“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
Contents

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- Member tab functions (slides 94-101)
- Prior Authorization tab functions (slides 102-109)
- Additional features within CHAMPS (slides 109-111)
- Domain Administrator functions (slides 112-125)
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.)
Select a Favorite if one has previously been saved
Once logged in you will be directed to the Provider Portal page.
My Inbox

Change Profile-How to change from being logged in with one NPI to another NPI
• Click the My Inbox tab
Click the Change Profile option
• Change to a different Billing NPI by selecting the appropriate NPI from the Domain dropdown
My Inbox

Archived Documents-Stored documents for provider view
Click the My Inbox tab
- Click the Archived Documents option
- Select a document type from the dropdown box (this example choose Medicaid Payments Paper RA to access the paper remittance advice).
- Click GO
Click the Paper RA hyperlink to access the paper RA
• The paper RA will then be displayed in PDF format
<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
<th></th>
</tr>
</thead>
<tbody>
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<tr>
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</tr>
<tr>
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<td>2</td>
<td></td>
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<tr>
<td>GA</td>
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<table>
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<th>Total Adjusted</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Warrant/EFT Date: 12/11/2014
My Inbox

Upload File-Uploading an electronic file to MDHHS
Click the My Inbox tab
- Click the Upload File option
Click Upload to select the file
- Click Browse to find the saved file on your computer
- Click Ok
If the file is successfully uploaded the message will appear:

**Upload File Response**

Thank You

The following File has been successfully uploaded:

**File Name**: 24FPAA_20170426113714_5475.201704261137.cat

**Submitter ID**: [Redacted]

**Date/Time**: 2017-04-26 11:38:20

Your file has been submitted for processing. You can retrieve the response(s) for this file by clicking on this link after 24 hours.

Please print this page for your reference.
Provider Verification

Tool used to verify a provider NPI is enrolled with Michigan Medicaid
Click the My Inbox tab
Click the Provider Verification option
Enter the NPI and click Verify to verify if a provider is enrolled with Michigan Medicaid.
The screen will then display the provider information, take note of the business status.

A result of no information found will be displayed if the provider is not enrolled.
Provider

Manage Provider Information
Click the Provider tab
Click the Manage Provider Information option
- Make any necessary changes to enrollment information making sure to complete all steps needed
- Step 11 must be submitted in order for changes to be reviewed by MDHHS
Submit Professional-How to use CHAMPS Direct Data Entry (DDE) option to submit a professional claim. Providers who bill using the CMS-1500 claim form
Click Claims tab
Click the Submit Professional option
Once in the claim screen the Billing NPI that you are logged into CHAMPS with will be pre-populated.

Enter all other necessary information for your claim and services being billed.
### BENEFICIARY INFORMATION

**Beneficiary**

- **Beneficiary ID:** 0123456789  
- **Last Name:** Beneficiary  
- **First Name:** Test  
- **Gender:** Male  
- **Date of Birth:** 01 01 2014

**Onset of Current Illness/symptom Date:**

- **Y/M/D:**

**Does the beneficiary have insurance other than Medicaid?**

- **Yes**  
- **No**

### OTHER INSURANCE INFORMATION

**Other Subscriber Information**

- **Payer Responsibility Code:**
- **Payer ID Number:**
- **Subscriber Last Name:**
- **Insured’s Group or Policy Number:**
- **Claim Filing Indicator:**
- **Remittance Date:**
- **Subscriber Member ID:**
- **First Name:**
- **Beneficiary’s Relationship:**
- **Total COB Payer Paid Amount:** $ 

---

- Enter the Beneficiary information
- If the beneficiary has a primary insurance answer Yes to the question then enter all required information as indicated by *
Continue to enter claim information as necessary for services being billed.

Any red plus sign can be expanded by clicking the red plus sign, once the field is expanded it will require information to be entered. If expanded in error click the red plus sign to close.
Enter the service line information, all asterisked fields are required for all providers
Once all information has been entered click Add Service Line Item to add it to the claim
The service line will then show at the bottom of the screen with its corresponding line number.

If other payer information was entered in the Beneficiary Information section then click on Insurance Info to enter the other payer information at the service line level.
Click Yes to the question.

Choose the Primary Payer Responsibility from the dropdown which will coincide with what was entered in the Beneficiary Information section.

