



Claim Jumper

Montana Healthcare Programs Claim Jumper

May 2024 Volume XXXIX, Issue 5

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The Provider Information Website – A Valuable Resource

We hear it all the time – providers are responsible for staying up to date with Montana Healthcare Programs by visiting the [Provider Information website](#) regularly– but what exactly does the website have to offer and how can it help providers?

Below is a list of key webpages and a short description of each. All pages are accessible from the menu on the left under Site Index. Expand a tab on the page by clicking the named tab.

Explore to see what you've been missing!

Announcements on the Home Page and Historical Announcements

Important announcements are posted on the [Home page of Provider Information website](#). They may be short-term and notify providers of outages or issues.

Historical announcements are included on the [Announcements page](#) in PDF format

Claim Instructions

Information on electronic and paper billing, electronic adjustments, common billing errors, and more is available on the [Claim Instructions page](#).

In addition to accessing through the Site Index option in the left menu, you may also click the Claim Instructions button at the bottom of the Home page.

Claim Jumper Newsletters

The Montana Healthcare Programs newsletter, the Claim Jumper, is published monthly on or near the last business day.

In addition to accessing the [Claim Jumper page](#) through the Site Index option in the left menu, you may also click the Claim Jumper Newsletters button at the bottom of the Home page or using the Claim Jumper Newsletters button at the top of your provider type page.

After reading and accepting the end user agreement, you may view monthly issues for the past three years. Issues beyond that may be accessed through the Archives page.

You may register to receive the Claim Jumper notification via email. Select Subscribe to Claim Jumper on the left menu to access the Claim Jumper Registration page. Registering your email with Montana DPHHS allows you to receive the newsletter link directly to your inbox and gives you the opportunity to receive additional announcements.

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Contact Information (including DPHHS Program Officers)

A list of useful Medicaid contact information, including that of DPHHS Program Officers is on the [Contact Us page](#). Click on a specific tab to expand it. Program contacts are listed in the Department of Public Health and Human Services (DPHHS) tab.

Forms

General forms for provider types are posted on the [Forms page](#), while the provider type pages include provider-specific forms. The forms are listed alphabetically in tabs that expand when the user clicks on them.

Frequently Asked Questions (FAQs)

Find answers to commonly asked questions on the [Frequently Asked Questions](#) page on the website. Questions are categorized by categories including:

- Adjustments
- Billing and Electronic Transactions
- Claims Processing
- Enrollment
- Eligibility
- Fraud and Abuse
- MATH Web Portal, FaxBack, and IVR
- Medicaid Policy
- Passport
- Payment-Related
- Prior Authorization
- TPL/Medicare
- Other/Miscellaneous Policy

New Provider Information / Montana Healthcare Programs Provider Enrollment

Under the Site Index, select New Provider Information to open the Montana Healthcare Programs [Provider Enrollment page](#).

Provides descriptions of:

- Individual Providers
 - Sole Proprietor Provider
 - Rendering Provider
 - Ordering/Referring/Prescribing Provider
- Organization Providers
 - Group
 - Facility

Enrollment Support Information is provided within the tabs:

- Enrollment Support Forms
- Enrollment Training Materials and User Guides
- Enrollment FAQs
- New Provider Resources
- Provider File Updates

Resources by Provider Type

In addition to accessing Resources by Provider Type through the Site Index, you may access your provider type page by clicking [Resources by Provider Type](#) in the left menu. After reading and accepting the end user agreement, the page on which you may choose your provider type opens. Locate your provider type and click the link to access the specific provider type page. Once on the page, to expand a topic tab, click on the named tab (e.g., Provider Notices, Other Resources).

Provider notices, fee schedules, provider manuals, and other key resources such as the SURS Provider Internal Self Review Protocol 10/2023 are posted on provider type pages. Click on the named tab to expand the content. Regularly reviewing your provider type page is vital to keeping up to date.

Training and Events

Monthly training opportunities are posted on the [Training page](#). To register for a training or view upcoming training topics, expand the Site Index, and select Training and Events. Each Training opportunity is listed by topic and presenter. Select Registration to receive the event specific link to join the training. Expand the Training Presentations menu by year to view previous training materials.

Website Posts (Recent and Historical)

In addition to accessing the list of documents through the Site Index and choosing Recent Website Posts, you can also access via the [Recent Website Posts](#) button at the bottom of the Home page. The year-to-date document is updated weekly.

About 3 years of historical posting information is accessible on this webpage. To access a list of postings earlier than that, users would access the [Archives page](#).

*Submitted by Aaron Hahm
MPATH Business Analyst
DPHHS*

SURS Revelations

Interactive Complexity in Mental Health

SURS has identified a trend of using the Interactive Complexity CPT code 90785 incorrectly and/or without proper documentation. The record needs to document the factors and reason that complicates the delivery of a mental health service. Providing play therapy as an intervention alone is not enough information to substantiate billing interactive complexity. There must be documented information as to how the client's behavior complicated the delivery of therapeutic services and became more difficult to proceed with the session.

Per the CPT 2024 coding book:

“Psychiatric procedures may be reported “with interactive complexity” when at least one of the following factors is present:

1. The need to manage maladaptive communication (related to, eg, high anxiety, high reactivity, repeated questions, or disagreement) among participants that complicates delivery of care.
2. Caregiver emotions or behavior that interferes with the caregiver's understanding and ability to assist in the implementation of the treatment plan.
3. Evidence or disclosure of a sentinel event and mandated report to third party (eg, abuse or neglect with report to state agency) with initiation of discussion of the sentinel event and/or report with patient and other visit participants.
4. Use of play equipment or other physical devices to communicate with the patient to overcome barriers to therapeutic or diagnostic interaction between the physician or other qualified health care professional and a patient who has not developed, or has lost, either the expressive language communication skills to explain his/her symptoms and response to treatment, or the receptive communication skills to understand the physician or other qualified health care professional if he/she were to use typical language for communication.”

