

Bulletin Number: MSA 17-48

Distribution: All Providers

Issued: November 27, 2017

Subject: Managed Care Network Provider Enrollment in the Community Health Automated Medicaid Processing System (CHAMPS)

Effective: January 1, 2018

Programs Affected: Medicaid, Healthy Michigan Plan (including dental), Children's Special Health Care Services, MI Health Link

The purpose of this bulletin is to update and clarify Medicaid managed care network provider enrollment requirements to comply with 42 CFR 438.602(b) and Section 5005(b)(2) of the 21st Century Cures Act.

Effective January 1, 2018, any individual or entity that provides services to, or orders, prescribes, refers or certifies eligibility for services for, individuals who are eligible for medical assistance under the State Plan participating in a managed care organization's provider network are required to be screened and enrolled in the Michigan Medicaid Program. Managed Care Organization (MCO) providers furnishing services to Medicaid beneficiaries must enroll in CHAMPS.

Medicaid rules prohibit payment to providers not appropriately screened and enrolled. Beginning March 1, 2018, MDHHS will prohibit MCOs from making payments to all typical rendering, referring, ordering and attending providers not enrolled in CHAMPS. Effective for dates of service on and after May 1, 2018, MDHHS will prohibit payment for prescription drug claims written by a prescriber who is not enrolled in CHAMPS. Enrollment in CHAMPS neither requires nor mandates those providers who are part of a managed care network to accept Fee-for-Service Medicaid beneficiaries. Enrollment in CHAMPS is solely used for the purpose of screening providers participating in Medicaid.

Providers enrolling in CHAMPS are divided into two categories: (1) typical and (2) atypical. Typical providers are professional health care providers that provide health care services to beneficiaries. Typical providers must meet education and state licensure requirements and have assigned National Provider Identifiers (NPIs). Examples of typical provider types include, but are not limited to: physicians, physician assistants, certified nurse practitioners, dentists and chiropractors. Providers should refer to the Michigan Medicaid Provider Manual and any applicable State policy or law for educational and professional licensure requirements.

Atypical providers provide support services for beneficiaries. These providers generally do not have professional licensure requirements, and may not have an NPI.

If a provider type is currently unavailable as an option in CHAMPS, it does not mean the provider is not required to enroll, only that the provider type is not currently being accepted for enrollment in CHAMPS. CHAMPS continues to be updated to accept additional provider types for enrollment. The Michigan Department of Health and Human Services (MDHHS) will release future updates as additional provider types become available in CHAMPS.

Providers requiring additional information or assistance enrolling in CHAMPS may call the Provider Support Help Line or visit any of the MDHHS provider websites listed below under the Resources section of this bulletin.

Resources

Provider Support Help Line

- Typical Providers: 1-800-292-2550
- Atypical Providers: 1-800-979-4662

Provider General Information: www.michigan.gov/medicaidproviders

Provider Enrollment General Information: www.michigan.gov/medicaidproviders >>
Provider Enrollment

CHAMPS Provider Enrollment: <https://milogintp.michigan.gov>

Medicaid Provider Manual: www.michigan.gov/medicaidproviders >> Policy, Letters & Forms

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

Attn: Sharene Johnson
MDHHS/MSA
PO Box 30479
Lansing, Michigan 48909-7979
Or
E-mail: JohnsonS14@michigan.gov

If responding by e-mail, please include "Managed Care Network Provider Enrollment" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Retain this bulletin until the information is incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved



Kathy Stiffler, Acting Director
Medical Services Administration