

# 2024 Provider Contact Reference Guide Updated August 2024

## Confused about where to go for answers?

Finding the right contact may save you time. Sometimes it's easy to know where to go for assistance. At other times, it's less clear. Use this chart to help guide you to the best point of contact for your answer.

ACRONYM LEGEND			
<b>MA</b>	Medicare Advantage	<b>EFT</b>	Electronic Funds Transfer
<b>HMK</b>	Healthy Montana Kids	<b>ERM</b>	Electronic Refund Management
<b>CAQH</b>	Council for Affordable Quality Healthcare (online Credentialing Tool)	<b>FEP®</b>	Federal Employee Program

Availity® Essentials	Group, BlueCard®, Individual Provider Customer Service	MA/HMK/FEP Provider Customer Service	Appeals/Disputes	Contract Request/Adding New Providers	Demographic Changes	Carelon Prior Authorizations	Medical Management	Credentialing, Network Representative	Network Consultant	Value Based Care
<a href="https://www.availity.com">availity.com</a> <b>800-282-4548</b>	<b>800-447-7828</b> Option 2	<b>FEP®</b> <b>800-634-3569</b>	Contact Based on Member Policy  <b>Group &amp; Individual Appeals</b> Non-Emergent F: <b>866-589-8256</b> Emergent F: <b>406-441-5569</b>	Provider Contract Requests  Please fill out and submit the Provider OnBoarding form located at: <a href="https://www.bcbsmt.com/provider/network-participation/network/update-your-provider-network">https://www.bcbsmt.com/provider/network-participation/network/update-your-provider-network</a>	Demographic Change Form located at: <a href="https://www.bcbsmt.com/provider/network-participation/network/update-your-provider-network">https://www.bcbsmt.com/provider/network-participation/network/update-your-provider-network</a>	<b>844-377-1285</b> <a href="https://providerportal.com/">https://providerportal.com/</a>	Contact Based on Member Policy  <b>FEP</b> Prior Authorization <b>877-885-3751</b>	<b>Credentialing</b> <a href="mailto:hcsx6100@bcbsmt.com">hcsx6100@bcbsmt.com</a>	Maggie Barnes <a href="mailto:maggie_barnes@bcbsmt.com">maggie_barnes@bcbsmt.com</a>	<a href="mailto:mt_valuebasedcareteam@bcbsmt.com">mt_valuebasedcareteam@bcbsmt.com</a>
Benefits Questions	Claims Questions & Issues	<b>HMK</b> <b>855-258-3489</b>	Emergent F: <b>406-441-5569</b>	Please fill out and submit the Provider OnBoarding form located at: <a href="https://www.bcbsmt.com/provider/network-participation/how-to-join">https://www.bcbsmt.com/provider/network-participation/how-to-join</a>	<ul style="list-style-type: none"> <li>Legal Name</li> <li>Office Physical Address/ Telephone/Fax/Email/ Hours of Operation</li> <li>Billing Address/ Telephone/Fax/Email</li> <li>Credentialing Address/ Telephone/Fax/Email</li> <li>Administrative/ Correspondence Address/Telephone/ Fax/Email</li> <li>Other Provider Updates</li> <li>Remove Provider from Group/Location</li> </ul>	<b>Evicore Prior Authorizations</b>  <b>855-252-1117</b> <a href="mailto:clientservices@evicore.com">clientservices@evicore.com</a> <a href="https://www.evicore.com/pages/providerlogin.aspx">https://www.evicore.com/pages/providerlogin.aspx</a>	<b>Case Management</b> <b>855-313-8908</b>	CAQH Issues	Grace Zeigler <a href="mailto:grace_zeigler@bcbsmt.com">grace_zeigler@bcbsmt.com</a>	Value Based Care Programs Contracting, Incentives, and Gap Reports
Claim Status	Benefits Questions	<b>MA Individual</b> <b>877-774-8592</b>	<b>HMK Appeals</b> Non-Emergent F: <b>866-589-8256</b> Emergent F: <b>406-441-5569</b>				<b>Disease Management</b> <b>866-412-8795</b>	Credentialing Issues	Contract Negotiations	
