“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
Agenda

- What is DMP?
- How to Access DMP
- Search Documents
- Upload Documents
- CHAMPS New Claim Submission
- CHAMPS Claim Adjustment
- Submit Fax
- Messages
- CHAMPS Icons
What is DMP?
What is DMP?

- The Document Management Portal (DMP) provides a browser-based interface to perform various tasks pertaining to submission of documents to Michigan Medicaid.
- DMP has replaced EZ Link for submitting documentation.
- DMP is authenticated via MILogin.
What is DMP? (Cont.)

• By directly accessing the DMP, providers can submit Medicaid documents that may or may not be related to a TCN.

• Users accessing the DMP will be able to:
  • Submit supporting documents
  • Submit documents for authorization and approval
  • Upload supporting documentation for Predictive Modeling
  • Upload Skilled Nursing Facility (SNF) documents
    • COMING SOON - Details will be posted when available
  • Send and receive messages pertaining to submitted documents
  • View documents and associated correspondence history
What is DMP? (Cont.)

- Directly upload documents
- Create cover sheets and fax documents
- Search existing uploaded documents
- View document notifications within CHAMPS
- Have messaging capabilities
- Receive notifications when documents are approved
How to Access DMP
Phase I
Access Points

- CHAMPS Provider Portal
- CHAMPS Direct Data Entry
- CHAMPS Manage/Adjust Claim
Click on DOCUMENT Management Portal in the External Links Drop Down.

DMP will launch in a new window. It is possible to work within DMP and CHAMPS simultaneously. DMP remains open until closed. To close DMP you will click the red X in the corner to return to Champs.
DMP will open a new window when Document Management Portal is selected. Tabs located at the top of the page are used to navigate features within DMP.
Search Documents
When DMP is launched, the NPI is prepopulated. Search for documents by entering different data in the search fields. If no date is entered, then the last 500 documents in history will display. All displayed documents will then appear at the bottom of the page.

*Tip: Search by Beneficiary ID*
There are 2 options for Document Type: Consents or Claims.
When Consents are selected, there are two selections available for Document Title:
- Hysterectomy Form
- Voluntary Sterilization Form
When searching by TCN, the Header TCN must be entered (must end in 000).

All search filters MUST match documents in history or search will not yield any results.
- Example above searched by BENE ID.
- Search results will be listed at the bottom of the screen in sortable fields.
- Click on the Document Title hyperlink to bring up document.
- Click VIEW Message Icon to see messages associated with the document.
- Click SEND Message Icon to send a message regarding this document.
Searching by STATUS displays the status of the document: Approved, Hold, Rejected, or Review/Process.
The status of a CONSENT can be viewed by searching Beneficiary ID and Document Type = CONSENTS.

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Document Type</th>
<th>TCN</th>
<th>NPI</th>
<th>Beneficiary ID</th>
<th>Date Of Service From</th>
<th>Loaded On</th>
<th>Status</th>
<th>View Message</th>
<th>Send Message</th>
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<tbody>
<tr>
<td>Hysterectomy Form</td>
<td>Consents</td>
<td></td>
<td></td>
<td></td>
<td>01/30/2013</td>
<td>2013-12-05 11:08:04 AM</td>
<td>Review/Process</td>
<td></td>
<td></td>
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<td>Hysterectomy Form</td>
<td>Consents</td>
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<td></td>
<td></td>
<td>02/14/2013</td>
<td>2013-12-04 09:18:50 AM</td>
<td>Review/Process</td>
<td></td>
<td></td>
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<td>Consents</td>
<td></td>
<td></td>
<td></td>
<td>12/25/2012</td>
<td>2013-12-04 08:35:20 AM</td>
<td>Review/Process</td>
<td></td>
<td></td>
</tr>
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<td>Hysterectomy Form</td>
<td>Consents</td>
<td></td>
<td></td>
<td></td>
<td>06/02/2013</td>
<td>2013-12-03 02:03:18 PM</td>
<td>Review/Process</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hysterectomy Form</td>
<td>Consents</td>
<td></td>
<td></td>
<td></td>
<td>01/01/2012</td>
<td>2013-11-26 09:11:38 AM</td>
<td>Review/Process</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Upload Documents

* A maximum of 5 attachments per upload
* A maximum of 10MB per attachment
- Select Document Upload from top menu bar.
- Guidelines for uploading documents are highlighted.
- Enter required information that is marked with an asterisk (*).
- Documents can be shared across 5 different NPIs.
The example above shows five documents are selected to upload.
Options can be changed within each line.
Document Type and Title may be used to search documents once uploaded.
Once the document is uploaded under a TCN, it will automatically be attached to the TCN and Beneficiary ID.
Upload Documents

- Only TCNs that are listed in CHAMPS as IN PROCESS or SUSPENDED are eligible to attach a document within DMP.
- If there is not an IN PROCESS or SUSPENDED TCN, it is still possible to upload documents to a Beneficiary ID.
- To connect an electronic claim with documentation submitted through the DMP when the TCN is unknown, the following notation must be included in the Claim Note:

  *Documents sent via DMP*
  (loop 2300 NTE segment)
After all information is entered, CLICK BROWSE.
A file upload box will launch.
Select the location where the file is stored on your computer and click on file. The selected file will populate within the FILENAME box. Once file is selected, click OPEN.
And SUBMIT.
Once the document is submitted, the DMP screen will flash.

