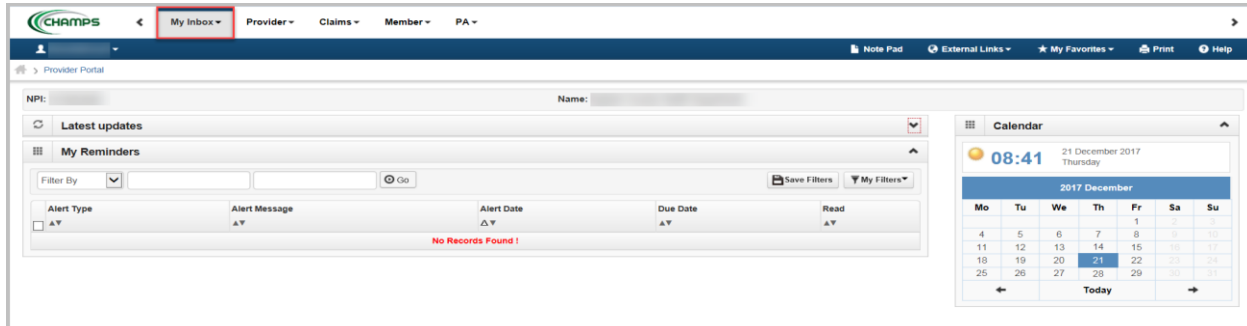


Retrieving a Medicaid Remittance Advice (RA) in CHAMPS

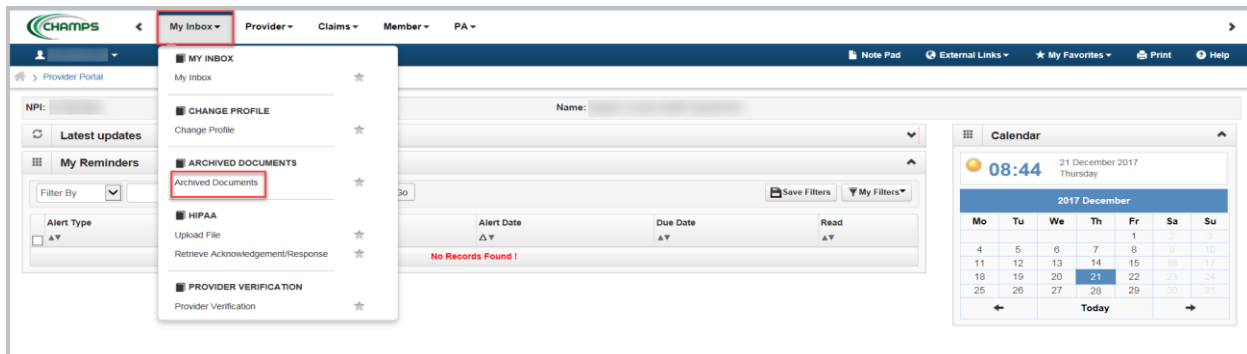
Navigating to a Medicaid RA under My Inbox tab within CHAMPS

Click on the My Inbox tab across the top of the page



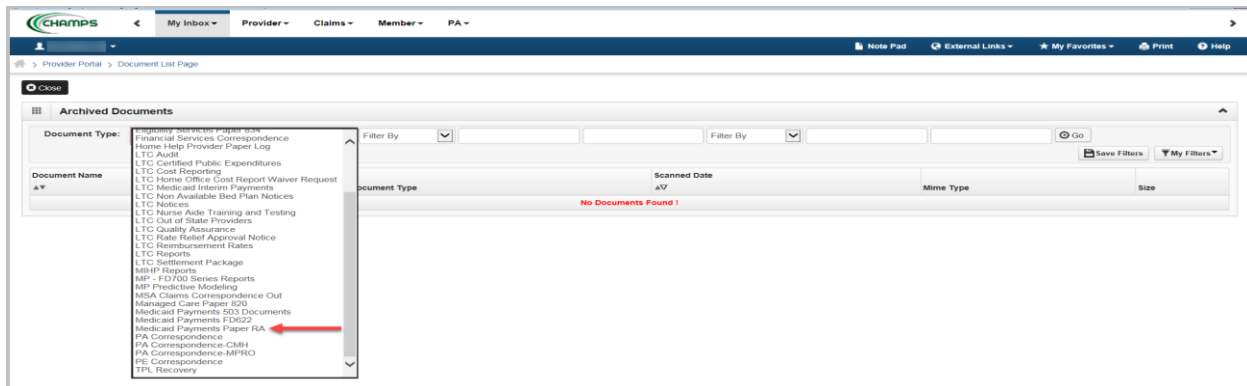
The screenshot shows the CHAMPS application interface. At the top, the 'My Inbox' tab is highlighted in the navigation bar. Below the navigation bar, there are sections for 'Latest updates', 'My Reminders', and a 'Calendar' on the right. The 'My Reminders' section shows a table with columns for Alert Type, Alert Message, Alert Date, Due Date, and Read. A red message 'No Records Found!' is displayed below the table.

