# CHAMPS
# Prior Authorization

New appearance as of January 2, 2018

"Working to protect, preserve and promote the health and safety of the people of Michigan by listening, communicating and educating our providers, in order to effectively resolve issues and enable providers to find solutions within our industry. We are committed to establishing customer trust and value by providing a quality experience the first time, every time."

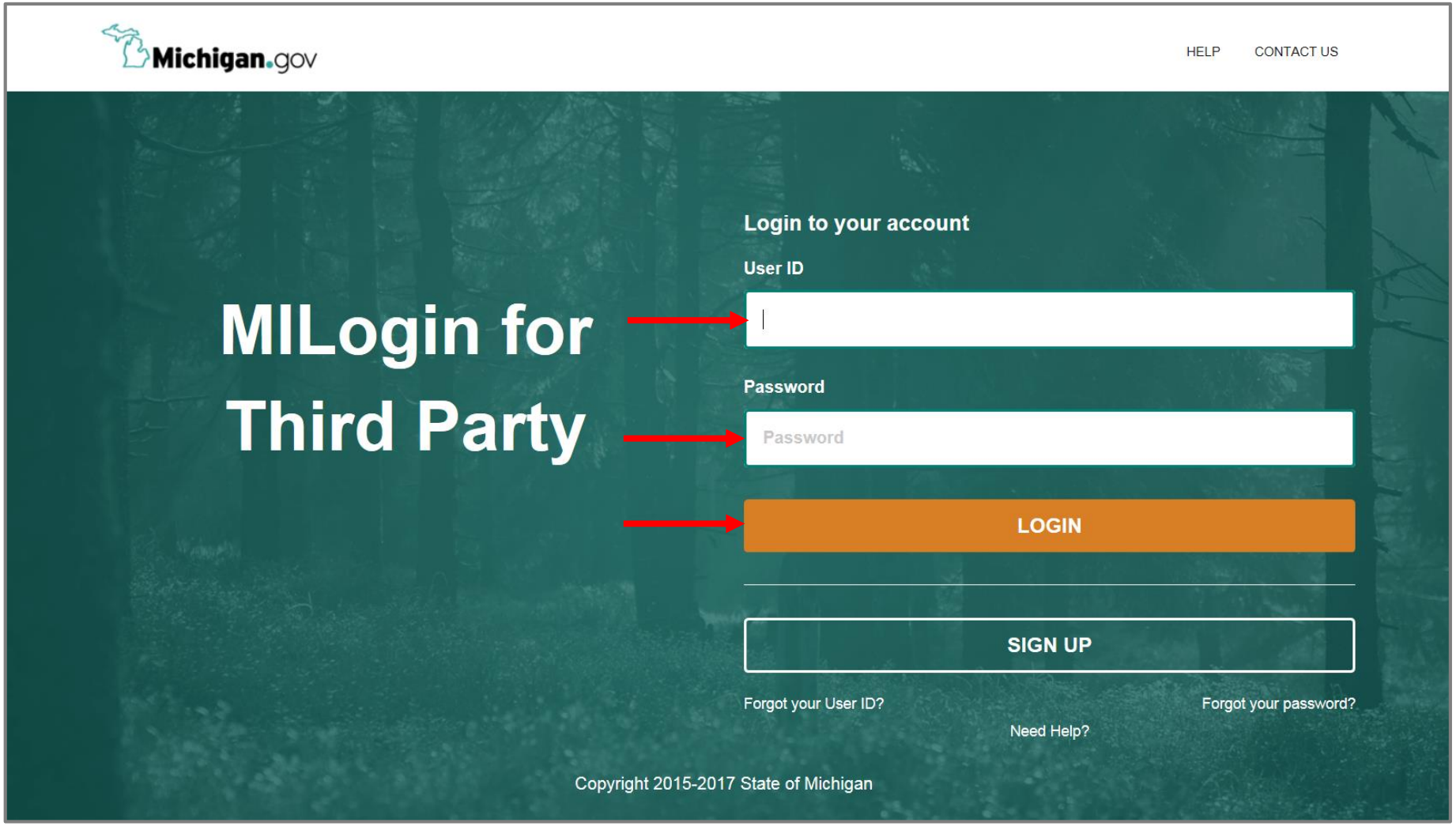
-Provider Relations

# Table of Contents

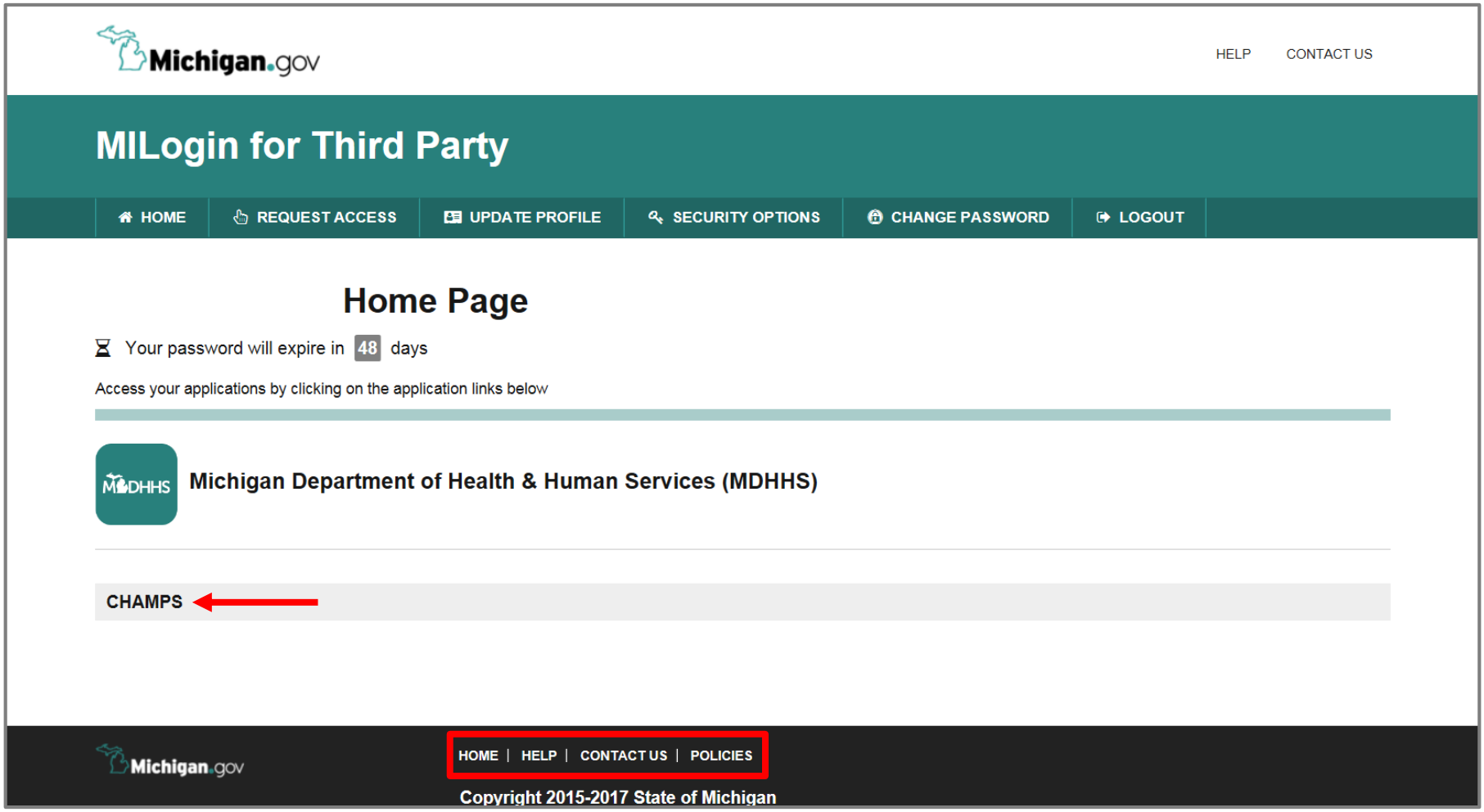

- Logging into MILogin and CHAMPS Slides 3-7
- Entering a Prior Authorization Slides 8-27
- How to upload documents via Fax Slides 28-33
- Searching for a Prior Authorization Slides 34-38
  - Using Tracking Number Slides 39-44
- Provider Resources

