CHAMPS 101: ProviderTab



"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





Overview: My Inbox Landing Page



Track Application



Manage Provider Information



Provider Resources



Overview: My Inbox Landing Page

- Access MILogin: <u>https://milogintp.Michigan.gov</u>
- Access CHAMPS
 - Select Domain and Profile
- From the My Inbox Landing Page:
 - Click the Provider tab
- From the Provider tab dropdown select one of the following:
 - New Enrollment
 - Track Application
 - Manage Provider Information



This presentation, including the screen captures, are based on the CHAMPS Full Access Profile. Additional features and tabs will vary based on the profile selected.



New Enrollment

For new providers who are not enrolled within CHAMPS may enroll themselves by visiting www.Michigan.gov/MedicaidProviders and click on Provider Enrollment.

For enrolled providers who wish to do a new enrollment, they can enroll them from within CHAMPS.



New Enrollment

- Whenever a provider enrolls a new provider from within CHAMPS, that provider becomes the Domain Administrator.
 - Example, Provider A enrolls Provider B in CHAMPS. Provider A is Provider B's Domain Administrator
 - For further Domain Administrator abilities visit <u>Registering for MILogin</u> <u>Account for access to CHAMPS</u>
- If a provider needs to enroll another provider:
 - Click New Enrollment from the Provider dropdown





New Enrollment

- After clicking on New Enrollment the next step is to select the Enrollment Type of the provider that needs to be enrolled.
- For the definition of each enrollment type, visit <u>Step 2:</u> <u>Determine CHAMPS</u> <u>Enrollment Type</u> from the Provider Enrollment webpage
- After selecting the applicable enrollment type , click Submit

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👫 > Provider Portal > New Enrollment					
Enrollment Type					^
Select the Applicable Enrollment Type					
Individual/Sole Proprietor					
Regular Individual/Sole Proprietor or Rendering/Servicing Provider					
○ Group Practice (Corporation, Partnership, LLC, etc.)					
O Billing Agent					
○ Facility/Agency/Organization (FAO-Hospital, Nursing Facility, Various Entities)					
○ Atypical (non-medical) provider (Choose this option if you do not have a NPI)					
⊖ Individual (Driver, Home Help/Personal Care, Carpenter, etc.)					
○ Agency (Child Care Institution, Home Help/Personal Care Agency, Transportation Company, Local Education Agency etc.)					
O submit					



New Enrollment

- The Provider Enrollment process officially starts at Step 1 Provider Basic Information.
- From here providers will need to access the <u>Provider</u> <u>Enrollment webpage</u> for step-by-step instructions on how to complete a provider enrollment application. Once at the Provider Enrollment webpage:
 - Select Step-by-Step CHAMPS Enrollment Guides
 - Click on the Enrollment Type based on the previous step's selection
 - Utilize the resources provided to complete the rest of the application.

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	Last Name:	*	Gender:		
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III Home Address					
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		(Enter Street Address or PO Box Only)			
	Address Line 3:		City/Town:	OTHER *	
	State/Province:	OTHER *	Country		
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Step 1 Basic Information will display differently depending on the Enrollment Type selected.



Track Application

After starting or submitting a Provider Enrollment application, Providers can use this feature to continue an incomplete application or track the status of a completed application.



Track Application

- In order to reference back to a started enrollment application or completed submitted enrollment application:
 - Click Track Application from the Provider dropdown





Track Application

- The instructions when filling out a Provider Enrollment Application advise providers to write down the Application ID given after completing Step 1 Basic Information. This is the number needed in order to track the application.
 - <u>Contact Provider Enrollment</u> if the application ID is forgotten
- After entering in the application ID there will be an additional step to verify application access.
 - For additional help reference the <u>Provider Enrollment</u> <u>webpage</u>, select the Enrollment type under Stepby-Step CHAMPS Enrollment Guides, then Track Application

