CHAMPS
Group Provider Enrollment Type: Revalidation Instructions



"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

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Provider Enrollment Resources

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Revalidation Overview

All providers must revalidate their Medicaid enrollment information a minimum of once every five years, or more often if requested by MDHHS.

- This presentation covers the provider enrollment steps that are required during revalidation for a Group enrollment type. Additional provider enrollment steps may need to be updated or reviewed by providers but are listed as optional and are not covered as part of this presentation.
- For complete Group enrollment instruction: www.Michigan.gov/MedicaidProviders >> Provider Enrollment >>Step-by-Step CHAMPS Enrollment Guides>>Group >> CHAMPS Enrollment Application: Group User Guide
- Providers should review the information within each enrollment step to ensure that information is accurate and up-to-date.
- When providers update enrollment information a new record is created for Provider Enrollment to review. Providers can change the updated information through the new record until the enrollment is submitted to the State for review.

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Provider Enrollment Revalidation Process

Providers have 90 days to complete their revalidation in CHAMPS.

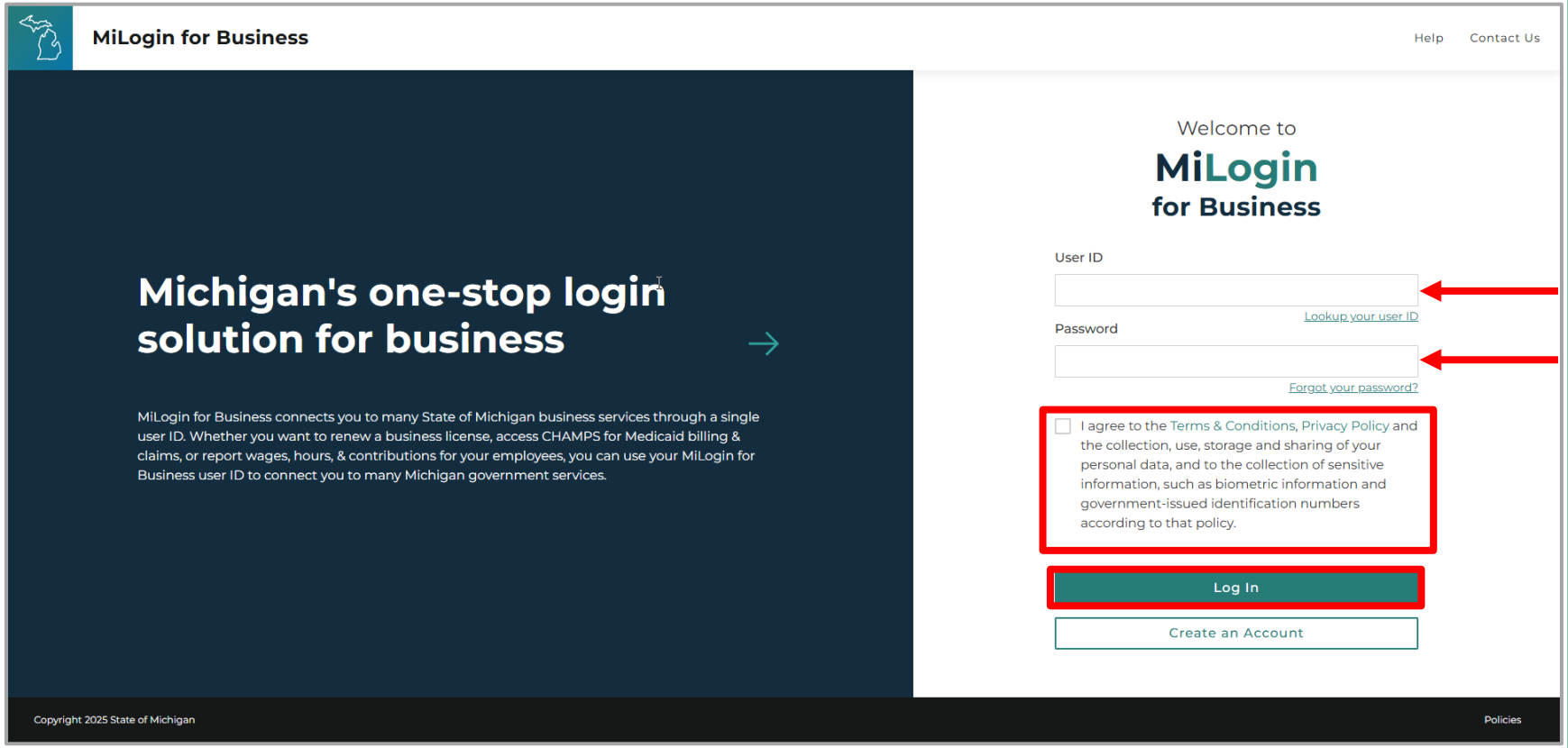
- 90 days prior to the revalidation cycle end date, providers receive a letter mailed to their CHAMPS correspondence address on file within the Provider Enrollment information.
- If the revalidation has not been completed, 30 days prior to the revalidation cycle end date a second letter is mailed.
- If the revalidation has not been completed by the end of the last day of the revalidation period, a termination letter will be generated.
  - For example: 2/01/25 is the revalidation cycle end date the termination letter will be generated the night of 2/01/25.

If revalidation is not completed during the revalidation cycle, providers will have their enrollment closed.

- Once an enrollment is closed due to not completing revalidation providers must contact MDHHS Provider Enrollment to have the enrollment re-opened.
  - Note: when MDHHS opens the enrollment manually, the provider cannot make changes until the following day.

MiLogin and CHAMPS

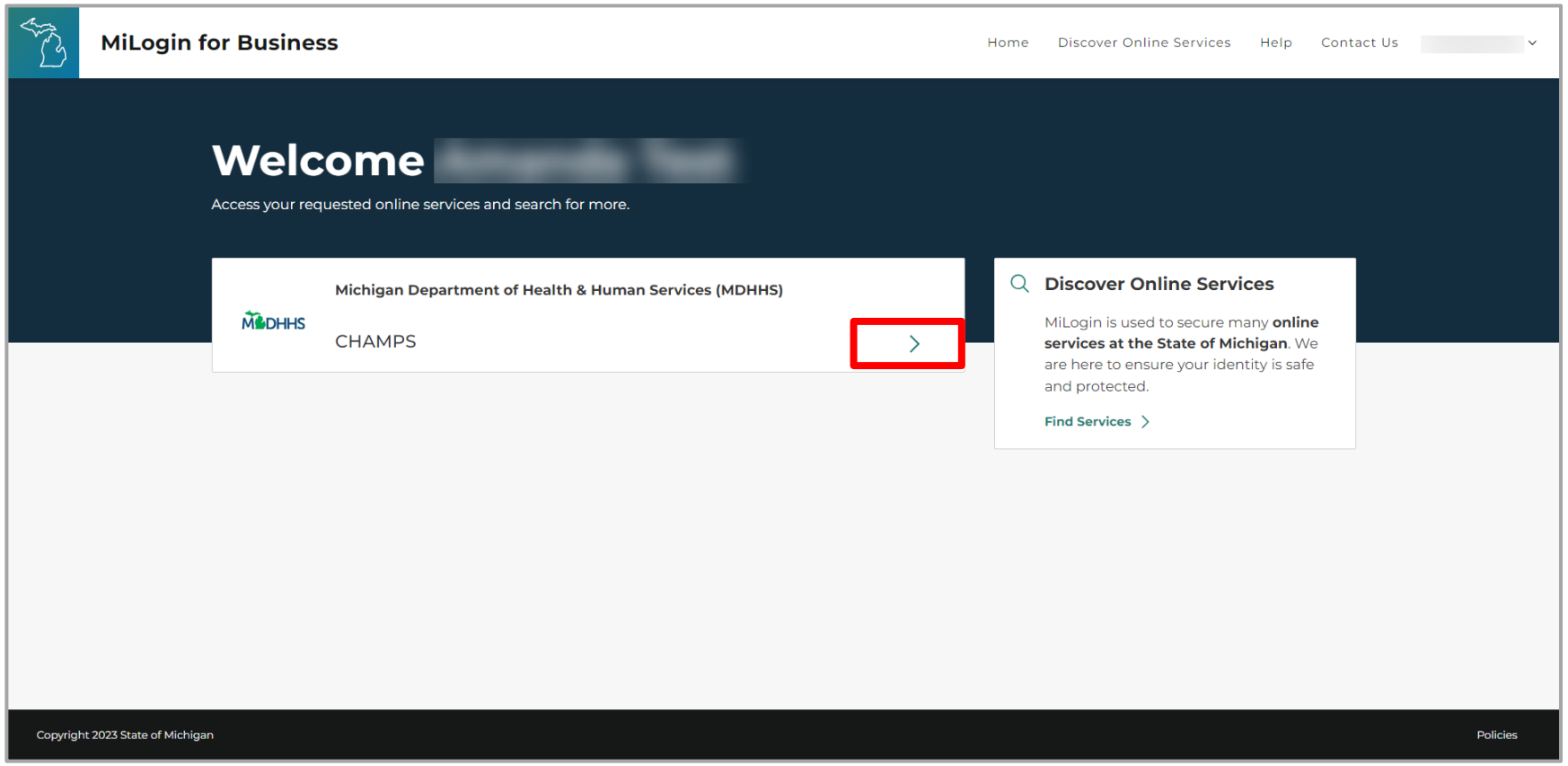
- Open your web browser (e.g., Internet Explorer, Google Chrome, Mozilla Firefox, etc.).
- Enter https://milogintp.Michigan.gov into the search bar.
- Enter the User ID and password.
- Review the Terms & Conditions, Privacy Policy and click to agree.
- Click Log In.



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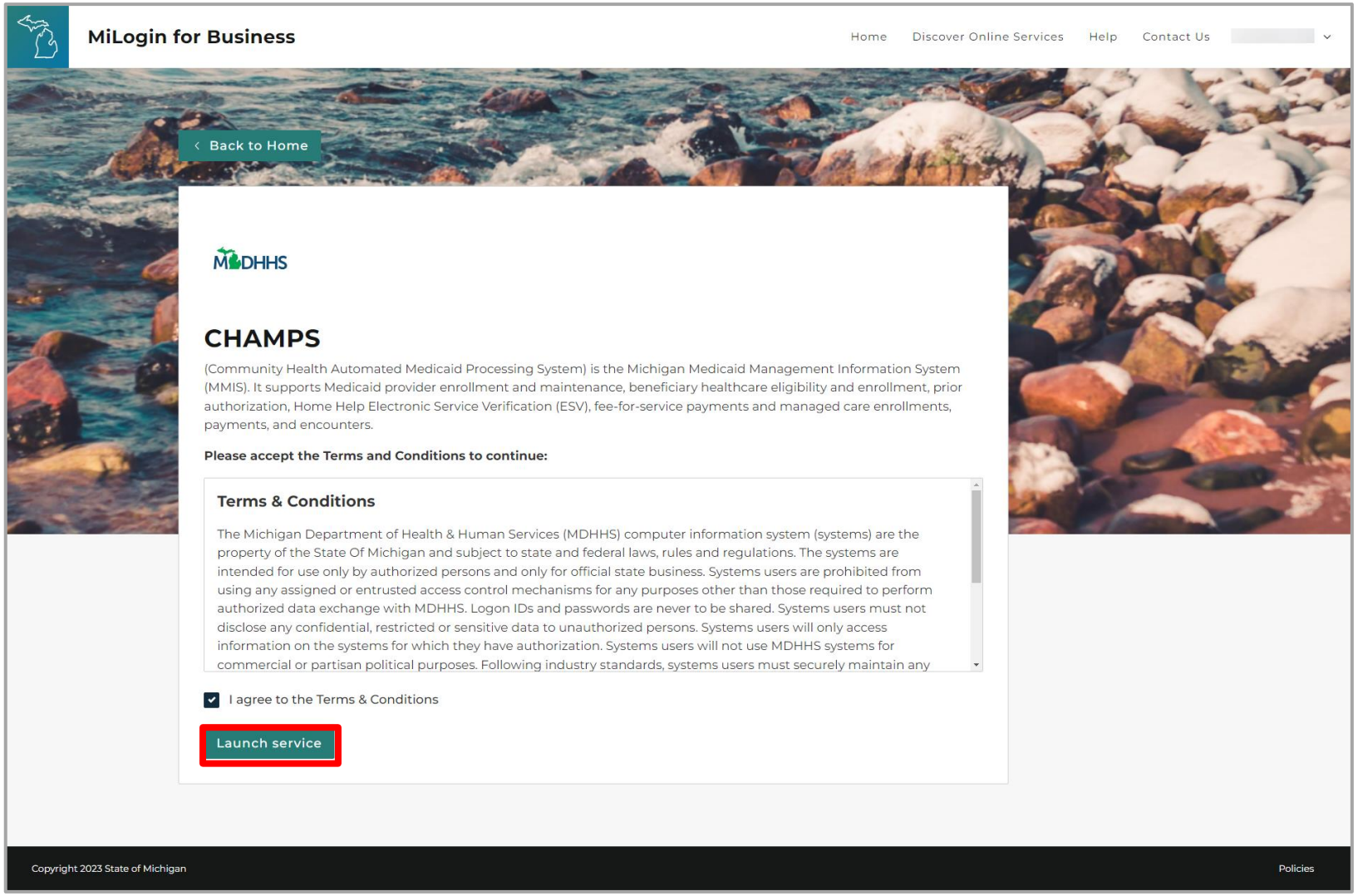
MiLogin and CHAMPS

- You will be directed to your MiLogin Welcome Page.
- Click the arrow hyperlink.



MiLogin and CHAMPS

- Review the terms and conditions and check the 'I agree to the Terms & Conditions'.
- Click Launch service.



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MiLogin and CHAMPS

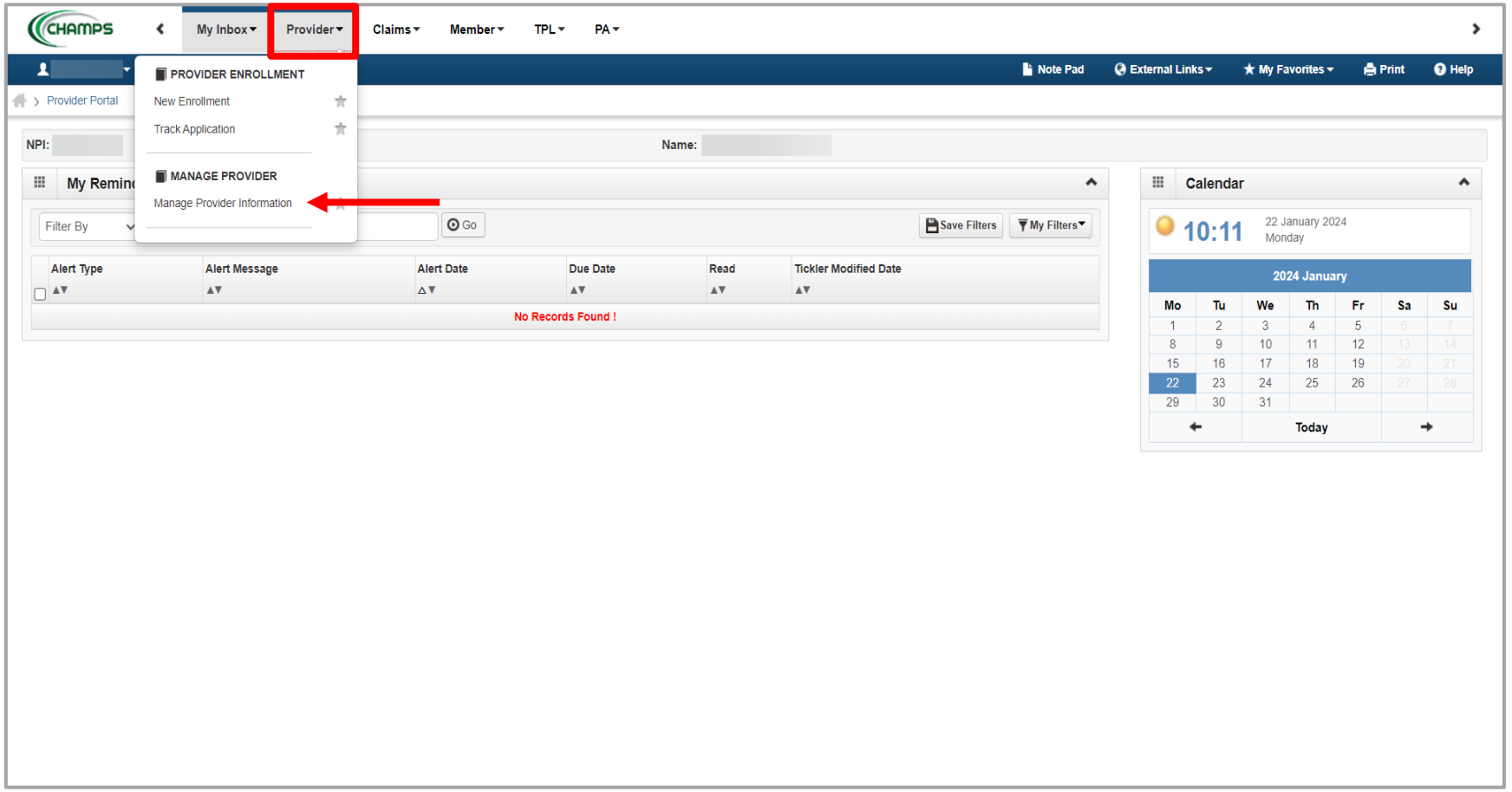
- Select the Billing NPI from the Domain dropdown.
- Select either Provider Enrollment Access or CHAMPS Full Access from the select profile dropdown.
- Click Go.
  - Note: If there are no Domain or Profile options to select from reference Domain Administrator Functions >> Adding Users/Assigning Profiles.