# Logging into MILogin and CHAMPS

If you do not have a MILogin account please register using MILogin instructions

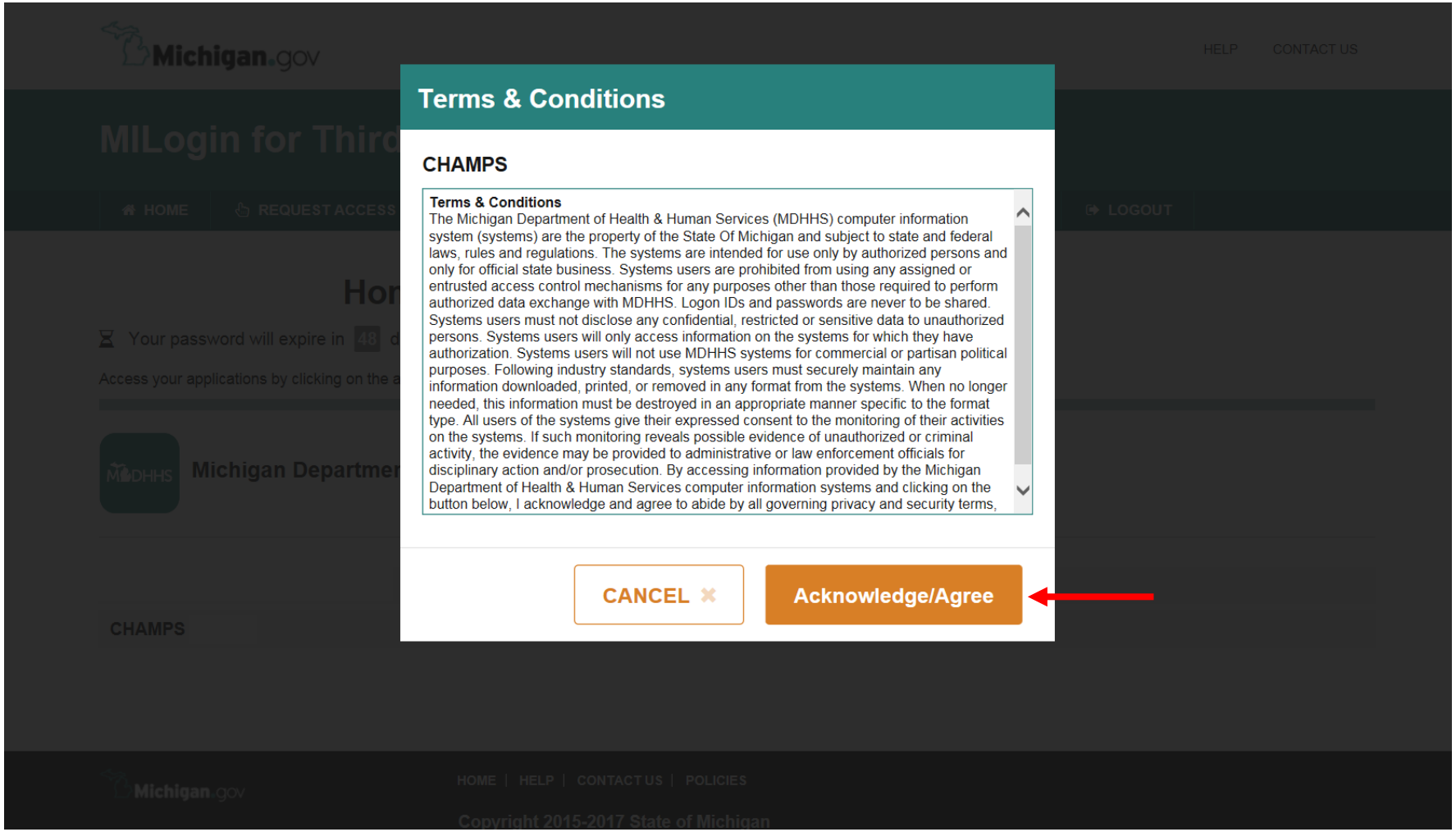



- Open your web browser (e.g. Internet Explorer, Google Chrome, Mozilla Firefox, etc.)
- Enter https://milogintp.Michigan.gov into the search bar
- Enter your User ID and Password
- Click Login




- You will be directed to your MILogin Home Page
- Click the CHAMPS hyperlink

**MILogin resource links are listed at the bottom of the page*




- Click Acknowledge/Agree to accept the Terms & Conditions to get into CHAMPS

- Select the Billing NPI from the Domain dropdown
- Select the appropriate profile (for example full access, limited access, etc.)

