



Surveillance and Utilization Review Section (SURS)

Conduent Provider WebEx Training

Spring 2018

Jennifer Tucker, CPC
SURS Supervisor



What is SURS?

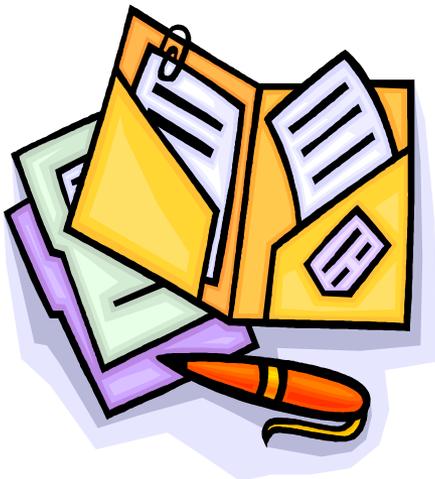
Surveillance/Utilization Review Section is a federally mandated program [42 CFR, Part 456.3]

The program maintains a strong commitment to assure that the right provider is receiving the right payment for the right services at the right time. We identify potential fraud, waste and abuse to ensure that State and Federal monies are spent appropriately.



We accomplish this by:

- performing retrospective reviews
- educating providers
- recovering overpayments if indicated



The Medicaid Processing System

- Claims processing system includes numerous edits
- To identify most billing errors
- It doesn't detect all errors

REJECTED
INSURANCE
CLAIM

The Medicaid Processing System

- Some claims are paid in error
 - due to incorrect billing
 - system complications
- ALL paid claims are subject to retrospective review
 - this includes prior authorized claims



Overpayment Recovery



SURS can recover whether the error is caused by the provider or the Medicaid claims processing system. [\[ARM 37.85.406 \(9\) & \(10\)\]](#)



Montana Medicaid Website

<http://medicaidprovider.mt.gov/>





Sheila Hogan, Director

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Montana Healthcare Programs

Thank you for serving Montana's Healthcare Program Members.

Welcome to the Montana Healthcare Programs Provider Information website.

If you are unable to locate a resource you need, please contact Provider Relations at 1 (800) 624-3958 or (406) 442-1837

Important Announcement:

Next WebEx: March 30, 2017 at 1:00 PM MST

Waiver Program with Paula Soll, DPHHS Program Specialist/Claim Examiner

Resources by Provider Type

Submit Provider Information for Enrollment, File Updates, and Revalidation

Montana HELP Plan

Subscribe to Claim Jumper

Site Search

Web Portal Tutorials

Resources

a review of what fields on the CMS-1500 are required for claims.

[Register for the Waiver Program WebEx](#)

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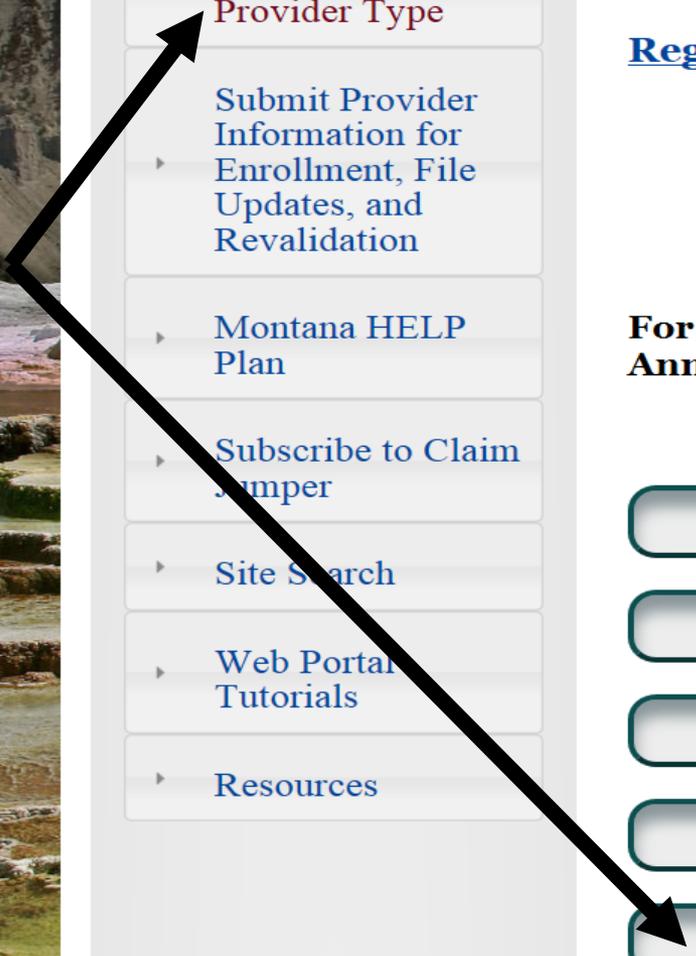
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Children/Families Disabilities Seniors Health Medical Assistance

