CHAMPS
Prior Authorization Subsystem:

Instruction Manual for CMH Users
Entering Private Duty Nursing Authorizations

Issued August, 2010

There have been changes to the PDN PA Manual originally issued in March 2010. For quick reference, these changes have been highlighted in yellow on pages 18, 20, 23, 24, 61 and 62. If you have already printed a copy of the manual, please replace these pages with the updated information.
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In this manual, we have provided you with screen shots and step-by-step written instructions beneath the screen shot. The screen shots will include numbered arrows that correspond to an instruction on that page. You should always follow the instructions in numbered order as doing things out of order can cause problems. You will note that many screen shots include thick black lines where personal identifying information would be entered as you proceed through the PA process.
There is a process to follow in order to subscribe and register for the CHAMPS database that is different from what you are familiar with. There is a checklist included at the beginning of Section 1 that you can follow to track your progress through the various steps, but it does not include the step-by-step instructions needed to complete your CHAMPS registration. **Comprehensive instructions for registering for CHAMPS are found in Section 1 of this manual. Please follow these step-by-step instructions CLOSELY as each specific step is critical in this process. If you skip a step, this could significantly delay your registration process.**

**Steps for entering prior authorizations are also in the manual beginning in Section 2. Please follow the manual step by step until you get very familiar with the process.**

We recommend you complete the online tutorial before you register. This can be found at http://champstraining.mihealth.org/. To do this tutorial, you will need to obtain a user name and password.

We also strongly recommend you use Internet Explorer (as opposed to Mozilla Firefox, etc) as your web browser.
SECTION 1:

REGISTERING FOR CHAMPS
CHECKLIST: Steps Needed to Obtain Access to CHAMPS
Note: These are not the step-by-step instructions which start on the following page

To get enrolled in the PA system, please complete the following steps in this section by following the step-by-step process on the following pages:

Web-Based Training can be completed at http://champstraining.mihealth.org/.

1. Single Sign On (SSO) Registration
   a. If you already have a Single Sign On User ID and password, skip to 2, Subscribe to DSA.
   b. Register for and log on Single Sign On via https://sso.state.mi.us/. CMH users may need to get access to both Children’s Waiver and Habilitation Supports Waiver programs if they work with both programs.
   c. Password creation and security “Challenge Questions.” Please write down your answers to these challenge questions and keep them in a safe and secure place so you can retrieve your User ID and password later if you forget them. The answers to the challenge questions can have the same answer even if the questions are different.

2. Subscribe to Database Security Application (DSA)
   a. To register for the DSA, click "Subscribe to Applications"
   b. In the first drop down select ”Dept of Community Health"
   c. In the second drop down select "Database Security Application (DSA)" and complete the steps and then submit and close the application

3. Create a Request for Access to CHAMPS
   a. Log into DSA
   b. Start a New Request
      i. Complete the CHAMPS Security Request Form, click Save-and-Continue
      ii. Request profiles from the subsystem list by clicking the associated Profile hyperlink.
      iii. Enter Reason for Access, click Save-and-Continue
      iv. Request Confirmation page and Submit
      v. WAIT FOR RECEIPT OF APPROVAL FOR ACCESS EMAIL BEFORE PROCEEDING TO STEP 4. Obtain CHAMPS hyperlink in Single Sign On.
      vi. If you want to check on the approval process, go back into in DSA and select New Request, Request List from the menu bar.

4. Obtain CHAMPS Hyperlink in SSO
   a. After receiving your Approval for Access email, log into Single Sign On.
   b. Click Subscribe to Applications
      i. Select DCH – CHAMPS from the first dropdown list, then CHAMPS from the next dropdown list
      ii. Complete steps necessary and click Submit
      iii. Log into CHAMPS by clicking on the CHAMPS hyperlink in Single Sign On.

5. Complete User Registration for CHAMPS
6. Begin Using CHAMPS – Log in and select the Profile needed to begin

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Step 1: Single Sign On (SSO) Registration

If you have already registered for Single Sign On as a user for the Children’s Waiver or the Habilitation Supports Waiver, you can proceed directly to page 10, Step 2: Subscribe to Database Security Application (DSA).

If not, please complete the following steps to register for Single Sign On.

1. Open your web browser and enter the Single Sign On URL https://sso.state.mi.us/ in the address field. As an alternative, you can access CHAMPS through the www.michigan.gov website and click on the CHAMPS link.
2. Click Go.
3. At this welcome page, if you are a new user, Click Register.
1. Type your information into the appropriate fields. You must use your agency email address, not a personal email.

2. Click Continue
1. Choose a four digit number for a UserID. (If you want the computer to choose a random number for you, click in the circle next to “Yes” where it says “Please generate a random four digit number for me.”)
2. You will see a five digit number in a box outlined in blue.
3. Enter this number into the blank text box above the blue box.
4. Click Continue.
1. Verify your information is correct and then click Submit. (The information in this picture is just an example. You should see your own information in the fields.)

You will receive an email giving you a temporary password, which can only be used one-time to log into Single Sign On to finish creating your account.

Log back into Single Sign On at https://sso.state.mi.us/ with your UserID and the temporary password. Then you will be asked to create a permanent password and answer challenge questions. Please write down your answers to these challenge questions and keep them in a safe and secure place so you can retrieve your User ID and password later if you forget them. If you prefer, the answers to the challenge questions can have the same answer even if the questions are different.

