

License Updates

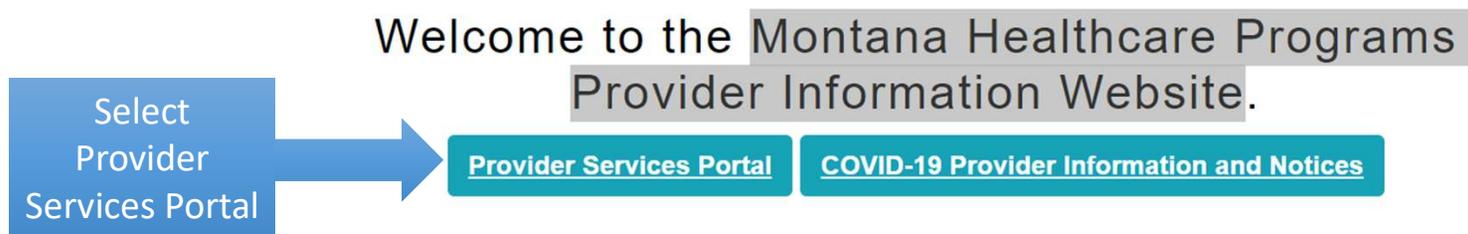
Roll Call

- We want to get to know our Community
- Your name
- The name of your company
- Who are you representing

Registering for the MPATH Portal

Accessing the Self-Service Portal

To begin, access the Provider Self Service portal by navigating to the Montana Healthcare Programs Provider Information Website <https://medicaidprovider.mt.gov>



You can also access the Self Service portal directly at:
https://mtdphhs-provider.optum.com/tpa-ap-web/?navDeepDive=MT_publicHomeDefaultContentMenu

