

March 13, 2008

Montana Healthcare Programs Notice

All Provider Types Except Critical Access Hospitals, RHCs, FQHCs and Indian Health Services

Resubmission of Denied Claims

Beginning December 1, 2007, healthcare programs administered by the Department of Public Health and Human Services implemented enhanced claims editing to identify situations where correct procedure coding principles needed to be improved.

This change affected many providers who bill for services using Current Procedure Terminology or Healthcare Common Procedure Coding System (CPT®/HCPCS) procedure codes.

Some of these edits use historical claims information in determining if a service is payable. In some situations, denied claims processing in the same cycle will cause a resubmitted correction to also deny. When a claim is denied, it is important to remember to **wait until the denied claim has completed the payment cycle and appears on your remittance advice before resubmitting a corrected claim or line.**

Contact Information

For claims questions or additional information, contact Provider Relations:

Provider Relations toll-free in- and out-of-state: 1-800-624-3958

Helena: (406) 442-1837

E-mail: MTPRHelpdesk@ACS-inc.com

Visit the Provider Information website:

<http://www.mtmedicaid.org>