Montana Healthcare Programs Provider Information » Select Your Provider Type

Select Your Provider Type

Provider types are listed in alphabetical order. Available resources include fee schedules, provider notices, provider manuals, and more.

- [A-C](#)
- [D-F](#)
- [G-K](#)
- [L-O](#)
- [P-Q](#)
- [R-Z](#)

Providers A - C

- 03/02/2018 [Ambulance](#)
- 03/02/2018 [Ambulatory Surgical Center](#)
- 03/02/2018 [Audiologist](#)
- 03/02/2018 [Chemical Dependency](#)
- 03/02/2018 [Chiropractor](#)
- 03/02/2018 [Clinic \(Public Health\)](#)
- 03/02/2018 [Clinical Pharmacist](#)

Here you can select the provider type you are looking for. **TOP** ↑

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- ▶ MATH Web Portal
- ▶ Resources by Provider Type

[Montana Healthcare Programs Provider Information](#) » [Physician](#)

Physician

Multiple resources are available on this page

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- ▶ [Fee Schedules – ATP Tests and Fees](#)
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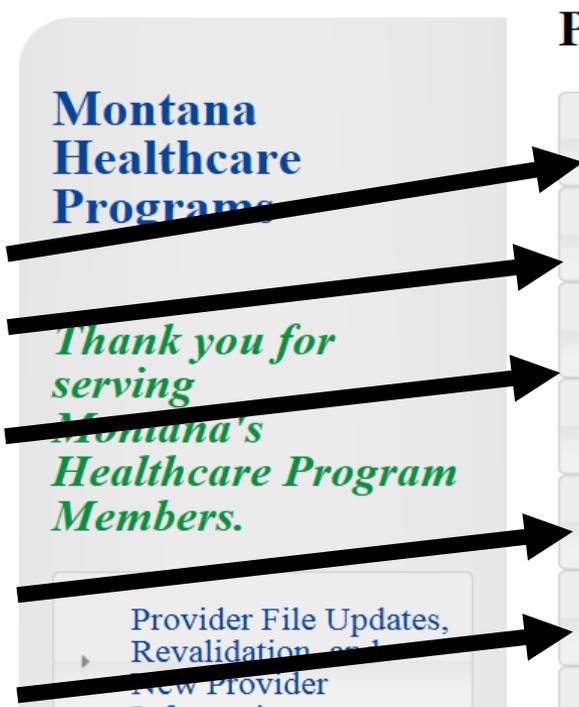
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[Provider Manuals](#)

[General Information for Providers](#) 04/2018

Medicaid manual with general information for all provider types.

[Physician-Related Services](#) 12/2017

This manual has information specific to your provider type.

[Prescription Drug Program](#) 02/12/2018

This manual has information specific to your provider type.

[Passport to Health](#) 10/2017

Everything a provider needs to know to become a successful Passport provider.

▶ [Medicaid Rules and Regulations](#)

▶ [Fee Schedules – Physician](#)

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Physician

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Fee Schedules – ATP Tests and Fees

Provider Notices

Some documents on this page are legal and/or historical in nature and cannot be altered to meet 508 Accessibility standards. Each of those documents has a corresponding .txt document with the same name placed next to it.

