Provider Enrollment FAQs

Table of Contents

1. How can I determine whether I am an approved Medicaid Provider?

Once the Provider has been approved by MDHHS, the Provider Name and NPI will appear in the Domain drop-down list of the MILogin user ID who submitted the Enrollment application. A provider may also click the "My Inbox Tab", Provider Verification and enter the NPI to see if it is enrolled. If a Provider attempts to initiate an Enrollment for a currently active Provider, CHAMPS will generate an error message stating that this provider's NPI and/or Tax ID has already been enrolled.

2. Why is the home address needed in the basic information step on an individual/sole proprietor enrollment and on the ownership step for a group or FAO enrollment?

Per new federal regulations under the Affordable Care Act, it is now required for all providers to provide their home personal address under the basic information step. It is also required by the Affordable Care Act that all individual owners, Board of Directors and Managing Employee's list their home personal address within the ownership step.

3. Mode of Claim Submission:

In order to submit and search the status of claims on-line through CHAMPS, the provider must select "Online Direct Data Entry," within the Mode of Claim Submission step. Providers should select all modes of claims submission that apply to them: Electronic Batch, On-Line Direct Data Entry, Billing Agent, and/or Paper. Providers should **NOT** select Data Exchange Gateway (DEG).

4. Will there be any type of confirmation when a new enrollment has been completed?

All new enrollments will receive a Welcome Letter upon approval in CHAMPS.

5. If a group or entity's provider enrollment, credentialing or billing staff enroll a rendering/servicing provider's information, how is the rendering/servicing provider's held accountable for their information in the system?

MDHHS has a template available for the provider to sign and maintain on file. This template authorizes the provider enrollment person to enroll the information for the individual providers. MDHHS does not keep this template on file. This template can be found at: http://michigan.gov/documents/mdch/ >> CHAMPS >> Electronic Signature.

6. Will "Ownership" be able to be completed by someone other than the designated provider enrollment person?

A provider's enrollment can be accessed and updated by multiple users at different times using the secure application number. There is not an option to hide the "Ownership" from specific users.

7. How many levels of "Ownership Interest in Other Medicare/Medicaid Entities" are required to be completed?

If the employed provider has greater than 5% interest in another Medicare or Medicaid Entity, this will need to be reported.

8. Once a Billing Agent is end-dated, will it still show on my enrollment?

The end-dated billing agent authorization will appear as a historical record. However, a billing agent cannot submit claims on behalf of a provider after the end-date of the provider's authorization/association to that billing agent.

9. What are we answering with the question "Are you accepting new Medicaid clients"?

This will be used to help Medicaid beneficiaries when they call our Beneficiary Helpline and are trying to find a new provider. It is important for providers to keep this updated. Providers can continue to accept Medicaid Beneficiaries on a case by case basis.

10. Does Medicaid Health Plans Provider information get updated from CHAMPS?

No, Medicaid Health Plans will continue to maintain their own Provider Enrollment, Benefits Administration, Prior Authorization, and Claims Processing Systems. Only Fee-For-Service Medicaid information should be submitted to CHAMPS.

11. What information is required for completing the "Location" step?

There are three addresses that must be reported to complete the Location step: Pay-To Address, Correspondence, and Primary Practice Location addresses must be added and validated.