The “Application Maintenance” screen should appear. Click Done.
Step 2: Subscribe for Database Security Application (DSA)

1. Click on Subscribe to Applications
1. In the first drop down select "Dept of Community health"
2. In the second drop down select "Database Security Application (DSA)"
3. Click Next.
1. Enter your Work Phone number.
2. Verify your email address is correct.
3. Click Continue.
Verify the information is correct.

1. Click Confirm
1. Click Close

You should receive an email when your request has been approved. When you receive the email, you can then proceed to the next step.
Step 3: Create a Request for Access to CHAMPS

After you have successfully subscribed to DSA, the next time you log on to Single Sign On, you should see the Database Security Application hyperlink on your Welcome page.

1. Click on the Database Security Application (DSA) hyperlink.

To complete the next few steps, please make sure your computer firewall and pop-up blockers are turned off. If you have questions about this, please contact your agency’s Information Technology help desk.
1. Put your cursor over the New Request selection at the top of the screen so it is highlighted to a darker blue color.

2. Move your mouse down until the Submit New Request choice is highlighted and click on it.

Note: If you have subscribed to the tutorial, you should be able to retrieve the training manual if you want to print off the instructions. To do this, click on Training.

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1. Click on Submit Request next to where it says “Access to the CHAMPS system”
Enter or select the appropriate information for each field. All fields must be completed before this form can be saved. Following are specific instructions for each field:

1. **User Name** – Enter user’s full name formatted as last name followed by first name with a comma separator and a space. No abbreviations (e.g., Smith, Jane). **NOTE:** Once a Request is submitted, User Name cannot be changed except by the DSA Administrator.

2. **Email Address** – Enter user’s official PIHP, CMH or provider email address.

3. **Area Code & Phone Number** – Enter user’s work phone number (e.g., 517-555-1234).

4. **Agency/Bureau** – Enter name of user’s agency, bureau, or company. For most people using this manual, this will be the PIHP or CMHSP you work for (or a provider agency under contract with a mental health agency).

5. **Immediate Supervisor** – Select Debra Ziegler as the Immediate Supervisor from the dropdown list.

6. **Division/Section** – Enter the name of user’s division or section.

7. **Domain** – Select DCH from the drop down menu.

8. Click Save and Continue

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Here is where you specify your profiles. Please pay close attention to the next few pages of instructions. If you submit the wrong profiles, the request will be rejected and you have to begin again. The default is VIEW ONLY. CMH users will only change profiles for three rows. All other subsystems should remain "VIEW ONLY".

1. Click on the Profile link in the Prior Authorization row
You will see a list of four choices on this screen. You will check only two boxes on this page, the top (1st) and bottom (4th) rows.

1. There should already be a check mark in the box next to the row that reads “I need VIEW ONLY access to Prior Authorization information.” Keep that box checked (green check mark in the box) (as indicated in the above screen shot by the arrow with the number 1 in it).

2. Click in the box next to the row that reads “I need access to all Prior Authorizations functions (create, modify, or approve PAs).” You should now see a green check mark in this box (as indicated in the above screen shot by the arrow with a number 2 in it).

**You should ONLY see checkmarks in the 1st and 4th boxes.** If you see checkmarks in the 2nd and 3rd boxes you must uncheck them; otherwise, we will need to reject your application.

3. Click Save-and-Return.
If you enter PAs for the Children’s Waiver (CW) program, please complete the steps on this page and the next page (pg. 21 and 22). If your duties require you to enter PAs for the Habilitation Supports Waiver (HS) only, complete the steps on pages 23 and 24. If you will enter PAs for both Children’s Waiver and Habilitation Supports Waiver, please complete the steps on pages 21-24.

1. Click on the Profile link next to the Prior Auth Org Units CMH – CW.
1. Click in the box next to each of the counties you need access to within your region (for instance, if your particular region has 3 counties, click the box next to each of those 3 counties). For example, if your CMH includes Clinton, Eaton, and Ingham Counties, you would have three boxes checked: I need access to Prior Authorization for Clinton CW; I need access to Prior Authorizations for Eaton CW; and I need access to Prior authorizations for Ingham CW.

2. Click Save-and-Return to go back to the previous page after you have made your selections to request access to all counties that you will enter PAs for if you are responsible for CW.
If you enter PAs for the Habilitation Supports Waiver program, please complete the steps on this page and the next page.

1. Click on the Profile link next to the Prior Auth Org Units CMH – HS.

If you only enter PAs for the Children’s Waiver Program, click on Save and Continue to skip ahead to the directions on page 25.
1. Click in the box next to each of the counties you need access to within your region.
Remember that for the HSW, the PIHP would be responsible for entering PAs. A PIHP region may be the same size as a CMH for a stand-alone PIHP or a larger affiliation of several CMHs. Be sure to select all the counties within your PIHP. For example, if your PIHP includes Benzie, Clinton, Eaton, Gratiot, Ingham, Ionia, Manistee, and Newaygo Counties, you would have eight boxes checked: I need access to Prior Authorization for Benzie HS; I need access to Prior Authorization for Clinton HS; etc.

2. Click Save-and-Return to go back to the previous page after you have made your selections to request access to all counties that you will enter PAs for if you are responsible for HS.

When you reach the screen on page 19, click on Save and Continue.
1. Make sure your profile information is correct as entered on the page. If you enter PAs for CWP, you should see each county in your CMH followed by CW. If you enter PAs for HSW, you should see each county in your PIHP. If you authorize for both CWP and HSW, each county should be listed twice.
1. In the Reason for Access text box, type: “I am a CMH user. I need to enter prior authorizations for PDN for the waiver programs.” Watch for typos, etc.

