Submit Prior Authorization Request Online

Business Rules

- Fields marked with an asterisk (*) are required and must be completed for the Prior Authorization (PA) Request to be submitted successfully
- Fields without an asterisk are conditional or optional fields. If the question applies to the situation for which PA is being requested, the field is required

- Contact the **Provider Support Helpline** at **1-800-292-2550** or **ProviderSupport@michigan.gov** to receive expert assistance

Action	Manage Provider Login	Notes
Step 1: Login to CHAMPS	1. Access **CHAMPS** using MILogin 2. Follow **CHAMPS** login screen prompts	• Must apply for access to **CHAMPS** System
Action	**Submit Prior Authorization Request Online**	**Notes**
Step 2: Submit PA Requests	1. After you have logged into **CHAMPS** with your MILogin, click the PA tab at the top of the page 2. Click on the **PA Request List** hyperlink 3. Click **Add New Request**	• The **PA Request List** page displays all of the **PAs** that are under the **Provider NPI** • The **PA Request List** will display one year of historical data • For data older than one year, the user must filter by the **Request Date** and enter the dates

Action	Submit PA Request Online – Requestor Information	Notes
Step 3: Requestor Information	1. The **Request Date** is automatically populated for the date the requestor begins the authorization 2. The **Requestor ID/NPI is** automatically populated from the Domain the User entered through the MILogin portal 3. Optionally, enter **Would you like to add additional identification or contact information?** Select "**Yes**" or "**No**"	• **"NO"** is the default • If "**YES**" is selected, you **MUST** click on **Show Details** and complete any fields that apply
Action	Submit PA Request Online – Subscriber Information	Notes
Step 4: Subscriber Information	1. Select either **MI-Member Identification Number** or **ZZ-Mutually Defined** (SSN) from the **Identification Code Qualifier** drop-down menu 2. Enter the **Member Identification Number** or **Social Security Number** within the **Identification Code field** 3. Select an **option** from the **Gender** drop-down menu 4. Enter Member's **Date of Birth** 5. **Enter any other optional information relevant to this PA entry** 6. Select **Next** to continue with PA Request	• **Identification Code field** requires the **Member Identification Code** (10 digit Beneficiary ID) or **Social Security Number** • Use the two-digit month (MM), two-digit date (DD), and four-digit year (YYYY) format – MM/DD/YYYY

Action	Submit PA Request Online – Diagnosis Information	Notes
Step 5: Diagnosis Information	1. Select **Add** on **Diagnosis Information** page 2. Enter the **Diagnosis Code** 3. Select appropriate **Diagnosis Type** from drop-down menu 4. Select the appropriate **Diagnosis Code Category** from the drop-down menu 5. Optionally, enter the **From Date** 6. Optionally, enter the **To Date** 7. Select **Submit** 8. To add additional Diagnosis codes, repeat Steps 1-6 9. Select **"Next"** to continue with PA request	• Add **Diagnosis** in order of importance for this **PA submission** with the most important diagnosis first • Use the two-digit month (MM), two-digit date (DD), and four-digit year (YYYY) format MM/DD/YYYY • Actor may enter one **Principal Diagnosis**, one **Admitting Diagnosis**, and up to six other Diagnosis codes as appropriate

Action	Submit PA Request Online – Service Review Information	Notes
Step 6: Service Review Information	1. Enter **Service From Date** 2. Enter **Service To Date** 3. Select **Service Type** from drop-down menu 4. Select **Certification Type** from drop-down menu 5. Select **Facility Code Qualifier** from drop-down menu 6. Select **Facility Code Value** from drop-down menu 7. Enter any other optional information relevant to this **PA** entry 8. Select **Next** to continue with PA Request	• Use the two-digit month (MM), two-digit date (DD), and four-digit year (YYYY) format – MM/DD/YYYY • If asking for a **retroactive request**, enter the **retroactive dates** within the **Service From** and **To date f**ields and an **explanation** within the **Remarks** section • Selecting **Extension** from the **Certification Type** drop-down menu will enable the ability to extend an existing **PA**
Action	Submit PA Request Online – Service Provider Information	Notes
Step 7: Service Provider Information	1. Select **Add By ID** 2. Enter **Service Provider NPI** 3. Optionally, enter **additional information** 4. Select **Submit** 5. Repeat Steps 1-4 to enter additional **Service Provider NPI's** 6. Select **Next** to continue with **PA Request**	• More than one **Servicing NPI** can be added to the **PA** • **CHAMPS** users can obtain a **PA** status by logging into **CHAMPS** with either the **Requestor Provider** or **Servicing Provider NPI**