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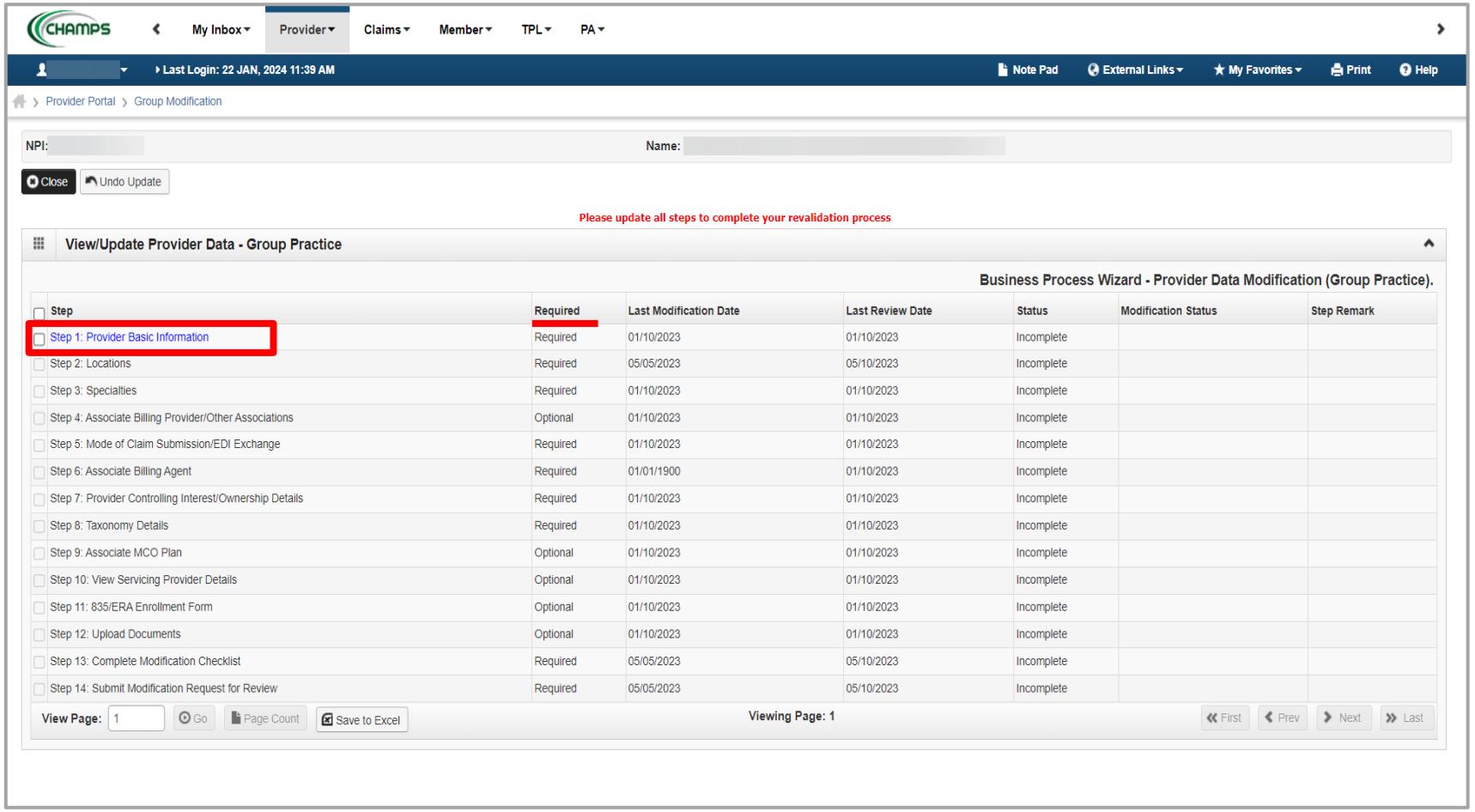
Group Revalidation

- Click the Provider Tab.
- Select Manage Provider Information.



Group Revalidation

- The required column displays which steps are Required versus Optional for the completion of revalidation.
  - During revalidation, each step should be reviewed to ensure the information accuracy.
- Each required step will need to be clicked into, even if the step information doesn't need to be updated, to allow the step status to change from Incomplete to Complete.
- Click on Step 1: Provider Basic Information.

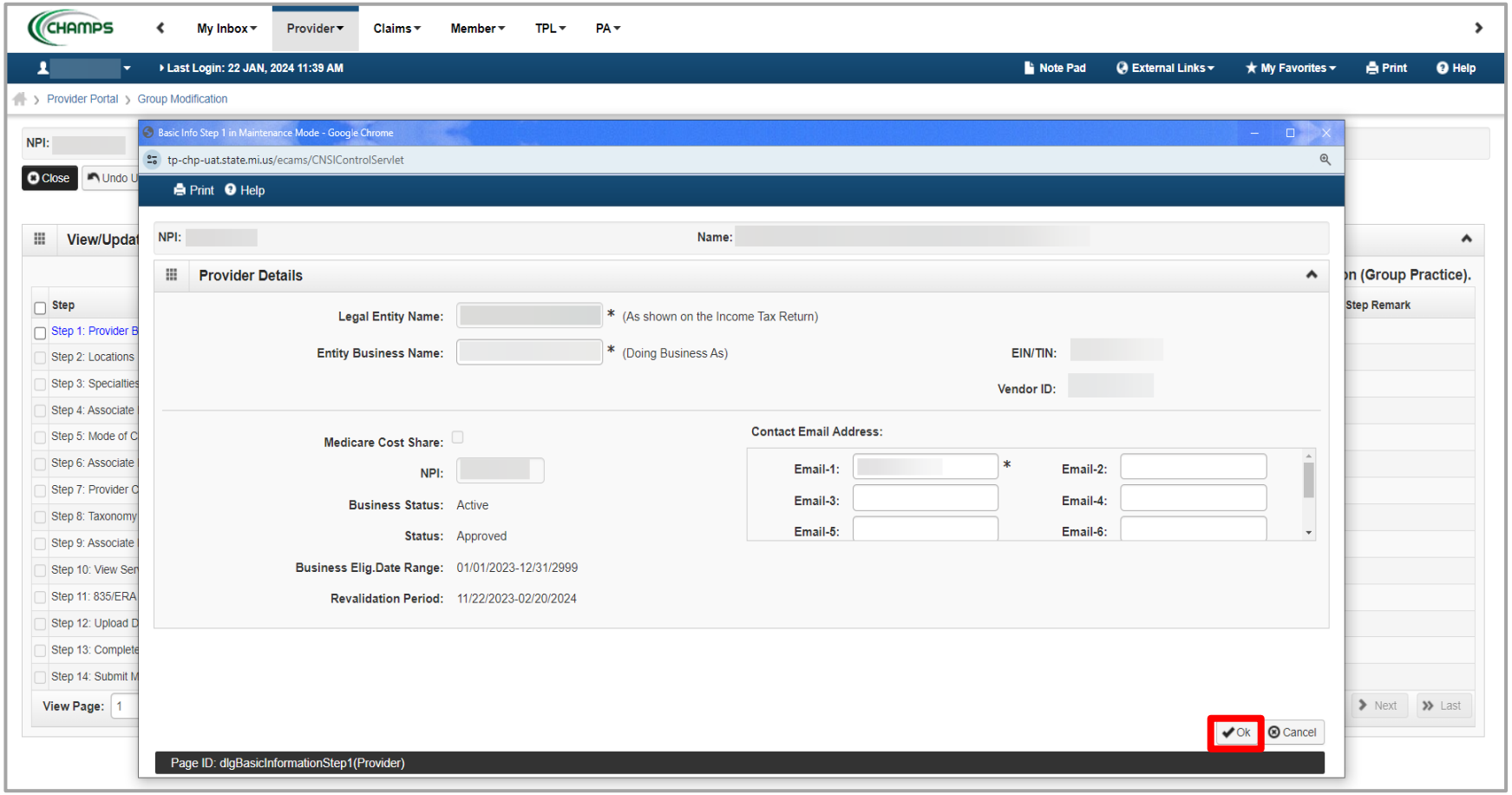


This presentation, including the screen captures, is based on the CHAMPS Full Access Profile. Additional features and tabs will vary based on the profile selected.

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Group Revalidation

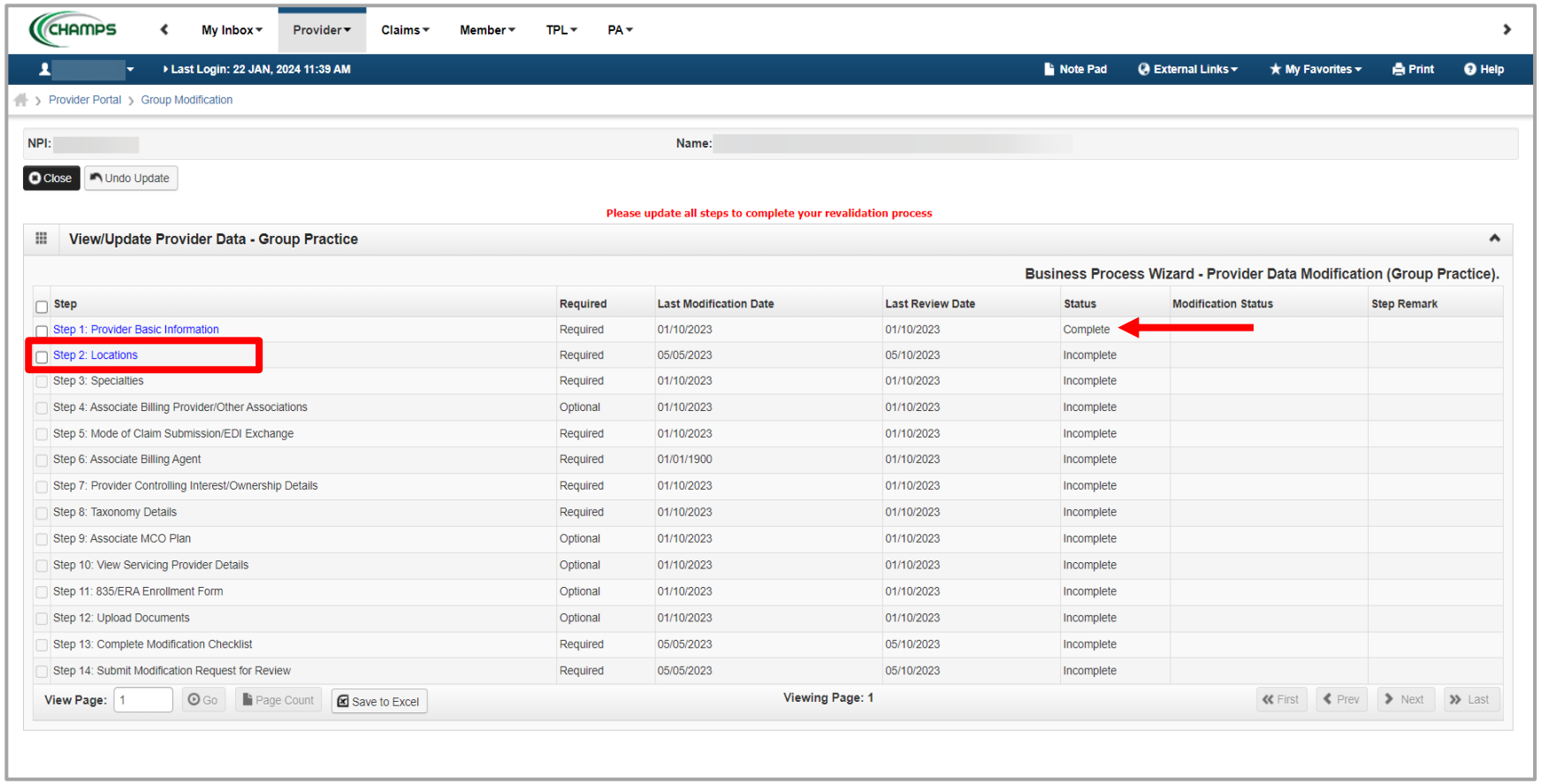
- Review all required information, as indicated with an asterisk (*), to ensure accuracy.
- Make any necessary updates.
- Click Ok.



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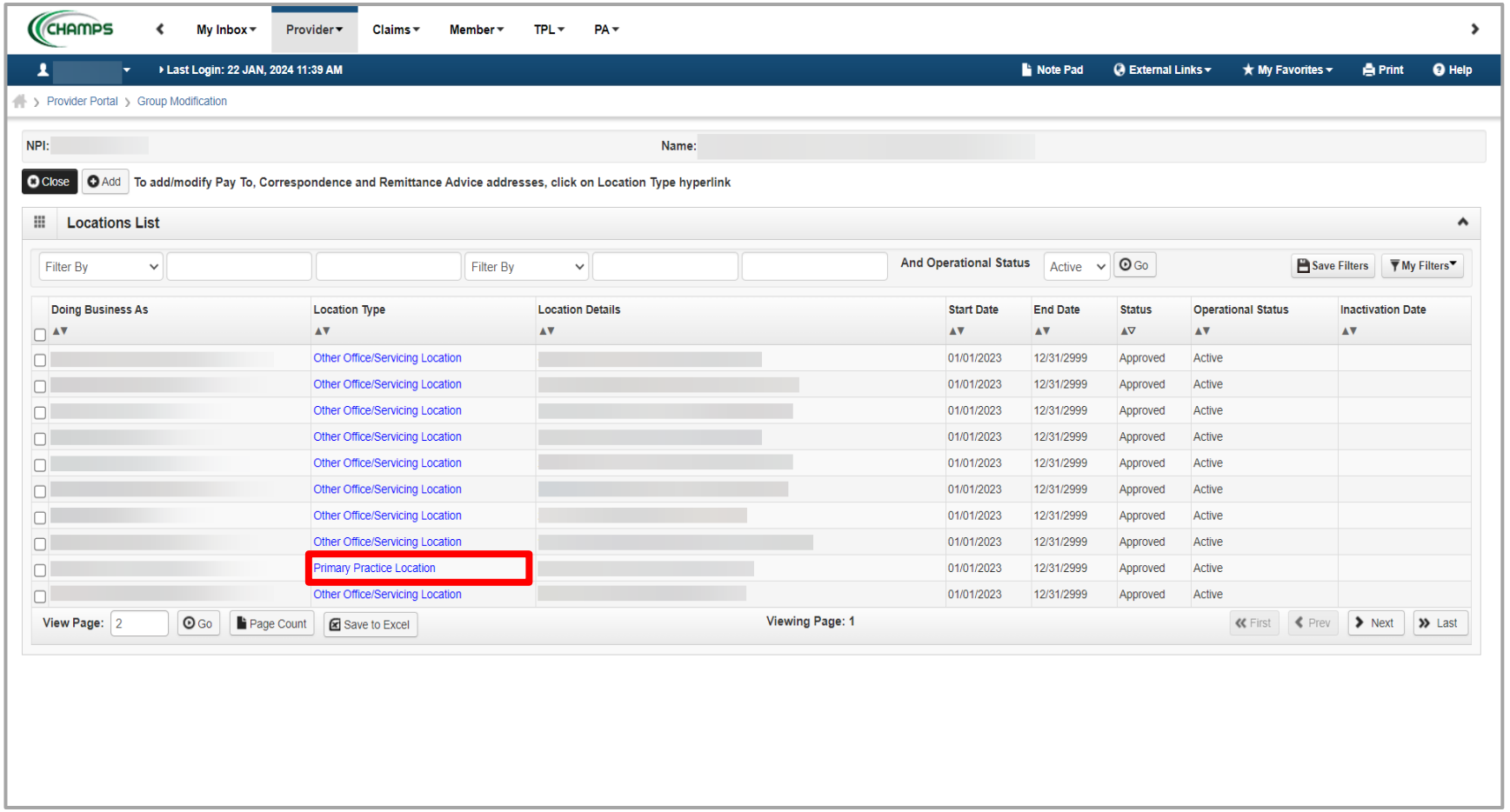
- Step 1 is Complete.
  - If changes were made an additional status of Updated would be listed in the Modification Status column.
- Click Step 2: Locations.



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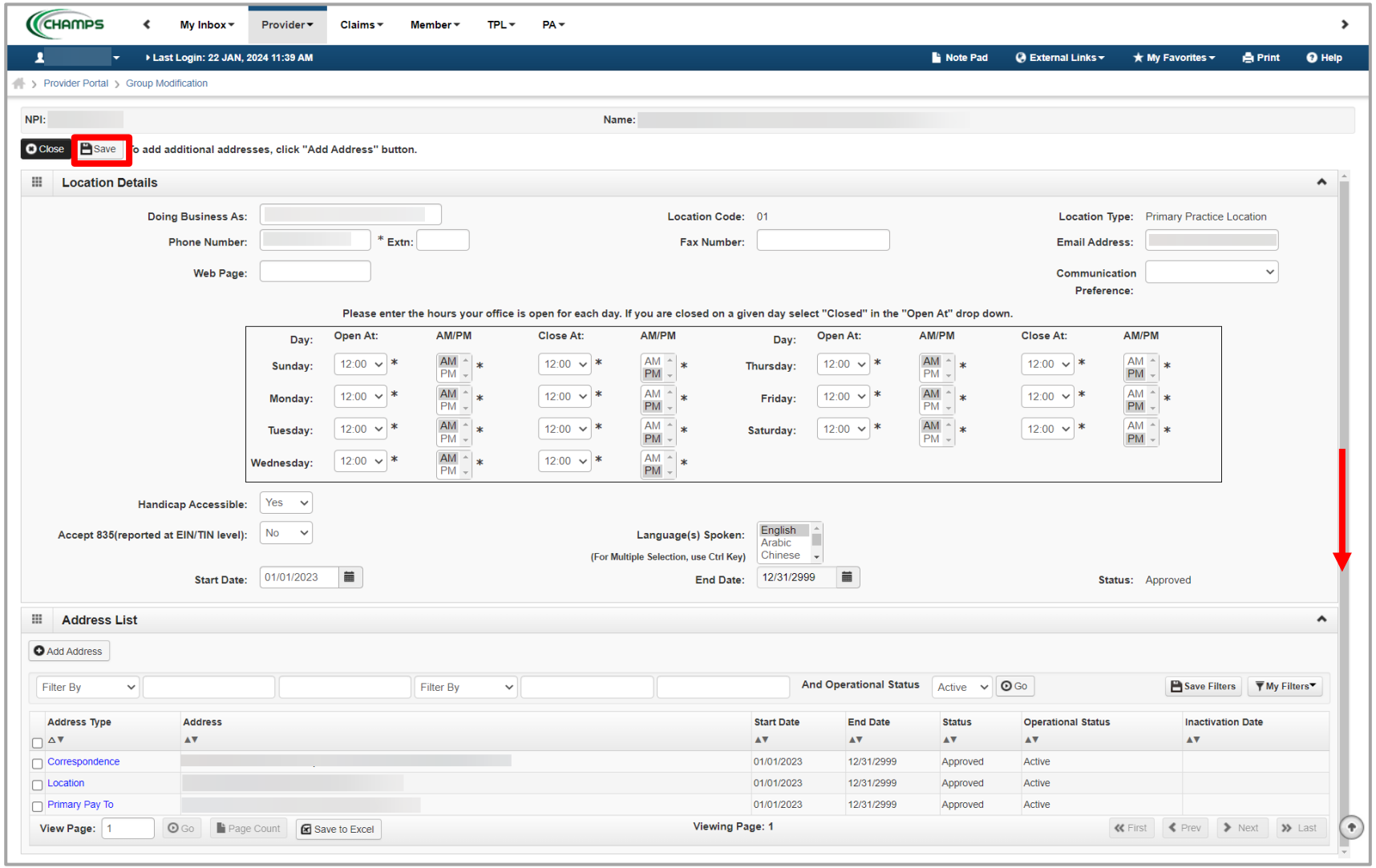
- Click the Primary Practice Location hyperlink.
  - Note: Multiple location-type addresses could be listed, if needed click the next page button to find the primary practice location address.