# Entering a Prior Authorization

Steps on navigating through CHAMPS to enter a Prior Authorization

# Policy Information

- There may be occasions when a beneficiary requires services beyond those ordinarily covered by Medicaid or needs a service that requires prior authorization (PA). In order for Medicaid to reimburse the provider in this situation, MDHHS requires that the provider obtain authorization for these services before the service is rendered.
- Providers should refer to their provider-specific chapters in the Medicaid Provider Manual for PA requirements.
- The Medicaid Code and Rate Reference Tool can be used to verify which HCPCS and CPT codes require a PA.
- The following slides will walk through each DDE PA step within CHAMPS.

MDHHS
Michigan Department of Health & Human Services

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

## My Reminders

Filter By | And | Filter By

Read Status | Go | Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

## Notification

User1 sent you message *Yesterday*

User1 sent you message *Yesterday*

User1 sent you message *Yesterday*

## Calendar

07:42 6 November 2017 Monday

2017 November

| Mo | Tu | We | Th | Fr | Sa | Su |
|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select the PA tab

MDHHS

CHAMPS | My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

PA REQUEST LIST
PA Request List

PA INQUIRE
PA Inquire

## My Reminders

Filter By | Read Status | Go | Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

## Notification

User1 sent you message Yesterday
User1 sent you message Yesterday
User1 sent you message Yesterday

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4:17 3 November 2017 Friday

2017 November

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| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select PA Request List

MDHHS

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox > Prior Authorization

Close | Add New Request

## PA Request List

Filter By | And | Filter By | And | Filter By

Go | Save Filters | My Filters

| Page View | Org | Beneficiary ID | Beneficiary Name | Tracking No. | Request Date | Status | NPI/ID | Upload |
|---|---|---|---|---|---|---|---|---|

No Records Found !

- Click Add New Request

MDHHS

CHAMPS

My Inbox | Provider | Claims | Member | PA

https://milogintp .michigan.gov/ - Welcome to MMIS - Internet Explorer

Print Help

Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## PA Basic Info

*Request Received Date: 11/03/2017

*Certification Type:

Request Category:

*Source of Request: DE-DDE

*Service Type:

*Service From Date: MM/DD/YYYY

*Service To Date: MM/DD/YYYY

Prev. Auth. Number:

Next

Page ID: pgPABasicInfo(Prior Authorization)

- Fill in all fields marked with an asterisk (*)
- For Service Type, select the option that most closely describes the service that is being requested.

*(Please Note: The navigation pane on the left side of the screen. Once a PA is entered, the user can move quickly between sections by clicking on the section in the navigation pane.)*

MDHHS

Print Help

Service From Date: Service To Date: Close

PA Basic Info
Beneficiary Info
Provider Info
Diagnosis Info
Procedure Info
Additional Documents
Acknowledge Submission

## Beneficiary Info

*Beneficiary ID:

Beneficiary ID

Beneficiary Name:

*Gender:

*DOB:

MM/DD/YYYY

Cancel Request Next

- Fill in all fields marked with an asterisk (*)
- Click Next

Print Help

Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Provider Info

### Requestor Information

Requestor NPI:

Requestor ID: Requestor ID

Requestor Name:

### Rendering/Servicing Providers

| Name | ID | NPI | Provider Code | Contact Name | Communication Qualifier | Communication Number | From Date | To Date | Actions |
|---|---|---|---|---|---|---|---|---|---|

Provider Type Code:

Provider NPI: Provider NPI

Provider ID: Provider ID

Provider Taxonomy Code: Provider Taxonomy Code

Requestor Remarks:

Save Cancel

Cancel Request Next

- The requestor NPI and name will be pre-populated based on the NPI that is logged into CHAMPS
- Select the Servicing Provider Type
- Enter Servicing Provider NPI
- Click Save

MDHHS

Print Help

Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Provider Info

### Requestor Information

Requestor NPI:

Requestor ID: Requestor ID

Requestor Name:

### Rendering/Servicing Providers

| Name | ID | NPI | Provider Code | Contact Name | Communication Qualifier | Communication Number | From Date | To Date | Actions |
|---|---|---|---|---|---|---|---|---|---|
| | | | PE-Performing | | TE-Telephone | | | | |

Add

Cancel Request Next

- After clicking Save the Servicing provider information will be displayed
- If another Rendering/Servicing provider needs to be added, click Add; repeat previous steps
- If no additional provider information is needed, click Next

Print Help

Tracking Number: Service From Date Service To Date: Beneficiary ID: Close

PA Basic Info
Beneficiary Info
Provider Info
Diagnosis Info
Procedure Info
Additional Documents
Acknowledge Submission

## Diagnosis Info

Diagnosis Information

| Diagnosis Code | Description | Actions |
|---|---|---|

Code:

Save Cancel

Cancel Request Next

- Enter the diagnosis code
- Click Save

*(Please Note: The Tracking Number is now displayed at the top of the screen, this can be used to track the status of your PA.)*

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Diagnosis Info

### Diagnosis Information

| Diagnosis Code | Description | Actions |
|---|---|---|
| | | |

Add

Cancel Request Next

- To enter additional diagnosis code information, click Add
- If no additional information is needed, click Next

MDHHS

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Procedure Info

### Service Lines

| Line | Servicing Provider | Code | Mod | Req Units | Req $ Amt | From Date | To Date | Status | Actions |
|---|---|---|---|---|---|---|---|---|---|

Add

Cancel Request Next

- To enter procedure information, click Add

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Procedure Info

### Service Lines

| Line | Servicing Provider | Code | Mod | Req Units | Req $ Amt | From Date | To Date | Status | Actions |
|---|---|---|---|---|---|---|---|---|---|

*Proc From Date: MM/DD/YYYY

*Proc To Date: MM/DD/YYYY

*Servicing Provider NPI/ID:

*Code Qualifier:

*Code:

Modifiers:

*Requested Quantity/Units:

*Requested $ Amount:

Part Number:

Comments entered in the Remarks box below will be visible to the State Staff

Remarks:

Save Cancel

Cancel Request Next

- Fill in all fields marked with an asterisk (*)
- Click Save

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Procedure Info

### Service Lines

| Line | Servicing Provider | Code | Mod | Req Units | Req $ Amt | From Date | To Date | Status | Actions |
|---|---|---|---|---|---|---|---|---|---|
| 01 | | | | | | | | Requested | |

Add

Cancel Request Next

- After clicking save the procedure information will be added to the PA
- To enter additional codes, click Add
- If no additional information is needed, click Next

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

Cancel Request Next

- To attach documents, click Add
  - Documents can be submitted either electronically or by fax
- Skip to slide 28 for fax steps or continue for electronic

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

Add

Cancel Request

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

You may add up to 20 Documents Information

*Mode of Transmission:

EL-Electronically Only

Attachment Description:

Attachment Description

Click here: To Upload Document

Save Cancel

Cancel Request Next

- To Submit electronically:
  - Select EL from the Mode of Transmission drop-down
  - Click on Click here: To Upload Document hyperlink

Print Help

Tracking Number: Service From Date Service To Date: Beneficiary ID Close

PA Basic Info
Beneficiary Info
Provider Info
Diagnosis Info
Procedure Info
Additional Documents
Acknowledge Submission

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

You may add up to 20 Documents Information

*Mode of Transmission:

EL-Electronically Only

Attachment Description:

Attachment Description

Save Cancel

Cancel Request Next

https://milogintp.michigan.gov/ - Welcome to MMIS - Internet Explorer

Print Help

Attachment:

Click Browse to Upload File

Filename: Browse... *

Upload Document Close

Page ID: dlgPAUploadDoc(Prior Authorization)

- To find the saved file on your computer, click Browse
- Select the file
- Click Upload Document

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

PA Basic Info
Beneficiary Info
Provider Info
Diagnosis Info
Procedure Info
Additional Documents
Acknowledge Submission

Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

https://milogintp.michigan.gov/ - Welcome to MMIS - Internet Explorer

Print Help

Attachment:

Click Browse to Upload File

Info : Document is successfully archived!

