



Montana Healthcare Programs Provider Notice

August 28, 2025

Reminder

Substance Use Disorders Providers

Prior Authorization Required for ASAM Level 3.1 and Above

SUD providers must adhere to policies and procedures of Utilization Management pertaining to ASAM level 3.1, 3.2-WM, 3.3, 3.5, and 3.7 per the [BHDD Medicaid Services Provider Manual for Substance Use Disorder and Adult Mental Health](#).

Prior Authorization is required for these services and must be appended to clean claims for processing. If a claim does not have the proper Prior Authorization number, it will be denied.

- **Policy 535:** SUD Clinically Managed Low-Intensity Residential, Adult and Adolescent (ASAM 3.1)
- **Policy 536:** SUD Clinically Managed Residential Withdrawal Management, Adult (ASAM 3.2-WM)
- **Policy 537:** SUD Clinically Managed Population-specific High-Intensity Residential, Adult (ASAM 3.3)
- **Policy 540:** SUD Clinically Managed High-Intensity Residential, Adult (ASAM 3.5)
 - SUD Clinically Managed Medium-Intensity Residential, Adolescent (ASAM 3.5)
- **Policy 545:** SUD Medically Monitored Intensive Inpatient, Adult (ASAM 3.7)
 - SUD Medically Monitored High-Intensity Inpatient, Adolescent (ASAM 3.7)

Contact and Website Information

If you have questions regarding these policies, please contact .

- Chelsey Hallsten, Medicaid Waiver and State Plan Specialist, BHDD Division – Adult Mental Health at (406) 444-9330 or email Chelsey.Hallsten@mt.gov
- Cody Magpie, SUD Program Officer, BHDD Division – Adult Mental Health at (406) 444-9582 or email Cody.Magpie@mt.gov

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.

Visit the [Contact Us page](#) on the Provider Information website for additional DPHHS contact numbers.