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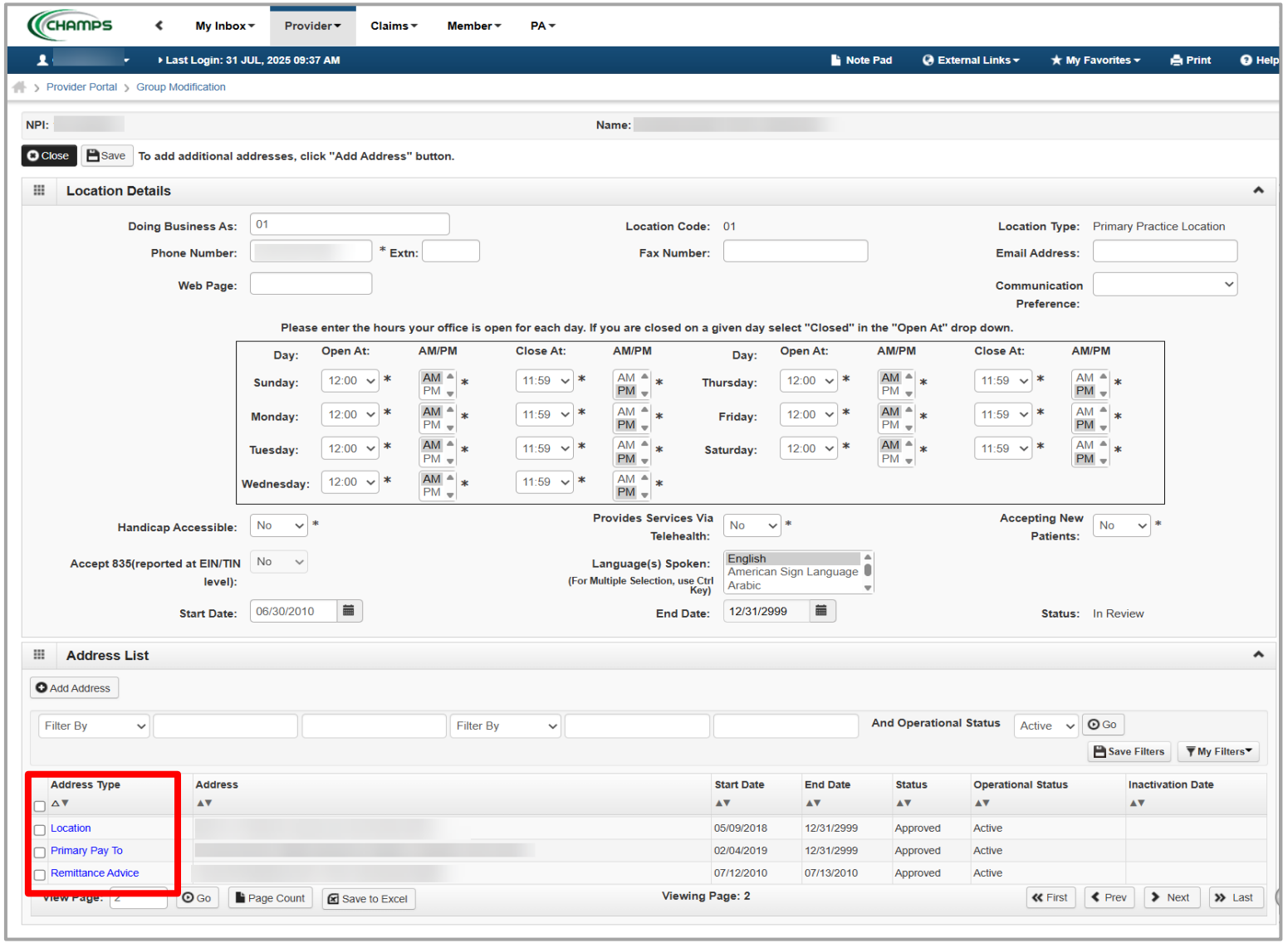
- Update office hours and any other required information.
- Click Save.
- Scroll down to review address information.



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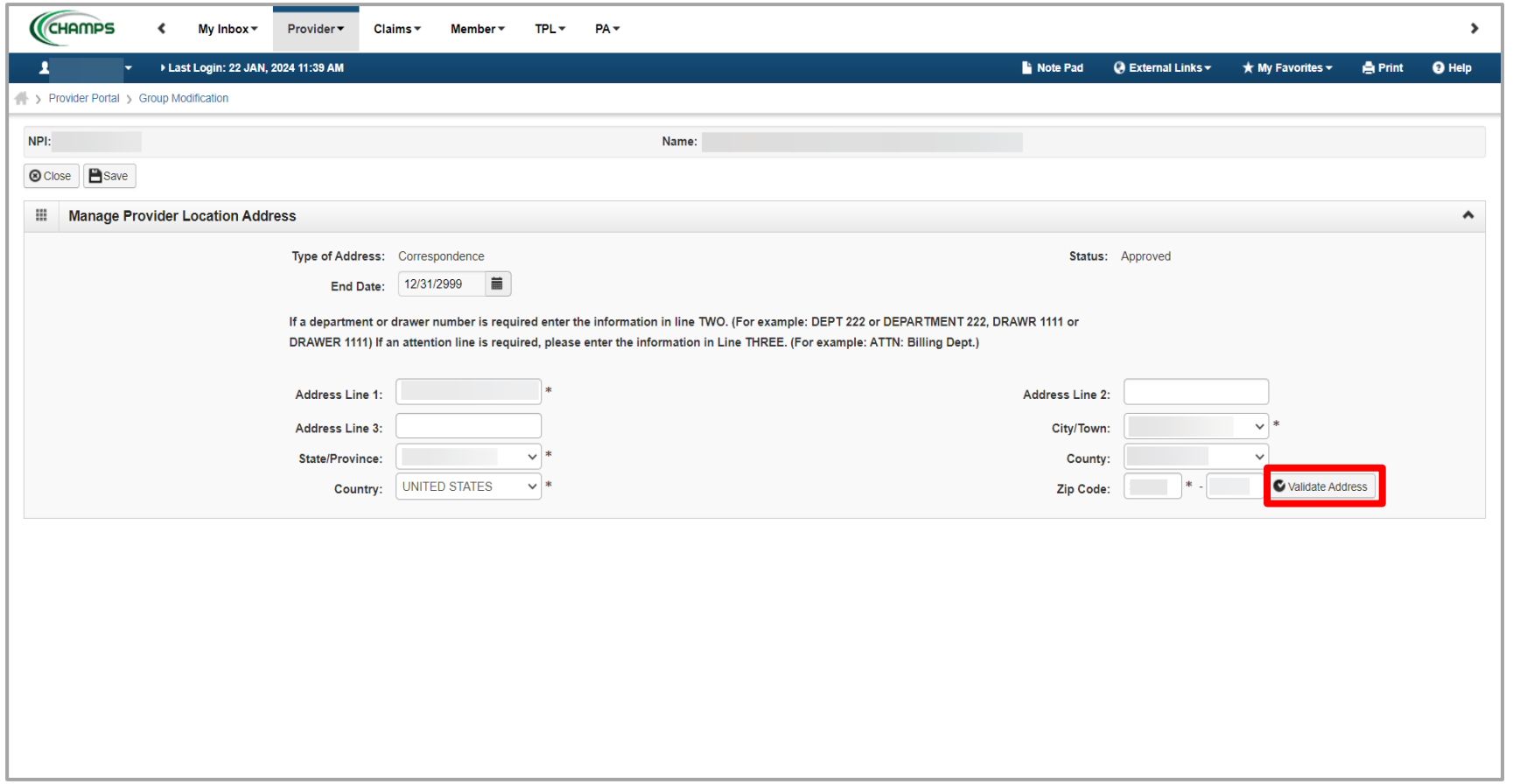
- Review all required information, as indicated with an asterisk (*), to ensure accuracy.
  - If the listed address information is accurate, click Close to be returned to the Locations List page.
- To update any of the addresses listed click into he address type hyperlink.



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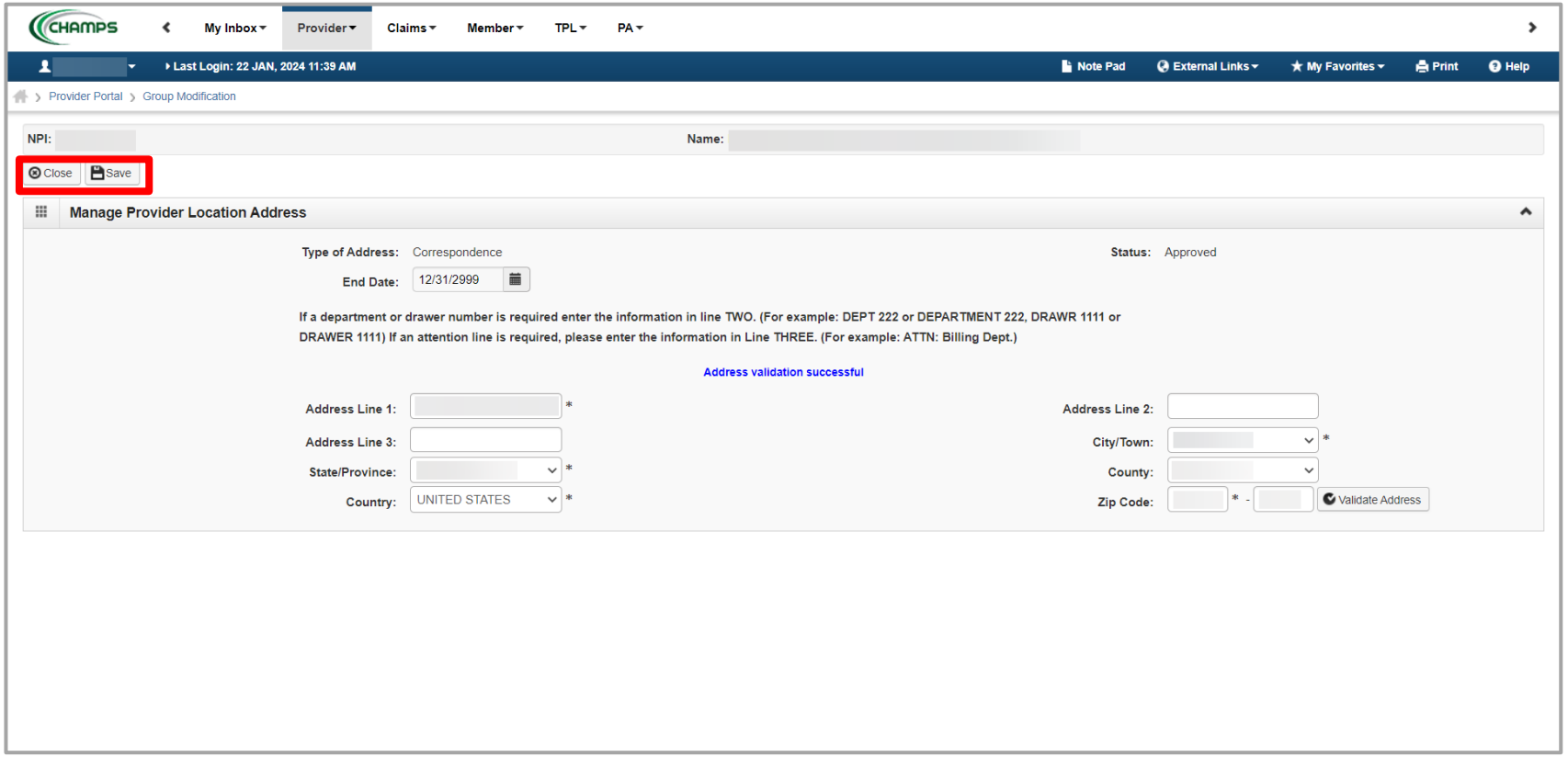
- Complete all fields marked with an asterisk (*).
- Click validate address.



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Group Revalidation

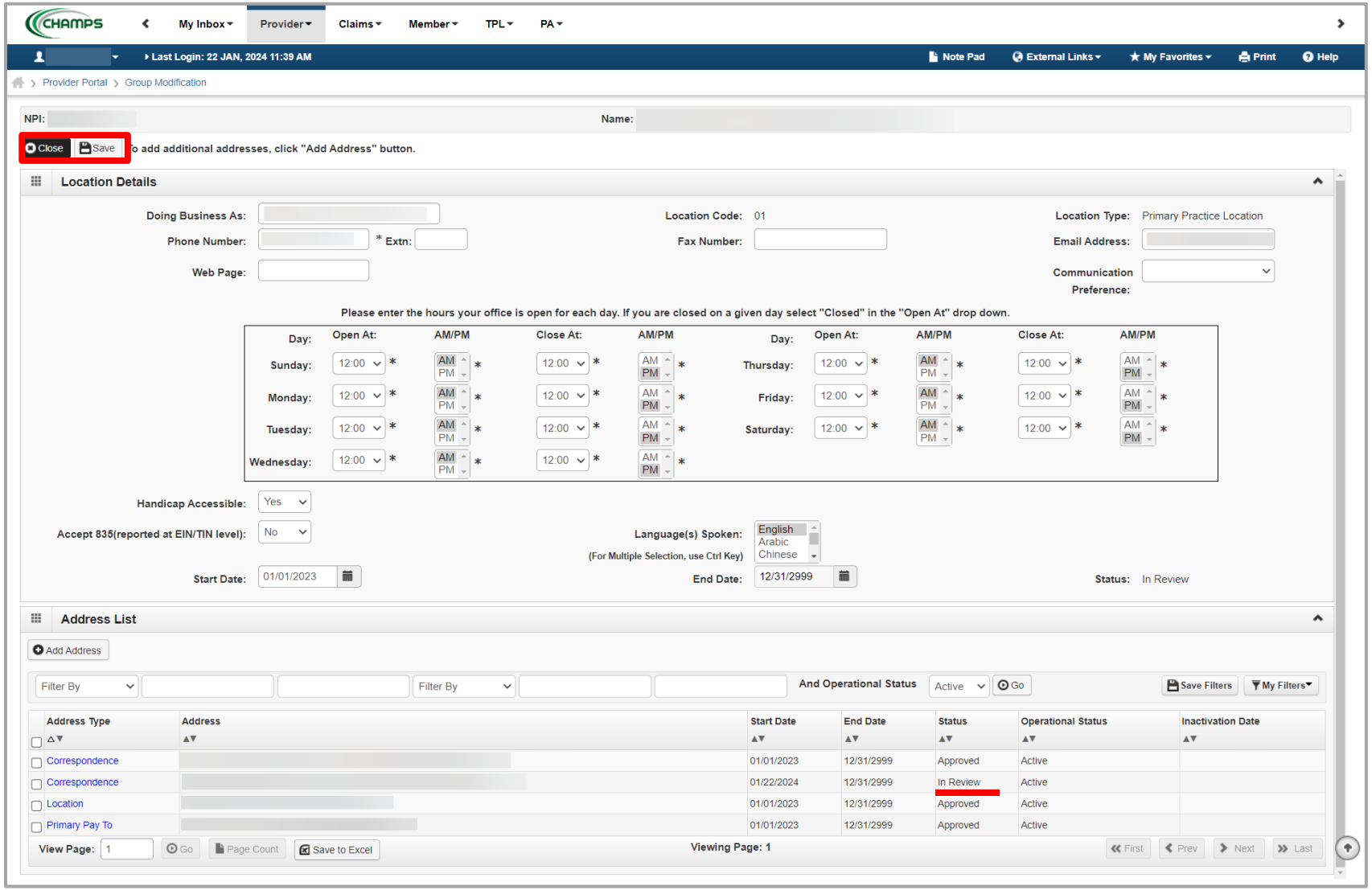
- The 'Address Validation Successful' message will appear indicating the address has been validated.
- Click Save.
- Click Close to return to the Location Details screen to review the next address.



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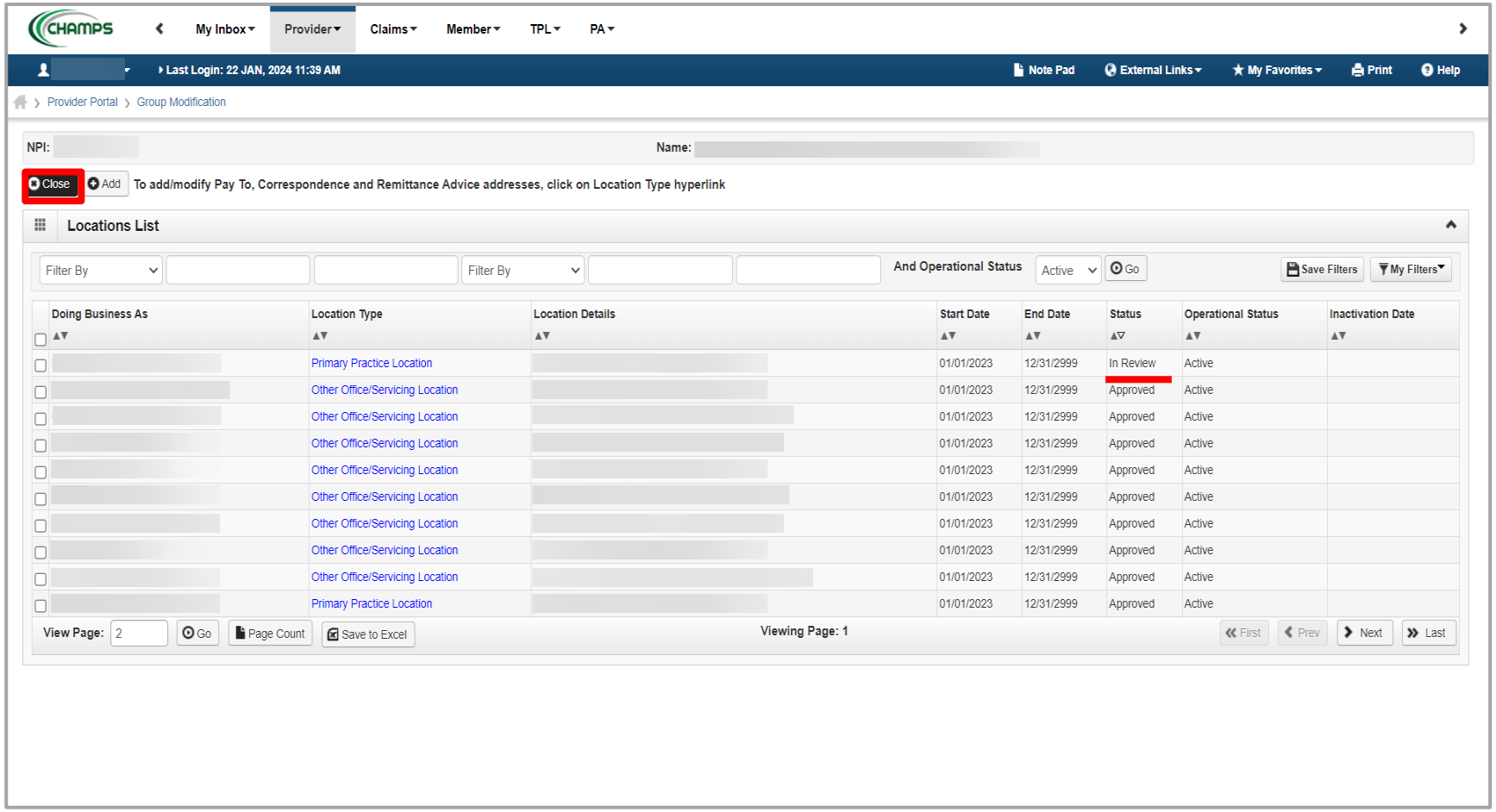
- There will be two rows for correspondence addresses, an approved address and one with an in-review status.
  - To update additional address types, click the address type hyperlink. Review/edit the address, click validate address, and save.
- To update the Primary Pay To address submit a letter on company letterhead to Provider Enrollment requesting the update.
  - The letter should include the NPI, EIN/SSN, Vendor ID, old pay-to-address, and new pay-to-address. The letter must be signed by someone with signing rights such as the President, Owner, CEO, etc.
- If no additional addresses need to be updated.
- Click Save and Close to return to the modification steps.