Coding Logic Tool	Member Eligibility	<b>MA Group</b> <b>877-299-1008</b>	<b>MA Claim Disputes Blue Cross Medicare Advantage<sup>SM</sup></b> Attn: Claims Disputes PO Box 4555 Scranton, PA 18505 F: <b>855-674-9192</b>				<b>HMK</b> Recommended Clinical Review & Prior Authorization P: <b>855-699-9907</b> F: <b>855-610-5684</b>	Network Representative	Pricing	
Compensation Policies	Remit Questions & Requests	Claims Questions & Issues					<b>BH Prior Authorization</b> P: <b>855-313-8909</b> F: <b>855-649-9681</b>	Message Box <b>406-437-6100</b> <a href="mailto:hcsx6100@bcbsmt.com">hcsx6100@bcbsmt.com</a>	Persistent Global Issues	<b>TriWest</b>
EFT & ERA Enrollment & Changes	Prior Authorization Status	Benefits Questions	<b>MA Clinical Appeals</b> Blue Cross Medicare Advantage Attention: Appeals Department PO Box 663099 Dallas, TX 75266 Standard Appeals F: <b>800-419-2009</b> Expedited Appeals F: <b>800-338-2227</b>				<b>MA Prior Authorization Required for Specialty Utilization Management</b>	Leave a message. We will respond within 48 hours.	Provider Education	Claim Status or Routine Inquiry <b>866-651-4977</b>
Electronic Refund Management (ERM)	<b>Behavioral Health</b> <b>800-528-7264</b>	Member Eligibility					<b>Group &amp; Individual</b> Recommended Clinical Review Requests for: Radiation Therapy & Molecular & Genomic Testing	Effective Date Questions	Process Questions	Provider's Zip Code will route to WPS for Legacy Region and TriWest for Expansion Region
Fee Schedule	<b>BlueCard</b> Prior Authorization <a href="https://www.bcbsmt.com/provider/standards-and-requirements/medical-policies-precert-router">https://www.bcbsmt.com/provider/standards-and-requirements/medical-policies-precert-router</a>	Remit Questions & Requests					<b>Individual Plans</b> Medical Prior Authorization <b>855-458-9444</b>	Global Reimbursement Issues	Provider Handbook – Billing & Claims: <a href="https://www.triwest.com/en/provider-handbook/billing-and-claims/">https://www.triwest.com/en/provider-handbook/billing-and-claims/</a>	Provider Handbook – Billing & Claims: <a href="https://www.triwest.com/en/provider-handbook/billing-and-claims/">https://www.triwest.com/en/provider-handbook/billing-and-claims/</a>
Medical Policies	Prior Authorization Status	Prior Authorization Status					<b>Group Plans</b> Prior Authorization P: <b>855-313-8914</b> F: <b>866-589-8256</b>	Provider Manual Questions	Provider Education	Network Participation: <a href="https://joinournetwork.triwest.com/">https://joinournetwork.triwest.com/</a>
Member Eligibility	MA Peer to Peer Scheduling <b>800-981-2795</b>	Prior Authorization Status					Recommended Clinical Review P: <b>800-447-7828</b> F: <b>866-900-2634</b>	Credentialing Questions		
Prior Authorization Requests	Program Information <a href="https://www.bcbsmt.com/provider/standards-and-requirements/blue-card">https://www.bcbsmt.com/provider/standards-and-requirements/blue-card</a>						<b>MA Prior Authorization</b> P: <b>877-774-8592</b>	Network Questions		
Provider Claim Summary								High Dollar Claims Issues (\$100,000+)		
Remittance Notices										
<b>BlueApprovR®</b> <b>Prior Authorizations</b> <a href="https://www.availity.com">availity.com</a> Select Applications tab and click BlueApprovR										

Information subject to change.

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eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for BCBSMT.

Carelon Health Benefits Management (Carelon) is an independent company that has contracted with BCBSMT to provide utilization management services for members with coverage through BCBSMT.

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