CHAMPS
Provider Enrollment: Billing Agent Modification

MDHHS

Michigan Department of Health & Human Services

"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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Modification Overview

- A modification is submitted in CHAMPS when enrollment information needs to be updated or changed.

- Before submitting a modification, all steps with a status of required must show as complete. A modification will not be able to be submitted with incomplete steps.

- Billing Agents wishing to elect another person to have Domain Administrator rights are required to submit:
  - Electronic Signature Agreement Cover Sheet (MDHHS-5405)
    - Include the CHAMPS 7-digit Provider ID (instead of NPI)
    - Other field: Indicate you need Domain Admin access for the billing agent enrollment
  - Electronic Signature Agreement (DCH-1401)
    - Include the CHAMPS 7-digit Provider ID (instead of NPI)

Billing Agent Modification Instructions

Step 1: Provider Basic Information

Step 2: Mode of Claim Submission/EDI Exchange

Step 3: Provider Controlling Interest/Ownership Details

Step 5: Complete Modification Checklist

Step 7: Submit Modification Request for Review

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Register for 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.

- Click Log In.

MiLogin for Business   Help   Contact Us

Michigan's one-stop login solution for business

MiLogin connects you to all State of Michigan business services through one single user ID. Whether you want to renew your business license or request an inspection, you can use your MiLogin for Business user ID to log in to Michigan government services.

Welcome to
MiLogin
for Business

User ID

Lookup your user ID

Password

Forgot your password?

Log In

Create an Account

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Register for MiLogin and CHAMPS

- Users will be directed to the MiLogin Welcome Page.

- Click the CHAMPS hyperlink.

Register for MiLogin and CHAMPS

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

- Click Launch service.

Register for MiLogin and CHAMPS

- Select the Billing Agent Provider ID from the Domain dropdown.

- Select the Billing Agent Access from the Select Profile dropdown.

- Click Go.
  - Please Note: If there are no Domain or Profile options to select from reference Domain Administrator Functions >> Adding Users/Assigning Profiles.
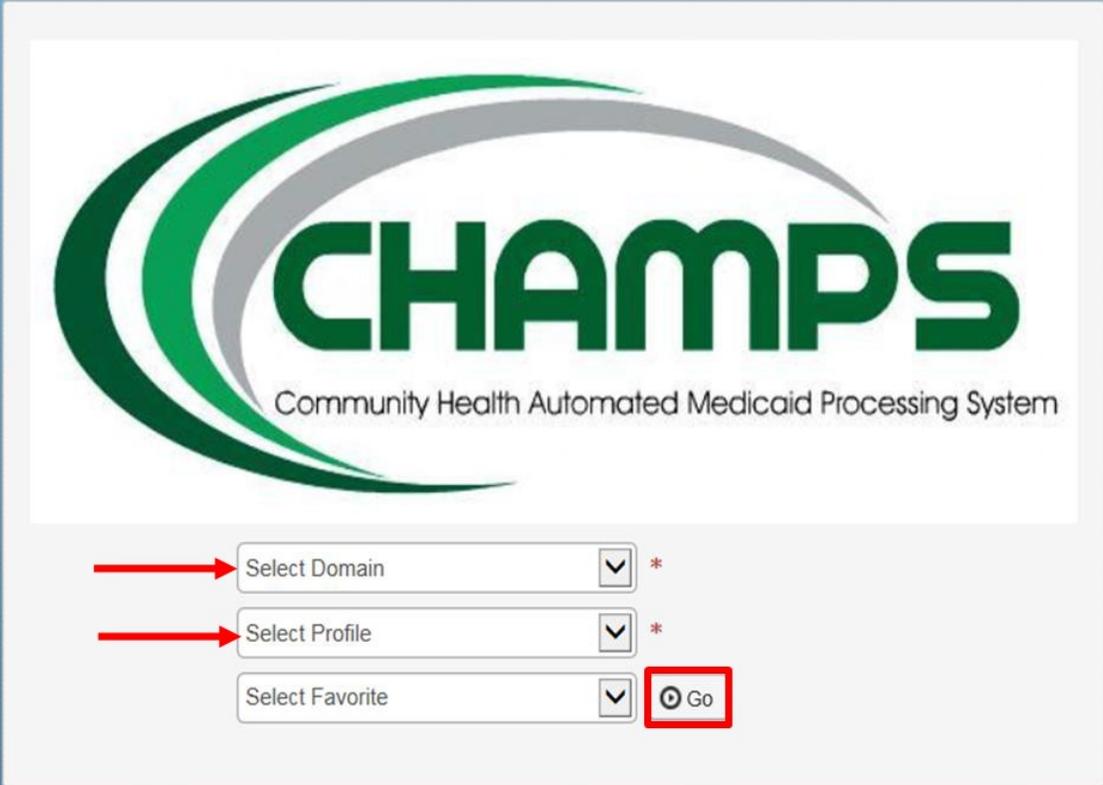
Billing Agent Modification

- Click the Provider Tab.

- Select the Manage Provider Information.

Billing Agent Modification

- Billing Agent enrollment steps are listed, this page is also referred to as the Business Process Wizard.
  - Note: some steps are required versus optional.

- Click any of the step hyperlinks to make updates to the information within the step.

- Before submitting the modification for State review all required steps with a status of Incomplete will need to be completed.