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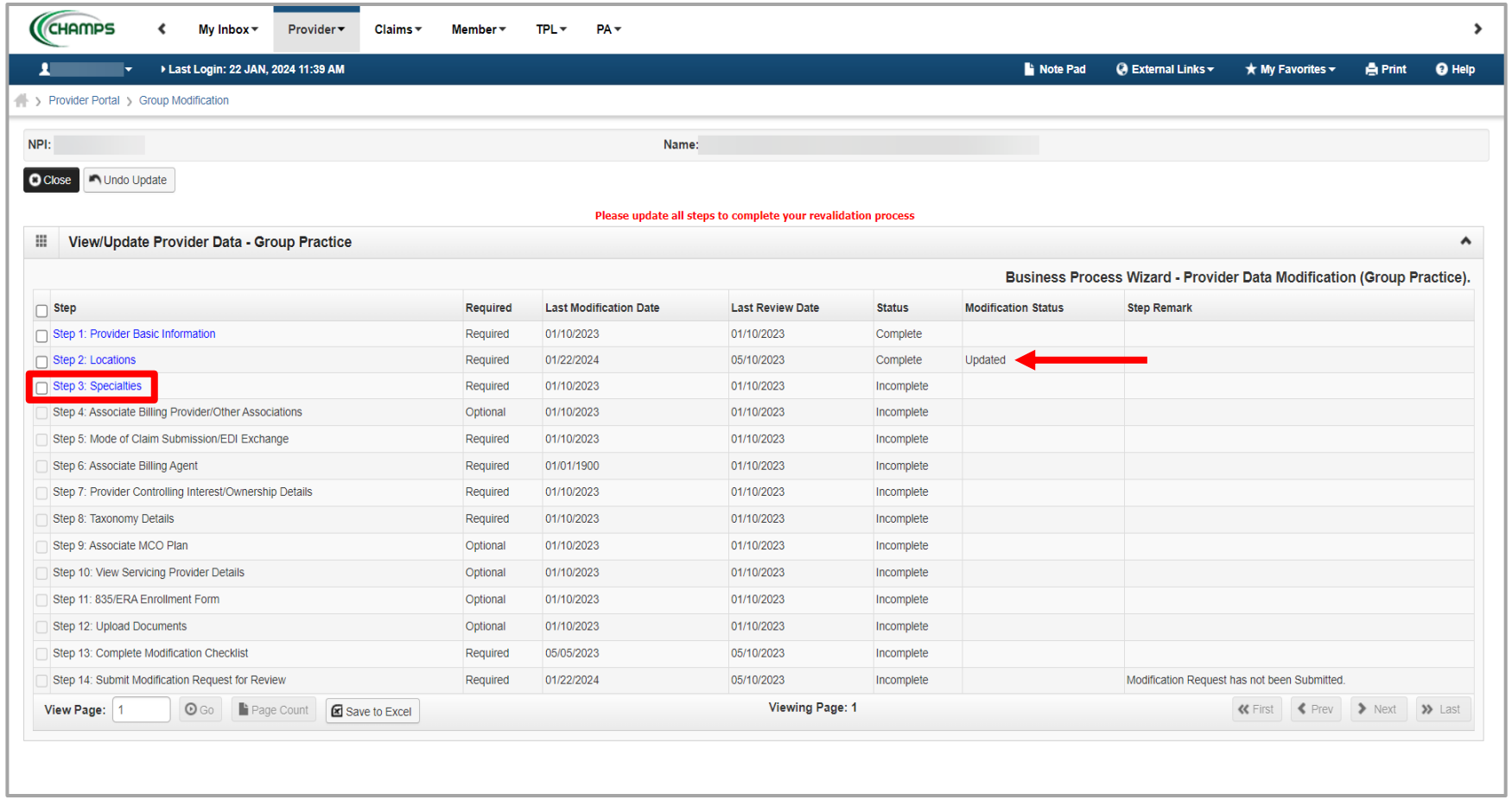
- Notice there are now two rows for Primary Practice Location, one that is approved and one 'In Review'.
- Click Close to return to the enrollment modification steps.



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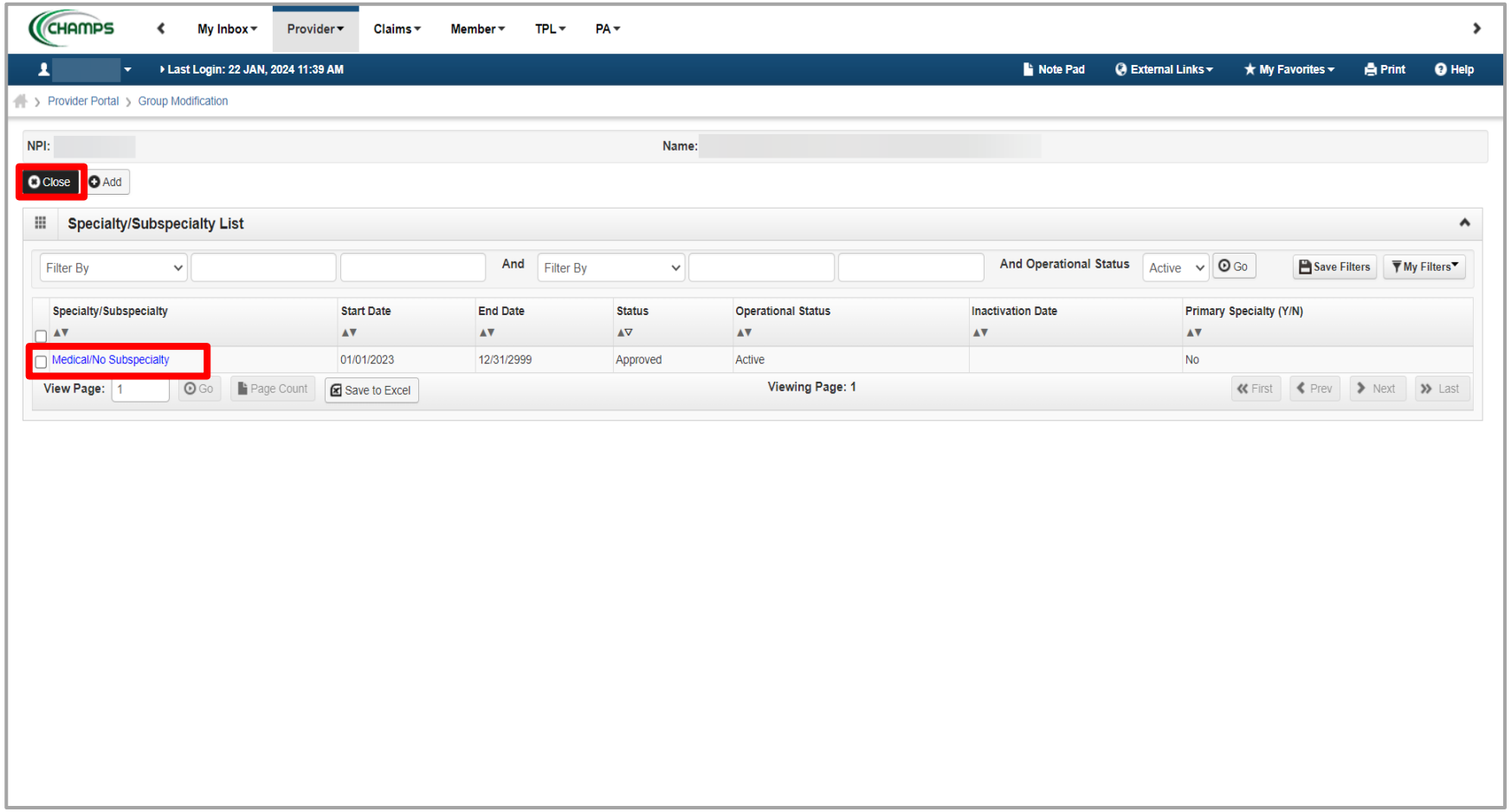
- Step 2 is Complete and a Modification Status of Updated as changes were made within this step.
  - If changes were made an additional status of Updated would be listed in the Modification Status column.
- Click Step 3: Specialties.



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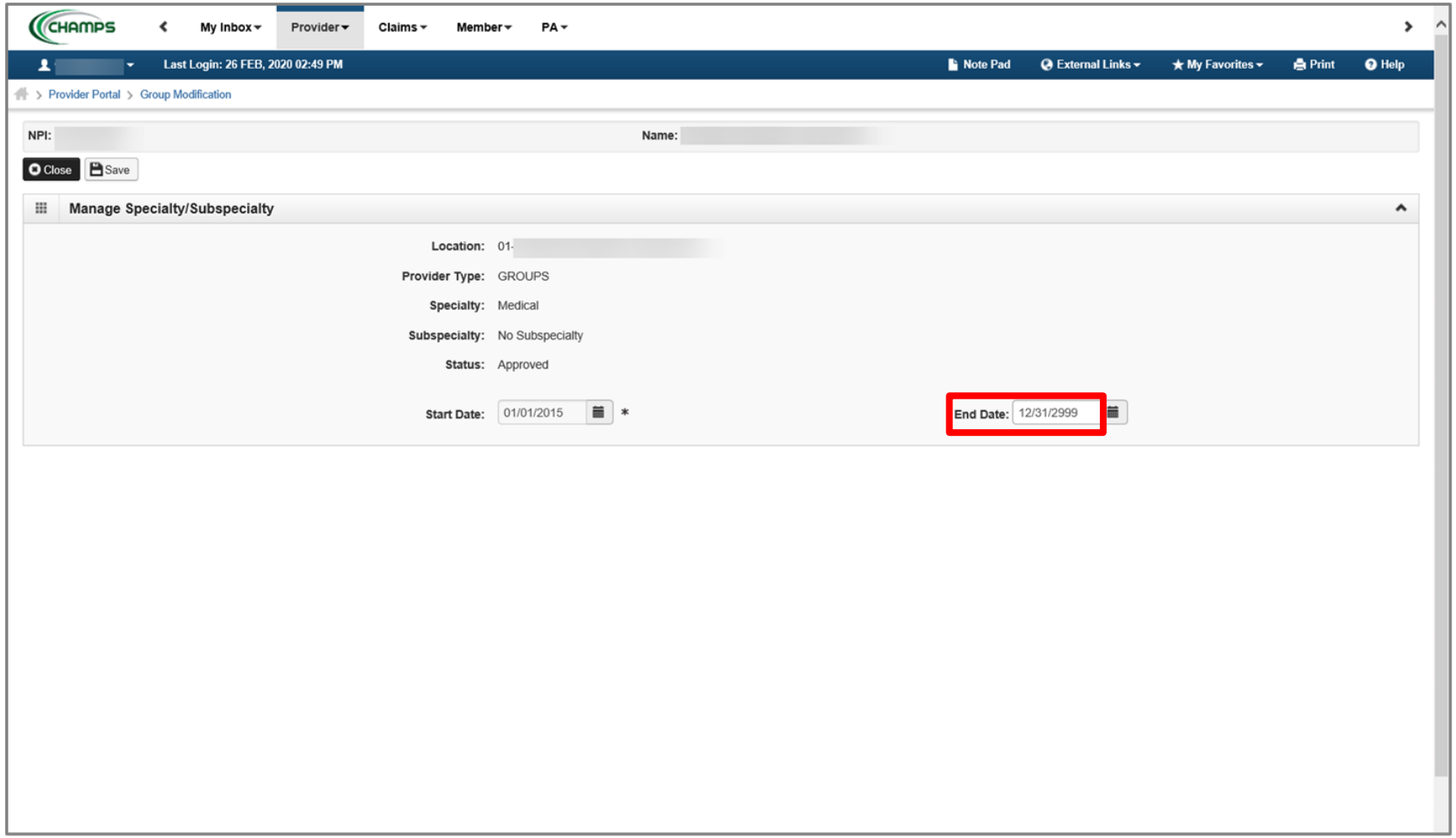
- Each Specialty should be reviewed for accuracy.
  - If the information is accurate and there are no updates or additions, click Close to be returned to the Enrollment Modification steps.
- To enter a new specialty that is not listed, click Add.
- To change the end date of a current Specialty listed click the Specialty/Subspecialty hyperlink.
  - Continue to the next slide for further information on how to end date a Specialty.



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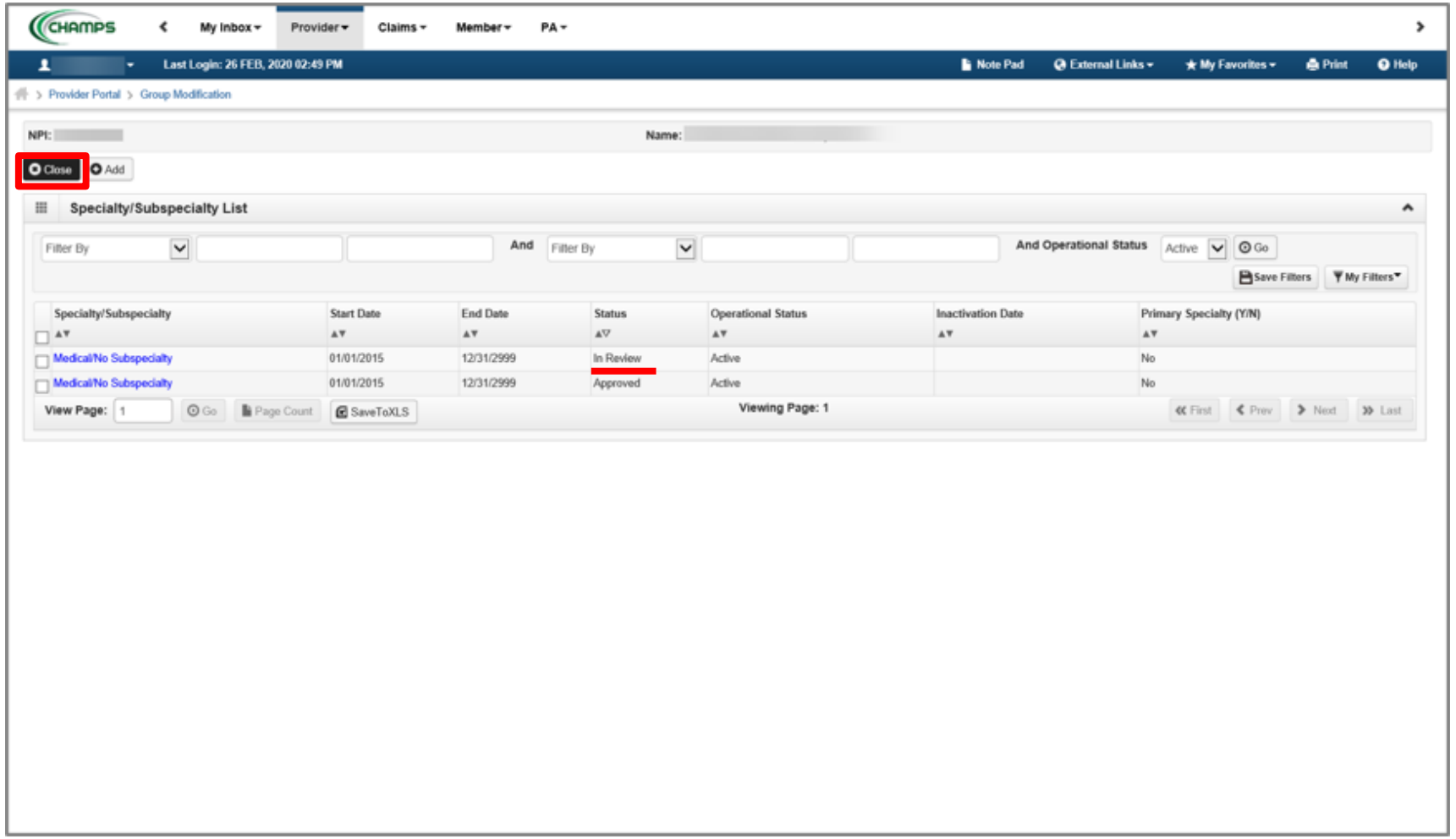
- Enter the end date to indicate the date the Specialty is no longer applicable.
- Click Save.
- Click Close to return to the Specialty/Subspecialties list screen.



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- Notice there are now two rows for Specialty/Subspecialty, one that is approved and one that is in review.
- If end dates are needed for any other Specialty/Subspecialty listed, click into those hyperlinks to enter end dates.
- Click Close to return to the Business Process Wizard steps.

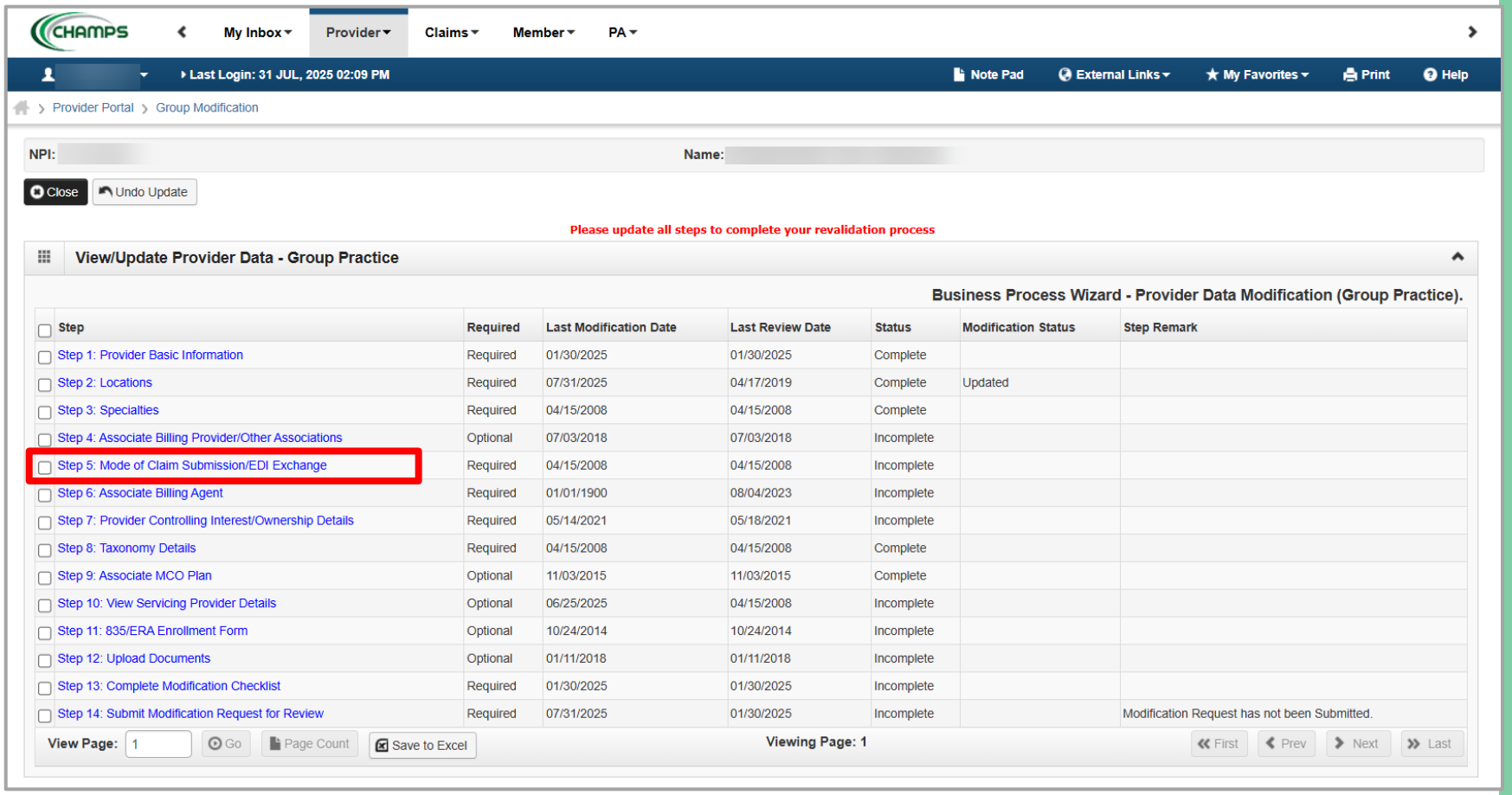


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- Step 3 is Complete and a Modification Status of Updated as changes were made within this step.
  - If changes were made an additional status of Updated would be listed in the Modification Status column.