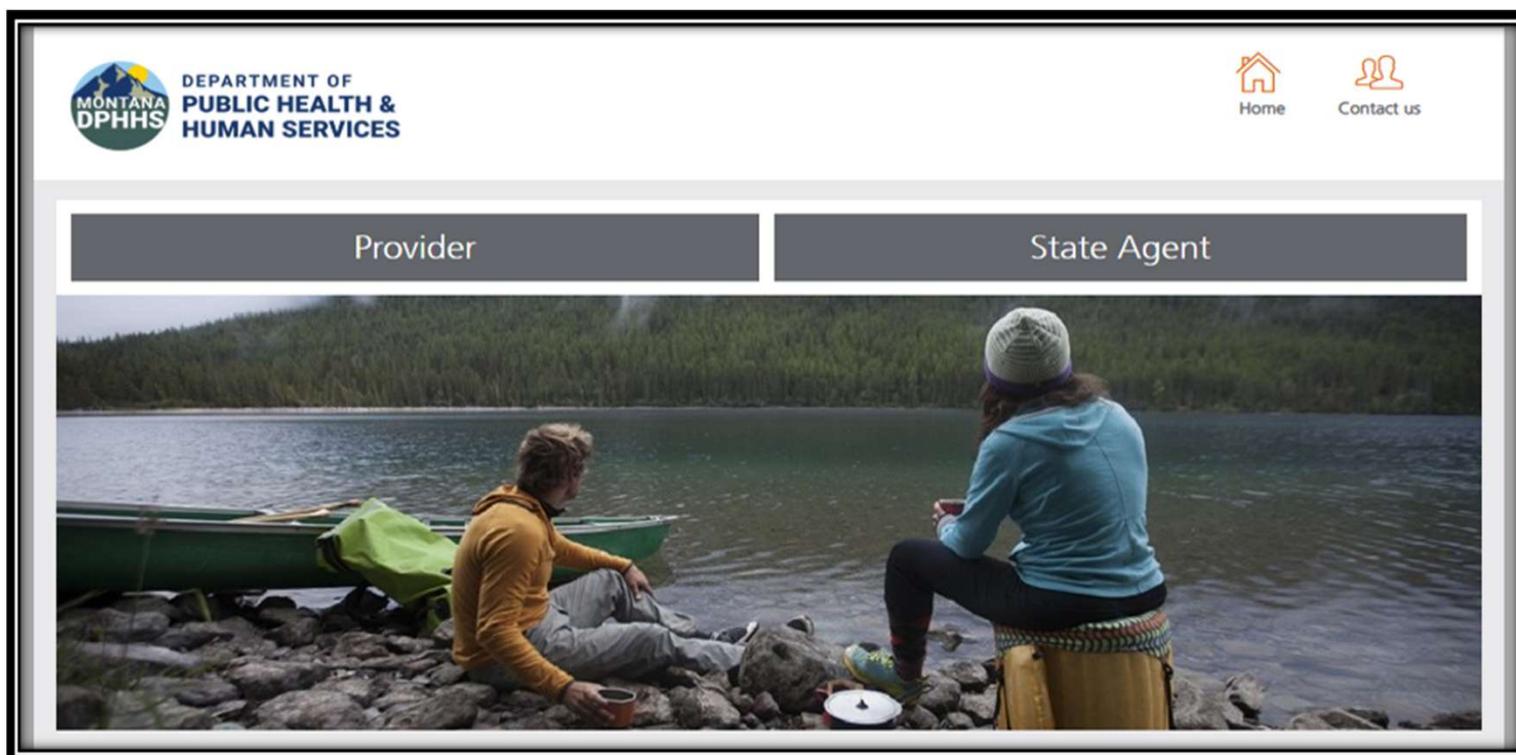


Disclaimer

Any names, data, or scenarios presented
are fictitious.

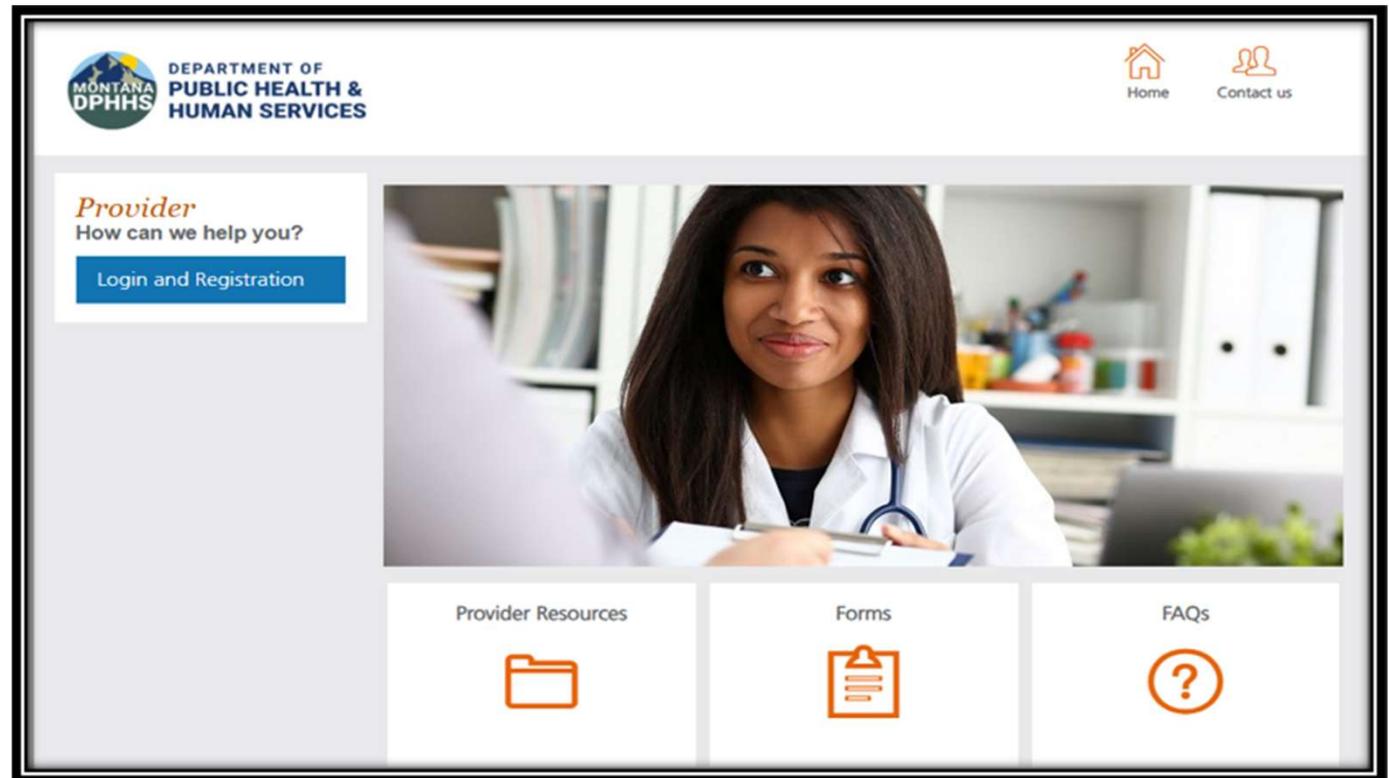
Accessing the Self-Service Portal

Select
Provider



Login and Registration

First time users
will need to
Register to use
the portal



Login and Registration

Sign In With Your Optum GovID

Optum GovID or email address <input type="text"/>	Additional options: Create Optum GovID Manage your Optum GovID What is Optum GovID? 
Password <input type="password"/>	

SIGN IN

[Forgot Optum GovID](#) | [Forgot Password](#)

As a security enhancement, we are removing Security questions as an account recovery and authentication method. Users will have the option to use other available methods.

