



ADMINISTRATIVE RULES OF MONTANA



6.6.5505 APPLICABILITY AND SCOPE

- (1) Except as otherwise specifically provided, the requirements of this subchapter apply to issuers, health care practitioners, and institutional care practitioners.
- (2) Nothing in this subchapter shall prevent an issuer from requesting additional information that is not contained on the forms required under this subchapter to determine eligibility of the claim for payment if required under the terms of the policy or certificate issued to the claimant. This subchapter does not apply to workers' compensation and occupational diseases insurance services provided pursuant to the Workers' Compensation and Occupational Disease Act. This rule does not apply to medical assistance-medicaid as referenced in 53-6-101 through 53-6-402 , MCA. Nothing in this rule prohibits such insurers and medical providers from complying with this subchapter, however, to the extent that such compliance is consistent with workers' compensation or medicaid laws and rules.
- (3) Nothing in this subchapter shall prohibit an issuer, health care practitioner or institutional care practitioner from using alternative forms or procedures for filing claims as are specified in a written contract between the health care practitioner or institutional care practitioner and issuer.

Authorizing statute(s): Sec. 50-4-501, MCA

Implementing statute(s): 50-4-305 and 50-4-501, MCA

History: NEW, 1995 MAR p. 923, Eff. 5/26/95.