Montana Healthcare Programs Hospital Program

HFMA Spring Conference

May 8, 2025

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Overview

1. Provider Webpage Walkthrough
2. Common Enrollment and Revalidation Errors
3. Claims
4. Legislative Updates
5. Resources
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Provider Webpage Walkthrough

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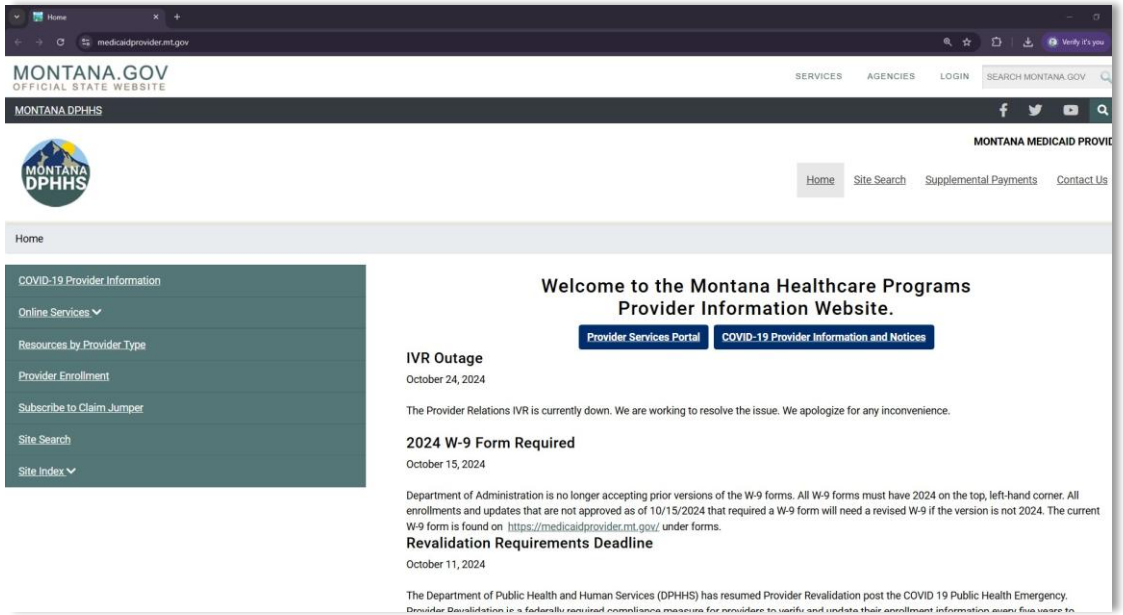
Medicaid Provider Webpage

- The provider webpage is the central hub for Montana Medicaid Program information; including but not limited to:
  - Announcements
  - Trainings
  - Claim Jumper
  - Fee Schedules and Manuals
  - Forms
  - Prior Authorization Information
  - Provider Notice