Warning! This system contains U.S Government information. By using this information system, you are consenting to system monitoring for law enforcement and other purposes. Unauthorized or improper use of, or access to, this computer system may subject you to state and federal criminal prosecution and penalties as well as civil penalties. At any time, the government may intercept, search, and seize any communication or data transiting or stored on this information system.

If you'd like assistance, contact MTPRHelpdesk@conduent.com

Begin by Selecting
"Create Optum GovID"

Login and Registration

After completing your profile information select “Agree”

Create Optum GovID

Optum GovID securely manages your account so that you can use one Optum GovID and password to sign in to all integrated applications.

 [Already have Optum GovID? Sign In now](#)

Profile Information

First name

Last name

Date of birth

mm-dd-yyyy

Sign In Information

Your email address

Create Optum GovID
 

Your Optum GovID must have:

- 6 to 50 characters
- At least one letter
- No spaces
- No letters with accents

Create password
 

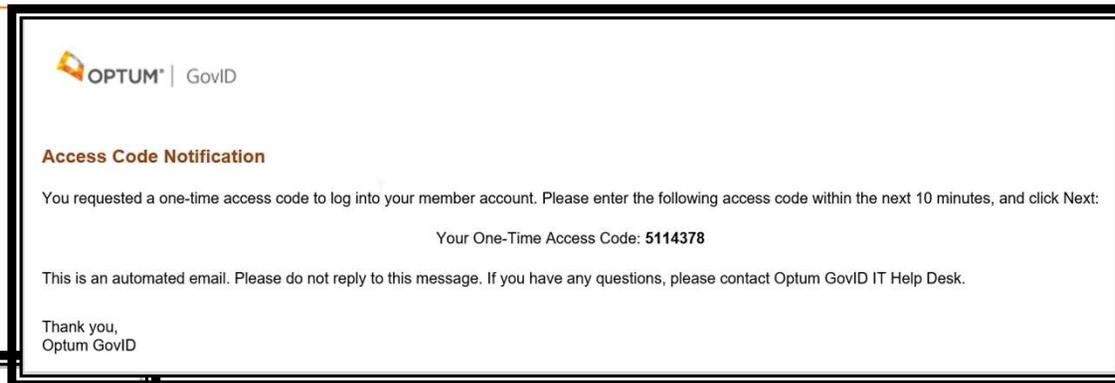
Your password must have:

- Between 8 and 100 characters
- At least 1 uppercase letter
- At least 1 lowercase letter
- At least 1 number
- At least 1 special character

Type password again
 

Login and Registration

An activation code will be sent to your email



OPTUM* | GovID

Access Code Notification

You requested a one-time access code to log into your member account. Please enter the following access code within the next 10 minutes, and click Next:

Your One-Time Access Code: **5114378**

This is an automated email. Please do not reply to this message. If you have any questions, please contact Optum GovID IT Help Desk.

Thank you,
Optum GovID

Next Step: Verify Your Email Address

1. **Check your email inbox** (sam*****th@getnada.com) for a message from Optum GovID (noreply@optumgovid.com).
2. [Enter the 10-digit activation code.](#)

Still waiting for your activation code? [Resend email](#) or [update email address](#)

If you don't see it, check your junk or spam folders. You may need to resend the message or add our address to your approved senders.

If you'd like assistance, contact support at the Help Desk location found when selecting the Contact Us icon on the portal's Home Page.

Copy the 10-digit activation code in the email and select "Enter the 10-digit activation code".

Login and Registration

Enter the 10-digit
activation code and
select "Next"

Sign In: Access Code

We've sent you an email to **den*****ik@mt.gov**. Type the code from the message here to verify your identity and sign in. You can bypass this step in the future by checking the box.

Access Code *

.....

Still waiting for your access code? [Resend Email](#)

Check your email for a message from Optum GovID(noreply@optumgovid.com). If you don't see it, check your junk or spam folders. You may need to resend the message or add our address to your list of approved senders.