Filename: Browse... *

Upload Document Close

Page ID: dlgPAUploadDoc(Prior Authorization)

Save Cancel

Cancel Request Next

- Message will then be display, ‘Info: Document is successfully archived!’
- Click Close

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Documents Upload

| Transmission | ID | Description |
|---|---|---|
| EL-Electronically Only | | |

Add

Cancel Request Next

- Please review and make sure all information is complete and correct
- Click Next to submit the PA to MDHHS for review

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: ✖Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Acknowledge Submission

**Prior Authorization has been submitted to State for review on:**

**Tracking No:**

**Requestor Transaction Set Control Number:**

**Submitter Transaction Identifier:**

Close

- The Acknowledge Submission screen will appear once the PA has been submitted
- Take note of the Tracking Number as this is used to status the PA once submitted
- Click Close to return to the PA request list page

MDHHS Michigan Department of Health & Human Services

# How to upload documents via Fax

Steps on faxing documentation for a PA

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

Cancel Request Next

- To attach documents, click Add
  - Documents can be submitted either electronically or by fax

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

Add

Cancel Request

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

You may add up to 20 Documents Information

*Mode of Transmission:

FX-By Fax

Click here: To Print Fax Cover Page

Cancel

Cancel Request Next

- To Submit by Fax:
  - Select FX from the Mode of Transmission drop-down
  - Click on Click here: To Print Fax Cover Page hyperlink

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

PA Basic Info
Beneficiary Info
Provider Info
Diagnosis Info
Procedure Info
Additional Documents
Acknowledge Submission

Cancel Request

Documents U

Transmission

Add

You may add up to 2

*Mode of Transmis

FX-By Fax

Cancel

ncel Request Next

https://milogintp.michigan.gov/dch-chpcuat/ecams/CNSIControlServlet - Internet Explorer

1 / 1 79.1%

Michigan Department of Health and Human Services
PO Box 30170
Lansing MI 48909-7670

MDHHS
Michigan Department of Health & Human Services

PA Fax Transmittal Coversheet

Tracking Number :

Beneficiary ID:

Please fax all required documentation to 517-

**Please note:** A different fax coversheet is generated for each request you enter through the CHAMPS system. You **MUST** use only this coversheet for all documents you would like electronically stored with this request under this Tracking number in the CHAMPS system. Use of any other coversheet will result in storage of the documents

Comment

Fill & Sign

Store and share files in the Document Cloud

Learn More

- Print the fax coversheet within Adobe

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

Add

Cancel Request

## Documents Upload

| Transmission | ID | Description |
|---|---|---|

Add

You may add up to 20 Documents Information

*Mode of Transmission:

FX-By Fax

Click here: To Print Fax Cover Page

Cancel

Cancel Request Next

- Please review and make sure all information is complete and correct
- Click Next to submit the PA to MDHHS for review

Print Help

Tracking Number: Service From Date: Service To Date: Beneficiary ID: ✖Close

- PA Basic Info
- Beneficiary Info
- Provider Info
- Diagnosis Info
- Procedure Info
- Additional Documents
- Acknowledge Submission

## Acknowledge Submission

**Prior Authorization has been submitted to State for review on:**

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**Requestor Transaction Set Control Number:**

**Submitter Transaction Identifier:**

Close

- The Acknowledge Submission screen will appear once the PA has been submitted
- Take note of the Tracking Number as this is used to status the PA once submitted
- Click Close to return to the PA request list page

MDHHS Michigan Department of Health & Human Services

# Searching for a Prior Authorization

- Select the Billing NPI from the Domain dropdown
- Select the appropriate profile (for example full access, limited access, etc.)