Select Archived documents from the drop down menu



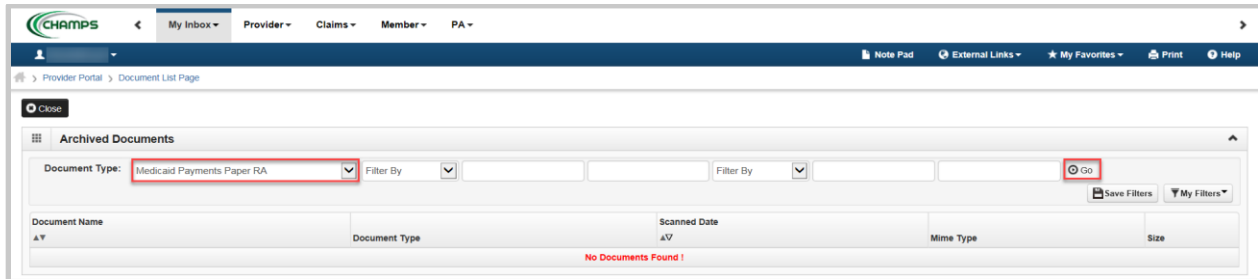
The screenshot shows the CHAMPS application interface with the 'My Inbox' dropdown menu open. The menu options include 'MY INBOX', 'CHANGE PROFILE', 'ARCHIVED DOCUMENTS', 'HIPAA', and 'PROVIDER VERIFICATION'. The 'ARCHIVED DOCUMENTS' option is highlighted with a red box. The background shows the same 'My Reminders' section with 'No Records Found!'.

From the document type drop down select Medicaid payments paper RA



The screenshot shows the 'Archived Documents' page in CHAMPS. A dropdown menu for 'Document Type' is open, showing a list of document types. 'Medicaid Payments Paper RA' is highlighted with a red arrow. The background shows a table with columns for Document Name, Document Type, Scanned Date, Mime Type, and Size. A red message 'No Documents Found!' is displayed below the table.

Once Medicaid Payments Paper RA is selected click “Go”