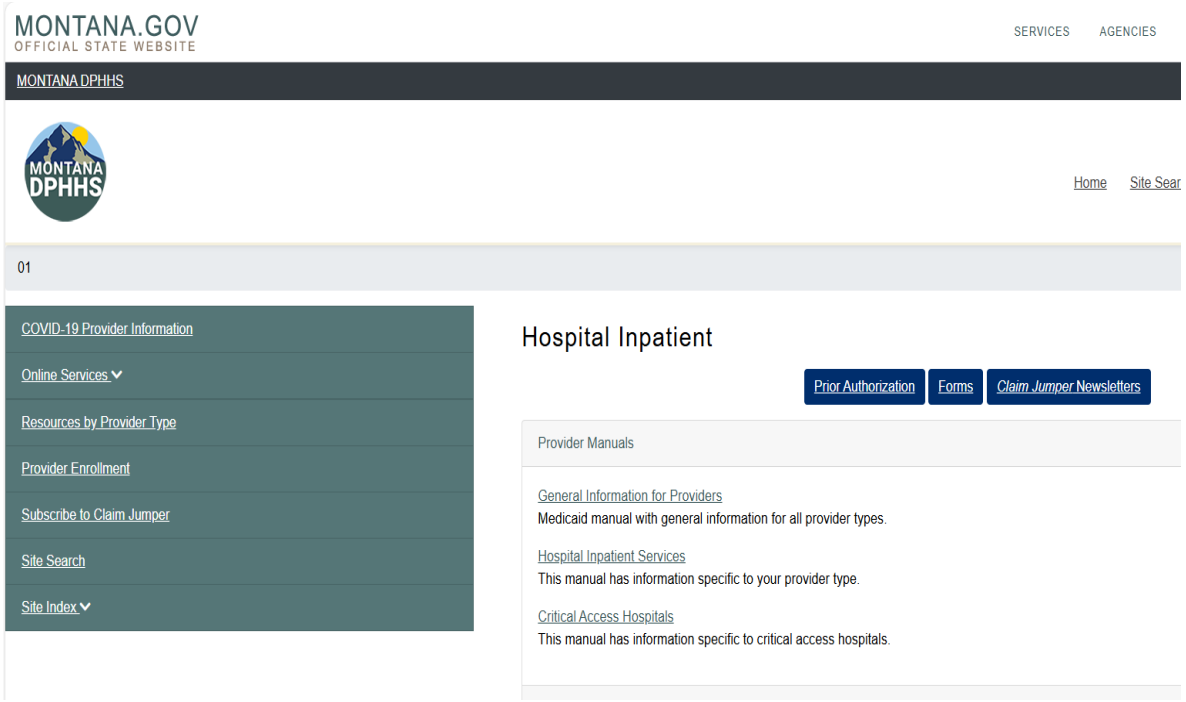
medicaidprovider.mt.gov



Provider Manuals

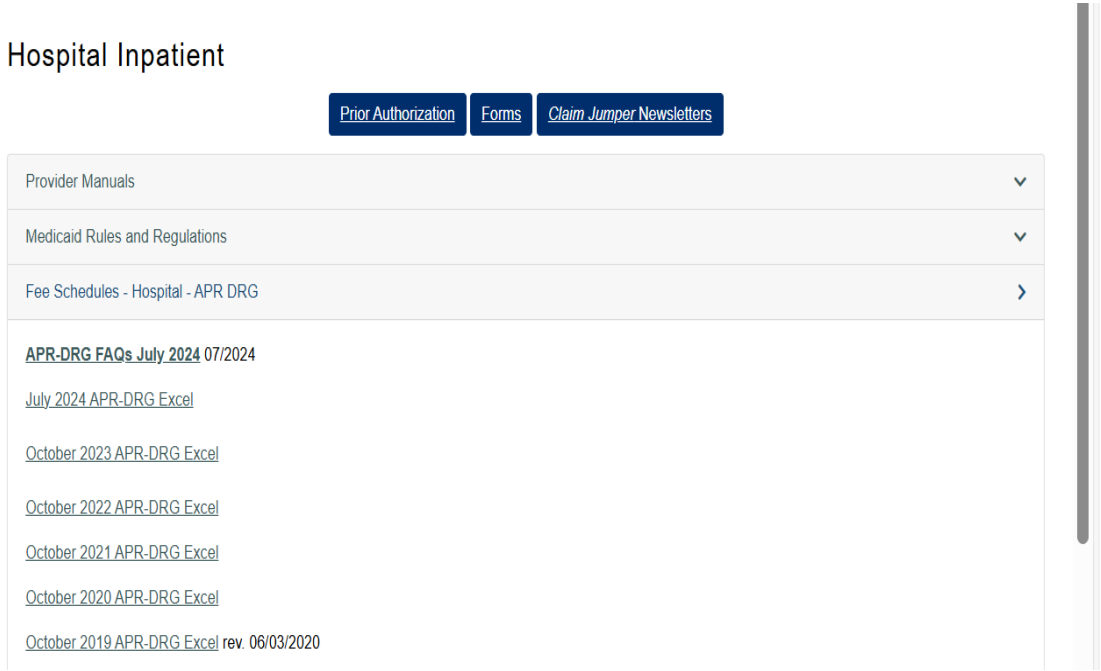
Select the Provider Type (e.g. Hospital Inpatient, Hospital Outpatient, etc.) to access provider type specific information including manuals:

- General Information for Providers
- Hospital Inpatient Services
- Critical Access Hospitals

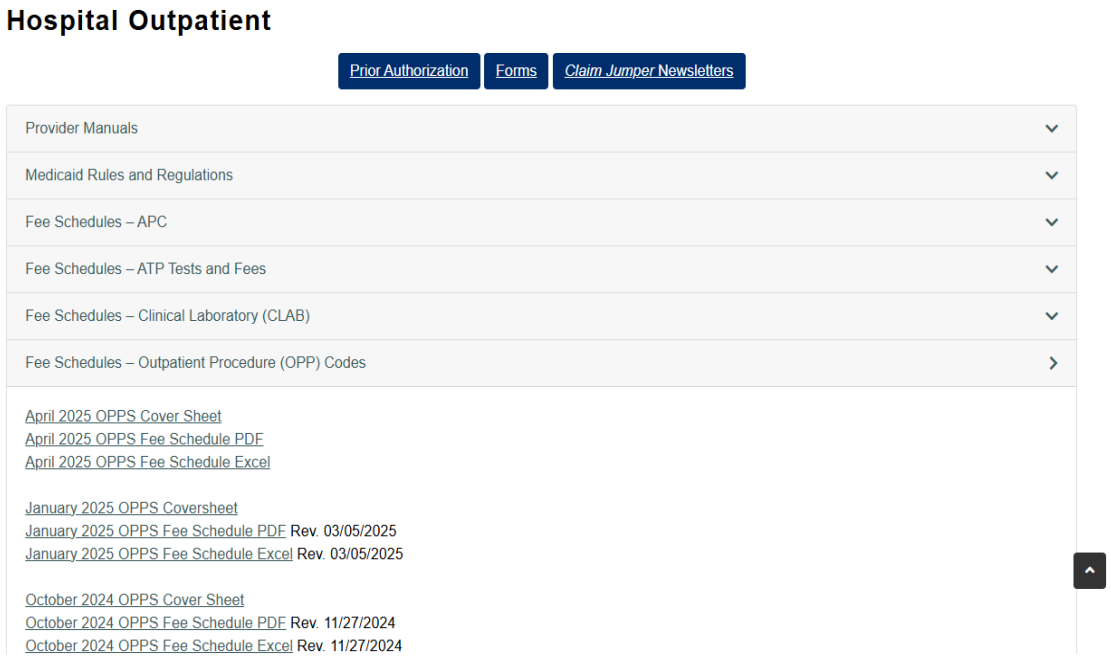


Fee Schedules

Hospital Inpatient Fee Schedule



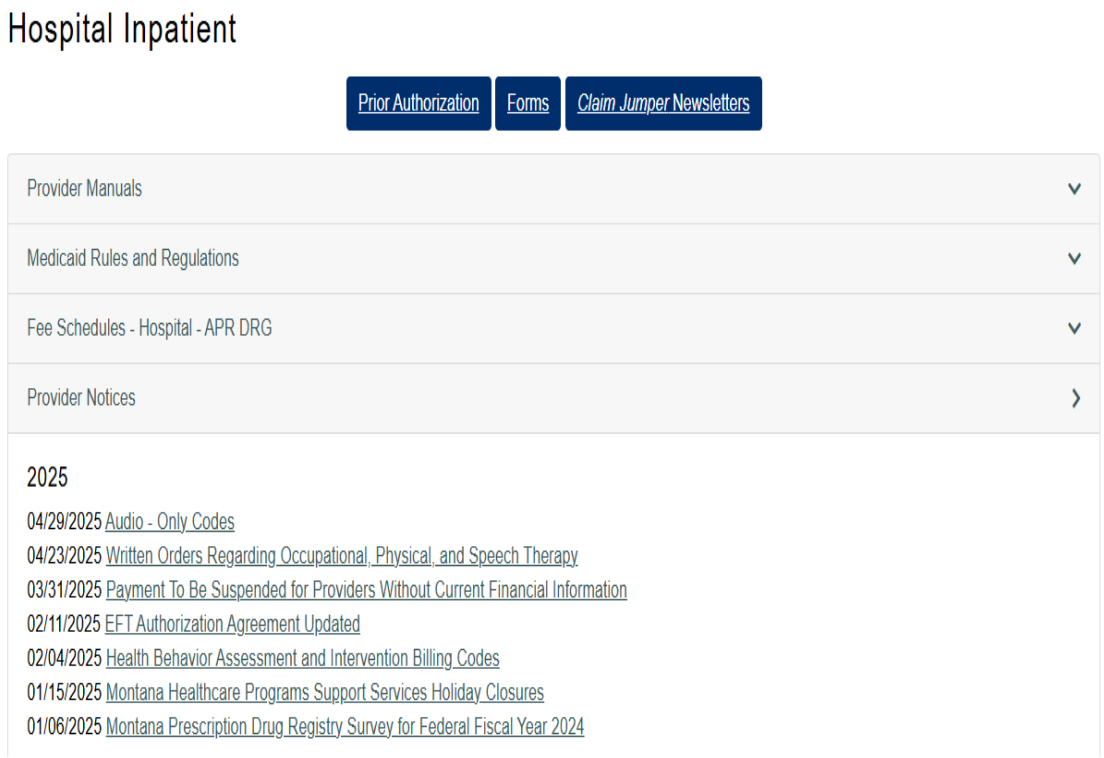