Action	Submit PA Request Online – Procedure Information	Notes

Step 8: Procedure Information	1. Select **Add**
	
	2. Optionally, change **Service From** and **To Dates** by selecting **Change Service Date** if entered incorrectly
	
	3. Enter **Code Qualifier** from drop-down menu
	
	4. Enter **From Date**
	
	5. Enter **To Date**
	
	6. Select **Servicing Provider** from Servicing Provider drop-down menu
	
	7. Optionally, enter **Modifiers**
	
	8. Enter **Quantity** and **Amount** and any relevant remarks.
	
	9. Select **Submit**
	
	10. Repeat Steps 1-9 to add additional **Procedure Codes**
	
	11. Select **Next** to continue with **PA Request**
		• System automatically displays **Service From** and **Service To Dates**
		
		• Drop-box menu options for Code Qualifier include:
		    ABR-Revenue Code
		    BO-HCPCS Procedure Code
		    BQ-ICD-9 Surgical Procedure Code
		    NDC-National Drug Code
		
		• Use the two-digit month (MM), two-digit date (DD), and four-digit year (YYYY) format – MM/DD/YYYY
		
		• **Code Description** will populate when a code has been entered
		
		• The **From and To** dates entered are specifically for the procedure code requested and can be the same or a shorter date span as the **Service From** and **To Dates**. More than one service with differing **From** and **To Dates** based on procedure code can be entered
		
		• The **Service From date** must reflect the earliest Procedure code date and the **Service To Date** must reflect the latest **Procedure Code Date**

Action	Submit PA Request Online – Request Navigator Information	Notes
Step 9: Request Navigator Information	1. Optionally, **make checkbox selection**. If no selection is made, skip to **Step 10** 2. Select **Next**	• The **Request Navigator** questions are all conditional based on the information required in the **PA** and the information entered in the **PA Request**. No questions are mandatory except the "Are you sending additional service information?" option – this question is permanently selected as all **PAs** require supporting documentation • If one is selected, fill in all required (*) fields • The **PA Tracking Number** cannot be used for billing until the **PA request** has been approved. Once the **PA request** has been approved, the **PA Tracking Number** becomes a valid **Prior Authorization** number for billing

Action	Submit PA Request Online – Additional Service Information	Notes

Step 10: Request Navigator Information	**1.** For documentation stored electronically:
	
	   a. Select **Click here: To Upload Documentation**
	   b. Select the **Browse** button to navigate to the documentation stored on user's computer. Select the correct file and select **Open.** The documentation will appear in the Filename: field. Click **Upload Document**
	   c. Select **Submit**
	
	2. For submission of paper documents:
	   a. Select **Click here: To Print Fax Cover Page**
	     • Click **Print Fax Page**
	     • Click the printer icon
	     • Click **Close**.
	     • Fax the attachment & Fax cover sheet to the facsimile number listed on the cover sheet
	
	3. To continue on with the **PA Request** select **"Next."**
	
	12. If no checkbox selection is made, click **"Next"** to finalize **PA request**. This "Next" button will change the status of the **PA** from "**Entering**" to "**Requested**" at which point the **PA request** can no longer be modified by the **Requestor**.
		• Print fax cover page and fax documents
		
		• **Please note: User <u>MUST</u> fax the documents to the fax number indicated on the cover sheet**
		
		• Champs electronic **PA** fax # for documents: 517-346-9800
		
		• If the user does not fax to this number, the documents will **NOT** be uploaded into Champs. The **PA** will be returned to provider for missing documentation