For prescription medication notices, see the Pharmacy page/

2018

- 04/25/2018 [Changes to the Medicare Part D Drug Benefit for Dual Eligible Members – Benzodiazepines](#)
- 04/04/2018 [Updated Passport Eligible Populations & Reimbursement](#)
- 03/22/2018 [Criteria for Breast Reconstruction](#)
- 03/15/2018 [Criteria for MRI of the Brain](#) rev. 04/10/2018
- 03/15/2018 [Criteria for CT of the Brain](#) rev. 04/10/2018
- 03/14/2018 [Prior Authorization for Genetics Testing for Youth Mental Health](#)
- 03/02/2018 [Physician Administered Drug Update](#) rev. 03/08/2018
- 03/02/2018 [Physician Administered Drug Update](#)
- 02/27/2018 [DME Incontinence Supply Rates](#)
- 02/26/2018 [New Rendering Only Provider Enrollment Application](#)
- 02/20/2018 [Advanced Imaging Prior Authorization](#)
- 02/12/2018 [Makena Injection Code Change and Reimbursement](#)
- 01/31/2018 [Montana Healthcare Programs Covered Double Electric Breast Pumps - E0603](#)
- 01/30/2018 [Fetal Chromosomal Aneuploidy Testing](#)
- 01/30/2018 [Psych Care Management New Codes 99492 - 99494](#)
- 01/17/2018 [Xgeva® Prior Authorization Criteria](#)
- 01/12/2018 [Zinplava Prior Authorization Criteria](#) (Revised, provider types

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Rule/Regulation Materials

- Code of Federal Regulations (CFR)
- Montana Code Annotated (MCA)
- Administrative Rules of Montana (ARM)



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Related Resources

The Code of Federal Regulations (CFR) annual edition is the codification of the general and permanent rules published in the Federal Register by the departments

Electronic Code of Federal Regulations

e-CFR data is current as of **May 8, 2018**

USER NOTICE

The Electronic Code of Federal Regulations (e-CFR) is a currently updated version of the Code of Federal Regulations (CFR). It is not an official legal edition of the CFR. The e-CFR is an editorial compilation of CFR material and *Federal Register* amendments produced by the National Archives and Records Administration's Office of the Federal Register (OFR) and the Government Publishing Office. The OFR updates the material in the e-CFR on a daily basis. The current update status appears at the top of all e-CFR web pages [More](#).

Browse: Select a title from the list below, then press "Go".

Title 1 - General Provisions [dropdown] [Go]

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Montana Code Annotated 2017

TITLE 53. SOCIAL SERVICES AND INSTITUTIONS
CHAPTER 6. HEALTH CARE SERVICES

Part 1. Medical Assistance -- Medicaid

- [53-6-101 Montana medicaid program -- authorization of services](#)
- [53-6-102 Repealed](#)
- [53-6-103 Repealed](#)
- [53-6-104 Freedom of doctors to treat recipients of medical assistance -- freedom to select doctor](#)
- [53-6-105 Discrimination prohibited](#)
- [53-6-106 Health care facility standards -- definitions](#)
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- [53-6-109 Consistent regulation of long-term care facilities -- rulemaking authority -- timeframes](#)
- [53-6-110 Report and recommendations on medicaid funding](#)
- [53-6-111 Department charged with administration and supervision of medical assistance program -- overpayment recovery -- sanctions for fraudulent and abusive activities -- adoption of rules](#)
- [53-6-112 Department to print and distribute copies of part and certain forms](#)
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- [53-6-122 and 53-6-123 reserved](#)
- [53-6-124 Definitions](#)