Skip this step in the future when signing in because this device is personal or private.

NEXT [Cancel](#)

If you'd like assistance, contact MTPRHelpdesk@conduent.com

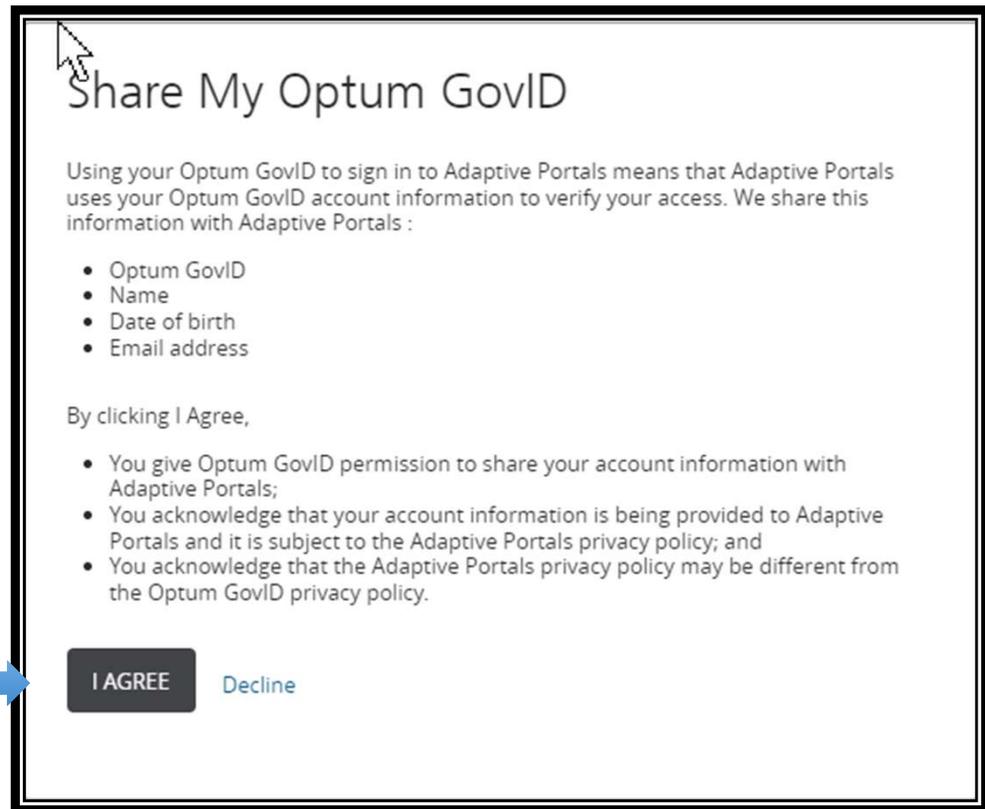
Select "Continue"

Email Address Verified

Your Optum GovID is ready to use. Click the Continue button below to finish.

CONTINUE

Login and Registration



Share My Optum GovID

Using your Optum GovID to sign in to Adaptive Portals means that Adaptive Portals uses your Optum GovID account information to verify your access. We share this information with Adaptive Portals :

- Optum GovID
- Name
- Date of birth
- Email address

By clicking I Agree,

- You give Optum GovID permission to share your account information with Adaptive Portals;
- You acknowledge that your account information is being provided to Adaptive Portals and it is subject to the Adaptive Portals privacy policy; and
- You acknowledge that the Adaptive Portals privacy policy may be different from the Optum GovID privacy policy.

Select
"Agree"

Manage Your Optum Gov ID

Return to Adaptive Portals

Manage Your Optum GovID

Keep your profile up-to-date, change your Optum GovID or password, and manage the options for verifying your identity.

Update Profile | **Sign In Info** | Verification Options

Optum GovID
samanthasmith@getnada.com

Change Password

Current Password

New Password

Your password must have:

- Between 8 and 100 characters
- At least 1 uppercase letter
- At least 1 lowercase letter
- At least 1 number
- At least 1 special character

Confirm New Password

SAVE Cancel

If you'd like assistance, contact the Help Desk location found when selecting the Contact Us icon on the portal's Home Page.

Select the Sign in tab to change password

Be sure to choose Notification Options and select "Save"

Return to Adaptive Portals

Manage Your Optum GovID

Keep your profile up-to-date, change your Optum GovID or password, and manage the options for verifying your identity.