Enter amount paid for the service line and applicable reason codes (CARC) and amounts based on the explanation of benefits (EOB) from the payer.
After completing information click Basic Claim Form to return to the claim information.
To save the claim as a template click Save as Template.

This will allow you to save the claim to either submit later or to re-use this same template for other beneficiaries.
Once claim is completed, click Submit Claim.

The TCN box will pop-up which displays the TCN number for further tracking, to attach documentation to the claim click Upload Documents.
Document Management Portal (DMP) will then launch in a separate window and will allow documentation to be uploaded and attached to the TCN number.
Submit Institutional-How to use CHAMPS Direct Data Entry (DDE) option to submit an Institutional claim. Providers who bill using the UB-04 claim form
Click Claims tab
• Click the Submit Institutional option
Once in the claim screen the Billing NPI that you are logged into CHAMPS with will be pre-populated

Enter the Beneficiary information
Continue to enter claim information as necessary for services being billed

- Any asterisked field is required for all providers
If the beneficiary has a primary payer, expand the Other Insurance Information field and enter all required information as indicated by the asterisk.

Any red plus sign can be expanded by clicking the red plus sign, once the field is expanded it will required information to be entered. If expanded in error click the red plus sign to close.
Enter the service line information, all asterisked fields are required.

Once all information has been entered click Add Service Line Item to add it to the claim.
The service line will then show at the bottom of the screen with its corresponding line number.

If there is a primary payer that was reported in the Other Insurance Information section click on Insurance Info to optionally enter the other payer information at the service line level.
To save the claim as a template click **Save as Template**

This will allow you to save the claim to either submit later or to re-use this same template for other beneficiaries.
Once claim is completed, click Submit Claim.

The TCN box will pop-up which displays the TCN number for further tracking, to attach documentation to the claim click Upload Documents.
Document Management Portal (DMP) will then launch in a separate window and will allow documentation to be uploaded and attached to the TCN number.
Claims
Submit Dental
System Notification

Attention All Providers: Due to system maintenance activities, the CHAMPS system will be down between 6:00 AM Saturday, January 10th through 9:00 PM Sunday, January 11th, 2015 with the exception of Health Care Eligibility Benefit Inquiry and Response (Core 270/271) Real-time transactions which will be down between 6:00am and 10:00am on Saturday January 10th. This outage will affect the CHAMPS system access for all functionality.

Click Claims tab
Click the Submit Dental option
Once in the claim screen the Billing NPI that you are logged into CHAMPS with will be pre-populated.

Enter all other necessary information for your claim and services being billed.

Enter the beneficiary information and if the beneficiary has primary coverage answer Yes to the question.
Click Yes to expand the diagnosis information if necessary for the services being billed.

Diagnosis information is required for Anesthesia and Extractions.
- Enter the service line information, all *asterisked* fields are required
- Once all information has been entered click Add Service Line Item to add it to the claim
The service line will then show at the bottom of the screen with its corresponding line number.

If other payer information was entered in the Beneficiary Information section then click on Insurance Info to enter the other payer information at the service line level.
Click Yes to the question
Choose the Primary Payer Responsibility from the dropdown which will coincide with what was entered in the Beneficiary Information section
Enter amount paid for the service line and applicable reason codes (CARC) and amounts based on the explanation of benefits (EOB) from the payer
After completing information click Basic Claim Form to return to the claim information.
To save the claim as a template click Save as Template.

This will allow you to save the claim to either submit later or to re-use this same template for other beneficiaries.
Once claim is completed, click Submit Claim.

The TCN box will pop-up which displays the TCN number for further tracking, to attach documentation to the claim click Upload Documents.
Document Management Portal (DMP) will then launch in a separate window and will allow documentation to be uploaded and will be attached to the TCN number.
Claims

Search Template-Search previously saved templates for use
Click Claims tab
Select Search Template option
A list of previously saved templates will be displayed

To use the saved template click the template number hyperlink
Claims

Adjust- How to make changes or corrections to a paid status claim
System Notification

Attention All Providers: Due to system maintenance activities, the CHAMPS system will be down between 6:00 AM Saturday, January 10th through 9:00 PM Sunday, January 11th, 2015 with the exception of Health Care Eligibility Benefit Inquiry and Response (Core 270/271) Real-time transactions which will be down between 6:00am and 10:00am on Saturday January 10th. This outage will affect the CHAMPS system access for all functionality.

