Individual Home Help Provider: End Dating the Association to an Agency

“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
Checklist

- For an Individual Home Help Provider who wants to End Date their Association to an Agency:
  - Login to MILogin with your previously created user ID and password
  - Access CHAMPS
  - Manage Provider Information
  - Update Steps 4, 14 and 15

Contact the Home Help Provider Support Helpline if you need assistance:

1-800-979-4662
- Open your web browser (e.g. Internet Explorer, Google Chrome, Mozilla Firefox, etc.)
- Enter your User ID and Password.
- Click Login.
Click the CHAMPS hyperlink.
Click ‘Acknowledge/Agree’ to accept the Terms & Conditions to get into CHAMPS.
Your Name and Provider ID number will show in the top section.
In the Select Profile drop-down menu, select Atypical Access.
Click Go.
In the **Provider** drop-down menu, click **Manage Provider Information**.
Click Step 4: Associate Billing Provider/Other Associations.
- Click on the **Provider ID Number** hyperlink.
Enter the **date** you want to end your association to the Agency.

Click **Save**.

Click **Close**.
• Click Close.

  Please Note: The end date is now listed and in review until the entire modification is submitted.
Click **Step 14: Complete Modification Checklist**.
Answer all of the **Provider Checklist** questions by choosing **Yes** or **No** from each drop-down menu in the **Answer** column.

- Click **Save**.
- Click **Close**.
Click Step 15: Submit Modification Request for Review.

Please Note: Step 14 status has now changed from Incomplete to Complete and the Modification Status to Updated.
Click Next.
By checking this, I acknowledge that I have read the terms and agreement and I agree to fully comply with all program requirements.
Your request has been submitted.
Click Close.
Logout.
The modification is approved when the Modification Status column shows blank.

Please Note: **Last Review Date** will be the date approved in steps that were showing “In Review” status. **Optional** steps may be displayed as **Incomplete**.

End Dating the Association to an Agency is considered a Modification.
Provider Resources

• Home Help Provider Support Hotline
  1-800-979-4662

• Home Help Provider Support Email:
  ProviderSupport@Michigan.gov

• Home Help Website
  www.Michigan.gov/HomeHelp