Update Profile | **Sign In Info** | Verification Options

First name

Middle name (optional)

Last name

Suffix (optional)

Prefix (optional)

Date of birth

mm-dd-yyyy

Home address (optional)

City (optional)

State (optional)
Select

ZIP code (optional)

Language Preferences

Select the language in which you want to receive communications from Optum GovID.

Preferred language
 English Español

Notification Options

Select the notifications you want to receive at your primary email address and by text if you added a phone number to your account.

Failed Login
 Email Text Message

Successful Login
 Email Text Message

Account Recovery Attempt
 Email Text Message

Locked Account
 Email Text Message

SAVE Cancel

If you'd like assistance, contact the Help Desk location found when selecting the Contact Us icon on the portal's Home Page.

Manage Your Optum Gov ID

On the Verification Options tab enter your phone number to receive text messages or calls with your verification code in addition to email.

[Return to Adaptive Portals](#)

Manage Your Optum GovID

Keep your profile up-to-date, change your Optum GovID or password, and manage the options for verifying your Identity.

Update Profile | Sign In Info | **Verification Options**

Optum GovID
samanthasmith@getnada.com

Email address

Email address is verified.

Secondary email address (optional)

Phone number (optional)

555-555-5555

Phone communication method

- Text messages only
- Phone calls only
- Both text messages and phone calls

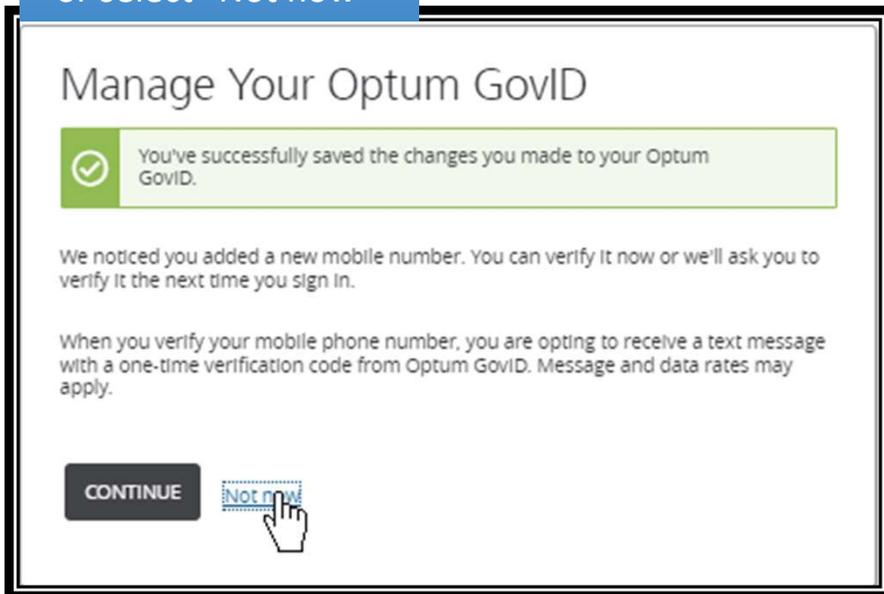
Security questions
Security questions can be used if you need to recover your account.

[Add or change security questions](#)

If you'd like assistance, contact the Help Desk location found when selecting the Contact Us icon on the portal's Home Page.

Manage Your Optum GovID

You can elect to verify your mobile number or select "Not now"



Manage Your Optum GovID

 You've successfully saved the changes you made to your Optum GovID.

We noticed you added a new mobile number. You can verify it now or we'll ask you to verify it the next time you sign in.

When you verify your mobile phone number, you are opting to receive a text message with a one-time verification code from Optum GovID. Message and data rates may apply.

[CONTINUE](#) [Not now](#)

The system will navigate users back to the Manage Your Optum GovID. Select "Return to Adaptive Portals"



Manage Your Optum GovID [Return to Adaptive Portals](#)

Keep your profile up-to-date, change your Optum GovID or password, and manage the options for verifying your identity.

[Update Profile](#) [Sign In Info](#) [Verification Options](#)

Optum GovID
samanthasmith@getnada.com

Email address

Email address is verified.

Secondary email address (optional)

Registration

On the Entity Tab
choose either Provider
or Provider Delegate
and select “Continue”

The screenshot shows the registration interface for the Montana Department of Public Health & Human Services. At the top left is the Montana DPHHS logo. To its right is the text "DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES". In the top right corner, there are icons for "Home" and "Contact us". Below the header is a banner image showing four diverse healthcare professionals. Underneath the banner are three tabs: "Entity", "Details", and "Review", with "Entity" being the active tab. The main content area is titled "Entity" and includes a note: "Note : Fields marked with * are required." Below this is a form field labeled "I am registering as:" with a dropdown menu. The dropdown menu is open, showing three options: "Select", "Provider", and "Provider Delegate". A mouse cursor is pointing at the "Provider" option. To the right of the dropdown are two buttons: "Continue" and "Cancel". At the bottom left, there is a "Privacy" link and a copyright notice: "©2024 Optum, Inc. All rights reserved."