Hospital Outpatient Fee Schedule



Provider Notices

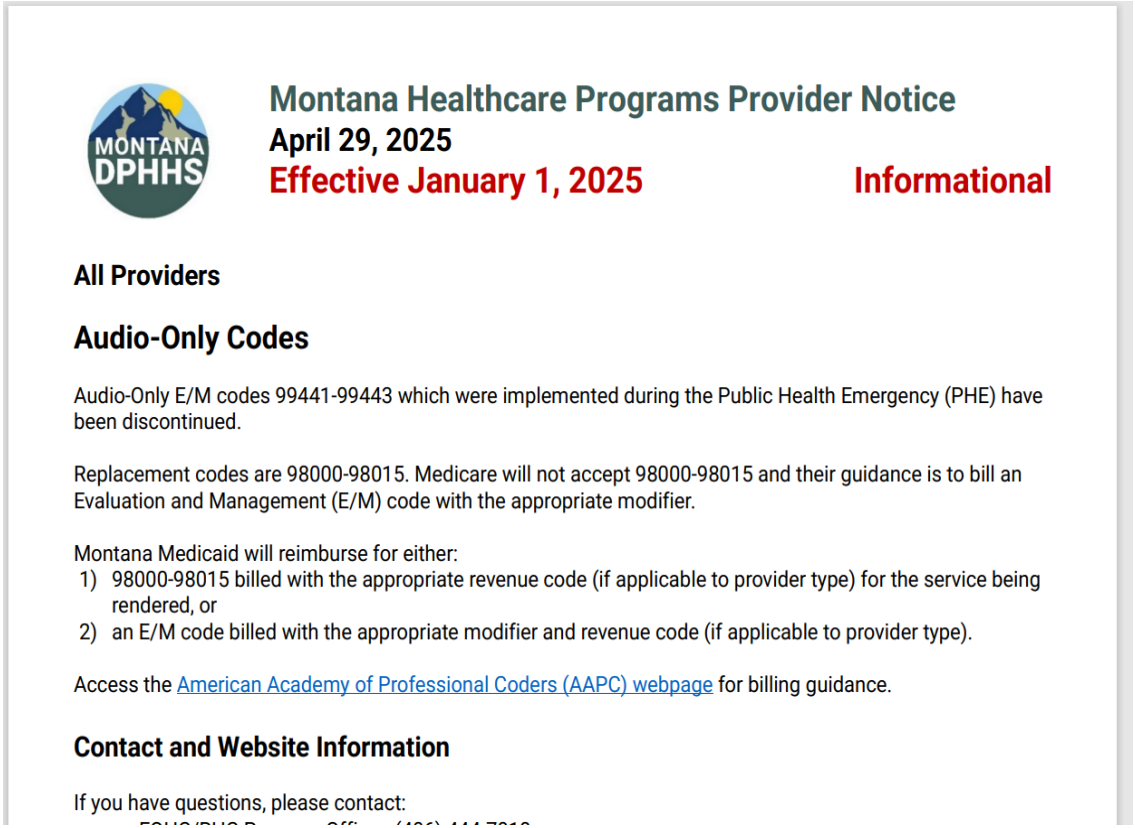
Provider notices are one method of communicating changes, updates, and reminders to providers.

