



Michigan Department of Health & Human Services

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Verifying a Claim Adjustment Source within CHAMPS

“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

Contents

- This document includes steps to verify why a claim was adjusted or voided by either a provider or MDCH within CHAMPS claim inquiry
- In addition to a claim note, certain types of claim adjustments or voids completed by MDCH may also have a posted corresponding [Biller B Aware](#) notification to providers

Billing Provider NPI: [REDACTED] Name: [REDACTED] EIN/TIN: [REDACTED] Pay Cycle: 17 RA Number: [REDACTED] RA Date: 04/24/2014

Beneficiary Name Beneficiary ID Patient Account #	Original TCN TCN TOB/POS	Submitter ID Rendering NPI DRG APC	Invoice Date Service Date(s)	Revenue Procedure Modifier	Qty	Billed Amount	Approved Amount	Cat	Reason	Remark
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3 [REDACTED] 00 4 [REDACTED] 100 13			04/10/2014 05/20/2013-05/20/2013			-\$487.00	\$0.00	C		
4 [REDACTED] 01			05/20/2013-05/20/2013	87070	-1	\$119.00	\$0.00	D	16	N152
4 [REDACTED] 02			05/20/2013-05/20/2013	87077	-1	\$68.00	\$0.00	D	16	N152
4 [REDACTED] 03			05/20/2013-05/20/2013	87186	-1	\$134.00	\$0.00	D	16	N152
4 [REDACTED] 04			05/20/2013-05/20/2013	87205	-1	\$59.00	\$0.00	D	16	N152
4 [REDACTED] 05			05/20/2013-05/20/2013	99391	-1	\$27.00	\$0.00	D	16	N152
4 [REDACTED] 06			05/20/2013-05/20/2013	90647	-1	\$0.00	\$0.00	D	16	N152
4 [REDACTED] 07			05/20/2013-05/20/2013	90670	-1	\$0.00	\$0.00	C		
4 [REDACTED] 08			05/20/2013-05/20/2013	90680	-1	\$0.00	\$0.00	D	16	N152
4 [REDACTED] 09			05/20/2013-05/20/2013	90723	-1	\$0.00	\$0.00	C		



- An example of a Remittance Advice showing a claim that was paid and is now being credited

MILogin for Third Party

Login to your account

User ID

Password

LOGIN

SIGN UP

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[Forgot your password?](#)

[Need Help?](#)


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- Open your web browser (e.g. Internet Explorer, Google Chrome, Mozilla Firefox, etc.)
- Enter <https://milogintp.Michigan.gov> into the search bar
- Enter your User ID and Password
- Click Login

MILogin for Third Party

[HOME](#)[REQUEST ACCESS](#)[UPDATE PROFILE](#)[SECURITY OPTIONS](#)[CHANGE PASSWORD](#)[LOGOUT](#)

Home Page

 Your password will expire in **48** days

Access your applications by clicking on the application links below



Michigan Department of Health & Human Services (MDHHS)

CHAMPS 

- You will be directed to your MILogin home page
- Click the CHAMPS hyperlink

**MILogin resource links are listed at the bottom of the page*

Terms & Conditions

CHAMPS

Terms & Conditions

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CANCEL x **Acknowledge/Agree**

- Click Acknowledge/Agree to accept the Terms & Conditions to get into CHAMPS



→ Select Domain *

→ Select Profile *

Select Favorite

- Choose the Domain(Billing NPI) and Profile

CHAMPS < My Inbox ▾ Provider ▾ **Claims ▾** Member ▾ PA ▾

Provider Portal

NPI: _____ Name: _____

Latest updates

System Notification
Attention All Providers: Due to system maintenance activities, the CHAMPS system will be down between 6:00 AM Saturday, January 10th through 9:00 PM Sunday, January 11th, 2015 with the exception of Health Care Eligibility Benefit Inquiry and Response (Core 270/271) Real-time transactions which will be down between 6:00am and 10:00am on Saturday January 10th. This outage will affect the CHAMPS system access for all functionality.

My Reminders

Filter By [] [] [Go] [Save Filters] [My Filters ▾]

Alert Type	Alert Message	Alert Date	Due Date	Read
No Records Found !				