Registration

Complete
required fields and
select “Continue”

Details for Provider Account

Important : If registering with an Organization/Group NPI or API, you will become the Owner/Administrator for that organization/group. If this is incorrect, **do not** proceed with this provider portal registration process.

For additional information on the Provider Portal Registration process:

[Quick Tips for Delegates/Office Staff](#)
[Quick Tips for Owners/Administrators](#)
[Organization and Group Registration User Guide](#) [MT Provider Training Video - New Providers](#)

Note: Fields marked with * are required.

Are you currently an active enrolled provider with the state of Montana?* Yes No

User:

First Name:

Last Name:

Email:

Provider:

Are you registering as an Individual Provider? * Yes No

Provider Name or Organization Name? * Provider Name Organization Name

Organization Name: *

NPI or API? * NPI - National Provider Identifier
 API - Atypical Provider Identifier
 Atypical Provider without assigned API

NPI: *

Billing or Non-Billing Provider? * Billing Non-Billing

TIN/FEIN: *

Note: For Organizations, additional NPIs/APIs can be added after registration.

Registration

Entity Details **Review**

Review for Provider Account

First Name: Loma
Last Name: Romero
Email: flomero90@gmail.com

Individual Provider? No
Organization Name: BETANCES CLINICAL CENTER INC
NPI: 1700208253
TIN/FEIN: 123456789

By submitting your registration information, you indicate that you have read and accept our [Terms and Conditions](#) and [Privacy Policy](#).

Submit Previous Cancel

Review the information, select the checkbox and "Submit"

Post Registration

Congratulations you are registered!
On the left you will have the following options:

- Provider Enrollment
- Provider Directory
- Account Administration

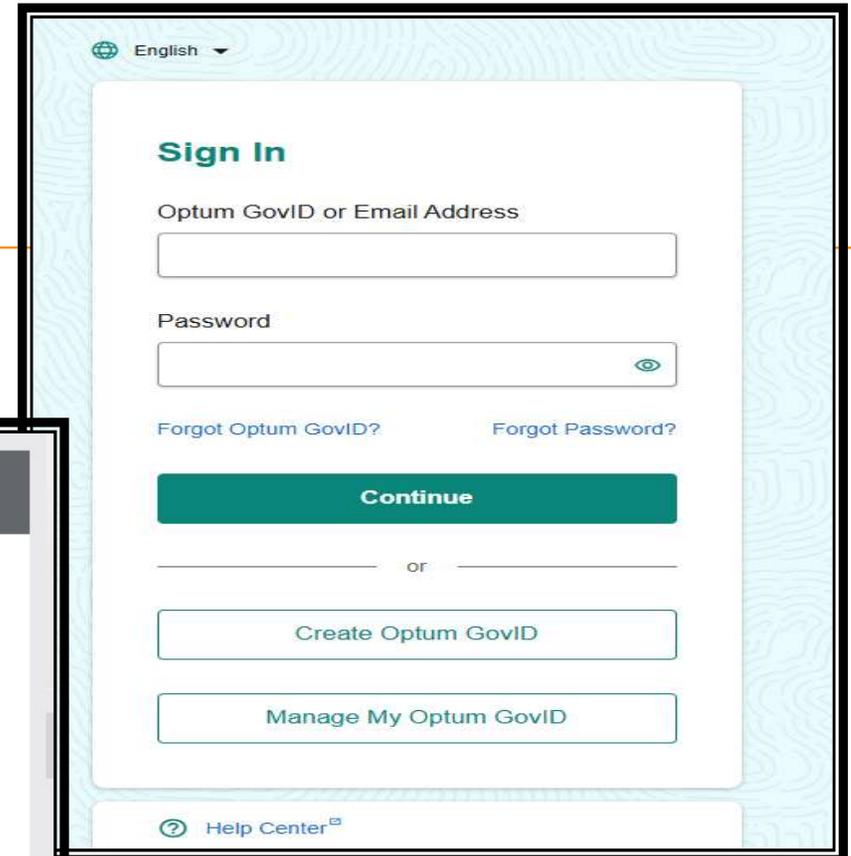
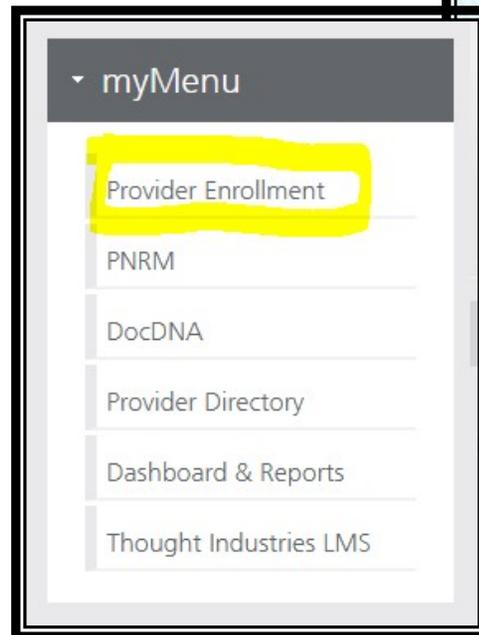
The screenshot displays the Montana Department of Public Health & Human Services (DPHHS) provider portal. At the top left is the DPHHS logo. The top right navigation bar includes icons for Home, Contact Us, Account Settings, and Log Out. The main content area features a 'Member search' section with a search prompt and three radio button options: 'Search By Member ID' (selected), 'Search By Member Name', and 'Search By Member SSN'. Below these are input fields for 'Member ID' and 'Service Date' (with a date picker), and a 'Go' button. To the right of the search section is a large image of a doctor in a white coat. Below the search section is a 'myMenu' dropdown menu with a red border, listing: Claims, Remittance Advice, Provider Profile, Provider Enrollment, Provider Directory, Account Administration, and Bulk HIPAA Transactions. The main dashboard area shows a greeting 'Hello, Conduent Test' and 'Last login: 12/22/2025'. Below this are three tiles: 'Provider Resources' with a folder icon, 'Forms' with a clipboard icon, and 'FAQs' with a question mark icon.