To warrant using the interactive complexity CPT code, the documentation must list the factors and reasons why there was increased complexity during the therapy session.

Remember, if it isn't documented the service cannot be substantiated.

*Submitted by Rachel Savage
Program Integrity Compliance Specialist
Program Compliance Bureau
Office of the Inspector General
DPHHS*

Recent Website Posts

Below is a list of recently published Montana Healthcare Programs information and updates available on the [Provider Information Website](#).

| PROVIDER NOTICES | | |
|--|--|---|
| Date Posted | Provider Types | Provider Notice Title |
| 04/02/2024 | Mental Health, Therapeutic Group Homes | Telehealth Policy Clarification for Children's Mental Health Services |
| 04/02/2024 | Mental Health | Temporary Suspension of Prior Authorization and Continued Stay Review Requirements |
| 04/04/2024 | Critical Access Hospital, Inpatient Hospital, Mid-Level, Outpatient Hospital, Physician, RHC, FQHC, Tribal 638, IHS | Written Orders for Physical, Occupational, and Speech Therapy |
| 04/08/2024 | Critical Access Hospital, Durable Medical Equipment, Hospital Inpatient, Hospital Outpatient, Mid-Level, Physician | Negative Pressure Wound Therapy Pumps (E2402) Do Not Require Prior Authorization |
| 04/19/2024 | Durable Medical Equipment (DME) | DME Claims Processing Instructions – Prior Authorization Required to Exceed Maximum Units |
| 04/19/2024 | All Providers | Changes Regarding Opioid Prior Authorization and Medication for Opioid Use Disorder |
| 04/19/2024 | Developmental Disabilities Program (DDP) | Developmental Disabilities Workforce Capacity Development Near-Term Initiative |
| 04/23/2023 | Eyeglasses, Optician, Optometric Providers | Prior Authorization Changes for Eyeglasses and Contacts |
| 04/30/2024 | Critical Access Hospitals, Hospital Outpatient, IHS, Mid-Level, Nutritionist/Dietician, Physician, Public Health Clinic, and Rural Health Care | Diabetes Prevention Program Information Revised |
| ADDITIONAL DOCUMENTS POSTED | | |
| <ul style="list-style-type: none"> • March 2024 PDL/DUR Meeting Minutes • Therapy Order Template • IHS Tribal Training Agenda April 2024 • National Diabetes Prevention Program Training April 2024 • April 2024 OPPS Fee Schedule • April 2024 APC Fee Schedule • April 2024 ASC Fee Schedule • July 2023 Developmental Disabilities Program Fee Schedule Revised | | |

Top 15 Claim Denials

| Claim Denial Reason | March 2024 | February 2024 |
|--------------------------------|------------|---------------|
| RECIPIENT NOT ELIGIBLE DOS | 1 | 1 |
| PA MISSING OR INVALID | 2 | 2 |
| EXACT DUPLICATE | 3 | 3 |
| MISSING/INVALID INFORMATION | 4 | 4 |
| RECIPIENT COVERED BY PART B | 5 | 5 |
| INVALID CLIA CERTIFICATION | 6 | 8 |
| PROVIDER TYPE/PROCEDURE MISMAT | 7 | 6 |
| SUSPECT DUPLICATE | 8 | 9 |
| CLAIM INDICATES TPL | 9 | 7 |
| PROC. CONTROL CODE = 01 | 10 | 12 |
| CLAIM DATE PAST FILING LIMIT | 11 | 11 |
| PROC FACT CODE NOT ALLOWED | 12 | 15 |
| DEPRIVATION CODE RESTRICTED | 13 | 13 |
| REV CODE INVALID FOR PROV TYPE | 14 | 14 |
| SLMB OR QI-1 ELIGIBILITY ONLY | 15 | 17 |

Thank you for the care and support of Montana Healthcare Programs members that you provide.
Your work is appreciated!

Key Contacts

Montana Healthcare Programs

Provider Relations

General Email:
MTPRHelpdesk@conduent.com

P.O. Box 4936
Helena, MT 59604
(800) 624-3958 In/Out of state
(406) 442-1837 Helena
(406) 442-4402 or (888) 772-2341
Fax

Provider Enrollment

Enrollment Email:
MTErollment@conduent.com
P.O. Box 89
Great Falls, MT 59403

Conduent EDI Solutions

<https://edisolutionsmmis.portal.conduent.com/gcro/>

Third Party Liability

Email: MTTPL@conduent.com
P.O. Box 5838
Helena, MT 59604
(800) 624-3958 In/Out of state
(406) 443-1365 Helena
(406) 442-0357 Fax

Claims Processing

P.O. Box 8000
Helena, MT 59604

EFT and ERA

Attach completed form online to your updated enrollment or mail completed form to Provider Services.
P.O. Box 89
Great Falls, MT 59403

Verify Member Eligibility

FaxBack (800) 714-0075
Voice Response (800) 714-0060

Pharmacy POS Help Desk

(800) 365-4944

Passport

(406) 457-9542

PERM Contact Information

Email: HeatherSmith@mt.gov
(406) 444-4171

Prior Authorization

OOS Acute & Behavioral Health Hospital, Transplant, Rehab, PDN, DMEPOS/Medical, & Behavioral Health Reviews
(406) 443-0320 (Helena) or
(800) 219-7035 (Toll-Free)