



Montana Healthcare Programs Provider Notice

September 24, 2026

July 01, 2026

Informational

Dialysis Clinic Providers

Hemodiafiltration Billing and Reimbursement

[MM14354](#), posted April 17, 2026, directs ESRD facilities to bill for hemodiafiltration using revenue code 829 with CPT 90999. The service will be reimbursed the same composite rate as hemodialysis. The current fee schedule can be found on the Dialysis Clinic webpage located at <https://medicaidprovider.mt.gov> under Resources by Provider Type. Revenue code 829 should only be billed for 1 treatment per day and should not be billed on the same day as revenue code 821.

Contact and Website Information

If you have questions, please contact the Dialysis Program Officer at (406) 444-7018.

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.