Upload successful pop-up will display. You will see in the pop up that all uploads will receive their own identifying number once uploaded successfully.

Upload is complete. Click OK.
CHAMPS New Claim Submission
After completing a claim in CHAMPS via direct data entry (DDE), click SUBMIT CLAIM and a pop-up box will display. The pop-up box now contains a new link that states UPLOAD DOCUMENT. Click the UPLOAD DOCUMENT button to launch the DMP portal.
The DMP will launch in a separate window and information from the claim is prepopulated.

Changes can be made and messages can be added.

Documents can only be updated to a TCN that is IN PROCESS or SUSPENDED.

Follow previous Document Upload instructions.
CHAMPS Claim Adjustment
● From Claims tab, within Manage Claims, select Adjust/Void Claim Provider

● Enter Header TCN to be adjusted
Make any and all changes to the claim that are necessary.

CLICK SAVE. The new TCN will appear at the top of the page.

Please note the new TCN.

CLICK SAVE for the DMP to attach to the correct TCN.
- Click Upload/View documents button to add a document.
- The DMP will launch in a separate window.
• Information from the claim in CHAMPS will be prepopulated in DMP.
• Verify the information is correct, and complete remaining fields.
• Follow previous Document Upload instructions.
Submit Fax
Submit Fax

- A new FAX cover sheet must be created for each document submission.
- Re-using the same fax cover sheet will result in the documents not being received and the possibility of a claim(s) being rejected.
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.
- Select FAX COVER SHEET from top of DMP page.
Complete all information regarding the documentation and CLICK SUBMIT.

Note – if no fax coversheet launches as a pdf, then:

- **IE users**: Check your IE compatibility settings
- **Google Chrome**: Check your taskbar at bottom of screen for pdf – double click to open
- **Firefox**: Check your downloads folder for pdf of your coversheet
- A FAX COVER sheet will launch in a new window.

- A NEW cover sheet must be created for each document submission to DMP.

- A BARCODE is created and used to store the PHI within previous screen.

- Print out FAX cover and attach to documents.

- Send Fax to appropriate number listed on the cover sheet.

- Add note to claim: **Documents sent via DMP** (Loop 2300 NTE segment)

- Allow 1 business day for document to be attached.
Messages/Messaging Function

- DMP currently has messaging capability.
- These messages will be attached within the submitted document within DMP.
- DMP messaging will only be used by the processor after initial documentation has been received.
- EMAIL notification when a new message is generated within the DMP message box.
  - The email notification will be sent to the email address that is attached to the MILogin user.
  - Please add our email address to your address book so the email does not delete the notification or add to SPAM or JUNK mail.
Beginning July 22, 2016, the messaging function within DMP will be available for claims suspending for Predictive Modeling.

The messaging function is only utilized for medical documentation submitted via DMP or FAX. It is not available for documentation submitted via mail.

This messaging function will allow providers and MDHHS staff the ability to communicate when it is determined that certain documentation is missing or not legible after an initial review of submitted documentation has been completed. This messaging function does not replace the initial documentation request letter that providers receive when the claim initially suspends for Predictive Modeling.
MDHHS will send a message to the provider indicating which document(s) is needed and the provider will have **10 business days** to upload additional requested documentation and respond back to MDHHS via DMP messaging. If the documentation is too large to upload via DMP or FAX, please reply via messaging that the documentation will be sent via mail.

If you believe the documentation requested via the MDHHS message request is already within your original submission, respond via messaging within **10 business days** specifying the location of this documentation. Please include the unique identifier of where the requested documentation is located to expedite the review of your claim.
<table>
<thead>
<tr>
<th>Received On</th>
<th>Beneficiary Id</th>
<th>To</th>
<th>From</th>
<th>Subject</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-12-18 02:35:30 PM</td>
<td>9879384753</td>
<td>uatsg1u9999</td>
<td></td>
<td>Requisition Status</td>
<td>Read</td>
</tr>
<tr>
<td>2013-12-18 02:34:42 PM</td>
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<td>Requisition Status</td>
<td>Read</td>
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<td>2013-12-16 03:11:37 PM</td>
<td>9347958794</td>
<td>uatsg1u9999</td>
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<td>2013-12-16 02:57:33 PM</td>
<td>7453242423</td>
<td>uatsg1u9999</td>
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<td>Requisition Status</td>
<td>Read</td>
</tr>
<tr>
<td>2013-12-09 11:42:48 AM</td>
<td>6457364565</td>
<td>uatsg1u9999</td>
<td></td>
<td>Test</td>
<td>Read</td>
</tr>
<tr>
<td>2013-12-09 09:08:12 AM</td>
<td>6457364565</td>
<td>uatsg1u9999</td>
<td></td>
<td>Test</td>
<td>Read</td>
</tr>
</tbody>
</table>

Showing 11 to 20 of 21 entries
MESSAGE notations are viewable here.
Once in the message, there are options to Reply to sender and View Documents associated with the message.
Clicking OK returns to the Messages Screen. There is a 250 character limit per message.
The claims processor may send you a message if there are questions regarding your claim or submitted documentation, or if medical documentation is missing.
CHAMPS Icons
• Icons display in CHAMPS if there are documents or messages attached to the TCN. The note icon displays if documents are attached to the TCN.

• The envelope icon indicates if there are messages related to the TCN.
• To see the attached documents/messages, you must the CLICK Upload/View Documents button.
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 or 1-800-292-2550

Thank you for participating in the Michigan Medicaid Program