

Provider in Training Policy

Blue Cross and Blue Shield of Montana
Network Management Administrative Policy
Version: N006.5

Original Effective Date: 05/03/2004
Version Effective Date: 03/27/2026

Replaces: N006.4

Scope

This policy applies to all lines of BCBSMT business with the exception of Medicare Advantage.

Purpose

BCBSMT recognizes the value of services being provided to its Enrollees by providers in training for their health care profession. This policy establishes billing guidelines for providers in training.

Because the licensed Health Care Provider oversees the care being given, BCBSMT allows an eligible provider acting in the capacity of a Preceptor (a practicing, licensed provider who gives personal instruction, training, and supervision to a new provider who is not yet fully licensed) to bill for services rendered by an eligible provider in training under his/her supervision so long as there is a formal supervisor-trainee relationship.

Providers in Training must be licensing candidates or doctoral students.

Claims submission

Preceptors must submit claims with their individual rendering NPI. Provider in Training information is not included on the claim. Submission of claims under the Preceptor's individual NPI constitutes certification of the Preceptor's personal knowledge that the services were rendered per Montana licensing requirements as explained below. Claim reimbursement is subject to the terms of a member's coverage and medical necessity review.

Supervision Requirements

The Preceptor may bill for services of a trainee who renders service to the member as long as the trainee is under that Preceptor's direct and personal supervision, except as otherwise authorized and communicated by BCBSMT. Direct personal supervision requires that the Preceptor be in the immediate vicinity 100% of the time to perform or manage the procedure if necessary. Whether immediate vicinity (i.e., physical presence) is necessary for direct personal supervision is determined by applicable Montana statutes and regulations governing the relevant professional license and services. For example, if Montana law permits supervision remotely via electronic transmission for the purposes of licensing, then direct personal supervision under this policy is permitted to be via electronic means provided all Montana licensing requirements for electronic supervision are met.

Preceptors and trainees are responsible for understanding and complying with all applicable state licensing supervision requirements, including general supervision

and documentation or recordkeeping requirements, for the purpose of complying with this policy. If a Preceptor does not comply with applicable state law in supervising a trainee and billing trainee services under this policy, BCBSMT may deny the claim and/or refer the billing to the Preceptor’s licensing board. If BCBSMT determines that a Preceptor lacked personal knowledge of the trainees’ services despite billing under the Preceptor’s NPI, BCBSMT may report such billing to the authorities as suspected fraud.

Documentation

Submission of medical records with the claim is not required but may be requested if the claim is subject to review, as well as documentation and records kept required for trainee supervision under Montana licensing laws and regulations. The medical records of the treatment rendered by the provider in training must adequately reflect the Preceptor’s oversight.

Other requirements

Provider remit and member EOB will identify the overseeing Preceptor as the rendering provider. Members should be informed of the provider in training status.

When training is completed, and licensure obtained, the newly licensed Health Care Provider must obtain an NPI number and submit claims as the rendering provider.

**Rationale/
Source**

This policy documents BCBSMT business operations.

**Cross-
References**

For additional information, refer to the following:

Note: Other policies and procedures may be applicable that are not included in this reference section.

Document Name
N007 Provider Network Participation Policy
BCBSMT Commercial Provider Manual

Formal Review or Revision Date History

This policy was reviewed/revised, and approved as documented below:

Version	Date	Summary of Changes
V-01	05/03/2004	<i>Original Approval Date</i>
V-02	07/19/2004	<i>Changed Policy statement term “a provider” to “an eligible provider” ay the request of HCS</i>
V-03	04/28/2006	<i>Biennial review and approval. New signature block</i>
V-03.1	03/16/2009	<i>Changed “must obtain a BCBSMT provider ID number” to “an NPI number”</i>
V-04	09/23/2013	<i>Added HCSC language to footer</i>
V-05	01/05/2016	<i>Changed title from HCS to Network Management</i>

N006	08/14/2019	<i>New policy numbering system. Added language regarding member's EOB – Reformatted</i>
N006.1	12/08/2020	<i>Updated executive approver</i>
N006.1	12/17/2021	<i>Annual review – no material changes. Reformatted</i>
N006.1	01/10/2023	<i>Annual review – no changes</i>
N006.1	01/09/2024	<i>Annual review – no changes</i>
N006.2	04/09/2024	<i>Added Doctoral Students to approved provider in training provider types</i>
N006.2	04/08/2025	<i>Annual Review – no changes</i>
N006.3	12/09/2025	<i>Clarified direct and personal supervision requirements</i>
N006.4	02/10/2026	<i>Clarified direct and personal supervision requirements and added language to address the use of telehealth.</i>
N006.5	03/27/2026	<i>Revised Claims Submission, Supervision Requirements, and Documentation</i>

Governance

Responsibility for adoption and/or implementation of this policy is as follows:

Executive Approval	Date
Signature on File	
Lisa Kelly President, Blue Cross and Blue Shield of Montana	03/27/2026