2. Click Save-and-Continue
1. After reading through the information, click in the box next to where it says “I agree to the rules specified above”. This box must be checked before you can save and submit.
2. Then click Save and Submit
This is your receipt page telling you your request is being processed. You should print this page for your records.

You will receive an email when the request has been approved or denied. Your email might look something like this if approved. You will need the Domain Name and Profiles later in the process.
Step 4: Obtain CHAMPS Hyperlink in SSO

1. Log into the State of Michigan Single Sign On system via https://sso.state.mi.us/ by typing in your User ID and Password into the appropriate fields
2. Click Login
1. Click **Subscribe to Applications**
You need to subscribe to CHAMPS to receive the hyperlink. You do this by:

1. Select DCH – CHAMPS from the first dropdown list
2. Select CHAMPS from the next dropdown list.
3. Click Next.
1. Type in your Work Phone in the text box (you will need to include dashes)
2. Verify your email is correct. If it does not show up in the box, type it in
3. Type in the Supervisor/Security Admin E-mail* address. (This is the name of your Agency Supervisor ; NOT Deb Ziegler)
4. Click the circle next to State User/Other under the CHAMPS User Type category. Please see the arrow numbered 4 in the picture above for clarification – the arrow is pointing to the correct choice.
5. Click Continue
1. Verify the information is correct, and Click Confirm.
**Step 5: Complete User Registration for CHAMPS**

You should have a copy of your Database Security Application confirmation email in front of you for the next steps. Note the Domain Name and the Profile indicated in the email.

1. After logging into Single Sign On, click on the link for CHAMPS.
1. Type in the **Employee ID** as 999999999 (there should be nine 9s)
2. Enter your **Office Phone Number** without dashes or slashes
3. Enter the **Supervisor Name**, which would be your supervisor at your agency
4. Enter the **Supervisor Phone**, which is your supervisor’s phone at your agency
5. In the box next to **User Type**, click the down arrow and choose “**Other**” as your user type
6. In the box next to **If Others**, type in **CMH User**. Note: If you receive an error message when you attempt to complete this step, please check with your IT support as it is probably a firewall issue at your agency.

(Continued on next page)
7. Click on the down arrow in the box next to Domain and click on the domain name indicated in the DSA confirmation email mentioned on the previous page. Your Domain should be DCH.

8. In the Work Location field, click on the down arrow and select “Other” from the menu.

9. You should see a list of Available Profiles. If not, click on the box below the Available Profiles title to bring up the list. Scroll down in the list until you find the profile indicated on the DSA confirmation email. Click on that profile to highlight it. Your profile should be PA Supervisor.

10. Click the right-pointing arrow to move it to the Selected Profiles column.

11. You should see your profile in the Selected Profiles column.
Scroll down the page until you see the “Security Details” section.

1. In the first box next to where it says “Provide detailed information describing how access to the requested profiles…” type your reason for needing access to CHAMPS, such as “I am a CMH user. I need to enter prior authorizations for PDN for the waiver programs.”
2. Read the Security Agreement in the next box (you can scroll up and down by clicking on the arrows)
3. Click inside the box next to “I accept and agree that I have read the security agreement and supplied correct information.”
4. Click the Submit button at the top of the screen.

You should then see a screen that indicates your CHAMPS subscription is in review. You should be notified via email when CHAMPS access has been confirmed.
Potential Problems With CHAMPS access
CHAMPS lockout due to inactivity.

Reason:
1) The CHAMPS system has a “90 days of inactivity” lockout protection. If the user has not been in the system in over 90 days, they will automatically be locked out.

2) The staff member is locked out for another reason.

Resolution:
The MDCH staff member must send an “unlock request” email to MDCHCHAMPSHelp@michigan.gov. If they are locked out for another reason, the Data Management staff will communicate that reason in their response. In the email, indicate that you are a CMH user for Prior Authorization, the name of the CMH you work for, the problem or issue, your username, and that you need to be unlocked.
Incorrect Registration for CHAMPS

**Reason:**
They have incorrectly registered for their CHAMPS link in SSO as a Provider/Billing Agent.

**Resolution:**
They must send an email to MDCHCHAMPSHelp@michigan.gov stating their name and SSO UserID and request that their Subscription to Application for CHAMPS is backed out.

Once DIT has responded that the Subscription to CHAMPS has been backed out, the user will then have the opportunity in SSO to ‘Subscribe to Application’ for CHAMPS. **In the email, indicate that you are a CMH user for Prior Authorization, the name of the CMH you work for, the problem or issue, your username, and that you need to be unlocked.**
SECTION 2:

ADDING A NEW PRIOR AUTHORIZATION
General Helpful Hints

How to maneuver through the fields
1. Hit the Tab key to move to the next field
2. Place cursor into field & left click

Use the door close icon at the top left of the screen to leave the CHAMPS system. Do not close the window via the “x” in the right corner of the screen because it will lock up the system.

If the screen locks up, you press F5 to refresh and click “retry” on the dialog box that will pop up.

Once you enter a comment, you cannot go back and edit it.

DO NOT PASS ON YOUR USER NAME AND PASSWORD TO OTHER PEOPLE. EACH USER WILL NEED THEIR OWN USER NAME AND PASSWORD TO AVOID FUTURE PROBLEMS!

If a CMH user no longer needs to access PA subsystem, the supervisor should notify the CHAMPS help desk via email and ask that the user’s access be terminated.