- Click Claims tab
Select Adjust/Void Claim option
Enter the most current paid status TCN and click GO.

The TCN must be the header TCN ending in 00.
- Make any changes or updates to the claim that are needed
- Click save
- Click adjust
Select PIA-Provider Initiated Adj from the Adjustment Source dropdown box

Enter a note as to why the claim is being adjusted

Click OK and your adjustment is complete, you will be taken back to the screen where you first entered your paid TCN number
Claims

Void-How to void a paid status claim to return money to MDHHS
Click Claims tab
Select the Adjust/Void Claim option
Enter the most current paid status TCN and click GO

The TCN must be the header TCN ending in 00
Click Void
Select PIA-Provider Initiated VOID from the Adjustment Source dropdown box
Enter a note as to why the claim is being voided
Click OK and your void is complete, you will be taken back to the screen where you first entered your paid TCN number
Claims

Inquiry-How to review paid/denied/suspended claims
Click Claims tab
- Select Claim Inquiry option
- Select filter by criteria
- If filtering by the TCN number, choose TCN from the first dropdown selection enter the header TCN in the corresponding box
- Click Go
After the query has ran and returned results click the Save TOXLS button to allow the query to open within a Microsoft Excel worksheet.
Once the Microsoft Excel window pops up select either open or save.
The query information will then be opened and displayed within Microsoft Excel.
Member

Eligibility Inquiry-How to verify eligibility for a beneficiary
Click the Member tab
Select the Eligibility Inquiry option
Select the Filter By criteria from the dropdown selection.

- Change the inquire start and end date if looking for different dates then the system date (current date).

- Click Submit.
- Click the hyperlink for Click to View Service Types to review available benefits under the benefit plan.
The available benefits will then be displayed.
If a beneficiary has a primary payer on file for the date of service being checked the Commercial/Other will be Y
Click the Commercial/Other Hyperlink to review the primary payer on file

<table>
<thead>
<tr>
<th>Benefit Plan Id</th>
<th>PET</th>
<th>Benefit Plan Type</th>
<th>CHAMPS Provider Id</th>
<th>Service Type Details</th>
<th>Created Date</th>
<th>Transaction Date</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHP-HMP</td>
<td></td>
<td>MANAGED CARE</td>
<td>28120567</td>
<td>Click To View Service Types</td>
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<td>NH</td>
<td>LTC-NFAC</td>
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<td>8501659</td>
<td>Click To View Service Types</td>
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<td>09/01/2018</td>
</tr>
</tbody>
</table>

- Services Applicable
- Patient Pay Amount
- PPA Start Date
- PPA End Date
The primary payer information will then be displayed including the coverage type, group number, policy number, date updated and begin and end dates.
Prior Authorization

PA Request list-Review prior authorizations by multiple filter criteria
Click the PA tab
Select the PA request list option
A list of prior authorizations will then be displayed.

The filter By dropdown can be used to add additional filter criteria.
Prior Authorization

PA Inquire-Look up a specific PA tracking number
Select the PA Inquire Option
Enter the PA Tracking number

Click Submit
The prior authorization information will then be displayed.
External Links

Links to other applications or websites accessible to providers
System Notification

Attention all providers: The informational edit for a Billing Agent not associated to a Billing NPI will change to DENY effective August 1, 2014. Please refer to the Biller B Aware for further information.

Click on the External Links
A list of available links will be displayed

Select one of the available links to open within a separate window from CHAMPS
Domain Administrator

Adding Users
• Login to CHAMPS with the Domain Administrator Profile
Click the Admin tab
Select the Maintain Users option.
Click Add
• Enter the User ID
• Choose any of the available profiles listed and click the arrows to add it to the Selected Profiles
Once all desired profiles have been selected for the User ID click Ok
Domain Administrator

Updating Domains
Click the Admin tab
Select the Maintain Users option
- Select Domain Name from the dropdown
- Enter the wildcard % and click Go
Click the domain name hyperlink that needs to be updated
- An expiration date can be entered if the user no longer needs access to that Billing NPI domain
- Profiles can also be added to the user or removed
Provider Resources

• MDHHS website:  [www.michigan.gov/medicaidproviders](http://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](mailto:ProviderSupport@michigan.gov) or 1-800-292-2550

Thank you for participating in the Michigan Medicaid Program