Calendar

11:48 AM 12 January 2015 Monday

2015 January						
Mo	Tu	We	Th	Fr	Sa	Su
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	
←		Today			→	

- Once logged into CHAMPS, click the Claims tab

The screenshot shows the CHAMPS Provider Portal interface. At the top, there are navigation tabs: My Inbox, Provider, Claims, Member, and PA. A dropdown menu is open over the 'Claims' tab, listing the following options:

- CLAIM SUBMISSION**
 - Submit Professional
 - Submit Institutional
 - Submit Dental
 - Search Template
- MANAGE CLAIMS**
 - Adjust/Void Claim Provider
- INQUIRE CLAIMS**
 - Claim Inquiry (highlighted with a red arrow)
- RA LIST**
 - RA List

The background interface includes a 'System Notification' section, a 'My Reminders' section with a filter dropdown, and a 'Calendar' widget showing the date 23 February 2015 (Monday).

- Click Claim Inquiry

CHAMPS < My Inbox Provider Claims Member PA >

Provider Portal > Inquire Claims

Close

Inquire Claim

TCN | And Filter By | And Filter By

And Filter By And Filter By With Status In Claim Last 6 Months

Go Save Filters My Filters

TCN	From Date	To Date	Submitted Charges	Claim Status	Approved Amount	Pay Cycle Date
No Records Found !						

- Filter by the TCN and enter the credited TCN which is listed on the Remittance Advice
 - Or filter by Original TCN and enter the paid TCN - this will return any adjustment or credited claim that adjusted or voided that was submitted using that paid TCN number

CHAMPS < My Inbox Provider Claims Member PA

Provider Portal > Inquire Claims

Close

Inquire Claim


TCN 4 00 And Filter By And Filter By And Filter By

And Filter By And Filter By With Status In Claim All

Go Save Filters My Filters

TCN	From Date	To Date	Submitted Charges	Claim Status	Approved Amount	Pay Cycle Date
4 00	05/20/2013	05/20/2013	\$487.00	Credited	\$0.00	04/24/2014

View Page: Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last



- Click on the TCN number hyperlink

Print Help

Header TCN: 4 [] 00
Beneficiary ID: [] Name: []

Show

Header Details

Upload/View Documents 0 0

TCN: 4 [] 00
Original TCN: 3 [] 00
Bill Type: 0 * 1 * 3 * 8 *
Adjustment Source: OTR-Other
Claim Type: F - Outpatient OPPS
No of Lines: 11
Medicare: N
Pricing Rule: APC Pricing
Source: Web Batch
Related Cause: NO
Commercial: N
Claim Status: Credited

Beneficiary ID: [] *
Gender: F-Female *
Patient Control Number: [] *
Benefit Plan:

Last Name: []
DOB: [] *
Medical Record Number: []

First Name: []
Age: 0

Billing Provider ID: [] * Type: NPI *
Billing Provider Taxonomy: []
Attending Provider ID: [] * Type: NPI *
Attending Provider Taxonomy: []
Pay To Provider ID: [] Type: NPI *
Operating Provider ID: [] Type: [] *
Other Operating [] Type: [] *

From Date: 05/20/2013 *
Referral #: []
Auth #: []

To Date: 05/20/2013 *
PRO #: []
DRG Code: []
Total DRG OutLier Payment: 0
Total APC OutLier Payment: \$0.00

Cancel

- Adjustment source is located within the claim header detail page
 - This example shows the adjustment source as OTR-OTHER
- For information on why the claim was adjusted or credited/voided, click on the claim note icon to view the adjustment note

Header TCN: 4 00

Beneficiary ID:

Name:

Show

Claim Notes

TCN	Note Type	Note	Date Entered (mm/dd/yyyy)
4 00	VCC - Void Claim Comment	75685309Jacob DaltonQTR Newborn Recovery - 3rd qtr 2013 - All claim types . n = 4,002.	04/10/2014
4 00	VRC - Void Reason Code	APPROVER COMMENT: approved. AB	04/15/2014

View Page: 1



Page Count



Viewing Page: 1



Cancel

- This recovery was completed by MDHHS due to the newborn beneficiary being retro-enrolled into a Medicaid Health Plan on the date of service

Adjustment Sources

- AUD-Audit
- TPL-TPL Other/Commercial Insurance
- TPL-TPL Medicare
- OTR-Other
- SC-System Correction
- PIA-Provider Initiated Adjustment
- PIV-Provider Initiated Void

Provider Resources

- **MDHHS website:** www.michigan.gov/medicaidproviders
- **We continue to update our Provider Resources, just click on the links below:**
 - [Listserv Instructions](#)
 - [Medicaid Alerts and Biller “B” Aware](#)
 - [Quick Reference Guides](#)
 - [Update Other Insurance NOW!](#)
 - [Medicaid Provider Training Sessions](#)
- **Provider Support:**
 - ProviderSupport@michigan.gov or 1-800-292-2550

Thank you for participating in the Michigan Medicaid Program