Effective July 1, 2017, Montana Medicaid covers Collaborative Practice Drug Therapy Management provided by a Clinical Pharmacist Practitioner (CPP). The legal basis for the Collaborative Practice Drug Therapy Management Program can be found in ARM 37.86.901; 37.86.902; and 37.86.905. Until the listed rules are published to the Administrative Rules of the State of Montana Website (http://www.mtrules.org); details can be found under Montana Administrative Register notice 37-792.

Requirements
- The CPP must be a pharmacist that meets the requirements as outlined in ARM 24.174.526.
- The CPP must have a collaborative practice agreement with a medical practitioner, as provided in ARM 24.174.524.
- CPPs must manage a member's drug therapy by providing face-to-face, direct care.
  - Members who have at least one chronic condition needing at least one maintenance medication are eligible for collaborative practice drug therapy management.
- The CPP must provide care through employment or contract within a physical practice of a medical practitioner or facility.

Enrollment
- The Clinical Pharmacist Practitioner must enroll with Montana Medicaid.
- Enrollment will be completed utilizing the full Medicaid provider enrollment application as a rendering only provider.
- This process is required regardless of practice. For example, CPPs employed through an FQHC or IHS facility must enroll prior to providing services.
- For FQHC/RHC providers that employ a CPP must submit a change in scope of service and a copy of the providers Health Resources and Services Administration (HRSA) Award Notice, form 5a- service details to the department prior to the revenue code being turned on for reimbursement. If your facility type is a, Urban Indian FQHC and RHC, which does not file a change is scope of service with HRSA, please notify the department is writing to submit a change in scope of service.
- Additional enrollment information can be found within the Montana Medicaid Provider Webpage (http://medicaidprovider.mt.gov/provider enrollment).

Billing and Reimbursement
**Physicians and Mid-Levels**
Bill utilizing three CPT codes: 99605, 99606, and 99607. CPP is listed as the rendering provider within the following boxes/loops on the CMS 1500 or 837P X12 Transactions:
- Paper: NPI/Taxonomy: 24 J
- Electronic (837P): Loop 2310D under NMI*82
The following codes will be reimbursed at the lower of: the providers usual and customary or the department established Medicaid fee schedule in ARM 37.85.105. The rates provided below are effective July 1, 2017. Please note, fee schedule rates can change quarterly.

99605  $58.45  
99606  $39.75  
99607  $16.04  

**Outpatient Hospitals**  
Bill utilizing three CPT codes: 99605, 99606, and 99607. CPP is listed as the attending provider with the following boxes with the UB-04 or 837I X12.

Paper UB-04 Attending Provider Name and Identifiers: FL 76  
Electronic 837I: Loop 2310A under NM1*71

**Provider-based Clinics**  
Bill utilizing three CPT codes: 99605, 99606, and 99607. Reimbursement of the provider based facility component will be on a rate-per-service basis using the OPPS schedule. The Provider based facility component must billed under revenue code 510 and will be reimbursed at 80% of the applicable rate.

**Federally Qualified Health Clinics / Rural Health Centers**  
Upon approval of the change in scope of service, bill revenue code 779 for Clinical Pharmacist Practitioner services. This revenue code should accompany the appropriate CPT code of either 99605 or 99606. For the face-to-face encounter with a CPP, FQHC/RHCs will be reimbursed at the facility prospective payment system (PPS) rate.

The CPP is listed as the attending provider with the following boxes with the UB-04 or 837I X12

Paper UB-04 Attending Provider Name and Identifiers: FL 76  
Electronic 837I: Loop 2310A under NM1*71  
Paper UB-04 Attending Provider Name and Identifiers: FL 76  
Electronic 837I: Loop 2310A under NM1*71

**IHS/Tribal 638**  
IHS/Tribal 638 providers offering Collaborative Practice Drug Therapy Management should refer to the provider notice on the IHS/Tribal 638 web page for further details.

**Contact Information**  
If you have any questions, please contact:

Cassie O' Bryant (CObryant@mt.gov), Physician Services Program Officer, at (406) 444-3337
Valerie St. Clair (vstclair@mt.gov), FQHC/RHC/CAH Program Officer, at (406) 444-4843
Chappell Smith (chappell.smith@mt.gov), PPS Program Officer at (406) 444-7018
Dani Feist (dfeist@mt.gov), Pharmacy Program Officer at (406) 444-2738
Casey Peck (cpeck@mt.gov), IHS Program Officer, at (406) 444-4349

For additional information, contact Montana Provider Relations at (800) 624-3958 or (406) 442-1837 or email MTPRHelpdesk@conduent.com.

Visit the Montana Healthcare Programs Provider Information website at www.medicaidprovider.mt.gov.