

# Claim Jumper

Montana Healthcare Programs Claim Jumper

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#### **Upcoming Training**

Provider Enrollment sessions held the second Wednesday of every month.

General Resources
October 1, 2025

Optometric Training October 16, 2025

Billing 101 **October 22, 2025** 

**Register Now** 

## **SURS Revelations**

## "Hello, Montana? Telehealth is Calling!"

Montana Medicaid makes it easier for patients to connect with their providers with video and audio-only visits, as long as they're done securely and meet privacy requirements. Providers must be licensed in Montana and enrolled in Montana Medicaid to bill Montana Medicaid for these services.

Montana Code Annotated 2023 57-6-122 (1)(a)b)(c) states:

- "(1) Providers enrolled in the medicaid program may provide medically necessary services by means of telehealth if the service:
  - (a) is clinically appropriate for delivery by telehealth as specified by the department by rule or policy;
  - (b) comports with the guidelines of the applicable medicaid provider manual; and
  - (c) is not specifically required in the applicable provider manual to be provided in a face-to-face manner."

Montana continues to allow audio-only visits as part of reimbursable telehealth. Both types of visits must meet the same standards:

- Medically necessary
- Properly documented
- Clearly documented as video call or audio call-only

For all telehealth services providers are required to document:

Whether the visit was performed by video or phone. Justification for the video or audio call-only. Originating setting; where is the member located.

As national coding changes, Montana Medicaid may issue supplemental guidance. It is recommended providers should routinely check the <u>Montana Healthcare Programs Provider Information Website</u>, state and federal guidance, as well as state policies and procedures for updates.

Montana Medicaid makes it simple: whether you're face-to-face, screen-to-screen, or ear-to-ear, care is just a call way.

"Montana, can you hear me now?"

Remember: "If it isn't documented the services can't be substantiated!"

Submitted by Lori Beniger, LPN
Program Integrity Compliance Specialist
DPHHS

## Revalidation – How to Stay Compliant

Per <u>42 CFR 424.515 [ecfr.gov]</u> providers enrolled with Medicaid are required to revalidate their enrollment every five years.

If you don't complete a revalidation within the designated time frame you could have your payments suspended until the revalidation is completed and could even be subject to a repayment of the funds you received.

When it's time for your revalidation you should receive a letter indicating the steps and time frame allotted to complete your revalidation.

Please do not ignore the notices for revalidation.

#### **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		
09/04/2025	All Providers	Medicaid Enrollment for Ordering, Referring, and Prescribing (ORP) Providers		
09/042025	FQHC, RHC, UIO	How to Choose the Correct Claim Form		
09/04/2025	IHS, Tribal 638	Licensed Addiction Counselor Candidates Enrollment Change		

### **FEE SCHEDULES**

- 2025 Hospice Non-Compliant
- 2025 Hospice Compliant
- July 2025 Proposed Lab Services Fee Schedule
- January 2023 Lab Services Fee Schedule
- January 2024 Lab Services Fee Schedule
- July 2024 Lab Services Fee Schedule
- January 2025 Lab Services Fee Schedule

## ADDITIONAL DOCUMENTS POSTED

- PDL Changes Effective 9/25/2025
- Passport to Health Manual Updates
- September 2025 Preferred Drug List
- September 2025 Rebateable Manufacturers
- 2025 Medicaid Statistics
- September 2025 PRTF Authorization and Billing Training Presentation

## **Top 15 Claim Denials**

Claim Denial Reason	August 2025	July 2025
RECIPIENT NOT ELIGIBILE DOS	1	1
PA MISSING OR INVALID	2	2
MISSING/INVALID INFORMATION	3	3
EXACT DUPLICATE	4	4
RECIPIENT COVERED BY PART B	5	5
INVALID CLIA CERTIFICATION	6	11
CLAIM INDICATES TPL	7	8
SUSPECT DUPLICATE	8	6
REV CODE INVALID FOR PROV TYPE	9	9
PROC. CONTROL CODE = NOT COVERED	10	12
CLAIM DATE PAST FILING LIMIT	11	13
PROC. FACT. CODE = NOT ALLOWED	12	14
PROVIDER TYPE/PROCEDURE MISMAT	13	7
RECIPIENT HAS TPL	14	15
SUSPECT DUPLICATE/CONFLICT	15	10

## Fraud, Waste, and Abuse...OH MY!

Feel like fraud is happening and you don't know who to talk to?

Call the Montana Medicaid Fraud Control Unit (MFCU) Provider Fraud Hotline (800) 376-1115.

## **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: MTEnrollment@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**

(800) 624-3958 Option 7 (Provider), Option 3 (Eligibility)

#### Pharmacy POS Help Desk

(800) 365-4944

## Passport

(406) 457-9542

#### **PERM Contact Information**

Email: Amy.Kohl@mt.gov (406) 444-9356

#### **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)