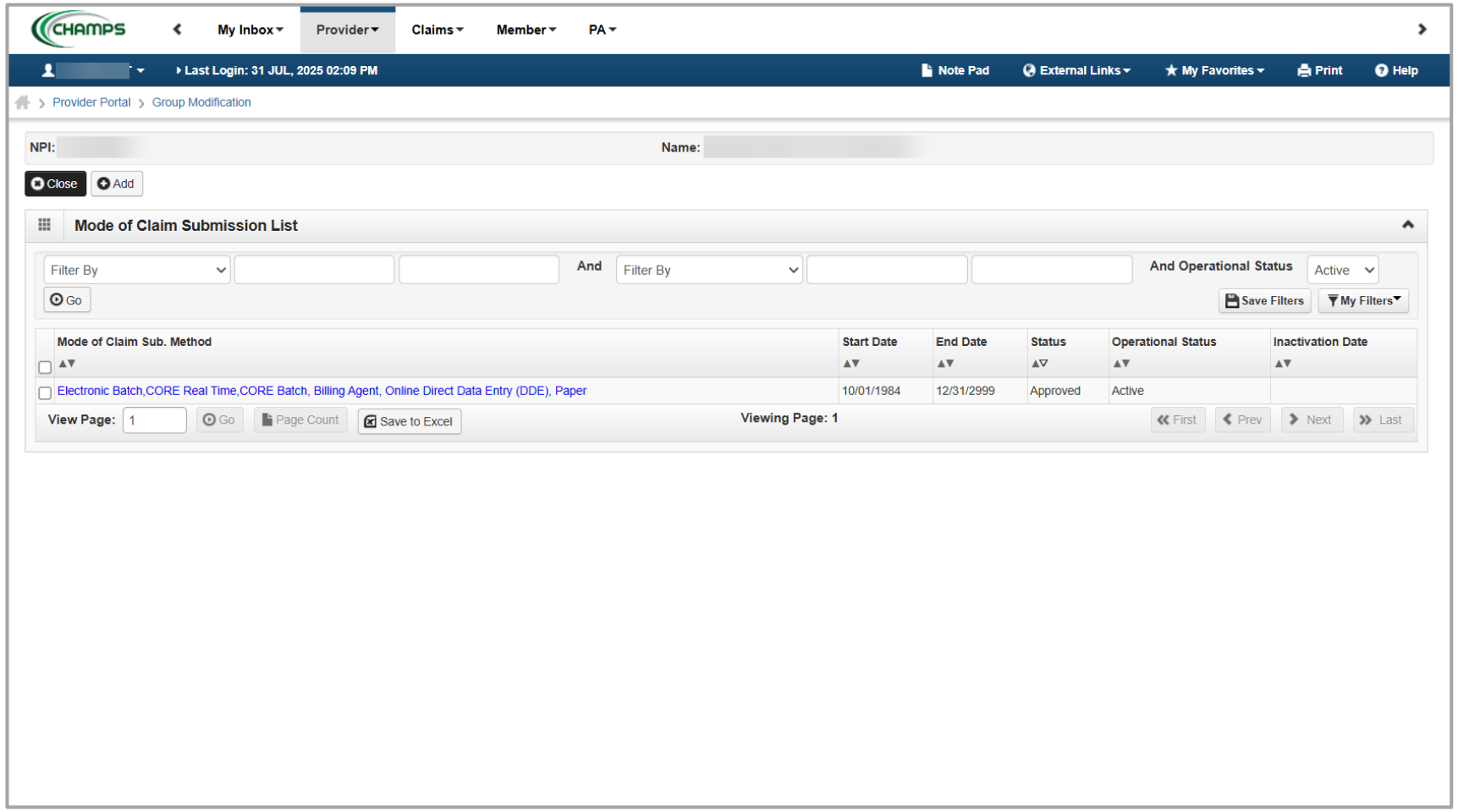
- Click on Step 5: Mode of Claim Submission/EDI Exchange
  - Note: Step 4 is optional and can be reviewed or updated if needed but is not required.



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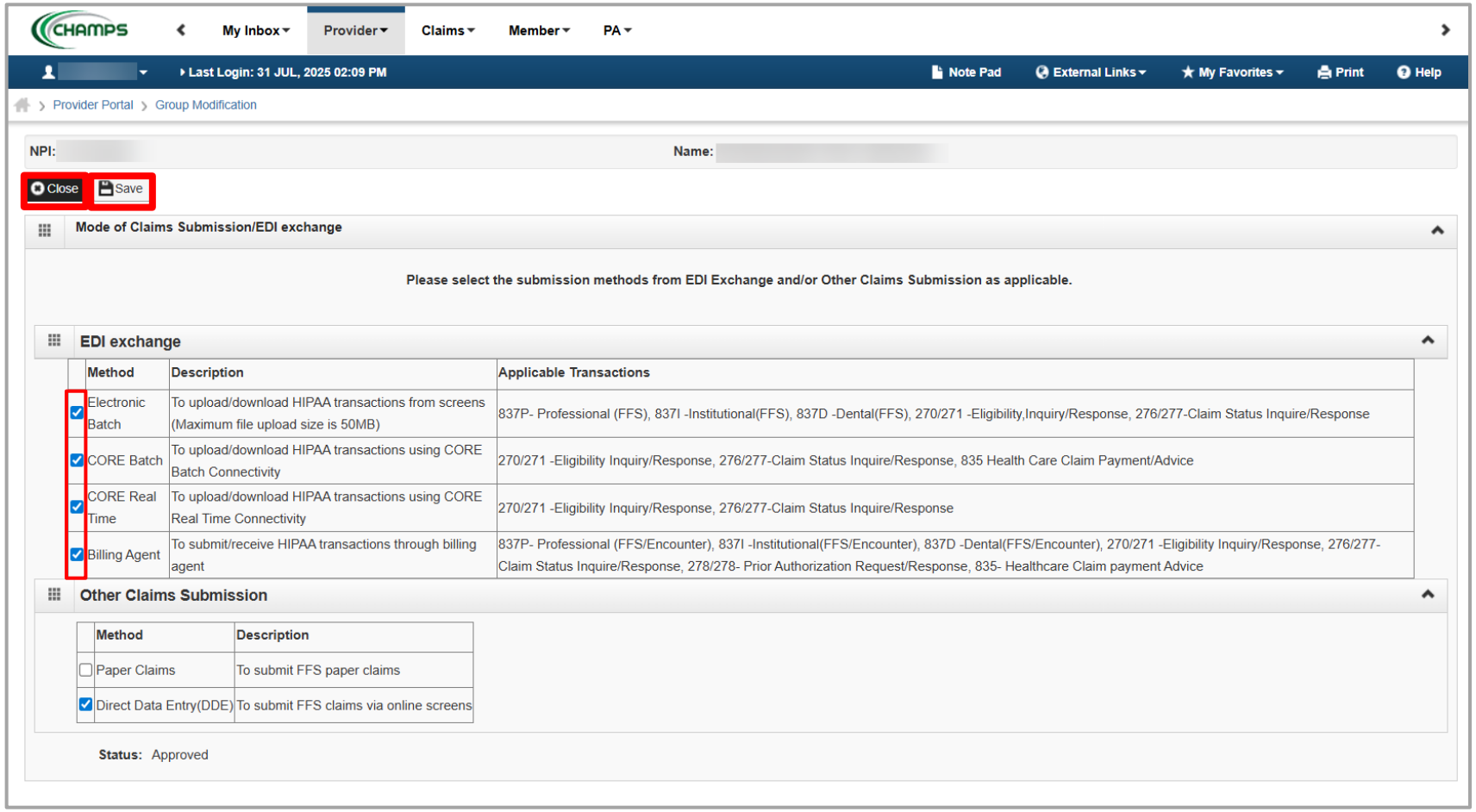
- The current mode(s) of claim submission will be displayed.
  - If the information listed is accurate and no edits need to be made, click Close to be returned to the Business Process Wizard steps.
- To add or remove a mode of claim submission click the Mode of Claim Submissions hyperlink.
  - Continue to the next slide for further instructions on how to remove a Mode of Claim Submission.



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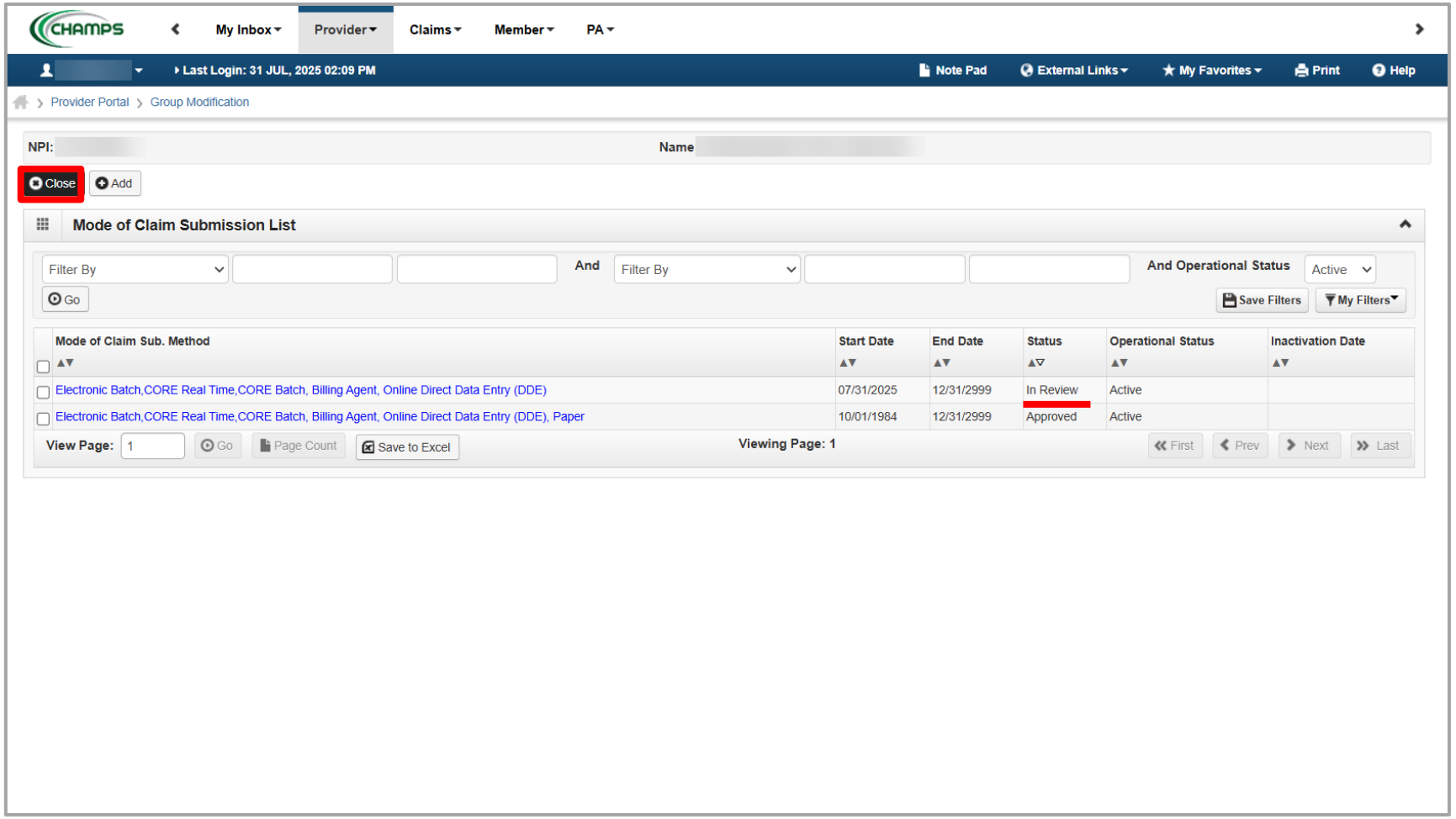
- To remove a Mode(s) of Claim Submission click the check mark next to the method of submission.
- Multiple methods can be updated at once, check or uncheck applicable methods.
- Click Save
- Click Close



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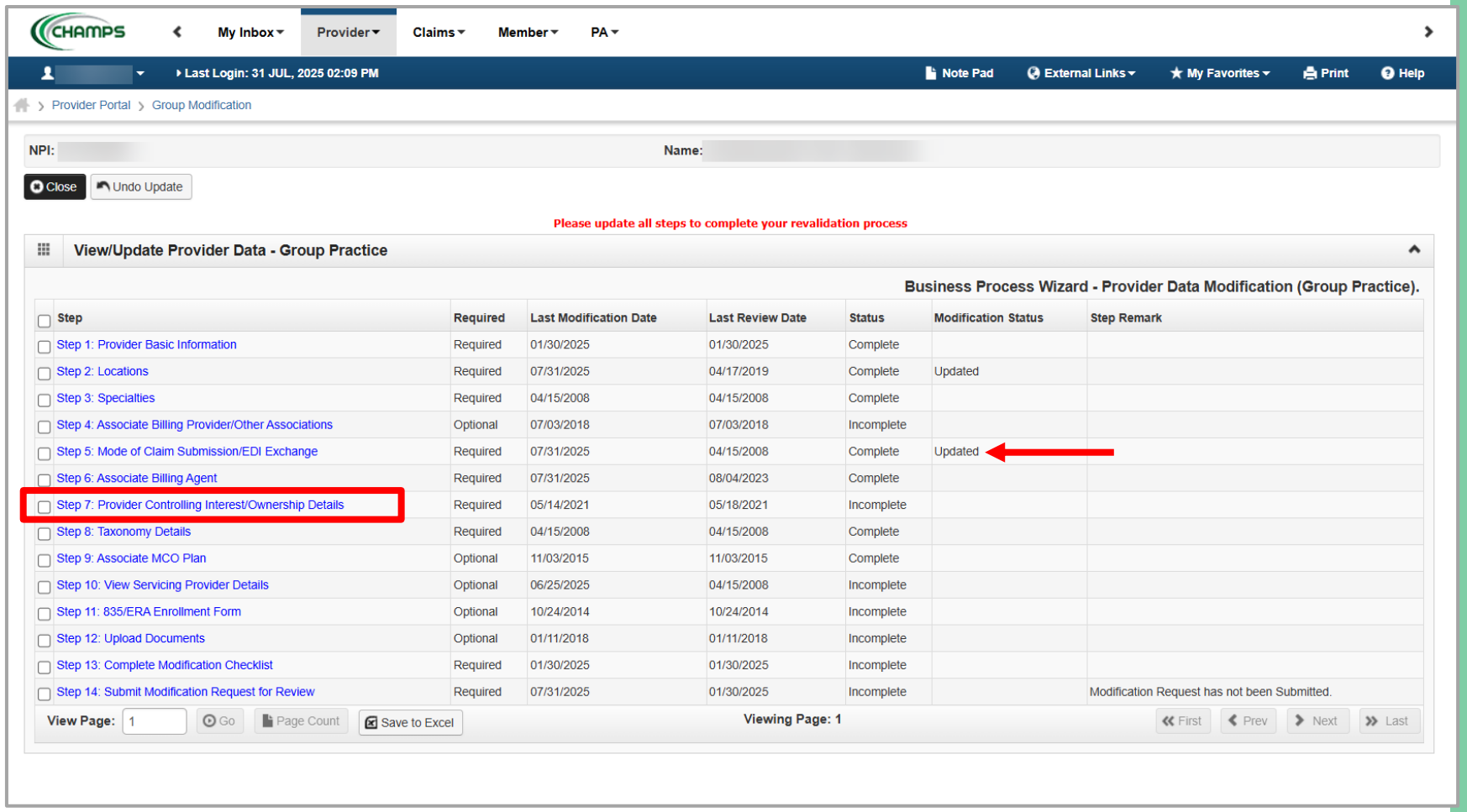
- Notice there are now two rows for Mode of Claim Submission, one that is approved and one that is in review.
- Note: due to Billing Agent being added as a Mode of Claim Submission, Step 6 will now become required.
- Click Close to return to the Business Process Wizard steps.



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- Step 5 is Complete and a Modification Status of Updated as changes were made within this step.
  - If changes were made an additional status of Updated would be listed in the Modification Status column.
  - Step 6 is optional and becomes required based on the selections made within Step 5. If a billing agent is added as a mode of claim submission, then Step 6 will become required.
- Click on Step 7: Provider Controlling Interest/Ownership Details

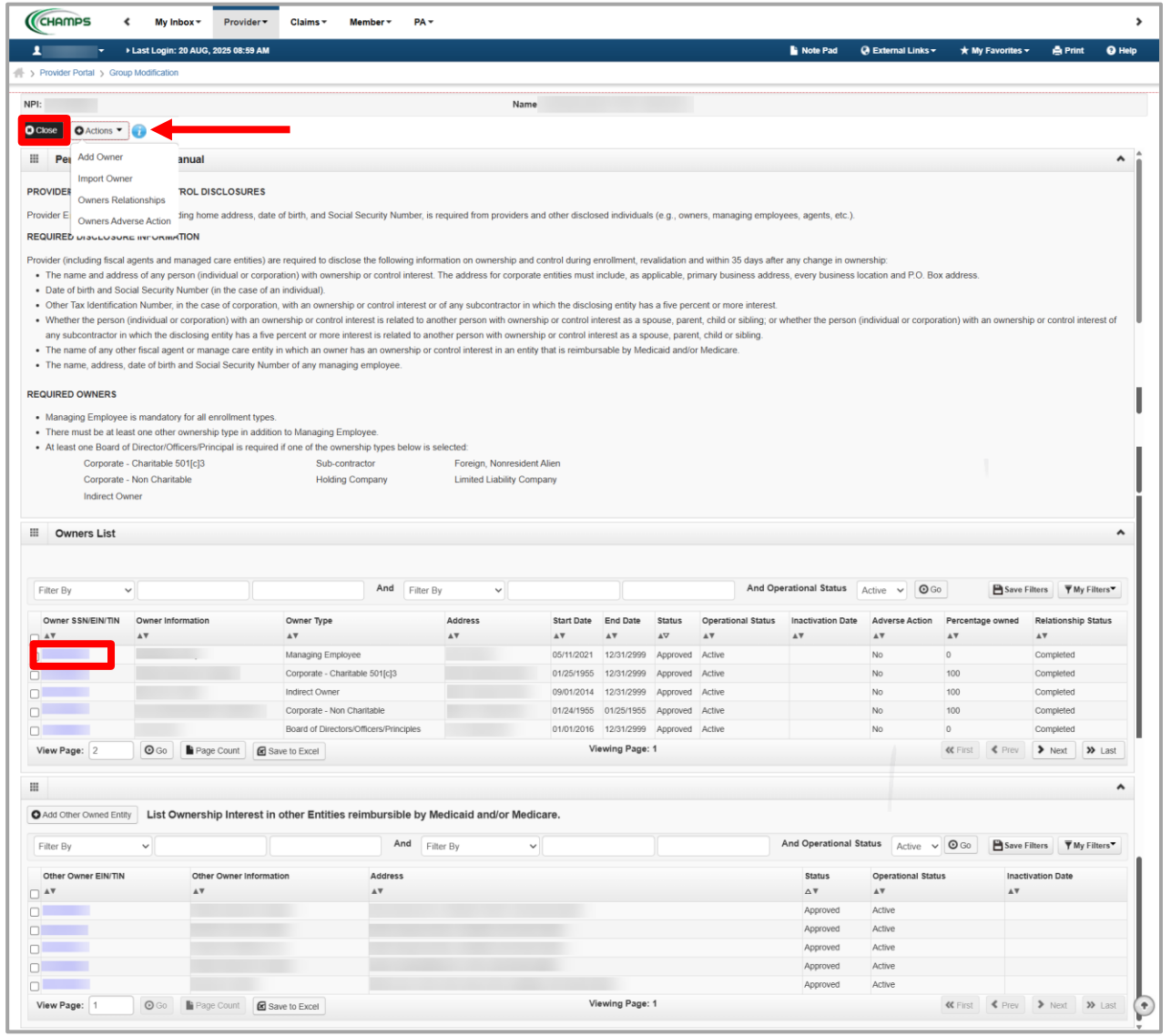


Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
Step 1: Provider Basic Information	Required	01/30/2025	01/30/2025	Complete		
Step 2: Locations	Required	07/31/2025	04/17/2019	Complete	Updated	
Step 3: Specialties	Required	04/15/2008	04/15/2008	Complete		
Step 4: Associate Billing Provider/Other Associations	Optional	07/03/2018	07/03/2018	Incomplete		
Step 5: Mode of Claim Submission/EDI Exchange	Required	07/31/2025	04/15/2008	Complete	Updated	
Step 6: Associate Billing Agent	Required	07/31/2025	08/04/2023	Complete		
Step 7: Provider Controlling Interest/Ownership Details	Required	05/14/2021	05/18/2021	Incomplete		
Step 8: Taxonomy Details	Required	04/15/2008	04/15/2008	Complete		
Step 9: Associate MCO Plan	Optional	11/03/2015	11/03/2015	Complete		
Step 10: View Servicing Provider Details	Optional	06/25/2025	04/15/2008	Incomplete		
Step 11: 835/ERA Enrollment Form	Optional	10/24/2014	10/24/2014	Incomplete		
Step 12: Upload Documents	Optional	01/11/2018	01/11/2018	Incomplete		
Step 13: Complete Modification Checklist	Required	01/30/2025	01/30/2025	Incomplete		
Step 14: Submit Modification Request for Review	Required	07/31/2025	01/30/2025	Incomplete		Modification Request has not been Submitted.

