

Provider Name

Montana Healthcare Programs

Provider Enrollment Social Security Number Change Attestation

When a Montana Healthcare Programs provider has enrolled and provided a Social Security Number (SSN) that has since become invalid, the provider must change the SSN on their provider record.

If it has been less than 365 days since the enrollment was approved, the provider must complete and upload this form to the Provider Services Portal.

If it has been more than 365 days since the enrollment was approved, the provider must disensoll and reenroll and complete and upload this form to the Provider Services Portal along with any other required documents.

A separate form must be submitted for each NPI or Atypical ID updated.

Provider Address	
Provider NPI	
Provider Atypical ID	
(if no NPI)	
Invalid SSN	
Corrected SSN	
Reason for Correction	
	Copy of valid SSN is attached.
I attest that the information provided is accurate.	
Provider Printed Name	
Provider Signature	
Date of Signature	