



Claim Jumper

Montana Healthcare Programs Claim Jumper

January 2024 Volume XXXIX, Issue 1

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False Claims Act

The Department of Public Health and Human Services (DPHHS) sends out letters annually regarding the [Deficit Reduction Act](#) (DRA) Threshold (Section 6032).

Providers who have been reimbursed for items and services totaling at least \$5 million dollars in a Federal Fiscal Year (FFY) are responsible for creating and distributing policies to their employees and/or contractors which include the [False Claims Act](#) (FCA) and the Social Security Act (SSA).

DPHHS has sent letters to the providers who have met the \$5 million criteria. The letters contain an attestation that the provider must sign stating that they comply with the DRA.

Attestations must be returned to the Surveillance Utilization Review Sections (SURS) within 30 days from the date on the letter.

If you have any questions, please call Summer Roberts at (406) 444-4281.

*Submitted by Lori Beniger, LPN
Program Integrity Compliance Specialist
Office of the Inspector General
DPHHS*

SURS Revelations

Billing Outside the FQHC and RHC Prospective Payment System Rate

A common question from providers is, are Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC) services only reimbursable through a qualifying Prospective Payment System (PPS) encounter payment, or are services such as testing and supplies separately billable to Montana Healthcare Programs?

FQHC/RHC providers are paid the PPS per-visit rate for each qualifying encounter as defined in ARM 37.86.4402. The baseline PPS rate is established using all allowable costs of providing FQHC/RHC services divided by the total allowable visits, as stated in ARM 37.86.4413.

Since the costs for services and supplies are already factored into the overall PPS rate, additional services may not be separately reimbursed. The following are exceptions listed in the FQHC/RHC provider manual:

- Peer support services
- Originating telemedicine site
- Long-acting reversible contraceptives (LARCs)
- Vaccines and administration of vaccines – Only billable for Healthy Montana Kids (HMK) members. The administration is not separately billable if it is provided as part of a qualifying encounter.
- Promising Pregnancy Care (PPC) – Must be approved by the Department of Public Health and Human Services (the Department) as a PPC provider
- Services provided in a hospital setting – The only services submitted by FQHC/RHC on CMS-1500 claim form

The PPS per-visit rate may be adjusted to consider any increase or decrease in an FQHC's or RHC's scope of service, per ARM 37.86.4412.

As a reminder, SURS encourages all providers to conduct internal self-reviews, and voluntarily disclose any overpayments. If the Department erroneously pays a claim and subsequently discovers that the provider was not entitled to the payment for any reason, the Department is entitled to recover the resulting overpayment regardless of whether the payment was Department or provider error, as stated in ARM 37.85.406.

*Submitted by Alyssa Clark
Program Integrity Compliance Specialist
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
11/20/2023	Critical Access Hospital, Inpatient Hospital, Labs, Mid-Level, Outpatient Hospital, and Physician	Fetal Chromosomal Aneuploidy Testing REVISED
12/12/2023	All Providers	Individual Providers Enrolled as Sole Proprietors Due for Revalidation
12/19/2023	CAH, FQHC, Hospital Inpatient, Hospital Outpatient, Mid-Level, Physician, and RHC	Montana Prescription Drug Registry Survey
12/22/2023	All Providers	Passport Provider Referral Number on Claims

FEE SCHEDULES

- October 2022 Hospice Compliant Fee Schedule FY 2023
- October 2022 Hospice Non-Compliant Fee Schedule FY 2023

ADDITIONAL DOCUMENTS POSTED

- December 2023 Claim Jumper
- Durable Medical Equipment, Prosthetics, Orthotics, and Medical Supplies (DMEPOS) Manual
- Medicaid Nursing Facility Add-On Strategy and Fee Schedule Selection
- Dental and Denturist Program Manual July 2023

Top 15 Claim Denials

Claim Denial Reason	November 2023	October 2023
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	2
MISSING/INVALID INFORMATION	3	3
PA MISSING OR INVALID	4	4
RECIPIENT COVERED BY PART B	5	5
PASSPORT PROVIDER NO. MISSING	6	6
PROVIDER TYPE/PROCEDURE MISMAT	7	9
SUSPECT DUPLICATE	8	14
PROC. CONTROL CODE = NOT COVERED	9	7
INVALID CLIA CERTIFICATION	10	7
CLAIM INDICATES TPL	11	9
REV CODE INVALID FOR PROV TYPE	12	13
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	13	12
CLAIM DATE PAST FILING LIMIT	14	18
PROCEDURE/AGE MISMATCH	15	22

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)