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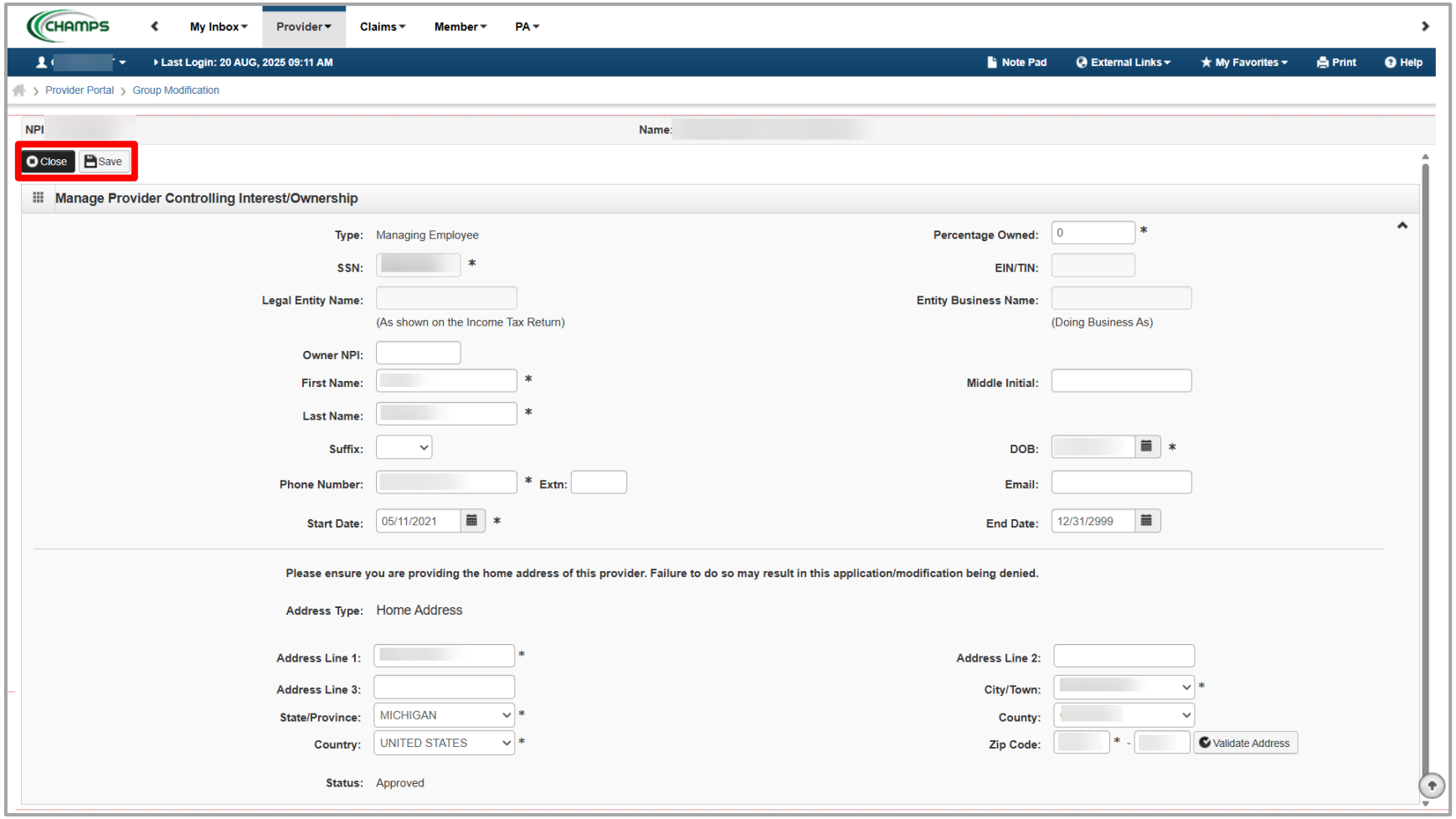
- The current Owner(s) will be displayed. For complete instructions on the Ownership step click here.
- Review all owners, if no updates need to be made, click Close to be returned to the Business Process Wizard steps.
- To edit owner information, select the owner SSN hyperlink.
- To add a new owner, edit relationship information, or complete the Adverse Action, select the option from the Actions dropdown. Please Note: if any owner information is updated the Adverse Action will need to be completed.
- Continue to the next slide for further instructions on how to edit current owner information.



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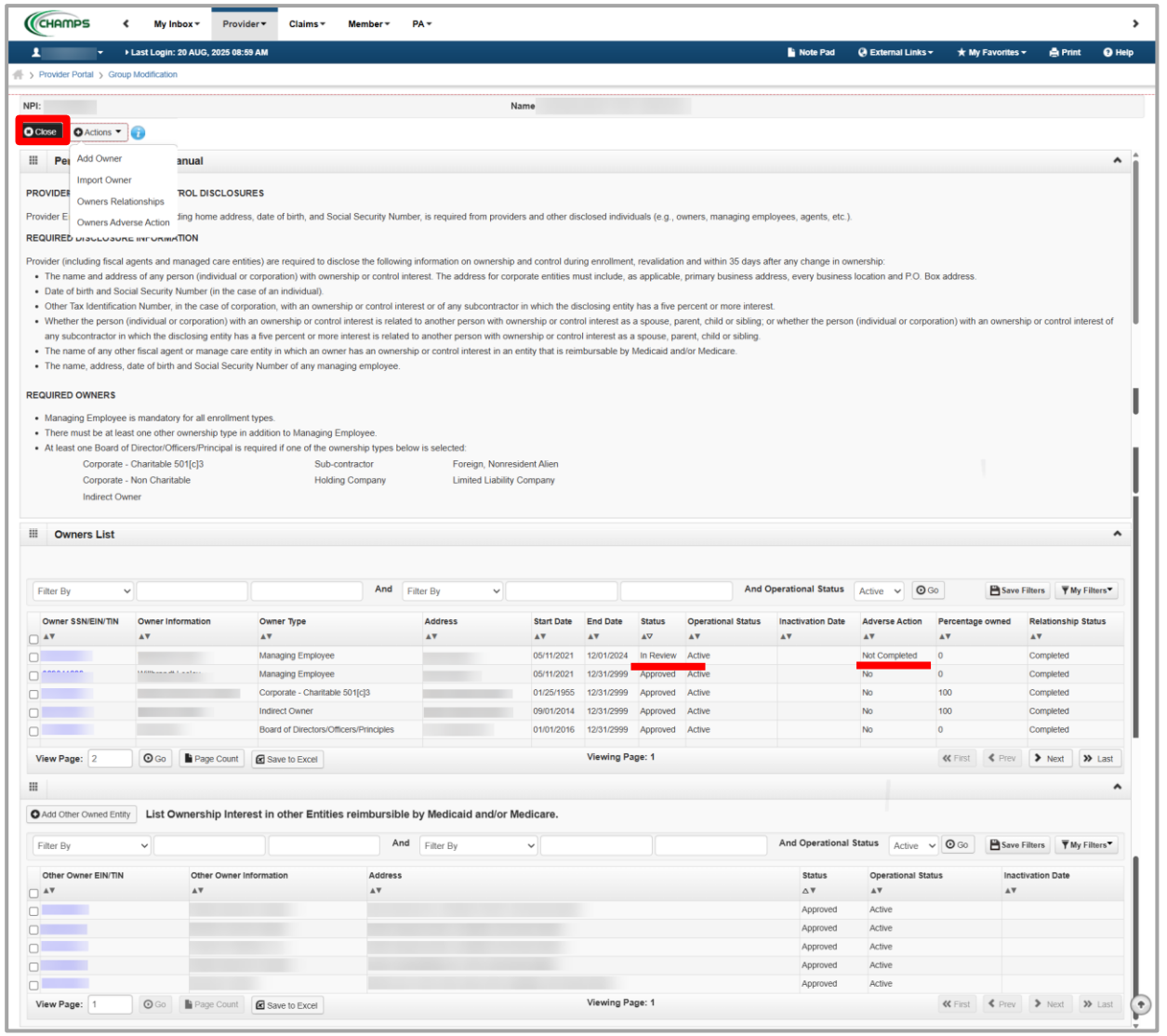
- Make any necessary updates or changes. Ensure all fields marked with an asterisk (*) are complete.
- If the address information is updated the Validate Address will need to be clicked prior to Save.
- Click Save
- Click Close



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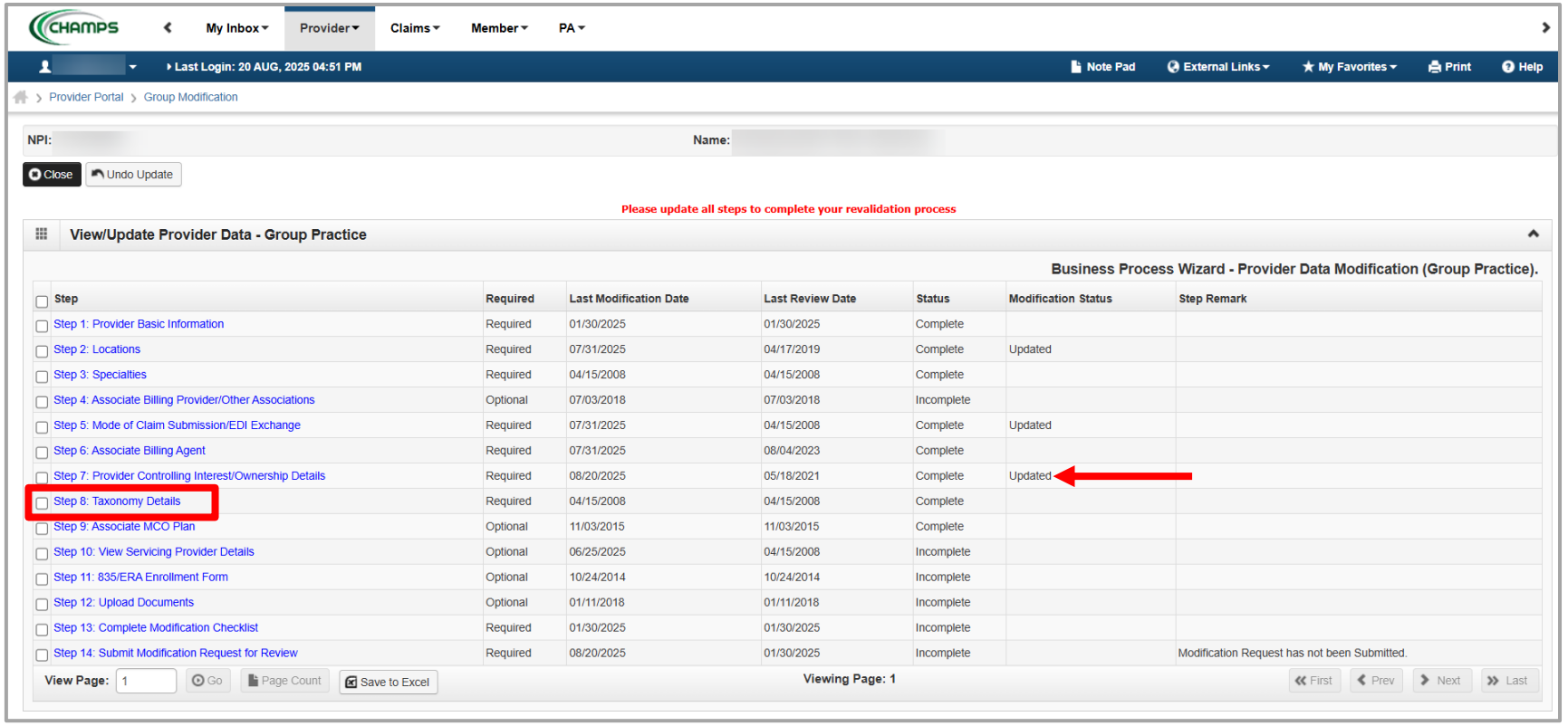
- Notice there are now two rows for the selected owner, one that is approved and one that is in review.
  - For complete instructions on the Ownership step click here.
- As owner information was updated the Adverse Action for any owner(s) would also need to be completed
- Click Close to return to the Business Process Wizard steps.



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- Step 7 is Complete and a Modification Status of Updated as changes were made within this step.
- If changes were made an additional status of Updated would be listed in the Modification Status column.
- Click on Step 8: Taxonomy Details

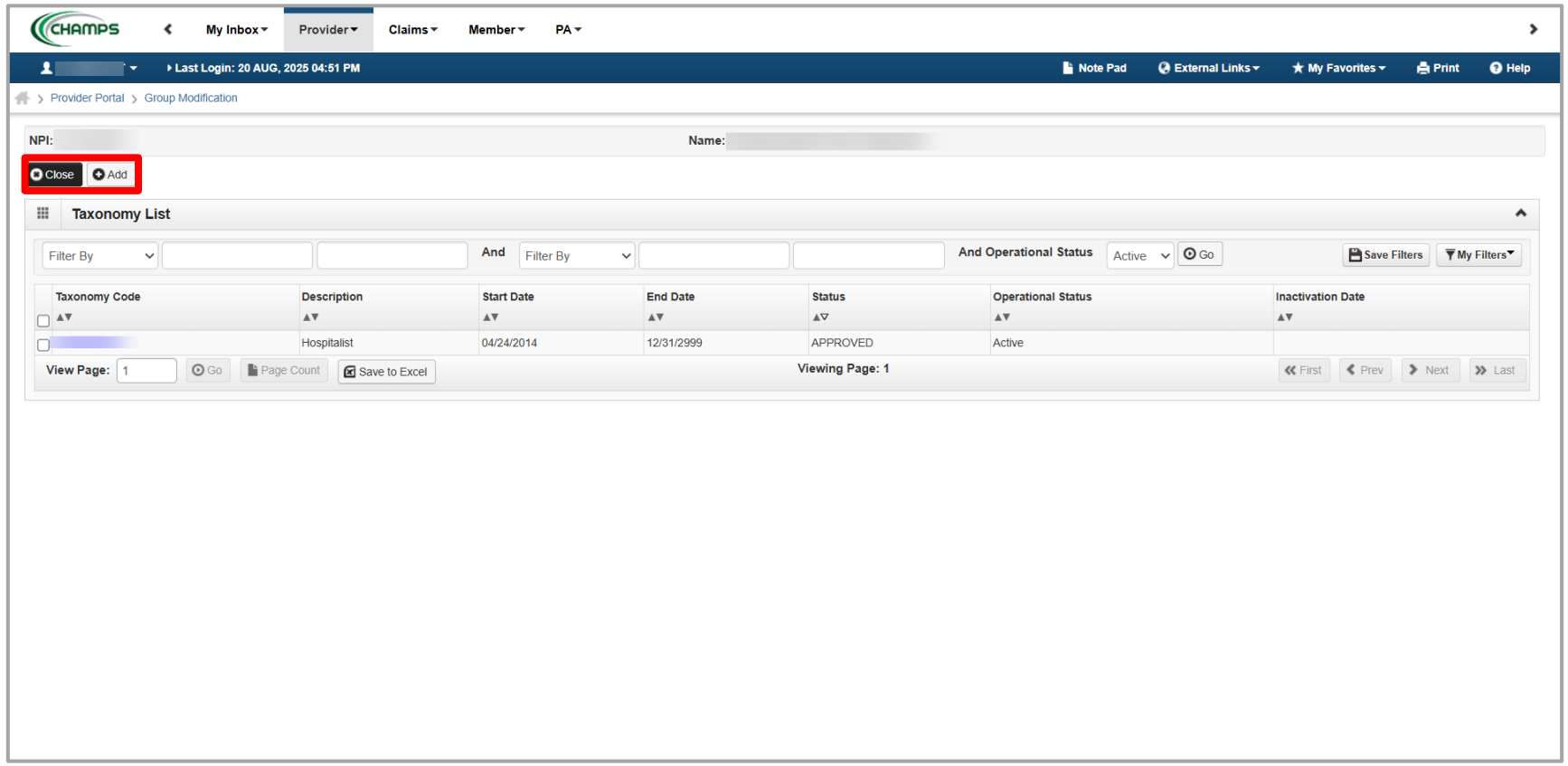


Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
Step 1: Provider Basic Information	Required	01/30/2025	01/30/2025	Complete		
Step 2: Locations	Required	07/31/2025	04/17/2019	Complete	Updated	
Step 3: Specialties	Required	04/15/2008	04/15/2008	Complete		
Step 4: Associate Billing Provider/Other Associations	Optional	07/03/2018	07/03/2018	Incomplete		
Step 5: Mode of Claim Submission/EDI Exchange	Required	07/31/2025	04/15/2008	Complete	Updated	
Step 6: Associate Billing Agent	Required	07/31/2025	08/04/2023	Complete		
Step 7: Provider Controlling Interest/Ownership Details	Required	08/20/2025	05/18/2021	Complete	Updated	
Step 8: Taxonomy Details	Required	04/15/2008	04/15/2008	Complete		
Step 9: Associate MCO Plan	Optional	11/03/2015	11/03/2015	Complete		
Step 10: View Servicing Provider Details	Optional	06/25/2025	04/15/2008	Incomplete		
Step 11: 835/ERA Enrollment Form	Optional	10/24/2014	10/24/2014	Incomplete		
Step 12: Upload Documents	Optional	01/11/2018	01/11/2018	Incomplete		
Step 13: Complete Modification Checklist	Required	01/30/2025	01/30/2025	Incomplete		
Step 14: Submit Modification Request for Review	Required	08/20/2025	01/30/2025	Incomplete		Modification Request has not been Submitted.

