



Montana Healthcare Programs Provider Notice

December 18, 2025

Reminder

All Providers

Submission of Supporting Claim Documentation

Documentation required for claim adjudication (e.g., primary EOB, invoice, sterilization consent form) must be provided at the submission of the claim.

Paper claim form(s) must be mailed/faxed with the documentation attached for every submission of a claim. A paper claim without documentation will not be matched with previously submitted documents.

Electronic claims sent via a clearinghouse must use loop 2300, PWK segment, to indicate such paperwork is being sent and the paperwork attachment control number sent on the claim must match the attachment control number on the Paperwork Attachment Cover Sheet. The format of the paper attachment control number, included in the PWK segment and on the cover sheet, uses the provider number, member number and date of service. The paperwork attachment cover sheet along with supporting documents are then faxed/mailed.

The MPATH Provider Services Portal follows the fax/mail process above but also offers an electronic attachment upload feature that eliminates the need for the paperwork attachment coversheet and fax/mail process. Files are manually uploaded during claim entry and delivered to Conduent daily.

Refer to the HIPAA 5010 Information page of the Montana Healthcare Programs Provider Information website to access Electronic Transaction Instructions for HIPAA 5010 for X12 values.

Contact and Website 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.