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Register Now

PERM Medical Review Process

Empower AI is the Federal contractor for the Payment Error Rate Measurement (PERM) Medical Record Reviews.

Empower AI will begin contacting providers to collect CHIP and Medicaid records for claims that have been sampled for review. Providers must respond to Empower AI within the timeframe indicated in the record request letter, submit all requested documentation, and return the documentation with the claim-specific cover letter for each claim pulled for review. If no documentation or incomplete records are provided to Empower AI, the claim will be considered in error and the State will seek an overpayment recovery.

Provider participation during the PERM review is required under the Federal Improper Payments Elimination and Recovery Act (IPERA) of 2010.

Providers may visit the [CMS provider webpage](#) to become familiar with the entire PERM process. Providers should monitor [Claim Jumper newsletters](#) for future PERM updates.

Please contact Heather Smith, DPHHS Program Compliance Bureau, for any PERM questions at (406) 444-4171 or HeatherSmith@mt.gov.

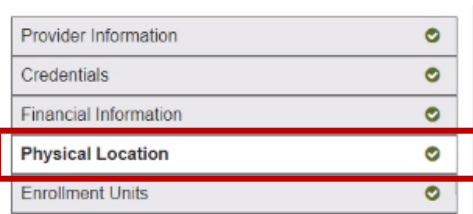
*Submitted by Heather Smith
PERM / MEQC / IPV Supervisor
DPHHS Office of the Inspector General*

Provider Services Portal News

Adding a Program to Your Enrollment

For a newly enrolled provider who needs to add a program type (e.g., HMK/CHIP, Medicaid, DDP, Big Sky Waiver, SDMI) in the [MPATH Provider Services Portal](#), start an Update Maintenance.

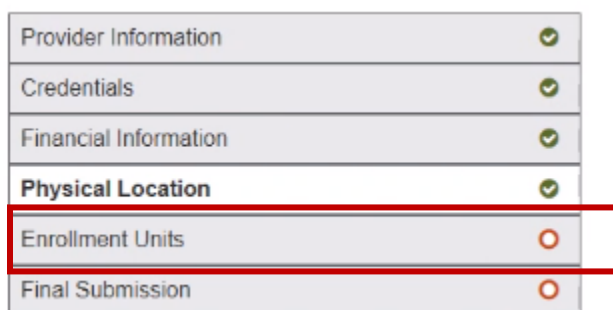
1. Select the radio button to the left of the most recent Enrolled Status. This must be an Active (not Denied) line of business.
2. On the **Practice Information tab**, scroll down to Specialties grid.
3. Under **Specialties**, click the **Add button**.
4. Select **Add Specialty**. Select the specialty.
5. Enter the applicable effective date. Click **Save**.
6. Under **State Program** or **Waiver Program**, click the **Add button**.
7. Choose the applicable program (e.g., Big Sky Waiver).
8. Choose the applicable Effective Date. Click **Save**.
9. Click **Save and Continue**. If no other information is required, all tiles on the left will display a green circle with a white checkmark.
10. Click the Physical Location tile to open.



11. If the new program is being added to the current Location, click the pencil icon under Actions and navigate to the lower portion of the Address tab. **If it is not being added to the current Location**, click the Add button and add an address that is different from the current Location indicated.
12. To add the Program to this location, click the applicable taxonomy code and program.



13. Click **Save and Continue**.
14. The new Enrollment Unit is generated, and an Enrollment Units tile appears, displaying a red circle.



Provider Services Portal News

Continued from page 2.

- Click on **Enrollment Units** to open.
- Click the related **pencil icon** to complete the Enrollment Units that were created.

Type: Select One Filter your results Search Search Clear

Team Name	Specialty	Service Location Name	Team Number	Effective Date	Terminate Date	System Status	Actions
Montana Medicaid (AK Plus)	General Acute Care Hospital	MPATH Location		12/01/2021		Complete	
Montana Medicaid (AK Plus)	In Home Supportive Care	MPATH Location		11/01/2022		Complete	
Sky Waiver	In Home Supportive Care	MPATH Location		11/01/2022		Pending	

- Navigate through the Enrollment Unit sections (Licensing, Certifications & Accreditations, Address, Communications, Managing Employees).
- Enter applicable information and accept information as presented on screen.
- Click **Save and Continue** so that all Enrollment Units have System Status of Complete.

Filter your results Search Search Clear

Team Number	Effective Date	Terminate Date	System Status	Actions
	12/01/2021		Complete	
	11/01/2022		Complete	
	11/01/2022		Complete	

- Navigate to the **Final Submission** tile and click Submit. All tiles display green circle with white checkmark.

Provider Information	
Credentials	
Financial Information	
Physical Location	
Enrollment Units	
Final Submission	
Summary	
Demographic Maintenance	

Submitted by Denise Juvik
 MPATH Provider Services Project Manager
 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
10/25/2022	Schools	2022 FMAP Changes to the School-Based Services Fee Schedule
10/27/2022	CAH and Outpatient Hospitals	Updated ICD-10 Obstetric Observation Diagnosis Codes
11/01/2022	Nursing Facility	Nursing Facility Continued Stay Reviews Resume August 1, 2022
11/09/2022	CAH, FQHC, Inpatient Hospital, Mid-Level Practitioner, Outpatient Hospital, Pharmacy, Physician, and RHC	Prior Authorization Criteria for Synagis®
11/15/2022	Pharmacies	Pharmacy Provider License Renewal Reminder
FEE SCHEDULES		
October 2022		
October 2022 ASC Fee Schedule		
October 2022 APR-DRG		
October 2022 APC Fee Schedule		
October 2022 OPSS Fee Schedule		
October 2022 School-Based Services Cover Sheet		
ADDITIONAL DOCUMENTS POSTED		
<ul style="list-style-type: none"> • September 2022 DURB Meeting Minutes • October 2022 Passport Training Presentation • November 2022 DURB Meeting Agenda • January 2022 ABA Services Launch Training Presentation • March 2022 ABA Services Family Training Presentation • ABA Qualitrac Authorized Official Training Presentation • November 2022 IHS Tribal Training Agenda • November 2022 IHS Medicaid Refresher Training Presentation 		

Top 15 Claim Denials

Claim Denial Reason	October 2022	September 2022
MISSING/INVALID INFORMATION	1	1
EXACT DUPLICATE	2	3
PA MISSING OR INVALID	3	2
RATE TIMES DAYS NOT = CHARGE	4	4
RECIPIENT COVERED BY PART B	5	5
PROVIDER TYPE/PROCEDURE MISMATCH	6	8
PROC. CODE NOT COVERED	7	6
RECIPIENT NOT ELIGIBLE DOS	8	7
CLAIM INDICATES TPL	9	9
PROC. CODE NOT ALLOWED	10	11
DEPRIVATION CODE RESTRICTED	11	12
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	12	13
REVENUE CONTROL CODE NOT COVERED	13	22
RENDERING NOT REQUIRED	14	14
RECIPIENT NUMBER NOT ON FILE	15	20

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:
MTEnrollment@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)