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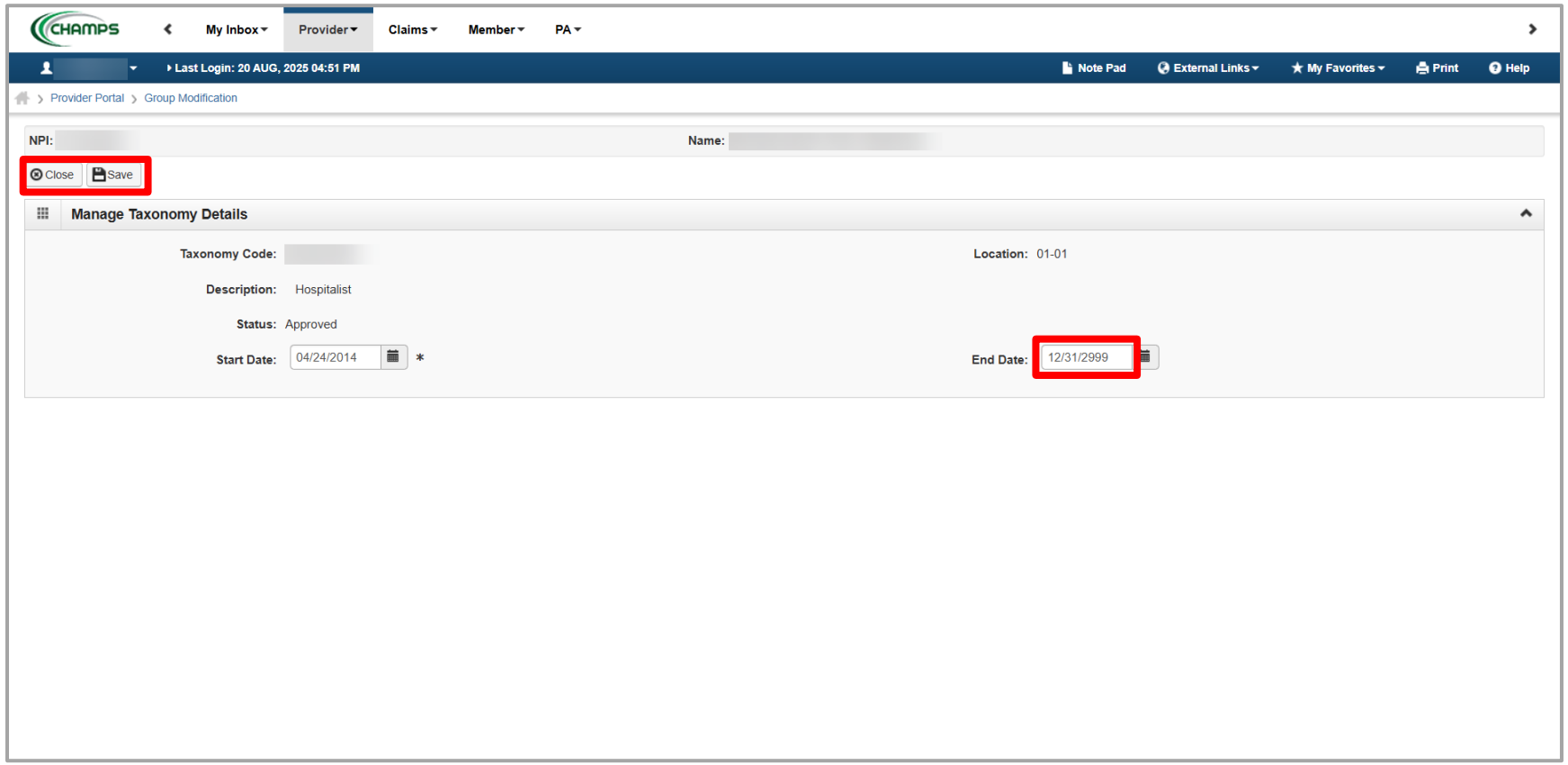
- The current Taxonomy Code(s) will be displayed.
  - If there are no edits that need to be made, click Close to be returned to the Business Process Wizard steps.
- To add a Taxonomy Code, click Add.
- To end date the current Taxonomy Code, click the Taxonomy Code hyperlink.
  - Note: that if there is only one taxonomy listed, and an end date is entered a new Taxonomy will need to be added.
- Continue to the next slide for further instructions on how to enter an end date to a Taxonomy.



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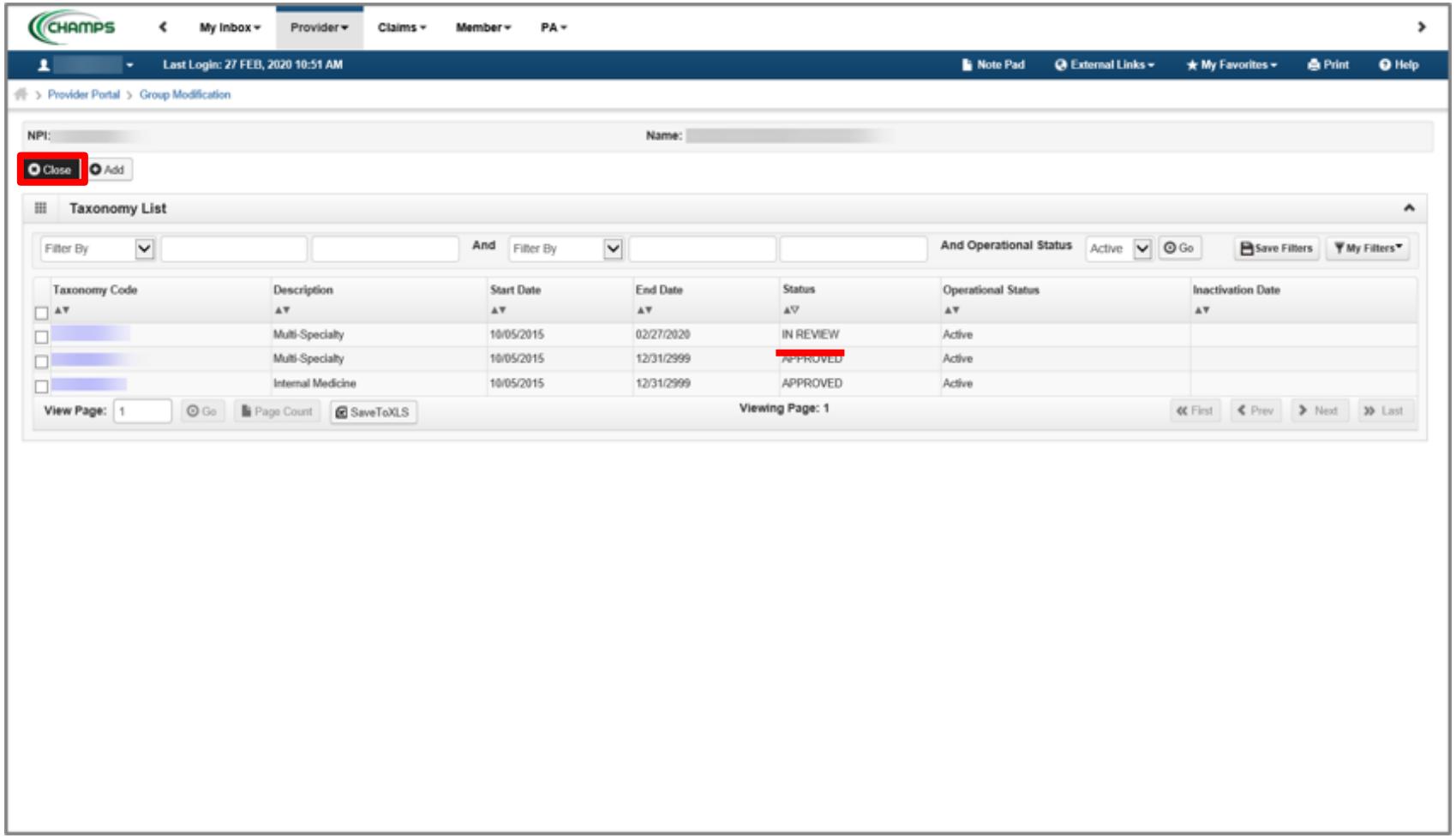
- Enter an End Date
- Click Save
- Click Close



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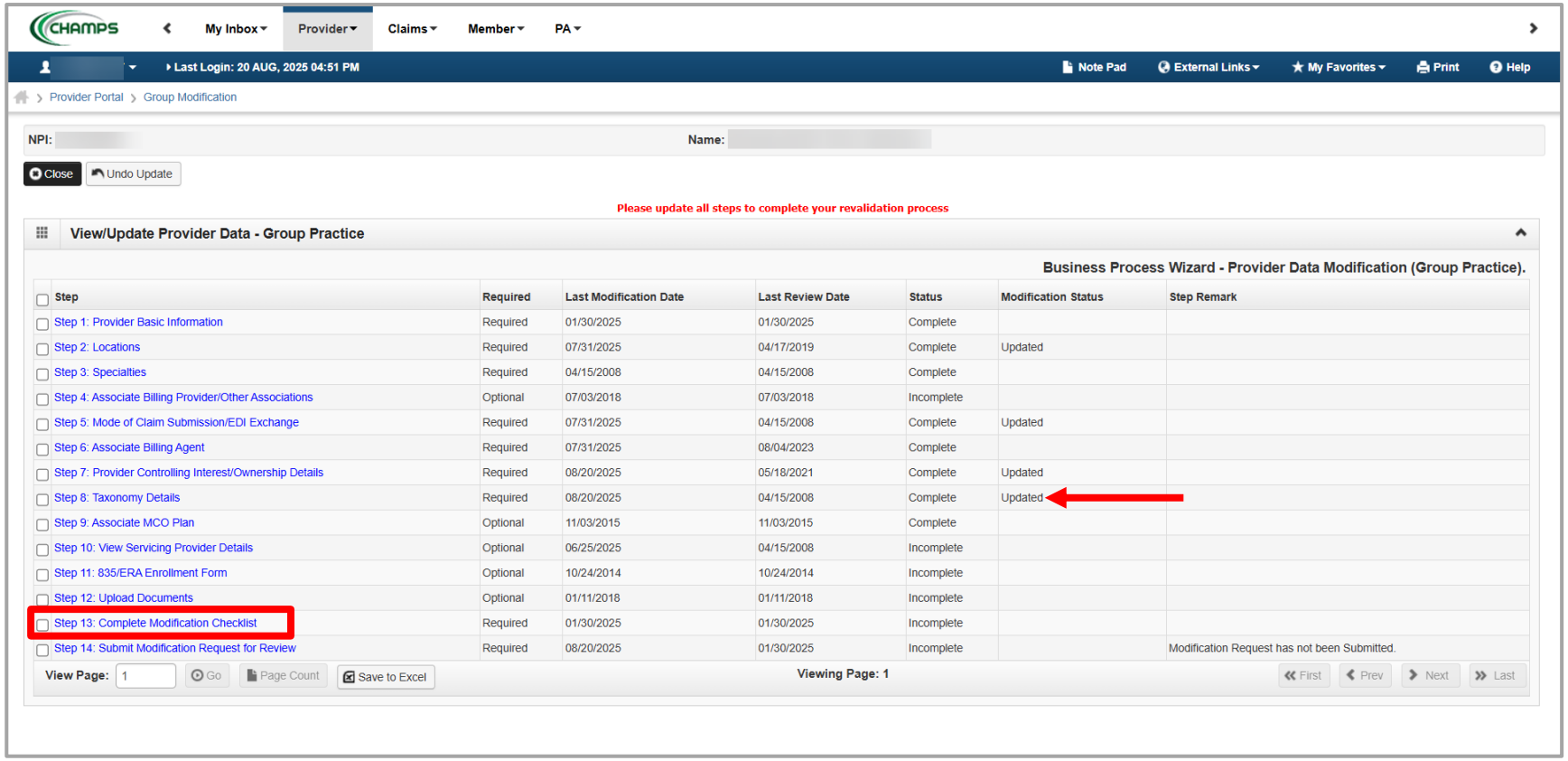
- Notice there are now two rows for the selected taxonomy, one in review and one that is approved .
- Click Close to be returned to the Business Process Wizard steps.



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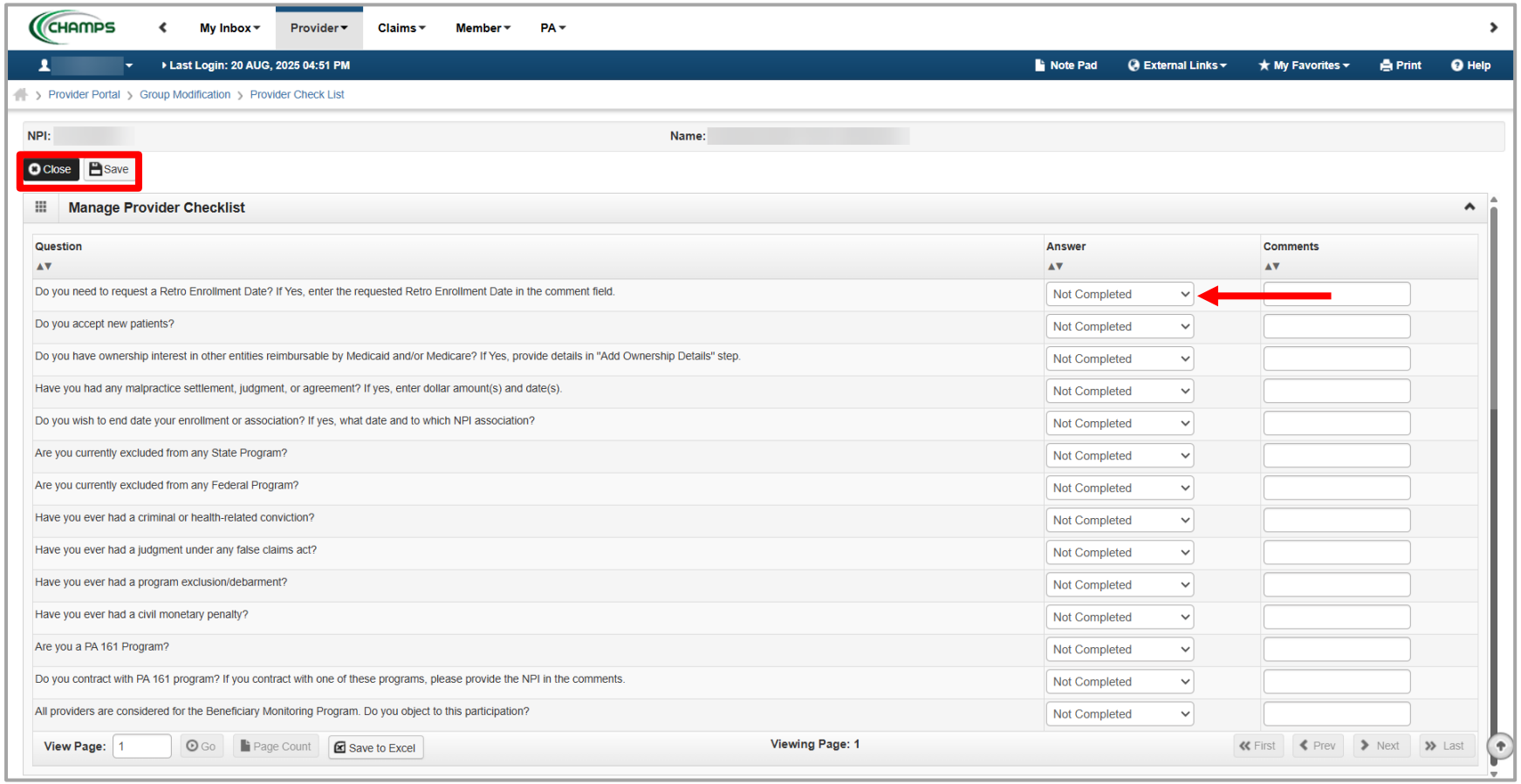
Group Revalidation

- Step 8 is Complete and a Modification Status of Updated as changes were made within this step.
- If changes were made an additional status of Updated would be listed in the Modification Status column.
- Click on Step 13: Complete Modification Checklist



Group Revalidation

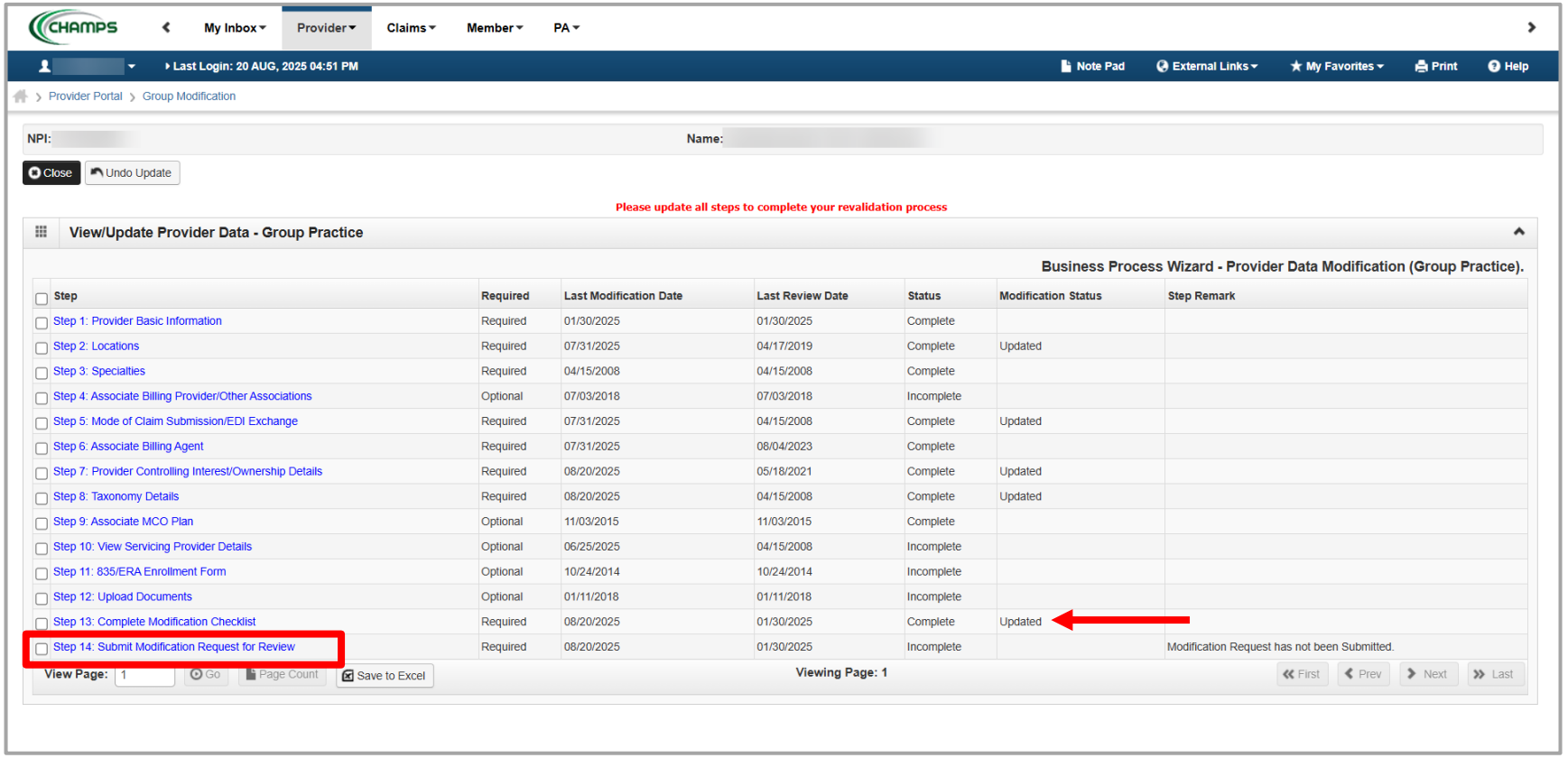
- Review each question and select Yes or No from the dropdown.
- Enter comments if necessary or required
- Click Save
- Click Close



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- Step 13 is Complete and a Modification Status of Updated as changes were made within this step.
- Ensure all information has been reviewed for each of the required steps and make sure any updates have been completed.
- Click on Step 14: Submit Modification Request for Review
  - Note : If you chose not to complete optional steps you can still submit your revalidation.



