



**DPHHS/IHS/Tribal MONTHLY
MEDICAID TELECONFERENCE
Tuesday, January 20th, 2026, 9:00 am**

CONTACT INFO: Casey Peck/DPHHS/444-5778

Meeting ID: 882 2937 4435

Password: 548737

1-646-558-8656 Call-in toll number

Zoom Meeting

<https://mt-gov.zoom.us/j/88229374435?pwd=Xk0BNCHBAPxDTuyWxtVkMjLCV9J98F.1>

Welcome and Introductions

Topic:

- Montana Medicaid Ambulance Program**

Kial Leach

Ambulance and Waiver Program

Officer

Health Resources Division

**This training will provide an overview of the Montana Medicaid Ambulance Program.
Discussion will include topics around covered and non-covered services, reimbursement,
documentation, and claims submittal.**

Questions/Comments/Concerns

- Providers are encouraged to ask questions, initiate comments, or concerns.**

Next call:

- February 17th, 9:00 a.m. - TBD**

DPHHS CONTACTS:	Telephone Numbers
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RESOURCE LINKS:	
Montana Medicaid Provider Website http://www.medicaidprovider.mt.gov	
Medicaid Client Self Service Portal https://apply.mt.gov	
Montana Medicaid Claims Modernization Claims Modernization	