

Montana Healthcare Programs Nutrition EPSDT Fee Schedule

Explanation

Proposed Effective July 1, 2025

Definitions:

Modifier:

When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.
For example:
26 = professional component
TC = technical component

Description:

Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions
In order to assure correct coding.

Effective

This is the first date of service for which the listed fee is applicable.

Method – Source of Fee Determination:

Note: If a valid, current code is not present, that code may be a non-covered service
Fee Sched: Medicaid fee; not determined using RBRVS payment schedule
Medicare: Medicare-prevailing fee for listed codes

PA:

Prior Authorization
Y: Prior authorization is required by this code

Pass:

Passport Referral - Not all provider specialties require passport, please refer to your program manual for specifics.
Y: Passport referral is required

CPT codes, descriptions, and other data only are copyright (2025) American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.