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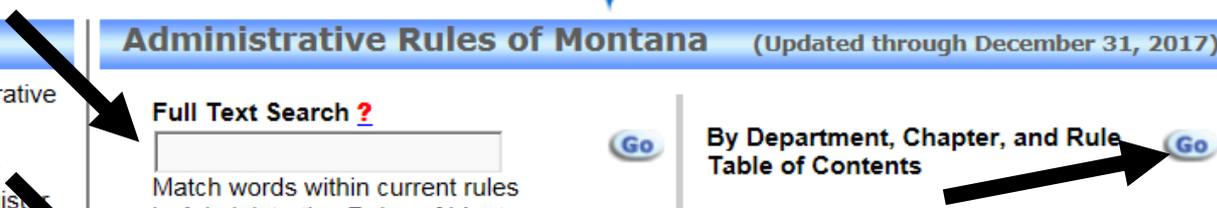
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8.28.1904	Application for a Telemedicine Certificate		
8.28.1907	Issuance of Telemedicine Certificate		
8.28.1909	Effect of Denial of Application for Telemedicine Certificate		
8.28.1910	Effect of Telemedicine Certificate		
24.101.413	RENEWAL DATES AND REQUIREMENTS		6/10/2017
24.156.801	PURPOSE AND AUTHORITY		10/27/2000
24.156.802	DEFINITIONS		5/14/2010
24.156.803	LICENSE REQUIREMENT		4/29/2017
24.156.804	APPLICATION FOR A TELEMEDICINE LICENSE		4/29/2017
24.156.805	FEES		4/29/2017
24.156.806	FAILURE TO SUBMIT FEES		4/29/2017
24.156.807	ISSUANCE OF A TELEMEDICINE LICENSE		4/29/2017
24.156.808	RENEWALS		4/29/2017
24.156.809	EFFECT OF DETERMINATION THAT APPLICATION FOR TELEMEDICINE LICENSE DOES NOT MEET REQUIREMENTS		4/29/2017
24.156.810	EFFECT OF TELEMEDICINE LICENSE		5/14/2010
24.156.811	SANCTIONS		4/29/2017
24.156.812	OBLIGATION TO REPORT TO THE BOARD		4/29/2017
37.86.3401	TARGETED CASE MANAGEMENT SERVICES FOR HIGH RISK PREGNANT WOMEN, DEFINITIONS		10/14/2017
37.86.3901	TARGETED CASE MANAGEMENT SERVICES FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS, DEFINITIONS		10/14/2017



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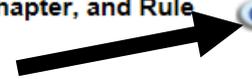
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37 : PUBLIC HEALTH AND HUMAN SERVICES



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37.85 : GENERAL MEDICAID SERVICES

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Subchapter 1			
Montana Medicaid Provider Fee Schedules			
37.85.104	EFFECTIVE DATES OF PROVIDER FEE SCHEDULES FOR MONTANA NON-MEDICAID SERVICES		3/1/2018
37.85.105	EFFECTIVE DATES, CONVERSION FACTORS, POLICY ADJUSTERS, AND COST-TO-CHARGE RATIOS OF MONTANA MEDICAID PROVIDER FEE SCHEDULES		3/1/2018
37.85.106	MEDICAID BEHAVIORAL HEALTH TARGETED CASE MANAGEMENT FEE SCHEDULE		3/1/2018
Subchapter 2			
Miscellaneous			
37.85.201	SELECTION OF PROVIDER		7/1/1999
Rules 37.85.202 and 37.85.203 reserved			
37.85.204	MEMBER REQUIREMENTS, COST SHARING		1/1/2018
37.85.205	RECIPIENT RESTRICTION OF ACCESS TO MEDICAL SERVICES	REP	7/23/2004
37.85.206	SERVICES PROVIDED		5/7/2016
37.85.207	SERVICES NOT PROVIDED BY THE MEDICAID PROGRAM		1/1/2013
Rules 37.85.208 through 37.85.211 reserved			
37.85.212	RESOURCE BASED RELATIVE VALUE SCALE (RBRVS) REIMBURSEMENT FOR SPECIFIED PROVIDER TYPES		9/9/2017
Rules 37.85.213 through 37.85.218 reserved			

Subchapter 3 reserved			
Subchapter 4 Provider Requirements			
37.85.401	PROVIDER PARTICIPATION		3/11/1997
37.85.402	PROVIDER ENROLLMENT AND AGREEMENTS		3/11/1997
37.85.403	ICD CLINICAL MODIFICATION (CM) AND PROCEDURAL CODING SYSTEM (PCS) SERVICES		12/25/2014
Rules 37.85.404 and 37.85.405 reserved			
37.85.406	BILLING, REIMBURSEMENT, CLAIMS PROCESSING, AND PAYMENT		10/1/2014
37.85.407	THIRD PARTY LIABILITY		3/11/1997
Rules 37.85.408 and 37.85.409 reserved			
37.85.410	DETERMINATION OF MEDICAL NECESSITY		3/11/1997
37.85.411	PROVIDER RIGHTS		6/30/2000
37.85.412	INTERPRETATION OF RULES		4/1/2005
37.85.413	LIMITATIONS ON CODING ADVICE		4/1/2005
37.85.414	MAINTENANCE OF RECORDS AND AUDITING		4/1/2005
37.85.415	MEDICAL ASSISTANCE MEDICAID PAYMENT		3/15/2002
37.85.416	STATISTICAL SAMPLING AUDITS		6/30/2000
Subchapter 5 Provider Sanctions			
37.85.501	GROUNDS FOR SANCTIONING		4/9/2004
37.85.502	SANCTIONS		4/9/2004
Rules 37.85.503 and 37.85.504 reserved			
37.85.505	FACTORS GOVERNING IMPOSITION OF SANCTION		11/16/1984
37.85.506	SCOPE OF SANCTION		11/28/1987
37.85.507	NOTICE OF SANCTION		6/13/1980
Rules 37.85.508 through 37.85.510 reserved			





