



# Montana Healthcare Programs Provider Notice

## November 4, 2024

**Reminder**

### All Providers

### Paper Claim Denials

The Department of Public Health and Human Services (DPHHS) has been receiving a high volume of paper claims that must be returned to providers because the claims cannot be processed as submitted.

Montana Medicaid **does not** allow a post office box for a provider's **billing** address. Providers should enter the physical location where the services are provided in the appropriate field. See claim types listed below.

Providers who had enrolled prior to December 10, 2021, were asked to update the Legal Name, Address tab and each of the Enrollment Units (EU) during revalidation. All enrolled providers, regardless of when they enrolled, were required to add each location to the provider record for the billing entity.

Paper claims that cannot be attributed to a specific provider record will be returned to providers through the U.S. mail. Verify that ZIP + 4, Taxonomy, and Team Number (if applicable), are correct on the claim form before submitting.

Required fields that are specific to paper claim submissions are detailed below:

- **CMS-1500** – Billing provider information (box 33) must match the physical location on file for the Billing NPI (box 33a) and the Billing Taxonomy (box 33b).
- **UB-04** – Billing provider name and address (box 1) must match the physical location on file for the Billing NPI (box 56) and Billing NPI Taxonomy (box 81).
- a. **ADA Dental** – Billing provider name and address (box 48) must match the physical location on file for the Billing NPI (box 49) and Billing NPI Taxonomy (box 52a).

The address used on the claim for physical location will not impact where payment is sent. The provider enrollment record drives where payment is remitted.

### Contact and Website Information

For specific program questions, access the [Contact Us page](#) on the Provider Information website. Choose the Department of Public Health and Human Services (DPHHS) tab for Program Officer contact information.

For claims questions or additional information, contact Montana Provider Relations at (800) 624-3958 or (406) 442-1837 or email [Montana Provider Relations Helpdesk](#).

Visit the [Montana Healthcare Programs Provider Information website](#) to access your provider type page. Choose Resources by Provider Type in the left-hand menu.

Visit the [Contact Us page](#) on the Provider Information website for additional DPHHS contact numbers.