- For example, we recently published a provider notice regarding the Audio-Only Codes.



Provider Notice Example

- The top section of the provider notice details:
  - The date the notice was posted.
  - Impacted provider types.
- The bottom section of the provider notice will provide applicable contact information.



Montana Healthcare Programs Provider Notice
April 29, 2025
Effective January 1, 2025 Informational

All Providers

Audio-Only Codes

Audio-Only E/M codes 99441-99443 which were implemented during the Public Health Emergency (PHE) have been discontinued.

Replacement codes are 98000-98015. Medicare will not accept 98000-98015 and their guidance is to bill an Evaluation and Management (E/M) code with the appropriate modifier.

Montana Medicaid will reimburse for either:
1) 98000-98015 billed with the appropriate revenue code (if applicable to provider type) for the service being rendered, or
2) an E/M code billed with the appropriate modifier and revenue code (if applicable to provider type).

Access the American Academy of Professional Coders (AAPC) webpage for billing guidance.

Contact and Website Information

If you have questions, please contact:

Recent Relevant Provider Notices

- 03/31/2025 Payment To Be Suspended for Providers Without Current Financial Information
- 11/04/2024 Paper Claim Denials
- 10/18/2024Electronic Adjustments Void or Void/Replace
- 10/15/2024 Revalidation Requirements Deadline
- 07/29/2024 Prior Authorization Requirements When a Member Has Third Party Liability
- 06/28/2024 January 1, 2024 and July 1, 2024 Fee Schedule Updates
- 06/20/2024 Hospital Transfers: In State Versus Out of State06/11/2024 Health Resources Division Claims Appeal Process
- 05/01/2024 Paperwork Attachments Submission Timing for Electronic Claims

Common Enrollment and Revalidation Errors

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Provider Enrollment

- Verify that all physical locations are enrolled.
  - Each location must have a different zip+4. If you try enrolling multiple suites at the same location with the same zip+4, claims will deny.
- Please read the questions carefully.
- Do not choose IHS (Indian Health Services) unless you are an IHS facility.
- Make sure DEA (Drug Enforcement Agency) numbers are included for prescribers.

Provider Enrollment - Continued

- Pharmacies, be sure to verify the NABP (National Association of Boards of Pharmacy) number twice.
- Answer the 340b questions carefully.
- Include all owner, managers, agents, and subcontractors.

Provider Revalidation

- Remember to click “submit” on the enrollment once completed.
- Verify that all documents are attached.
- EFT form and W-9 must be signed within the last 365 days.
- IRS letters- verify the name and tax ID match what is on file with the IRS. If there is no match, payments will be suspended.

Provider Revalidation - Continued

- Check the Provider Revalidation List (https://medicaidprovider.mt.gov/) to make sure all rendering, attending, ordering, referring, and prescribing providers have also had their revalidations completed.

- Check the website weekly to see status of enrollment or log into the Provider Portal to verify status.
  - Look for RTP (returned to provider) for missing materials.

Claims

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Claims Processing

- OB providers billing Z38.00/Z38.01 which is a delivery dx code on a claim for immunizations, 520 is denied.
  - These are the principal dx codes on all newborn records for the first birth encounter.
  - Do not bill on immunization appointments for kids. E.g., DOB is 2002 and current year is 2025, the provider is billing Z38.00 as the primary dx on the claim.
- Baby weights for delivery claims.
  - No baby weight on claim will Deny as ungroupable.
    - Single Live Birth and Baby Weight must be on the claim.
    - No baby DX Codes on the moms claims and vice versa.