Linda McCulloch
MONTANA SECRETARY OF STATE



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Rule Title: MAINTENANCE OF RECORDS AND AUDITING

Department: [PUBLIC HEALTH AND HUMAN SERVICES, DEPARTMENT OF](#)
Chapter: [GENERAL MEDICAID SERVICES](#)
Subchapter: [Provider Requirements](#)



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Latest version of the adopted rule presented in Administrative Rules of Montana (ARM):

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37.85.414 MAINTENANCE OF RECORDS AND AUDITING

(1) All providers of service must maintain records which fully demonstrate the extent, nature and medical necessity of services and items provided to Montana Medicaid recipients. The records must support the fee charged or payment sought for the services and items and demonstrate compliance with all applicable requirements.

(a) All records which support a claim for a service or item must be complete within 90 days after the date on which the claim was submitted to Medicaid for reimbursement. A record that is required to be signed and dated, including but not limited to an order, prescription, certificate of medical necessity, referral or progress note, is not complete until it has been signed and dated.

(b) When reimbursement is based on the length of time spent in providing the service, the records must specify the time spent or the time treatment began and ended for each procedure billed to the nearest minute. Total time billed using one or multiple procedure codes may not exceed the total actual time spent with the Medicaid client.

(c) These records must be retained for a period of at least six years and three months from the date on which the service was rendered or until any dispute or litigation concerning the services is resolved, whichever is later.

(d) In maintaining financial records, providers shall employ generally accepted accounting methods. Generally accepted accounting methods are those approved by the National Association of Certified Public Accountants.

(e) The department shall have access to all records so maintained and retained regardless of a provider's continued participation in the program.

(f) In the event of a change of ownership, the original owner must retain all required records unless an alternative method of providing for the retention of records has been established in writing and approved by the department.

providers must also comply with any specific record keeping requirements applicable to the type of service the provider furnishes, which may be more restrictive than the minimum requirements of this rule.

(2) In addition to the recipient's medical records, any Medicaid information regarding a recipient or applicant is confidential and shall be used solely for purposes related to the administration of the Montana Medicaid program. This information shall not be divulged by the provider or his employees, to any person, group, or organization other than those listed below or a department representative without the written consent of the recipient or applicant. In addition, the provider must comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 USC 1320d et seq., and the Uniform Health Care Information Act, [50-16-501](#) et seq., MCA.

(3) The department, the designated review organization, the legislative auditor, the Department of Revenue, the Medicaid fraud control unit, and their legal representatives shall have the right to inspect or evaluate the quality, appropriateness, and timeliness of services performed by providers, and to inspect and audit all records required by this rule.

(a) Upon the department's request for records, the provider shall submit a true and accurate copy of each record of the service or item being reviewed as it existed within 90 days after the date on which the claim was submitted to Medicaid.

(b) Refusal to permit inspection, evaluation or audit of services shall result in the imposition of provider sanctions in accordance with the rules of the department.

(4) The provisions of this rule specifying the length of time for which records must be retained shall not be construed as a limitation on the period in which the department may recover overpayments or impose sanctions.

History: [53-6-113](#), MCA; [IMP](#), [53-2-201](#), [53-6-101](#), [53-6-111](#), [53-6-113](#) and [53-6-141](#), MCA; [NEW](#), 1980 MAR p. 1491, Eff. 5/16/80; [AMD](#), 1997 MAR p. 474, Eff. 3/11/97; [TRANS](#), from SRS, 2000 MAR p. 479; [AMD](#), 2005 MAR p. 459, Eff. 4/1/05.