Contact info:
Joan Deschamps (for CWP info): 517-241-5754  deschampsj@michigan.gov
Heather Sturtz: (for HSW & CWP info): 517-335-6489  sturtzh@michigan.gov
Deb Ziegler (for HSW info): 517-241-3044  zieglerd@michigan.gov

SSO is a MDIT application. If the user is experiencing problems with their SSO username/password, they need to contact the DIT Help Desk for assistance. DIT Help Desk = 517-241-9700

Acronyms:
CWP or CW: Children’s Waiver Program
HCPCS: Healthcare Common Procedure Coding System
HSW or HS: Habilitation Supports Program
NPI: National Provider Identifier
PA: Prior Authorization
PDN: Private Duty Nursing

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Open your web browser and enter the Single Sign On URL https://sso.state.mi.us/ in the address field and click Go. This is the screen you’ll see next.

1. Enter your User ID and Password.
2. Click Login.
You will now be at the “WELCOME” screen. You may only be subscribed for the CHAMPS database, so don’t worry if your screen doesn’t include other applications like this example. “CHAMPS” is the application you’ll be working with.

1. Click the CHAMPS link
1. Click on the Select a Domain drop-down box and select DCH
2. Select a Profile. You will probably see only “PA Supervisor”; select it from the drop-down list if it’s not pre-filled.
3. Click Go
1. Click on the “PA” tab at the top of the screen to get to prior authorization subsystem.
This is the screen to start a new PA or modify an existing PA.

In this section, we will be creating a new PA.
1. Click on PA Request List link
You will now see a screen that looks like this, on which are listed all of the PAs you’ve created in CHAMPS as well as those you created in the old system that have been converted to CHAMPS.

**Remember:** you have access only to PAs created for the county and program you selected. In the example illustrated by this screen, the domain selected was “PA – CMH 001-Alcona CW”. Because there are no PDN PAs in the system for a CWP consumer in Alcona County, the screen looks like this. Note the remark in red: “No Records Found!” This message simply means the system does not find any prior authorizations for that county and program yet.

1. In the Filter By box, select Beneficiary ID from the drop-down menu.
2. Enter the Beneficiary ID (you would enter the 10-digit Medicaid ID – you may need to enter zeros before the number to make the number 10 digits).
3. Click Go. (You should see a list of PAs that have been created for that Beneficiary ID – if you do not see any PAs listed, that means no PAs have been entered for that beneficiary for previous months.)
4. Sort Service From Date from most recent (click on the tiny down arrow under the column title to sort by most recent entry)
5. Confirm there is no other auth for the month you are trying to input FOR THAT SAME PROVIDER by looking at the dates in the Service From Date column. There may be another PA for the month, but it should be a DIFFERENT provider (when the beneficiary has more than one agency or independent nurse during the month).
6. If there is already a prior authorization entered for the particular ID, month, and provider, make sure the status column says “Approved.” If the PA is there & approved, you do not need to enter another one for that same provider for that month. NOTE: If the status column for the row says “Requested”, this PA has not been finished yet. Until it shows “Approved” in the status column, the PDN provider will not be able to bill and be paid for services rendered during that month.

   a. To complete a PA that is already started, go into the PA by clicking on the tracking number, click next to get to the second screen of the PA where the line will display (it’s the page with the requested and approved quantities and amounts). Then go to page 60 of the manual and follow the instructions to finish the PA.

The next pages walk you through entering a brand new PA.
If you verified that the information you are trying to enter has not been entered yet, then

1. Click on Add New Request.
1. Click on the arrow to get the **Organization Unit** drop down menu.

You will see only those counties and programs in your profile. For example, if you work at CEI, you would have Clinton, Eaton, and Ingham counties displayed, followed by the program [Children’s Waiver (CW) or Habilitation Supports (HS)].

Example:
- 3123-PA-CMH019-Clinton CW
- 3127-PA-CMH023-Eaton CW
- 3137-PA-CMH033-Ingham CW
- 3039-PA-CMH019-Clinton HS
- 3043-PA-CMH023-Eaton HS
- 3053-PA-CMH033-Ingham HS

**NOTE:** If you have access to both the CWP and HSW, each county will be listed twice. Be sure to select the correct county and program combination.
Once you have selected the correct organization unit,

1. Click Next (at the bottom right of the screen).

This takes you to the first screen where you begin to enter information about the PA you want to create.
1. **Beneficiary ID#** - this must be the 10-digit Medicaid ID#. If you have an 8-digit number, put 2 zeros in front of the number. For example, ID # 12345678 must be entered as 0012345678.
Before entering the PA, you must check that the beneficiary has active Medicaid eligibility.

1. Click on the Verify Details button
2. Click on the child’s name to hyperlink to member demographic data. (The child’s name should appear blue in color.)
1. In the Show box at upper right of the page, select “eligibility history” from the drop-down list.
1. If the beneficiary has Medicaid, you should see a row with Eligibility Source of MA. Look to the far right columns under Start and End Dates. The month of service for PDN that you want to enter must be within the start and end dates for MA. So, for example, if you are entering a PA for February 2010, the MA start date is 1/1/2010 and the end date is 12/31/2999, the beneficiary has active Medicaid for February and you can proceed with instructions on the following page to enter the PA. If there is no MA row, stop here and check back daily until the MA eligibility is updated to CHAMPS. Sometimes a delay of a few days can occur between DHS enrollment in Medicaid and updating the CHAMPS system. If, in our example, the start date for MA was 1/1/2010 and the end date was 1/31/2010, you should not enter a PA for February because it is outside the eligibility period.