Claims Processing - Continued

- Allow up to 100 days for claims to process and up to 268 days for takebacks.
- Do not submit multiple claims or takebacks.
  - Wait for the original claims to go through before submitting again, as this can cause a delay in the process and can lead to multiple takebacks and/or duplicate denials.
- Unlisted Codes
  - Please include medical records when you submit your claim. Otherwise, your claim will Deny.
  - If submitting claims electronically, please use the “Paperwork Attachment Cover sheet.

Claims Processing - Continued

- When submitting electronic adjustments, remember to make sure the Pay-to/Rendering/Attending information is up to date on the current claim before submitting.
  - When the information has changed between the original claim and the adjustment, the claim will deny when the NPI information is not correct.

- To check the status of a claim, contact Provider Relations at (800)624-3958, HRD Claims Resolution claimsresolution@mt.gov or your Program Officer.

Health Resources Division Claims Appeal Process

- Submit a request for reconsideration to HRD- Claims Appeals Section.
  - Mail to:

    Attention Claims Appeal Section
    Health Resources Division
    P.O. Box 202951
    Helena, MT 59620-2951
  - Fax to (406)444-1861, attention Claims Appeals Section.
  - Make sure to send a new claim and all corresponding paperwork for your appeal.

- Claim Inquiries and Appeal Status Follow-Ups: email claimsresolution@mt.gov

- For more details, go to the posted Provider Notice, Health Resources Division Claims Appeal Process

Legislative Updates

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Legislative Updates

- House Bill 245 - Revise the Montana HELP Act workforce development provisions and termination date.
- House Bill 687 - Revise age of expanded Medicaid participants required to engage in community engagement activities.
- House Bill 732 - Establish prompt cost report reimbursement Act.
- House Bill 473 - Allow for automatic CMS Medicare fee schedule updates.
- House Bill 474 - Revise date for annual supplemental Medicaid payment to hospitals.

Resources

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Provider Website Resources

- http://medicaidprovider.mt.gov
  - Main page for Medicaid Provider Information
  - Left panel leads to individual provider pages
    - Fee schedules
    - Provider Notices
- http://medicaidprovider.mt.gov/forms
  - Prior authorization, adjustment, sterilization, hysterectomy forms, etc.
- http://medicaidprovider.mt.gov/priorauthorization
  - Prior authorization information
  - Criteria for physician administered drugs
- http://mtrules.org
  - Secretary of State website containing all Administrative Rules of Montana

- Rebateable Manufacturers List
  - Determine if a manufacturer is rebateable
    - Check the first 5 digits of the National Drug Code (NDC) against the list
    - No match, the drug is not reimbursable
  - Please visit the Rebateable Manufacturers List below for more information
    - https://medicaidprovider.mt.gov/docs/rebateablelabelers/RebateableDrugManufacturersApril2025.pdf

Contact Information

Provider Relations

- Emails:
  - Provider Enrollment: MTEnrollment@conduent.com
  - Provider Relations MTPRHelpdesk@conduent.com
- Phone: (800) 624-3958
- Fax: (888) 772-2341
- Address:

  Provider Relations Unit
  PO Box 4936
  Helena, MT 59604

Contact Information

Amanda Brensdal, Hospital Program Officer

- Email: Amanda.Brensdal@mt.gov
- Phone: (406) 444-7002
- Fax: (406) 444-1861

Don Holmlund, Hospital & Physician Services Bureau Chief

- Email: dholmlund2@mt.gov
- Phone: (406) 444-3634

Stephanie King, Physician Program Officer

- Email: Stephanie.King@mt.gov
- Phone: (406) 444-3995

Mary LeMieux, Administrator, Health Resources Division

- Email: mlemieux2@mt.gov
- Phone: (406) 444-4458

Questions

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