Step 1 Provider Basic Information

Make updates to Claim Submission Type, Contact Information, and Billing Agent Address details

After completing this step, if no other updates are needed continue to [Step 5: Complete Modification Checklist](#) and [Step 7: Submit Modification Request for Review](#).

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Step 1: Provider Basic Information

- Click on Step 1: Provider Basic Information to update the Claim Submission Type, Contact Information, and Address details.

Step 1: Provider Basic Information

- Make updates to information as needed. Required information is indicated with an asterisk (*).
  - Note: If the billing agent address needs to be updated, do not change the end date of the current listed address. Make updates to the address that is currently listed, and click validate address.

- Once changes have been made, click Ok.

Step 1: Provider Basic Information

- Step 1 will show a modification status of Updated as changes were made within the step.

- After completing Step 1, if no other updates are needed continue to Step 5: Complete Modification Checklist and Step 7: Submit Modification Request for Review.

Step 2: Mode of Claim Submission/ EDI Exchange

Make updates to the method or connection in how files are submitted to CHAMPS.

After completing this step, if no other updates are needed continue to [Step 5: Complete Modification Checklist](#) and [Step 7: Submit Modification Request for Review](#).

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Step 2: Mode of Claim Submission/EDI Exchange

- Click on Step 2: Mode of Claim Submission/EDI Exchange
  - Allows billing agents to add or end date modes or methods of submitting electronic files to Michigan Medicaid.

Step 2: Mode of Claim Submission/EDI Exchange

- The mode(s) of claim submission will be displayed. Previous modes are also listed but have an end date as they are no longer applicable.

- To add or remove a mode of claim submission click on the mode of submissions hyperlink.

Step 2: Mode of Claim Submission/EDI Exchange

- To remove a mode(s) of claim submission click the check box next to the method of submission.
  - Multiple methods can be updated at once, check or uncheck applicable methods.

- To add a mode(s) of submission click the check box next to the currently unchecked method of submission.

- Click Save.

- Click Close.

Step 2: Mode of Claim Submission/EDI Exchange

- Notice there are now two rows for Mode of Claim Submission, one that is approved and one that is in review.

- Click Close to return to the Business Process Wizard steps.

Step 2: Mode of Claim Submission/EDI Exchange

- Step 2 will show a modification status of Updated as changes were made within the step.

- Once updates are complete continue to Step 5: Complete Modification Checklist and Step 7: Submit Modification Request for Review.

Step 3: Provider Controlling Interest/ Ownership Details

Make updates to ownership information, click on Step 3: Provider Controlling Interest/Ownership Details.

For complete instructions on the Ownership step click here.

After completing this step, if no other updates are needed continue to Step 5: Complete Modification Checklist and Step 7: Submit Modification Request for Review.

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Step 3: Provider Controlling Interest/ Ownership Details

- Click on Step 3: Provider Controlling Interest/Ownership Details
  - Within this step updates can be made to the current owner(s) information, adding or end dating existing owner(s), or adding or end dating relationships between existing owner(s).

Step 3: Provider Controlling Interest/ Ownership Details

- 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.
  - 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.

Step 3: Provider Controlling Interest/ Ownership Details

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

- Click Save.

- Click Close.

Step 3: Provider Controlling Interest/ Ownership Details

- Notice there are now two rows for the selected owner, one that is approved and one that is in review.

- The Adverse Action for that owner(s) will need to be completed.
  - For complete instructions on the Ownership step [click here](#).

- Click Close to return to the Business Process Wizard steps.

Step 3: Provider Controlling Interest/ Ownership Details

- Step 3 will show a modification status of Updated as changes were made within the step.

- Once updates are complete continue to **Step 5: Complete Modification Checklist** and **Step 7: Submit Modification Request for Review**.

Step 5: Complete Modification Checklist

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Step 7: Submit Modification Request for Review

Required steps to complete a modification and submit to the State for review.

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Click on Step 5: Complete Modification Checklist

- Click Step 5: Complete Modification Checklist

Click on Step 5: Complete Modification Checklist

- Review each question and select Yes or No from the dropdown.

- Enter comments if necessary or required.

- Click Save.

- Click Close.

Step 7: Submit Modification Request for Review

- Step 5 will show 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. If you choose not to complete the optional steps you can still submit your modification.

- Click on Step 7: Submit Modification Request for Review

You must complete step 7 to submit your modification.

Step 7: Submit Modification Request for Review

- Final Submission: Click Next.

Step 7: Submit Modification Request for Review

- Scroll down the page to review the Billing Agent Enrollment & Trading Partner Agreement-Conditions.

Step 7: Submit Modification Request for Review

- Read through the entire list of Billing Agent 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.

Step 7: Submit Modification Request for Review

- Step 7 is now complete, and the modification has been submitted to the State for review.

- Click Close.

(Note: Optional steps may show as incomplete if you choose not to complete. This is ok.)

Billing Agent Resources

MDHHS Trading Partners website: www.michigan.gov/mdhhs/doing-business/providers/tradingpartners/howtobecome

We continue to update our Provider Resources:

HIPAA Companion Guides

Listserv Instructions

Provider Alerts

Medicaid Provider Training Sessions

Forms

Electronic Signature Agreement Cover Sheet (MDHHS-5405)

Electronic Signature Agreement (DCH-1401)

Electronic File Help

Electronic file (5475,5414,4952) and 835/ERA inquiries: Automatedbilling@Michigan.gov

Encounter file inquiries (5476): MDHHSEncounterData@Michigan.gov

Thank you for participating in the Michigan Medicaid Program

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