

Claims and Encounters (CE)

How can I determine if a TCN is available to be Adjusted or Voided within the CHAMPS system?

Use the Inquiry screens in CHAMPS to locate the last paid header TCN (these claims end in double zero). Claims available for Managing must have a final status of "Paid" and a "Paid Date" must be populated if this is a claim adjudicated out of the CHAMPS system.

When will my claims be available for Inquiry in CHAMPS?

Claims submitted via the Direct Data Entry (DDE) tool will be available for inquiry within 15 minutes of submission. Claims Submitted via the 837 HIPAA file (Billing Agent, Clearinghouse, and Direct Data Upload) will be available within 24 hours of MDCH receiving the file.

How are claims going to be converted* into CHAMPS?

MDCH will migrate existing suspended claims from the current legacy system into CHAMPS. This migration will take place in phases during which the claims will be rejected in the legacy system and then resurrected in CHAMPS. For further information, please refer to either MSA Numbered Letter L09 -19 or MSA CHAMPS Bulletin 09-46.

*Conversion is the migration of paid & denied claims from Legacy to CHAMPS- Since we were not able to process all the suspended claims in Legacy before CHAMPS went live we also DENIED all the suspended claims - & will RESURRECT any claims that can be processed in CHAMPS (sometime in OCT is the plan right now).

In the claims subsystem, what does TCN* stand for?

All claims in CHAMPS will be assigned a Transaction Control Number or TCN. This terminology will replace Claim Reference Number (CRN) which was used in MDCH's previous claim adjudication system.

*Please see the TCN Composition worksheet located in the Resources Table on the CHAMPS website, under "Additional Resources."

How can a provider check the status of a claim that was converted from the old legacy system?

A provider will need to know the CRN of the converted claim. Place 200 before CRN and 00 after CRN (example: 200123456789100), or on the claims inquiry screen filter under beneficiary ID, patient account number, etc. in order to identify claim under the new TCN number.

Should claims be billed under a group or individual NPI?

Providers should bill under the NPI that is enrolled with the tax ID that the provider expects the payment to be made under. For most providers this would be their group NPI (Type 2). Providers can also report a rendering provider on the claim. The rendering

provider on the claim would be the individual (Type 1), however the billing provider would be the group (Type 2) NPI.

How will providers see their pended claim(s) and the reason the claim(s) pended?

In CHAMPS, pended claims are labeled as 'in process'. In order to see these claims a provider will search for claims on the inquiry claims screen. Filter by 'reason code' and a status of 'in process'. This will return all in process claims with the appropriate reason and remark codes.

How many service lines will CHAMPS allow me to enter into Direct Data Entry (DDE)?

In accordance with HIPAA guidelines, providers will be allowed to enter up to 999 claim service lines for institutional claims, and 50 claim service lines will be allowed for professional and dental claims.

Providers can now do their own adjustments and voids directly in CHAMPS, but will they still be able to adjust claims through a Billing Agent?

Yes, replacement and void claims can be submitted in HIPAA 837 format by a billing agent in CHAMPS. They can continue to submit their claims via the Data Exchange Gateway (DEG), as they do today, or they can choose to submit original, void, and/or replacement claims in HIPAA 837 format via the batch upload functionality (for smaller batches of claims) directly into CHAMPS.

Can I status claims sent by Billing Agents?

Yes. Even though you may not know the TCN, you may filter by other search options to status claims sent in batches from a billing agent (i.e. Beneficiary ID, From/Through dates, etc.)

How are claims uploaded directly into CHAMPS?

A link under the "My Inbox" tab in CHAMPS will provide a pop-up where a user can attach a HIPAA 837 file in .dat format like they would attach a file to an email.

When can a voided claim be rebilled?

A voided claim can be rebilled as an original claim when the status of "Credited" appears in the provider's "Inquire Claims" screen.

Can an "In Process" (pending) claim be voided or adjusted?

No. Claims may only be managed if they have been paid and have appeared on a remittance advice.

Will CHAMPS provide front-end errors for eligibility or third party liability?

Users can verify eligibility in CHAMPS, however, the Direct Data Entry screens do not prevent a person from submitting a claim with a patient gender or date of birth that does not match the beneficiary's eligibility information.

How is a direct-data-entry error fixed that should have been caught in front-end editing?

The user should verify service information and the eligibility information in CHAMPS and resubmit the claim.

When reporting other insurance information within the 837, are HIPAA Group Codes like "PR" or "CO" needed?

Yes, CHAMPS uses HIPAA standards.

Is there a way to send attachments for claim(s) through CHAMPS?

Providers will still have the capability of sending attachments through documentations EZ Link. For more information on this process please visit:

www.michigan.gov/medicaidproviders >> Documentation EZ Link.

How long will it take before CHAMPS gives us a "status" on a claim?

CHAMPS will provide claim status for Direct-Data-Entry claims within 15 minutes of submission. CHAMPS will provide claim status for batches of HIPAA 837 files submitted through the DEG overnight.

How many characters are allowed in the comments section of the void/adjust source screen?

80

Is the date that a claim goes into a particular status, such as the "in process" status going to be available?

There is a Julian Date embedded in the CHAMPS TCN.

Where did the Proprietary MDCH edits go on my remittance advice?

All MDCH proprietary edits are no longer valid. Only HIPAA reason and remark codes will be reported.

Where can I find my Paper Remittance Advice in CHAMPS?

Paper Remittance Advices along with any CHAMPS generated correspondence can be located in Archived Documents within the My Inbox tab. Archived Documents can be accessed using the CHAMPS Full Access or CHAMPS Limited Access profile.

Why do I no longer receive my Paper Remittance Advice in the mail?

Paper Remittance Advices are only mailed to Providers who have reported a Remittance

Advice Address within the Location step of their Billing NPI(s) Provider Enrollment application.

Will all of my Remittance Advices from the past three years be loaded into CHAMPS?

Archived Documents will store the CHAMPS generated paper Remittance Advices only. These will be stored here for approximately three months.