2. Click Close
1. Click **Close** in the upper left corner of the page
You are now ready to enter a new PA.

1. **Beneficiary ID#** - this must be the 10-digit Medicaid ID#. If you have an 8-digit number, put 2 zeros in front of the number. For example, ID # 12345678 must be entered as 0012345678.
   - If you already entered this in the previous step you do not need to enter it again as long as the number is correct.

2. **Requestor NPI** – this is a 10-digit number and must be the PDN provider’s NPI#; do not include spaces or dashes (-); do not use the PIHP/CMHSP’s NPI#. (Hint: Once you type in the correct NPI number, double click on the field to highlight the number, right click your mouse to “copy” and then you can “paste” the same number in on the next screen)

3. **Request Received Date** – use the date you create the authorization.

   *(continued on next page)*

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4. **Source of Request** – from the drop-down list, select *MP-Mail/Paper*. (Hint: if you click on “select” to highlight this field, you will get the drop-down list. You can also arrow down to get to “MP-Mail/Paper”.)

5. **Service From Date** – Enter the date (mm/dd/yyyy) that PDN services will start for that month, which will usually be the first of the month.

6. **Service To Date** – Enter the last date that PDN services will be authorized for that month. It should be the last date of the month unless the beneficiary will lose eligibility for PDN services before the end of the month. As an example, if a beneficiary will turn 21 during the month, state plan PDN can only be authorized until the day before their 21\textsuperscript{st} birthday. If a child enrolled in CWP will age off on his/her 18\textsuperscript{th} birthday, the end date for a CWP authorization would be the day before their birthday. Refer to Section 6 for details on how to complete prior authorizations for a beneficiary who has CWP for a partial month and then enrolls in HSW on his or her 18\textsuperscript{th} birthday.

   **NOTE:** the date format is mm/dd/yyyy. If you enter it incorrectly, you’ll get a dialog box prompting you to enter the correct format.

7. **Service Type** - from the drop-down list, select *Private Duty Nursing* (Hint: if you click on “select” to highlight this field, you can enter “P” in the field and then hit the down arrow to get to *Private Duty Nursing*)

8. **Place of Service** - from the drop-down list, select *12-Home*. This will always be the place of service code you use for PDN.

9. Click *Next*. 

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You should now see a screen like this (Note that the identifying information has been blocked out on this view of the screen, but when you look at your monitor, the following information will be displayed:

1. The tracking number will be filled in.
2. Check the consumer’s name to make sure you are prior authorizing services for the correct person.
3. Confirm the “service from” date is correct.
4. Confirm the “service to” date is correct.
Now that you’re on this screen, you need to re-enter the Servicing Provider NPI, as well as some new data.

1. **Servicing Prov NPI** – this is the same as the Requestor NPI you entered before; it is the PDN provider’s 10-digit NPI#. (NOTE: the screen is updated to show the name of the PDN Provider after you enter the NPI# and move to the next field.) (Hint: If you copied the NPI # on the previous screen, you can “paste” it into this field and avoid re-typing it).

2. **Code Qualifier** – for PDN, this will always be “P-HCPCS Procedure Code”. (Hint: if you click on “select” to highlight the field, you can type “P” and the entire phrase fills in. NOTE: There is a slight delay when you click on this field as the screen refreshes)

3. **Code** - enter the HCPCS code for PDN. This will always be **S9123** or **S9124**. For an independent nurse, you MUST enter the code that corresponds to his or her license or it will cause problems with payments. If the independent nurse is an RN, the code is S9123. If the independent nurse is an LPN, the code is S9124. For a PDN agency, you will always authorize PDN under the code S9123. When billing PDN, the agency will bill under the code appropriate to the nurse’s license.

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4. **Proc From Date** and **Proc To Date** should auto-fill. (These dates are the same as the **Service From Date** and the **Service To Date**.)

5. **Line Status** should auto-fill as “Requested”; leave this as is for this step.

6. **Quantity And Amount** – Under the “Requested” column, enter the number of units you want to authorize in the **Quantity/Units** field. Since October 1, 2004, PDN has been billed and paid in 15-minute increments. **There will be a change to one-hour increments** effective October 1, 2010. This change will bring MDCH into compliance with the appropriate codes that must be used for private duty nursing billing under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
   a. **For months of service prior to October 1, 2010, units should be in 15 minute increments.** For example, if the person receives 8 hours of PDN per day, the authorized amount for a 30-day month would be 8 hours X 30 days X 4 units per hour for a total of 768 units. Next type “0” (zero) in the **$ Amount** field. (When you leave this field, the amount will display as “$0.00”)
   
   b. **Effective October 1, 2010, units should be in 1-hour increments. For any PDN prior authorizations for October 2010 and all months thereafter, units should be in 1-hour increments.** For example, if the person receives 8 hours of PDN per day, the authorized amount for a 30-day month would be 8 hours X 30 days for a total of 240 units. Next type “0” (zero) in the **$ Amount** field. (When you leave this field, the amount will display as “$0.00”)

7. Click **Add**.
Now you will see one line of information towards the bottom of the screen.

1. Click on the box to the left of the line.
2. Click Approve.
You will see a screen like this. Reqst Units and Reqst$Amount are auto-filled with what you entered previously.