CHAMPS

My Inbox Provider Claims Member PA

Provider Portal Document List Page

Close

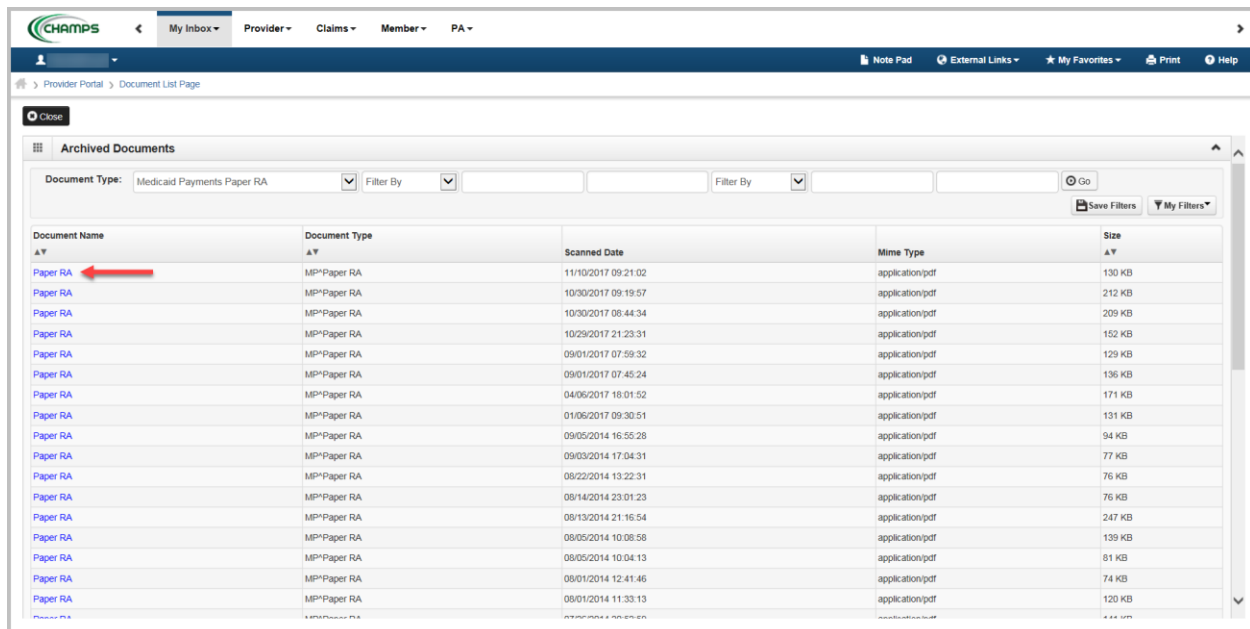
Archived Documents

Document Type: Medicaid Payments Paper RA Filter By Filter By Go

Save Filters My Filters

Document Name	Document Type	Scanned Date	Mime Type	Size
No Documents Found !				

It may take a couple minutes for the RA to load. When the new screen opens up, the system will display multiple paper remittance advices. You will see on the left hand side it says Paper RA in blue writing. Click on the blue hyper link of the paid date you would like to view. As seen below.



CHAMPS

My Inbox Provider Claims Member PA

Provider Portal Document List Page

Close


Archived Documents

Document Type: Medicaid Payments Paper RA Filter By Filter By Go


Save Filters My Filters

Document Name	Document Type	Scanned Date	Mime Type	Size
Paper RA	MPH Paper RA	11/10/2017 09:21:02	application/pdf	130 KB
Paper RA	MPH Paper RA	10/30/2017 09:19:57	application/pdf	212 KB
Paper RA	MPH Paper RA	10/30/2017 08:44:34	application/pdf	209 KB
Paper RA	MPH Paper RA	10/29/2017 21:23:31	application/pdf	152 KB
Paper RA	MPH Paper RA	09/01/2017 07:59:32	application/pdf	129 KB
Paper RA	MPH Paper RA	09/01/2017 07:45:24	application/pdf	136 KB
Paper RA	MPH Paper RA	04/06/2017 18:01:52	application/pdf	171 KB
Paper RA	MPH Paper RA	01/06/2017 09:30:51	application/pdf	131 KB
Paper RA	MPH Paper RA	09/05/2014 16:55:28	application/pdf	94 KB
Paper RA	MPH Paper RA	09/03/2014 17:04:31	application/pdf	77 KB
Paper RA	MPH Paper RA	08/22/2014 13:22:31	application/pdf	76 KB
Paper RA	MPH Paper RA	08/14/2014 23:01:23	application/pdf	76 KB
Paper RA	MPH Paper RA	08/13/2014 21:16:54	application/pdf	247 KB
Paper RA	MPH Paper RA	08/05/2014 10:08:58	application/pdf	139 KB
Paper RA	MPH Paper RA	08/05/2014 10:04:13	application/pdf	81 KB
Paper RA	MPH Paper RA	08/01/2014 12:41:46	application/pdf	74 KB
Paper RA	MPH Paper RA	06/01/2014 11:33:13	application/pdf	120 KB

Once you have selected the paid date you would like to view and have clicked on the link provided, the system will then open a new window with the remittance advice that you have chosen. Below is an example of the first page of the remittance advice.

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES MEDICAL SERVICES ADMINISTRATION - MEDICAID PAYMENTS PO BOX 30238 LANSING MI 48909	LANSING MI 48911-3800	Michigan Department of Health and Human Services Medical Services Administration - Medicaid Payments P O Box 30238 Lansing MI 48909
LANSING MI 48911-3800		
		 1642851340000001

Page 2 of the Remittance Advice reports the RA Number and RA Date in the upper right-hand corner, while the amount of Paid, Credited, Denied and Gross Adjustment (GA) claims are reported towards the middle left-hand side of the page. This page also has the Total Approved, Total Adjusted and Total Paid amounts along with the Warrant/EFT # and Warrant/EFT Date listed last.