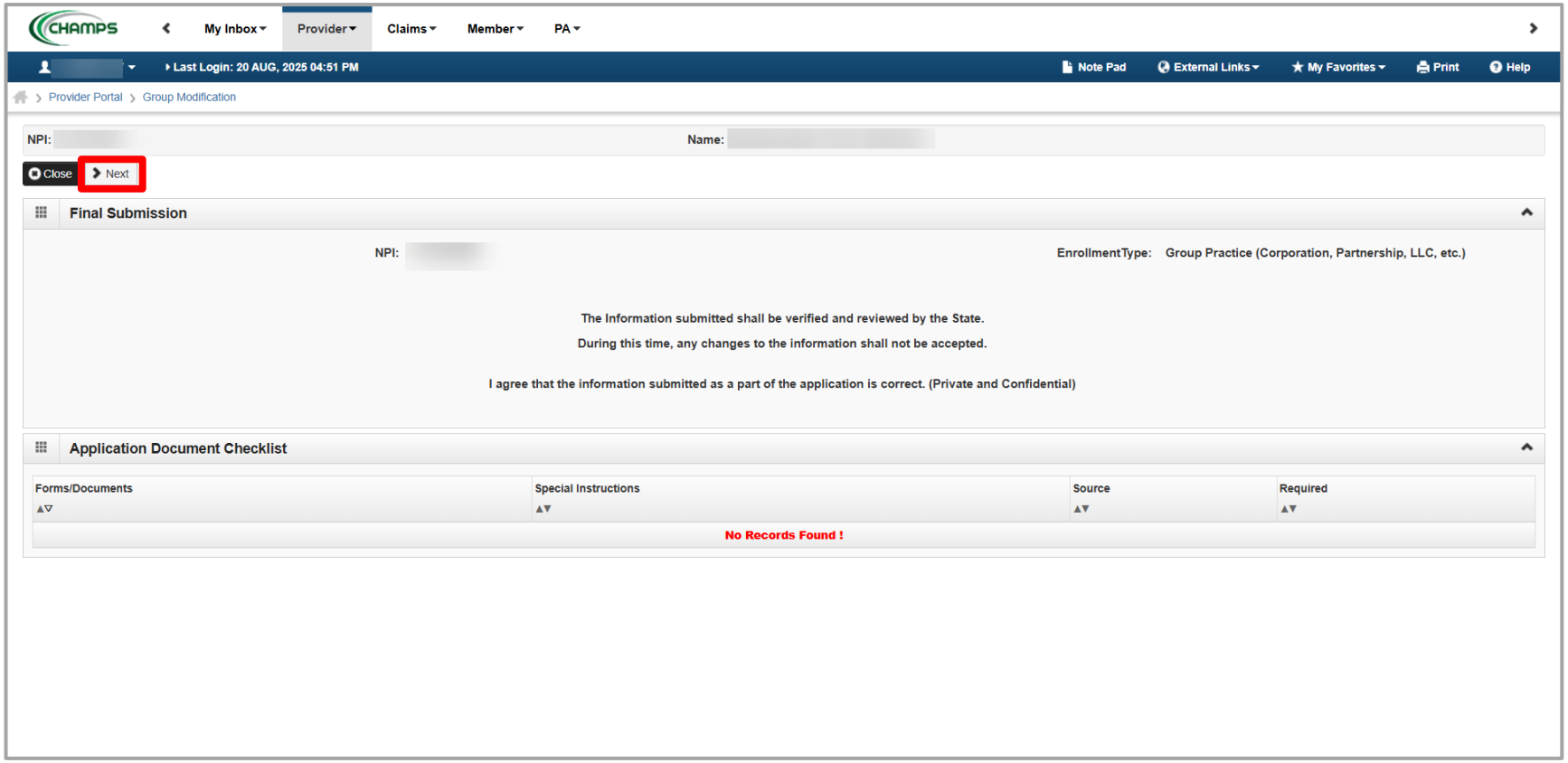
Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
Step 1: Provider Basic Information	Required	01/30/2025	01/30/2025	Complete		
Step 2: Locations	Required	07/31/2025	04/17/2019	Complete	Updated	
Step 3: Specialties	Required	04/15/2008	04/15/2008	Complete		
Step 4: Associate Billing Provider/Other Associations	Optional	07/03/2018	07/03/2018	Incomplete		
Step 5: Mode of Claim Submission/EDI Exchange	Required	07/31/2025	04/15/2008	Complete	Updated	
Step 6: Associate Billing Agent	Required	07/31/2025	08/04/2023	Complete		
Step 7: Provider Controlling Interest/Ownership Details	Required	08/20/2025	05/18/2021	Complete	Updated	
Step 8: Taxonomy Details	Required	08/20/2025	04/15/2008	Complete	Updated	
Step 9: Associate MCO Plan	Optional	11/03/2015	11/03/2015	Complete		
Step 10: View Servicing Provider Details	Optional	06/25/2025	04/15/2008	Incomplete		
Step 11: 835/ERA Enrollment Form	Optional	10/24/2014	10/24/2014	Incomplete		
Step 12: Upload Documents	Optional	01/11/2018	01/11/2018	Incomplete		
Step 13: Complete Modification Checklist	Required	08/20/2025	01/30/2025	Complete	Updated	
Step 14: Submit Modification Request for Review	Required	08/20/2025	01/30/2025	Incomplete		Modification Request has not been Submitted.

Step 14 must be completed to submit the revalidation

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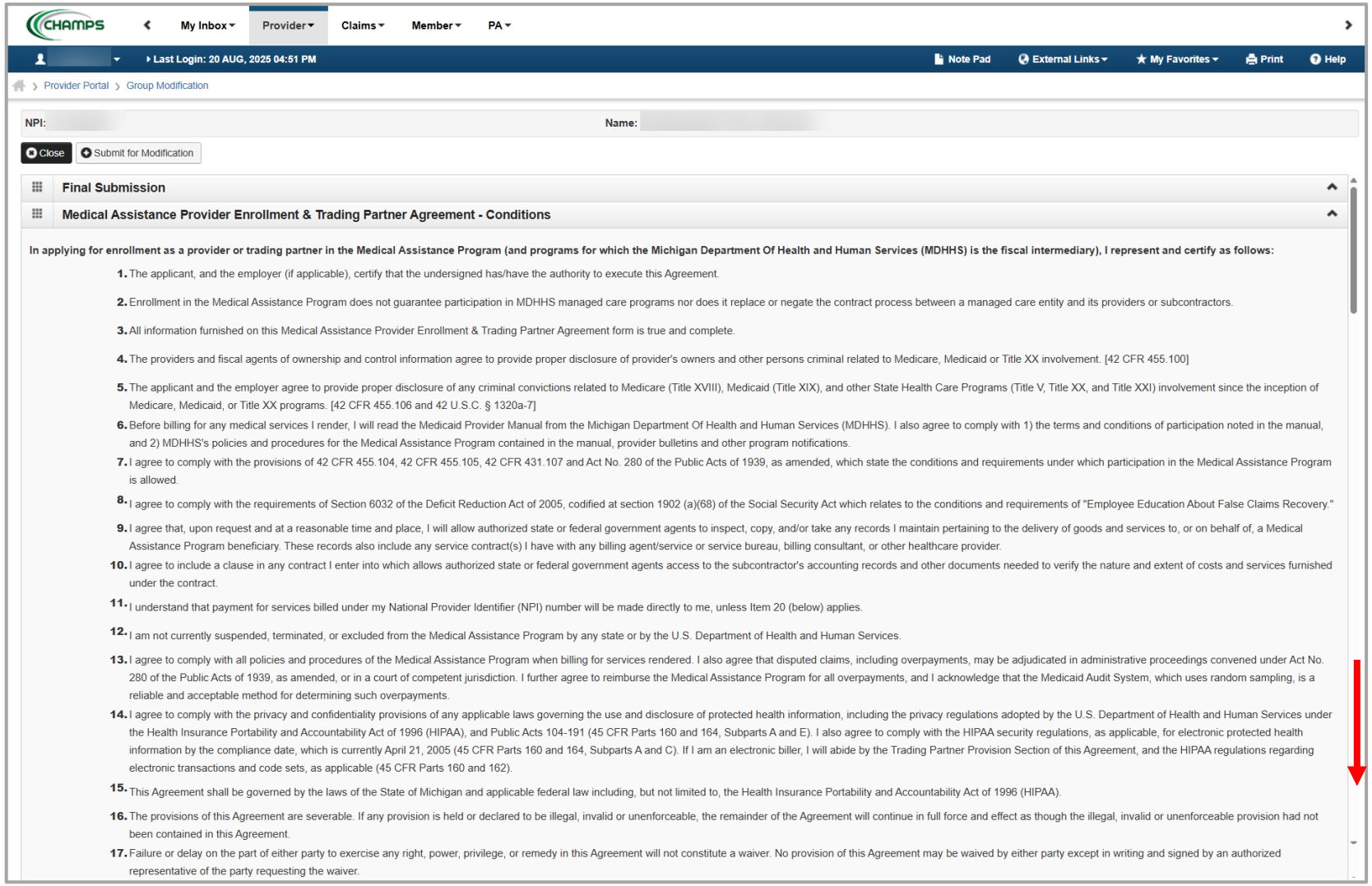
- Final Submission: Click Next



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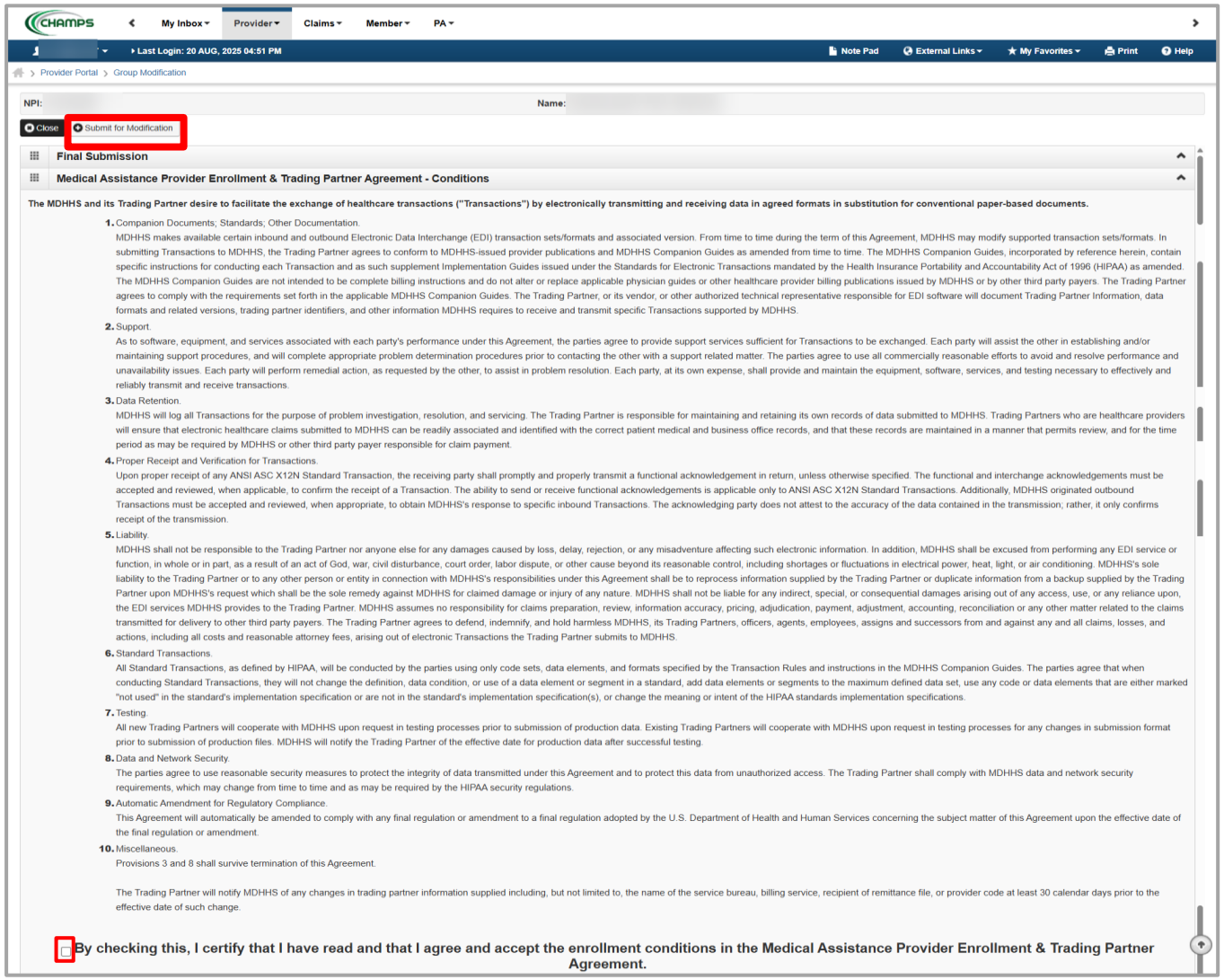
- Scroll down the page to review the Provider Enrollment & Trading Partner Agreement-Conditions



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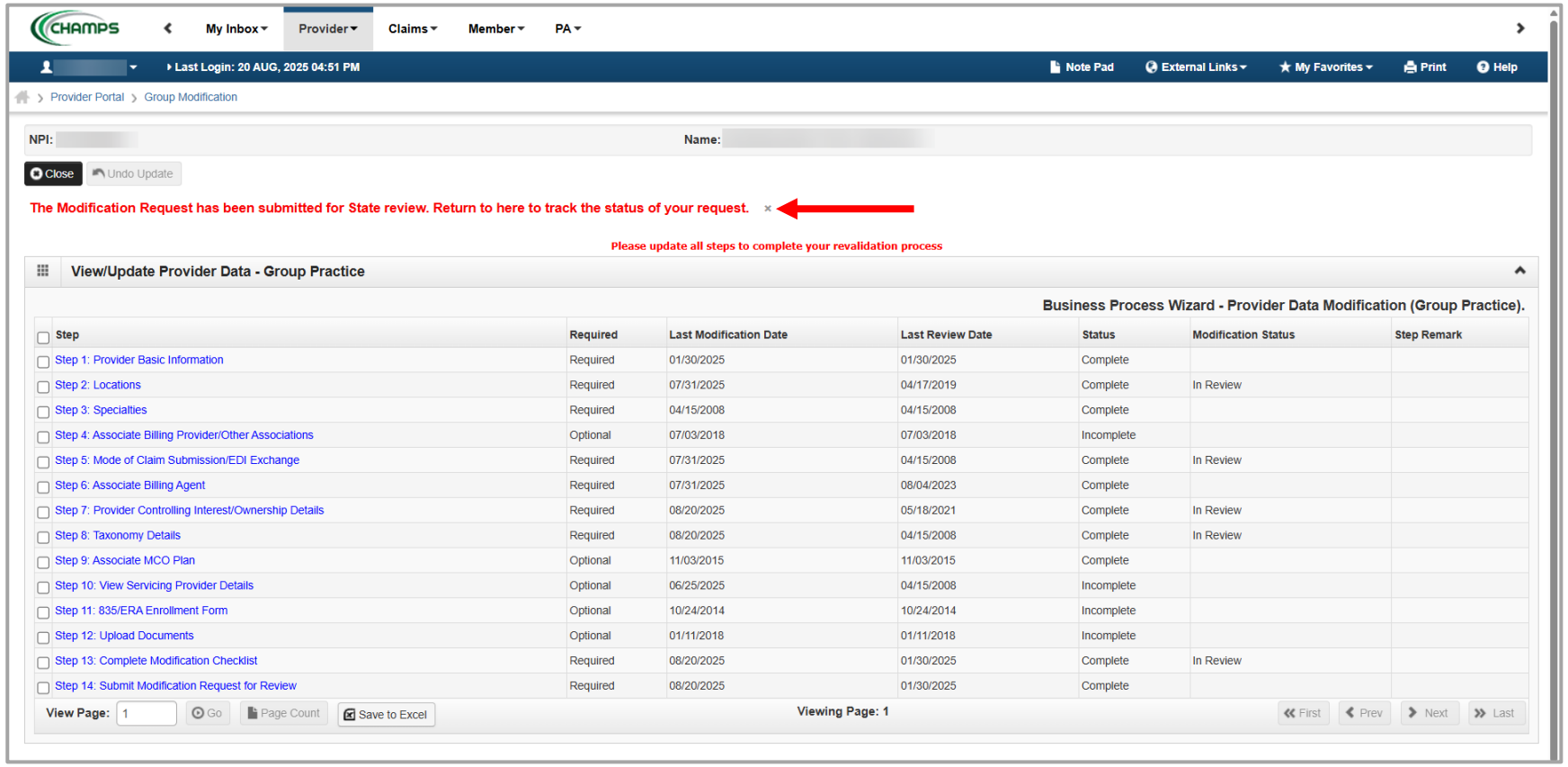
- Read through the entire list of Provider Enrollment & Trading Partner Agreement-Conditions
- Check the box at the end to agree to the Terms and Conditions
- Click 'Submit for Modification'
  - Once submitted to the State for review, changes cannot be made to the information.



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- Step 14 is now complete, and the revalidation has been submitted to the State for review.
- Click Close
- Note: Optional steps may show as incomplete if you chose not to complete. This is ok.



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Provider Enrollment Resources

Provider Enrollment website:
https://www.michigan.gov/mdhhs/doing-business/providers/providers/medicaid/provider-enrollment

Resources:

Domain Administrator Functions -PDF

Track Application – PDF

Electronic Signature Agreement Cover Sheet (MDHHS-5405)

Electronic Signature Agreement (DCH-1401)

Provider Enrollment:

1-800-292-2550

ProviderSupport@Michigan.gov

ProviderEnrollment@Michigan.gov

Thank you for participating in the Michigan Medicaid Program