License Update

Sign in to the Portal

Next Under my Menu choose

Select Provider Enrollment



Update

Search the NPI using the fields shown.

Select the radio button for NPI.

Click the Update button on the left menu.

A new Update line will show at the end of your list and click pencil icon.

The screenshot displays the 'Enrollment Workbench' interface. At the top, there is a search section with a dropdown menu labeled 'Select "Search By" Column' (set to 'Select One'), a search input field, and 'Search' and 'Clear' buttons. Below this is a table with the following columns: Actions, Type, Status, Submission Date, Confirmation #, Tax ID, NPI/Atypical ID, Provider ID, and Provider Name. The first row shows an enrollment record for 'Deb Braga' with a status of 'Enrolled' and a submission date of '12-09-2021'. At the bottom of the table, a new row is highlighted with a yellow box, showing an 'Update' action with a status of 'InProgress' and a submission date of '20087591'. A red circle highlights the pencil icon in the 'Actions' column of this row.

Actions	Type	Status	Submission Date	Confirmation #	Tax ID	NPI/Atypical ID	Provider ID	Provider Name
	Enrollment	Enrolled	12-09-2021	20086035	XX-XXX1234	0002089504	200002447	Deb Braga
	Update	InProgress	20087591		XX-XXX1234	0002089504	200002447	Deb Braga

License Update Continued

- Choose Credentials Tab

Provider Information	<input type="radio"/>
Credentials	<input type="radio"/>
Financial Information	<input type="radio"/>
Physical Location	<input type="radio"/>
Enrollment Units	<input type="radio"/>
Final Submission	<input type="radio"/>
Summary	
Demographic Maintenance	



License Update Cont.

Add License - A window will open to add details.

Note: License end dates can be extended by clicking the pencil. Only add a license if a new license is required or if there is a gap in coverage.

Licensing, Certifications & Accreditations

Licensing, Certifications & Accreditations ? Help

Please complete all of the required information when entering licensing, certification, and accreditation information if applicable. To add a license, certification or accreditation, select the "Add" button and the corresponding pop-up screen will display. Enter in the license, certification, or accreditation number, effective and terminate dates, and indicate the name of the issuing party identifier. Use the top ? to access User Documentation to help navigate each section of the Provider Enrollment application. The 'Help' symbol is also available for additional help or the (i) for hover field level help.

Please enter the exact License number located on your certificate, including special characters.

