



# MONTANA HEALTHCARE PROGRAMS NOTICE

June 2, 2023

## Audiology, Durable Medical Equipment, and Hearing Aid Providers

**Effective June 16, 2023**

### New Hearing Aid Review and Approval Process Through Qualitrac Portal

Effective June 16, 2023, prior authorization requests for hearing aids, including Early and Periodic Screening, Diagnostic and Treatment (EPSDT) hearing aids and bone-anchored hearing aids (BAHA), will be reviewed by Mountain-Pacific Quality Health (MPQH). Requests **must** be submitted electronically through the Qualitrac Portal. **Requests that are faxed, mailed, or phoned in will not be accepted.**

If you do not already have access to Qualitrac, please visit the [Medicaid Portal - Home - Mountain-Pacific Quality Healthcare \(mpqhf.org\)](https://mpqhf.org) and select Document Library to complete the registration online.

#### Information on Submitting a Prior Authorization Request

The following is **required documentation** that must be included with the request for review:

- Completed Hearing Aid CMN form.
- Completed Hearing Aid PA Request form.
- Supporting documentation, which must include, at a minimum:
  - A copy of the physician's or mid-level practitioner's referral.
  - Medical clearance.
  - An audiogram.
  - A report from the licensed audiologist.
- For EPSDT reviews, the EPSDT Prior Authorization & Certificate of Medical Necessity form is required.

The forms above are on the [Forms page of the Provider Information website](#). The Forms page link is under the Site Index drop-down on the Home page.

Providers are required to ensure the Hearing Aid CMN form and Hearing Aid PA Request forms are complete, and all supporting documentation related to the request must be submitted along with the forms via the Qualitrac Portal. Incomplete requests cannot be reviewed.

For training on setting up Qualitrac accounts, please refer to the **May 2022 – Montana Medicaid: Qualitrac Authorized Official Training** located on the [MPQH webpage under the Education and Training tab](#). The slide deck and recorded training will walk you step-by-step through the process.

Once you have access to Qualitrac, please refer to the **March 29, 2019 – Provider Training**, starting on slide 15.

Specifically for Hearing Aid requests, please select the following:

- **Review Type:** Health Resource Division
- **Place of Service:** Other Place of Service (will auto-default)
- **Type of Service:** Hearing Aids
- **Timing:** Prospective (Should always be submitted **prior** to the Hearing Aid being dispensed.)

- **Personal Representative:** Leave blank.
- **Treating Provider:** The Hearing Aid Dispenser
- **Ordering Provider:** The ordering Audiologist
- **Documentation:** **Must** attach all required documentation listed above before case can be submitted for review

## Contact and Website Information

If you have questions, please contact the Audiology and Hearing Aid Program Officer, Maggie Irby, at (406) 444-4518 or email [margaret.irby@mt.gov](mailto:margaret.irby@mt.gov).

If you have questions regarding the Qualitrac Portal, please contact the Mountain-Pacific Call Center at (800) 219-7035.

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.