

# Key Contacts

Hours for Key Contacts are 8:00 a.m. to 5:00 p.m. Monday through Friday (Mountain Time), unless otherwise stated. The phone numbers designated “In state” will not work outside Montana.

## Provider Relations

Contact Provider Relations for questions about Medicaid, MHSP, and CHIP eyeglass and dental payments and denials, eligibility, general claims questions, and Medicaid enrollment:

**(800) 624-3958** In- and out-of-state  
**(406) 442-1837** Helena  
**(406) 442-4402** Fax

Send written inquiries to:

Provider Relations Unit  
P.O. Box 4936  
Helena, MT 59604

Send e-mail inquiries to:

MTPRHelpdesk@ACS-inc.com

For PASSPORT enrollment or caseload questions:

(800) 362-8312

Send PASSPORT correspondence to:

PASSPORT To Health  
P.O. Box 254  
Helena, MT 59624

## Claims

Send paper claims to:

Claims Processing Unit  
P. O. Box 8000  
Helena, MT 59604

## PASSPORT Client Information

Clients who have general Medicaid questions may call the **Montana Medicaid Help Line** or write to:

**(800) 362-8312** In- and out-of-state

PASSPORT To Health  
P.O. Box 254  
Helena, MT 59624-0254

## PASSPORT Program Officer

PASSPORT providers report errors, omissions, or discrepancies in enrollee utilization and cost reports to:

**(406) 444-4540**

PASSPORT Program Officer  
DPHHS  
Medicaid Services Bureau  
P.O. Box 202951  
Helena, MT 59620-2951

## Client Eligibility

There are several methods for verifying client eligibility; see *Client Eligibility and Responsibilities, Verifying Client Eligibility*.

## Third Party Liability

For questions about private insurance, Medicare, or other third-party liability:

**(800) 624-3958** In-state

**(406) 443-1365** Out-of-state and Helena

Send written inquiries to:

Third Party Liability Unit  
P. O. Box 5838  
Helena, MT 59604

## Provider's Policy Questions

For policy questions, contact the appropriate division of the Department of Public Health and Human Services; see *Program Policy Information* in the *Introduction* chapter.

## Presumptive Eligibility

To verify Presumptive Eligibility call:  
**(800) 932-4453**

To become a provider who can determine presumptive eligibility contact:  
**(406) 444-4540**

Send written inquiries to:  
Health Policy and Services Division  
1400 Broadway  
Helena, MT 59601

## EDI Technical Help Desk

For questions regarding electronic claims submissions:

**(800) 987-6719** In and out-of-state  
**(406) 442-1837** Helena  
**(850) 442-4402** Fax

Send e-mail inquiries to:  
MTEDIHelpdesk@ACS-inc.com

Mail to:  
ACS  
ATTN: MT EDI  
P.O. Box 4936  
Helena, MT 59604

## Health Insurance Premium Payment Coverage

To apply for this program contact:  
**(800) 694-3084** In state  
**(406) 444-9440** Out of state and Helena

Send written inquiries to:  
Health Insurance Payment Program  
P.O. Box 202953  
Helena, MT 59620-2953

## Administrative Reviews and Fair Hearings

To request an administrative review, address or direct the request to the division that issued the contested determination, and deliver or mail to:

DPHHS  
111 N. Sanders  
P.O. Box 4210  
Helena, MT 59604-4210

To request a fair hearing, deliver or mail the request to the following address. A copy of the hearing request must also be delivered to the division that issued the contested determination.

DPHHS  
Quality Assurance Division  
Office of Fair Hearings  
P.O. Box 202953  
Helena, MT 59620-2953

## Surveillance/Utilization Review

To report suspected fraud and abuse by providers:

**(406) 444-4586**

**(800) 376-1115**

To report suspected fraud and abuse by clients:

**(406) 444-4167**

Send written inquiries to:

Fraud and Abuse

Surveillance/Utilization Review

2401 Colonial Drive

P.O. Box 202953

Helena, MT 59620-2953

## Team Care Program Officer

For questions regarding the Team Care Program:

**(406) 444-4540** Phone

**(406) 444-1861** Fax

Team Care Program Officer

DPHHS

Managed Care Bureau

P.O. Box 202951

Helena, MT 59620-2951

## Nurse First

For questions regarding Nurse First Disease Management or the Nurse Advice Line, contact:

**(406) 444-4540** Phone

**(406) 444-1861** Fax

Nurse First Program Officer

DPHHS

Managed Care Bureau

P.O. Box 202951

Helena, MT 59620-2951

## Secretary of State

The Secretary of State's office publishes the most current version of the Administrative Rules of Montana (ARM):

**(406) 444-2055** Phone

Secretary of State

P.O. Box 202801

Helena, MT 59620-2801