1. Enter Auth Units (should match the Reqst Unit)
2. Enter 0 (zero) in the Auth $ Amount
3. Click Ok.

This will approve the line only. You will need to authorize the entire PA in a later step. If you stop here and do not authorize the entire PA, it will remain in “Requested” status and the provider will not receive payments if they try to bill against the tracking number.

Version 2 (Updated 08/2010)
This will take you back to the approval screen.

Note: The status of the line is “approved.” If it says approved, proceed to the next page in this manual.

** If it does not say “approved,” you need to go back to page 63 and try again.
Now that you have approved the line, this is the step to approve the entire PA. You must follow these instructions in the order presented to complete the approval of the PA.

1. **Change Line Status** to “Approved” in the drop-down box.
2. **Change the Auth Status** to “Approved” in the drop-down box.
3. The **Decision Maker** field should be auto-filled with your name.
   a. If there is no name in the field, click the arrow to find your name in the drop-down box and select.
   b. If your name does not appear in the drop-down box, there is a problem with the role you have been assigned. In this situation, use Deb Ziegler as Decision Maker temporarily to finish your PA. You must then contact the MDCH CHAMPS Help Desk. Send an email to MDCHCHAMPTSHelp@michigan.gov. Include the following message: I am a CMH user on the PA subsystem for CHAMPS. My user ID is _______ and I am trying to enter a PA for ___________ (name of the county) for the __________ (Children’s Waiver or Habilitation Supports Waiver). My name is not appearing on the drop down list of Decision Makers. Please advise. Thank you.
4. Enter an **Auth Status Comment**. It can be something as simple as “approved.” You just need to have something in the field to move beyond this screen. You cannot go back and edit a comment once it has been saved so be careful of wording and typos.
5. **Click Next**.

Version 2 (Updated 08/2010)
Almost done!

1. Before proceeding, make note of the Tracking No. (CHAMPS’ terminology for PA number), as you will need this for your authorization letter.
2. Click Finish to complete the authorization
If your PA was entered correctly, you should see “Approved” in the status column. You should see only one PA for the beneficiary for the provider for the month. The one exception to this rule is when you are splitting a PA between CWP and HSW when the individual ages off of CWP and transfers to HSW during that month.

If you see “Error” in the status column, click on the number in the “Tracking No.” column to go into that PA and view the error message. Some commonly seen errors are discussed in Section 5.

If you see “Requested” in the status column, this means the PA did not get completed. Click on the number in the “Tracking No.” column to go into that PA, click “Next” to get to the screen with the line displayed and go back to page 63 to try to complete the PA.

Version 2 (Updated 08/2010)
CHAMPS will automatically take you back to your list of authorizations

Congratulations! You have completed your PA. Now you can either prepare the authorization letter (from your template) or get ready to do another authorization

Hint: If you didn’t make note of the Tracking No. or if you want a summary of the authorization you’ve just completed,

1. Click on the icon in the Page View column to the left of the line you’ve just approved. You can see a sample of the page view summary on the next page.

If you are ready to do the authorization letter, go to Section 3: Preparing the PA letter, in this manual.

2. If you are entering another PA, Click Add New Request and go back to page 58 of this manual.

Version 2 (Updated 08/2010)
Page Views look like this:

You can print screen shots of each authorization and produce the letters later using the information from these printed screens.
SECTION 3:
CREATING THE PRIOR AUTHORIZATION LETTER
How to complete the authorization letter

NOTE: CMH users issuing prior authorization letters are asked NOT to use the PDN authorization correspondence template in CHAMPS at this time. Please use the letter templates included in this manual on the following pages until you receive different instructions from DCH. When the CMH templates are available through CHAMPS, a manual update will be issued and CMH users will be advised via an email notification.

If you would like an electronic version of the letter templates, please email Heather Sturtz at sturtzh@michigan.gov. Information that must be filled in manually by the CMH user is denoted inside brackets and grey highlight, e.g., <NAME OF ENROLLED PROVIDER>. You must complete each of those sections since nothing will auto-complete from CHAMPS into these letters.

Please issue letters on your agency’s letterhead and retain a copy of the final letter in the individual’s file.

There are two letter templates. The first is used when one nurse delivers private duty nursing services to one child. The other is if the ratio of nurse to children is 1:2. Both letters can be used for either Children’s Waiver or Habilitation Supports Waiver and unlike the old letters, there is no need to send different letters to agencies and independent nurses.
Letter for PDN with 1 Nurse to 1 Child

<DATE>

<NAME OF ENROLLED PDN PROVIDER>
<ADDRESS OF ENROLLED PDN PROVIDER>

Re: <BENE NAME>
ID: <BENE ID>

NOTICE OF AUTHORIZATION

<NAME OF PIHP/CMHSP> has approved Private Duty Nursing for <BENE NAME>, who is enrolled in the <CHILDREN’S WAIVER PROGRAM OR HABILITATION SUPPORTS WAIVER PROGRAM> as indicated below.

While this letter constitutes “prior approval” for Private Duty Nursing services, payment for services is contingent upon <BENE NAME> being Medicaid eligible for the month in which the services are provided. It is your responsibility to verify Medicaid eligibility at the beginning of each month and to advise the Community Mental Health Agency of any change in Medicaid. (Note: you must use the Eligibility Verification System to verify Medicaid eligibility; program staff will not verify eligibility for you.) It is also your responsibility to determine if a private third-party insurer covers services, to adhere to all requirements of that insurer and to bill them for covered services prior to billing Medicaid.