MAR Notices	Effective From	Effective To	History Notes
	4/1/2005	Current	History: 53-6-113 , MCA; IMP , 53-2-201 , 53-6-101 , 53-6-111 , 53-6-113 and 53-6-141 , MCA; NEW , 1980 MAR p. 1491, Eff. 5/16/80; AMD , 1997 MAR p. 474, Eff. 3/11/97; TRANS , from SRS, 2000 MAR p. 479; AMD , 2005 MAR p. 459, Eff. 4/1/05.

- (10) In addition to the above, the department will pay:
- (a) the lesser of either the actual charge for drugs and other prescribed supplies, or the wholesale price cited, less 15%, plus a dispensing fee on the Medicaid point-of-sale system;
 - (b) 85% of the cost of durable medical equipment to the appropriate amount when allowing financial assistance, or to the maximum amount set by the program for the federal fiscal year;
 - (c) 85% of the cost of specialized formula and foods and prescriptive or nonprescriptive medications prescribed by a physician for inborn errors of metabolism; and
 - (d) 85% of the cost of syringes and disposable medical equipment for the treatment of covered conditions.

(11) A CYSHCN who attends interdisciplinary pediatric specialty clinics, supported by CSHS, is not responsible for copays, deductibles, or coinsurance, nor will they be balance-billed.

History: [50-1-202](#), MCA; [IMP](#), [50-1-202](#), MCA; [NEW](#), 1990 MAR p. 1256, Eff. 6/29/90; [AMD](#), 1992 MAR p. 919, Eff. 5/1/92; [AMD](#), 1994 MAR p. 1836, Eff. 7/8/94; [AMD](#), 1999 MAR p. 2879, Eff. 12/17/99; [TRANS](#), from DHES, 2001 MAR, p. 398; [AMD](#), 2003 MAR p. 1637, Eff. 8/1/03; [AMD](#), 2003 MAR p. 1637, Eff. 8/1/03; [AMD](#), 2012 MAR p. 1672, Eff. 8/24/12; [AMD](#), 2013 MAR p. 1449, Eff. 8/9/13.

MAR Notices	Effective From	Effective To	History Notes
37-641	8/9/2013	Current	History: 50-1-202 , MCA; IMP , 50-1-202 , MCA; NEW , 1990 MAR p. 1256, Eff. 6/29/90; AMD , 1992 MAR p. 919, Eff. 5/1/92; AMD , 1994 MAR p. 1836, Eff. 7/8/94; AMD , 1999 MAR p. 2879, Eff. 12/17/99; TRANS , from DHES, 2001 MAR, p. 398; AMD , 2003 MAR p. 1637, Eff. 8/1/03; AMD , 2003 MAR p. 1637, Eff. 8/1/03; AMD , 2012 MAR p. 1672, Eff. 8/24/12; AMD , 2013 MAR p. 1449, Eff. 8/9/13.
37-588	8/24/2012	8/9/2013	History: 50-1-202 , MCA; IMP , 50-1-202 , MCA; NEW , 1990 MAR p. 1256, Eff. 6/29/90; AMD , 1992 MAR p. 919, Eff. 5/1/92; AMD , 1994 MAR p. 1836, Eff. 7/8/94; AMD , 1999 MAR p. 2879, Eff. 12/17/99; TRANS , from DHES, 2001 MAR, p. 398; AMD , 2003 MAR p. 1637, Eff. 8/1/03; AMD , 2003 MAR p. 1637, Eff. 8/1/03; AMD , 2012 MAR p. 1672, Eff. 8/24/12.
	8/1/2003	8/24/2012	History: Sec. 50-1-202 , MCA; IMP , Sec. 50-1-202 , MCA; NEW , 1990 MAR p. 1256, Eff. 6/29/90; AMD , 1992 MAR p. 919, Eff. 5/1/92; AMD , 1994 MAR p. 1836, Eff. 7/8/94; AMD , 1999 MAR p. 2879, Eff. 12/17/99; TRANS , from DHES, 2001 MAR, p. 398; AMD , 2003 MAR p. 1637, Eff. 8/1/03.

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