Billing Provider NPI:	Name:	EIN/TIN:	Vendor ID:	Pay Cycle:	RA Number:	RA Date:
FINANCIAL ADJUSTMENTS						
Adjustment Type	Previous Balance	Adjustment Amount	Remaining Balance			
Balance Owed by Tax ID	\$0.00		\$0.00			
CLAIM SUMMARY						
Category	Count					
Paid	7	←	Total Number of Paid Claims			
Credited	0	←	Total Number of Credited Claims			
Denied	0	←	Total Number of Denied Claims			
GA	0	←	Total Number of Gross Adjustments			
Total Approved		\$616.74	Total Adjusted		\$0.00	Total Paid
						\$616.74
Warrant/EFT #:		Warrant/EFT Date: 11/09/2017				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Please Note: Suspended Claims and MDHHS Proprietary will not be reported on the Remittance Advice </div>						
 1642851340000002						

Page 3 of the Remittance Advice shows a breakdown of adjudicated claims. The provider can then print a copy or save it to their computer.

Billing Provider NPI:	Name:	EIN/TIN:	Vendor ID:	Pay Cycle:	RA Number:	RA Date:					
Gross Adj ID Beneficiary Name Beneficiary ID Patient Account # Medical Record #	Original TCN TCN Type of Bill	Submitter ID Rendering Provider NPI	Invoice Date Service Date(s)	Revenue Procedure Modifier	PPS DRG APC	Qty	Billed Amount	Approved Amount	Category	Reason	Remark
			10/02/2017 09/11/2017-09/11/2017				\$113.00	\$83.72	P		
			09/11/2017-09/11/2017	99402		1	\$113.00	\$83.72	P	45	
			10/02/2017 09/13/2017-09/13/2017				\$113.00	\$83.72	P		
			09/13/2017-09/13/2017	99402		1	\$113.00	\$83.72	P	45	

See screenshot below for examples and descriptions of each column within the RA

Billing Provider NPI:	Name:	EIN/TIN:	Vendor ID:	Pay Cycle:	RA Number:	RA Date:					
Gross Adj ID Beneficiary Name Beneficiary ID Patient Account # Medical Record #	Original TCN TCN Type of Bill	Submitter ID Rendering Provider NPI	Invoice Date Service Date(s)	Revenue Procedure Modifier	PPS DRG APC	Qty	Billed Amount	Approved Amount	Category	Reason	Remark
Column 1 lists in order the Gross Adjustment ID (if applicable), Bene Name, Bene ID, Patient Acc. # (if applicable), and Medical Rec. # (if applicable)	Column 2 lists in order the Original TCN (if void or adjustment was submitted), TCN, and TOB (if applicable)	Column 3 lists in order the Submitter ID (CHAMPS Billing Agent ID, DEG ID, or Provider NPI) and Rendering Provider NPI	Column 4 lists Invoice Date and Service Date(s)	Column 5 lists in order the Revenue code (if applicable), Procedure Code (if applicable), and Modifier (if applicable)	Column 6 lists in order the PPS, DRG, and APC rates (if applicable)	Column 7 lists the Quantity Billed	Column 8 lists the Total Charges billed	Column 9 lists the Amount Approved	Column 10 lists the claim Category (Paid, Denied, or Gross Adjusted)	Column 11 lists the HIPAA Reason Code(s)	Column 12 lists the HIPAA Remark Code(s)
Patient, Name 0022332423 0006269322	310918410003215000	12345678 1111111111	12/09/2008-12/09/2008								
	310918410003215001		12/09/2008-12/09/2008	15340	409	1	\$375.00	\$0.00	Denied	133, 23, 31	N10, N131
	310918410003215002		12/09/2008-12/09/2008	15341		1	\$60.00	\$0.00	Denied	133, 23, 31	N10, N131
	310918410003215003		12/09/2008-12/09/2008	J7340		1	\$1,452.00	\$0.00	Denied	133, 23, 31, B5	N10, N131 M461, N185
Patient, One 0095124282 0005711862	310918410089841000	12345678 1111111111	03/07/2008-03/07/2008				\$80.00	\$18.24	Paid		
	310918410089841001		03/07/2008-03/07/2008	99213		1	\$80.00	\$18.24	Paid	2, 45	



7508677600000004