PDN services are authorized as follows:

Begin Date: <MM/DD/YYYY>
End Date: <MM/DD/YYYY>
PDN service authorized for this time period: RN/LPN – up to <units>
Prior Authorization Tracking Number: <TRACKING NUMBER>

The number of units provided and billed may not exceed the above-authorized level of service. Services should be arranged to meet the needs of the consumer and his/her family. Payments made represent payment in full; you are not allowed to bill the consumer any additional charges for services provided.

All services and billing practices are subject to the policies described in the Michigan Medicaid Provider Manual available online at www.michigan.gov/mdch.

If there are any questions regarding this letter, please contact <NAME AND TELEPHONE NUMBER>.

Sincerely,

<NAME OF PERSON ISSUING AUTHORIZATION LETTER>

Version 2 (Updated 08/2010)
Letter for PDN with 1 Nurse to 2 Children

<DATE>

<NAME OF ENROLLED PDN PROVIDER>  
<ADDRESS OF ENROLLED PDN PROVIDER>

Re: <BENE NAME>  
ID: <BENE ID>

NOTICE OF AUTHORIZATION

<NAME OF PIHP/CMHSP> has approved Private Duty Nursing for <BENE NAME>, who is enrolled in the <CHILDREN’S WAIVER PROGRAM OR HABILITATION SUPPORTS WAIVER PROGRAM> as indicated below.

While this letter constitutes “prior approval” for Private Duty Nursing services, payment for services is contingent upon <BENE NAME> being Medicaid eligible for the month in which the services are provided. It is your responsibility to verify Medicaid eligibility at the beginning of each month and to advise the Community Mental Health Agency of any change in Medicaid. (Note: you must use the Eligibility Verification System to verify Medicaid eligibility; program staff will not verify eligibility for you.) It is also your responsibility to determine if a private third-party insurer covers services, to adhere to all requirements of that insurer and to bill them for covered services prior to billing Medicaid.

PDN services are authorized as follows:

Begin Date: <MM/DD/YYYY>  
End Date: <MM/DD/YYYY>

PDN service authorized for this time period: RN/LPN – up to <units>

Prior Authorization Tracking Number: <TRACKING NUMBER>

This authorization is for 1 nurse to 2 consumers. The detailed ‘service log’ must indicate shifts or portions of shifts when nursing is provided 1:1 vs. 1:2. The number of units provided and billed may not exceed the above-authorized level of service. Services should be arranged to meet the needs of the consumer and his/her family. Payments made represent payment in full; you are not allowed to bill the consumer any additional charges for services provided.

All services and billing practices are subject to the policies described in the Michigan Medicaid Provider Manual available online at www.michigan.gov/mdch.

If there are any questions regarding this letter, please contact <NAME AND TELEPHONE NUMBER>.

Sincerely,

<NAME OF PERSON ISSUING AUTHORIZATION LETTER>

Version 2 (Updated 08/2010)
SECTION 4:

CHANGING AN EXISTING PRIOR AUTHORIZATION
To change a PA that is already in the system,

Log in through single sign-on. Click on the CHAMPS link.

1. Choose DCH from the drop down menu for Select a Domain box.
2. Choose “PA Supervisor” from the drop down box in the Select a Profile field.
3. Click Go.
1. Select PA tab at top of the screen.
1. Click on **PA Request List**
You should now see a screen with a list of all of the PAs you have created.

There are several different ways to find the record you want to modify.

1. In the Filter By box, choose the information you want to search by. For example, if you know the beneficiary ID, select that field from the drop-down menu. If you know the Tracking Number (previously known as the prior authorization number), select that one.

2. Enter the information for your search choice in this field. For example, if you had selected beneficiary ID, you would enter the 10-digit Medicaid ID here. If you had the tracking number, you’d enter the tracking number into the field instead.

3. Click Go.
If you selected the tracking number, you’ll only get one result back. Your screen will look like this.

1. Click on the tracking number link to take you into the record. (Click on the actual tracking number.)

**NOTE:** If you selected another parameter like Medicaid ID number, you may have to sort further to figure out which PA you want to modify. The easiest way is to know the Service From Date (meaning the first date of the month you were authorizing and now want to change). You can sort by clicking the down arrow in the column title. Be careful if you have more than one provider for the same month. If so, you need to know the NPI number for the provider too.
You will now be on the screen with beneficiary information

Double check that this is the correct beneficiary, provider, and month of service.

1. Click Next
The screen you will see has the information you had previously entered when you did your initial prior authorization.

1. Click on the “1” in the Line # field
This will take you to the Line Detail screen.

1. To change the number of units, move your cursor into the Requested column, Quantity/Units row. Make the necessary change.
2. Move your cursor into the Authorized column, Quantity/Units row. Make the necessary change so the two boxes have matching values.
3. Click OK.

NOTE: If the $ Amount is not $0.00, you will need to change this also by putting the cursor into the appropriate fields and changing the $ Amount so the two values match. The $ Amount should always be $0.00.
You will be taken back to the screen that looks like this.

1. Change Line Status to Approved.
2. Change Auth Status to Approved
   NOTE: The Auth Status may already say “Approved.” If so, you need to change it by selecting the blank option and then going back and reselecting “Approved”
3. The Auth Status Comments text box should appear. Type in a comment indicating your reason for changing the PA (for example, “Changed unit amount from ___ units to ___ units because….state the reason, such as prolonged absence from school due to illness caused increase in units).

NOTE: These three steps must be done in this order or else the information will not enter properly.

Version 2 (Updated 08/2010)
This is the screen you will see.