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

## My Reminders

Filter By | And | Filter By

Read Status | Go | Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

## Notification

User1 sent you message Yesterday

User1 sent you message Yesterday

User1 sent you message Yesterday

## Calendar

07:42 6 November 2017 Monday

2017 November

| Mo | Tu | We | Th | Fr | Sa | Su |
|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select the PA tab

MDHHS

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

PA REQUEST LIST

PA Request List

PA INQUIRE

PA Inquire

## My Reminders

Filter By | Read Status | Go | Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

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4:17 3 November 2017 Friday

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| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select PA Request List

MDHHS

CHAMPS | My Inbox | Provider | Claims | Reference | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox › Prior Authorization

Close | Add New Request

## PA Request List

Filter By | And | Filter By | And | Filter By | Go | Save Filters | My Filters

| Page View | Org | Beneficiary ID | Beneficiary Name | Tracking No. | Request Date | Status | NPI/ID | Upload |
|---|---|---|---|---|---|---|---|---|
| | | | | | 05/25/2011 | Requested | | |
| | | | | | 08/22/2012 | Entering | | |
| | CSHCS | | | | 07/28/2016 | In Process | | |
| | | | | | 02/17/2016 | Entering | | |
| | | | | | 02/17/2016 | Entering | | |
| | | | | | 05/24/2016 | Entering | | |
| | MPRO | | | | 09/18/2017 | In Process | | |
| | | | | | 11/29/2011 | Entering | | |
| | | | | | 11/10/2014 | Entering | | |
| | | | | | 08/22/2012 | Entering | | |

View Page: 2 | Go | Page Count | SaveToXLS | Viewing Page: 1 | First | Prev | Next | Last

- The PA request list page shows PA's that are Requested, In Process, or Entering.

MDHHS

# Searching by Prior Authorization Tracking Number

Steps on how to search within CHAMPS PA tab for a tracking number

- Select the Billing NPI from the Domain dropdown
- Select the appropriate profile (for example full access, limited access, etc.)

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

## My Reminders

Filter By | And | Filter By

Read Status | Go | Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

## Notification

User1 sent you message Yesterday

User1 sent you message Yesterday

User1 sent you message Yesterday

## Calendar

07:42 6 November 2017 Monday

2017 November

| Mo | Tu | We | Th | Fr | Sa | Su |
|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select the PA tab

MDHHS

CHAMPS

My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox

PA REQUEST LIST

PA Request List

PA INQUIRE

PA Inquire

## My Reminders

Filter By

Read Status | Go

Save Filters | My Filters

| Alert Type | Alert Message | Alert Date | Due Date | Read | Completed |
|---|---|---|---|---|---|

No Records Found !

## Notification

User1 sent you message Yesterday

User1 sent you message Yesterday

User1 sent you message Yesterday

## Calendar

4:17 3 November 2017 Friday

2017 November

| Mo | Tu | We | Th | Fr | Sa | Su |
|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

Today

## Quick Find

Select | Go

- Select PA Inquire

MDHHS

CHAMPS | My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox > PA Inquire

Close | Submit

**PA Inquire:**

Tracking No.: *

- Enter Tracking Number
- Click Submit

CHAMPS | My Inbox | Provider | Claims | Member | PA

Quick Find | Note Pad | External Links | My Favorites | Print | Help

MyInbox › PA Inquire › PA Utilization

Close

## PA Utilization

| | | | |
|---|---|---|---|
| Tracking No: | | Authorization Status: | Requested |
| Beneficiary ID: | | Beneficiary Name: | |
| Service: | | Organization: | PA - DEFAULT |
| Request Date: | 11/03/2017 | Last Updated Date: | |
| Service Start Date: | | Service End Date: | |
| Requestor NPI: | | Requestor Name: | |
| Requestor ID: | | Source of Request: | DDE |

| Line # | Servicing Prov NPI | Servicing Prov ID | Service TRN | Code | Mod1 | Mod2 | Mod3 | Mod4 | ToothNum | Reqst Units | Reqst $ Amount | Auth Units | Auth $ Amount | From Date | To Date | Status |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01 | | | | | | | | | | | | 0 | 0.00 | | | Requested |

View Page: 1 | Go | Page Count | SaveToXLS | Viewing Page: 1 | First | Prev | Next | Last

- The PA requested information will be displayed

MDHHS

# Provider Resources

- **MDHHS website:** www.michigan.gov/medicaidproviders

- **We continue to update our Provider Resources, just click on the links below:**
  - Listserv Instructions
  - Medicaid Alerts and Biller "B" Aware
  - Quick Reference Guides
  - Update Other Insurance NOW!
  - Medicaid Provider Training Sessions

- **Provider Support:**
  - ProviderSupport@Michigan.gov or 1-800-292-2550

Thank you for participating in the Michigan Medicaid Program

MDHHS