2025 Provider Contact Reference Guide Updated February 2025

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 | | | | | | | |
|----------|-------------|---------------|----------------|---|---------|-------|------|------------------------------|--|--|
| | | ı | MA | Medicare Advantage | | | EFT | Electronic Funds Transfer | | |
| | | ŀ | НМК | Healthy Montana Kids | | | | Electronic Refund Management | | |
| | | | CAQH | Council for Affordable Quality Healthcare (online Credentialing Tool) | | | FEP® | Federal Employee Program | | |
| wer. | | | | | | | | | | |
| Contract | Demographic | Carelon Prior | | Medical | Network | Netwo | rk | Value Based Care | | |

| Availity® Essentials | Group, BlueCard®, Individual Provider Customer Service | MA/HMK/FEP Provider Customer | Appeals/Disputes Contact Based on | Contract Request/Adding New Providers | Demographic Changes | Carelon Prior Authorizations | Medical Management | Network Representative | Network Consultant | Value Based Care |
|--|--|--|---|---|--|---|--|---|--------------------------|---|
| availity.com 800-282-4548 | 800-447-7828 | Service | Member Policy | Provider Contract | Demographic Change Form located at: | 844-377-1285 | Contact Based on Member Policy | hcsx6100@ bcbsmt.com | hcsx6100@ bcbsmt.com | valuebasedcareteam@ bcbsmt.com |
| Benefits Questions | Option 2 | FEP® 800-634-3569 | Group & Individual Appeals Non-Emergent | Requests Please fill out and submit | https://www.bcbsmt. com/provider/ | https://providerportal.com/ | FEP Prior Authorization 877-885-3751 | Leave a message. We will respond within 48 hours. | Contract Negotiations | Value Based Care Programs |
| Claim Status | Renefits Questions Member Eligibility | HMK 855-258-3489 MA Individual 877-774-8592 MA Group | F: 866-589-8256 Emergent F: 406-441-5569 HMK Appeals Non-Emergent | the Provider OnBoarding form located at: https://www.bcbsmt. com/provider/ network-participation/ how-to-join | network-participation/ network/update-your- provider-network • Legal Name • Office Physical Address/ Telephone/Fax/Email/ | Evicore Prior Authorizations 855-252-1117 | Case Management 855-313-8908 Disease Management 866-412-8795 | Effective Date Questions | Pricing | Contracting, Incentives, and Gap Reports |
| Coding Logic Tool | | | | | | | | Global Reimbursement Issues | Persistent Global Issues | |
| Compensation Policies | | | | | | | | Provider Manual | Process Questions | |
| EFT & ERA | Remit Questions & Requests | 877-299-1008 | F: 866-589-8256 Emergent | now to join | Hours of Operation • Billing Address/ | clientservices @evicore.com | HMK Recommended | Questions | Provider Education | |
| Enrollment & Changes | Prior Authorization | Claims Questions & Issues | F: 406-441-5569 | | Telephone/Fax/Email | https://www. | Clinical Review & Prior Authorization | Network Questions | | TriWest |
| Electronic Refund Management | Status | Benefits Questions | MA Claim Disputes Blue Cross | | Credentialing Address/ Telephone/Fax/Email | evicore.com/pages/ providerlogin.aspx | P: 855-699-9907 F: 855-610-5684 | High Dollar Claims Issues (\$100,000+) | | Claim Status or Routine Inquiry |
| Fee Schedule | Behavioral Health 800-528-7264 | Member Eligibility Remit Questions | Medicare Advantage ^{s™} Attn: Claims Disputes | | Administrative/ Correspondence Address/Telephone/ | MA Prior Authorization Required for Specialty | BH Prior Authorization | CAQH Issues | | 866-651-4977 Provider's Zip Code will |
| Medical Policies | BlueCard | & Requests | PO Box 4555 Scranton, PA 18505 F: 855-674-9192 | | Fax/Email Other Provider Updates | Utilization Management | P: 855-313-8909 F: 855-649-9681 | | | route to WPS for Legacy Region and TriWest for |
| Member Eligibility | https://www.bcbsmt. | Status | MA Clinical Appeals | | • Remove Provider from | Group & Individual Recommended Clinical | Individual Plans | | | Expansion Region Provider Handbook – |
| Prior Authorization Requests | standards-and- | MA Peer to Peer Scheduling 800-981-2795 | Blue Cross Medicare Advantage Attention: Appeals Department PO Box 663099 Dallas, TX 75266 Standard Appeals F: 800-419-2009 Expedited Appeals F: 800-338-2227 | | Group/Location | Review Requests for: Radiation Therapy & Molecular & Genomic Testing | Medical Prior Authorization 855-458-9444 Group Plans Prior Authorization P: 855-313-8914 F: 866-589-8256 | | | Billing & Claims: https://www.triwest. com/en/provider- handbook/billing-and- claims/ Network Participation: https://joinournetwork. triwest.com/ |
| Provider Claim Summary | | | | | Dental | | | | | |
| Remittance Notices | | | | | Dental Benefits Customer Service: 888-381-9727 (Monday through Friday, 7 a.m. to 6 p.m. MST.) | | | | | |
| BlueApprovR® Prior Authorizations availity.com Select Applications tab | | | | | | | Recommended Clinical Review P: 800-447-7828 F: 866-900-2634 | | | |
| and click BlueApprovR | | | | | | | MA Prior Authorization P: 877-774-8592 | | | |

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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