Licenses: i

Add i

License #	Specialty	State	Effective Date	Expiration Date	Issuing Party Identifier	Other (Mail or Fax)	Actions
abc-med-lic-124 *	Case Management	MT	01/01/2025	12/31/2026	Board of Behavioral Health	<input type="checkbox"/>	

License Update

- Add Provider Type
- Specialty
- License# with Letters
- State of License
- Issuing Party Identifier
- Effective Date
- Expiration Date
- Save

The screenshot shows a web form titled "Add Licenses" with a close button (X) in the top right corner. The form contains the following fields:

- Provider Type:** A dropdown menu with "Dental Providers" selected.
- Specialty:** A dropdown menu with "Dentist - 122300000X" selected.
- License#:** A text input field containing "den-gen-lic-123".
- State:** A dropdown menu with "MT" selected.
- Issuing Party Identifier:** A dropdown menu with "Board of Dentistry" selected.
- Effective Date:** A date picker field showing "01/01/2025".
- Expiration Date:** A date picker field showing "12/31/2026".

Each field has an information icon (i) next to its label. At the bottom right of the form is a blue "Save" button.

License Update Cont.

Add License to update by clicking on the blue upload arrow.

License #	Specialty ↑	State	Effective Date	Expiration Date	Issuing Party Identifier	Other (Mail or Fax)	Actions
den-gen-lic-123*	Dentist	MT	01/01/2025	12/31/2026	Board of Dentistry	<input type="checkbox"/>	  

An add document window appears, select Browse button

Search for the license on your computer & double click on the document.

Add Document

Document Type:  License   

License Update Cont.

Once the file is successfully uploaded close the window.

Add Document ✕

Document Type: License Browse

Rules for uploading documents:

- Do not upload a file other than the supported format (Word, PDF, Visio, Excel, PowerPoint, TIFF, JPEG, PNG, XML, HTML, EDI and ZIP)
- Do not upload a file beyond 50MB
- Do not upload a file which is password protected or an empty file
- Recommended not to upload a filename containing special characters

File successfully uploaded

Attachment	Document Type	Upload Date	Remove
Training_example.docx	License	02/13/2026	🗑️

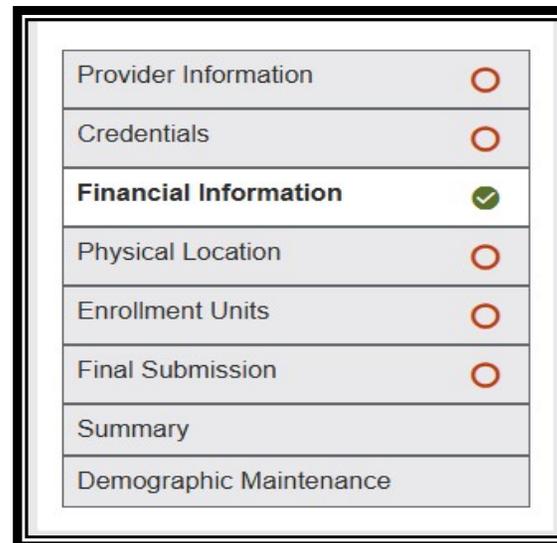
Close

License Update Cont.

- Click Save and Continue



Once completed, each menu
Section will have a green checkmark.



License Update Cont.

- Submit the license update

Tip: Verify that all required documents have been/will be uploaded.

License	Required	 Training example.docx	<input type="checkbox"/>
Medicaid	Optional		<input type="checkbox"/>



Questions?

Need Help?

At the top of each screen is a **User Guide** icon.

When you click on the icon, the user guide will open to the section matching the screen you are on.



User Guide



Online Resources

Provider Information Website:
<https://medicaidprovider.mt.gov>

[Provider Enrollment Page](#)

Provider Services Module User Guides

[Claim Jumper Newsletters](#)

Previous training presentations and videos



Provider Relations Contact Information

Provider Relations Call Center:

(800) 624-3958

Monday through Friday 8am to 5pm MST

General, Claims, TPL, and EDI questions:

MTPRHelpdesk@conduent.com

Enrollment Questions and documents:

MTEnrollment@conduent.com

Note: the Conduent helpdesks cannot accept secured emails or PHI.

Email Assistance MTPRHelpdesk@conduent.com

When emailing the help desk, please provide the following so we can research & submit a help ticket to our Tech Team.

GovID:

Name:

Email registered:

NPI attempting/registered:

Phone number:

A screen shot of the error:

Please allow 2 - 5 business days for a response.

Thank you for the care and support of
Montana Healthcare Programs
members that you provide!