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	Provider Portal S Next Track Exi Request J	CHAMPS <	Kequest Access to Home Help	Image: My Inbox Provider Last Login: 14 JAN, 2020 09:26 AM Provider Portal > Track Application Image: Track Existing Application Request Access to Home Help Provider Info Click the below	Image: My Inbox Provider Claims Last Login: 14 JAN, 2020 09:26 AM Provider Portal > Track Application Image: Track Existing Application Application Request Access to Home Help Provider Info Click the below link if you are	Image: Marking and the second seco	Image: Margin and Control of Contro	Claims Very Porvider Claims Very PA -	Impose My Inbox Provider Claims - Member - PA - Impose Lest Legin: 14 JAN, 2020 19/26 AM Impose Pade Provider Partal - Track Application Impose Partal Track Existing Application Please provide the Application ID to track your application. Application ID: Please provide the Application ID to track your application. Click the below link if you are an Existing Home Help Individual or Agency accessing CHAMPS system for the first time, provide the Application ID to Home Help Providers requesting access to their Information.	Champs My Inbox	Champes My Indox Provider* Claims* Nember* PA*	Champes My Inbox



Manage Provider Information

Provides access to a providers approved Enrollment Application when their information needs to be updated.



Manage Provider Information

- Providers are able to complete revalidations and update provider enrollment information from within the manage provider information section of CHAMPS.
 - For a list of items that require an enrollment application update reference the <u>Michigan Medicaid</u> <u>Provider Manual</u>, Chapter General Information for Providers, Section 2 Provider Enrollment
- To do this select Manage Provider Information from the Provider dropdown





Manage Provider Information

- After selecting Manage Provider Information the list of steps will display given the Enrollment Type.
- Make any necessary changes to the enrollment information making sure to complete all steps needed.
- The checklist step of any enrollment application, Complete Modification Checklist, will always show as incomplete. This step must be reviewed and submitted for changes to be approved by MDHHS.
 - For required revalidations the checklist steps, Complete Modification Checklist and Submit Modification Request for Review will always show as incomplete. These steps will need to be reviewed and submitted for changes to be approved by MDHHS.
- For help filling out a step reference the <u>Provider Enrollment webpage</u>, Stepby-Step CHAMPS Enrollment Guides, and the applicable Enrollment Type

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Step	itep		Required	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark			
Step 1: F	Step 1: Provider Basic Information		Required	12/15/2014	11/01/2013	Complete					
Step 2: L	Step 2: Locations		Required	10/23/2013	11/01/2013	Complete					
Step 3: S	itep 3: Specialties		Required	04/15/2008	04/15/2008	Complete					
Step 4: N	Step 4: Mode of Claim Submission		Required	04/15/2008	04/15/2008	Complete					
Step 5: A	Step 5. Associate Billing Agent		Required	12/15/2014	11/01/2013	Complete					
Step 6: F	Step 6: Provider Controlling Interest/Ownership Details		Required	10/21/2013	11/01/2013	Complete					
Step 7: T	Step 7: Taxonomy Details		Required	04/15/2008	04/15/2008	Complete					
Step 8: \	Step 8: View Servicing Provider Details		Optional	04/15/2008	04/15/2008	Complete					
🗂 Step 9: 8	Step 9: 835/ERA Enrollment Form		Optional			Complete					
Step 10:	Step 10: Complete Modification Checklist		Required	04/24/2014	05/20/2014	Incomplete		Please Answer all the	Questions.		
Step 11:	Step 11: Submit Modification Request for Review		Required	04/24/2014	05/20/2014	Complete					
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Provider Resources



MDHHS website: www.michigan.gov/medicaidproviders



We continue to update our Provider Resources: CHAMPS Resources Listserv Instructions Provider Alerts Medicaid Provider Training Sessions



Provider Support:

ProviderSupport@Michigan.gov 1-800-292-2550



Thank you for participating in the Michigan Medicaid Program