1. If the changes you made have been done correctly, you should see “Approved” in the Line Status and Auth Status boxes and the revised amount you entered should be in Req Units and Auth Units on the line.
2. If this is all correct, click Next.
1. Click Finish.

Note: You will need to reissue your PA letter to the provider with the revised authorized quantity of PDN units for the month (see Section 3)
SECTION 5:

COMMON ERROR MESSAGES
**Error #1: Duplicate PA**

You may get an error message suggesting you have a “Duplicate PA.” This is when the database thinks more than one PA has been entered for an individual. This could be due to trying to create more than one PA for the same provider in the same month for the same beneficiary. However, there is a “bug” in the CHAMPS system currently that misinterprets when a beneficiary has another PA in the system for the same month for a DIFFERENT provider. Until it gets fixed, there is a work-around.

1. Copy the **Beneficiary ID** number so you can go back to check whether a duplicate PA is on file.
2. Click **Close**
3. Click **Cancel** on the other screen that appears (the button on the bottom right hand side)
4. Click **Ok**
Steps to find a duplicate PA:

1. Filter by Beneficiary ID
2. Type (or paste if you copied from the previous screen) the Beneficiary ID into the box
3. Hit Go
4. Sort Service From Date from most recent (click on the tiny down arrow under the column title
5. Confirm there is no other auth for the month you are trying to input FOR THAT SAME PROVIDER. There may be another PA for the month, but it should be a DIFFERENT provider (when the beneficiary has more than one agency or independent nurse during the month).
6. There should be “error” under the status column
7. Click on the tracking number link to take you back into that PA.

**Note:** In the event you have multiple providers, you will be likely to receive a “Duplicate PA” error message. Once you have confirmed that this is not a true duplicate PA (i.e., a duplicate is when a second PA is entered for the SAME beneficiary for the SAME provider NPI# for the SAME month), you can force the PA by following the steps on the next 5 pages.

Version 2 (Updated 08/2010)
Verify dates are correct so you know you are in the correct PA.
1. Click Next
1. Change Line Status to Approved
2. Change Auth Status to Approved
1. An Auth Status Comments box should appear. Enter a comment that you checked for a duplicate PA, that you found none, and that you are forcing the PA.
2. Click Next
1. Click in the white box to the left of the line
2. Click Force
You should see this screen.

1. Click Finish. This should complete the PA and you can proceed with creating the PA Letter.
Error #2: Error while loading PAs
Should you see this screen, don’t panic. Sometimes, the system just locks up. Just close out and follow instructions on the following pages.

1. Click Close
1. Filter by Beneficiary ID
2. Type Beneficiary ID number in the box
3. Click Go
You should see this screen. Note: Status should now show as “approved”

You can now complete the PA letter (see Section 3).
Error #3: Invalid NPI
If you see this error, it means the NPI number you entered is not registered through CHAMPS to provide PDN services.

Step One: Check to make sure the number was not incorrectly entered.

Step Two: Call the provider to get the correct NPI number that they registered in CHAMPS to provide PDN services. One of the problems has been that the providers are giving their legacy provider number and not their CHAMPS number. The old legacy number will not work in the CHAMPS system.

Also, make sure the provider is up-to-date in terms of certification. This could be a reason for this error message as well.

Note: You cannot complete the PA in the CHAMPS system until you have a valid NPI# for the provider. That means the provider will not be paid for PDN services until the PA has been entered successfully (with an “Approved” status).
SECTION 6:

SPECIAL SITUATIONS:

PERSON AGING OFF CHILDREN’S WAIVER MID-MONTH

NEW BENEFICIARY WITHOUT ACTIVE MEDICAID YET
Special Situation #1

Splitting PA between CWP and HSW due to aging off children’s waiver during the month.

In this example, the child will turn 18 on 12/18/2009 and age off CWP, with an effective enrollment date into the HSW on 12/18/2009.

**NOTE:** The PA created under the CW Organizational Unit will have Service From Date of 12/01/2009 and a Service To Date of 12/17/2009.

Complete the PA following the steps outlined in Section 2 to Add a New PA. This will create a PA that authorizes the portion of the month the child will be in the CWP. You next will need to create a second PA for the remainder of the month under HS Organizational Unit.
Begin a new PA following steps outlined in Add a New PA section.

1. At this screen, select the org unit for the county and HS as the extension.
2. Click Next
Complete this screen following the steps outlined in Section 2: Add a New PA.

**NOTE:** In this example, the Service From Date is 12/18/2009 to indicate the first day this person is enrolled in HSW and eligible for PDN and the Service To Date is 12/31/2009 indicating the end of the month. The next full month, January 2010, would be completed for the full month (01/01/2010 to 01/31/2010) under the HS organizational unit.

1. Click **Next**
Follow the instructions outlined in Section 2 to complete the PA.

1. You must include a comment in the Auth Status Comments box explaining why this auth covers a partial month.
Special Situation #2
Person under 21, newly eligible for Medicaid and receiving private duty nursing.

You may see this if the person has a Medicaid ID, but eligibility is not yet active. You will need to check back in a day or so to see if the number has become active. Do not enter a PA until you see a row for MA with the start and end dates to cover the month for which you will authorize services.

On the following page, you can see the in the example that there will now be a row for MA eligibility.

Version 2 (Updated 08/2010)
The screen will appear something like this once the person has active Medicaid, as denoted by the row under “Eligibility Source” = MA. Note: the start and end dates should encompass the month you are authorizing services.