Revision: HCFA-PM-87-4 (BERC) OMB No.: 0938-0193
MARCH 1987

State/Territory: Montana

Citation	4.4 Medicaid Quality Control
42 CFR 431.800(c) 50 FR 21839 1903(u)(1)(D) of the Act, P.L. 99-509 (Section 9407)	(a) A system of quality control is implemented in accordance with 42 CFR Part 431, Subpart P. (b) The State operates a claims processing assessment system that meets the requirements of 431.800(e), (g), (h), (j) and (k). /_/ Yes. /X/ Not applicable. The State has an approved Medicaid Management Information System (MMIS).

TN No. 87(10)11
Supersedes
TN No. _____

Approval Date 8/12/87

Effective Date 4/1/87

HCFA ID: 1010P/0012P

JUN 29 1987