



Document Management Portal

Claim Attachments and Consents

“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

Topic

- What is DMP?
- How to Access DMP
- Search Documents
- Upload Documents
- Champs New Claim Submission
- Champs Claim Adjustment
- Submit Fax
- Messages

What is DMP?

What is DMP?

- The Document Management Portal (DMP) provides a browser-based interface to perform various tasks pertaining to submission of documents to Michigan Medicaid.
- DMP was integrated within CHAMPS. Users will access DMP functionality directly through CHAMPS interface only.
- DMP is authenticated via the State's MILogin portal.

What is DMP? (cont.)

- By directly accessing DMP, providers can submit Medicaid documents that may or may not be related to a TCN.
- Users accessing DMP will be able to:
 - Submit supporting documents.
 - Submit documents for authorization and approval.
 - Send and receive messages pertaining to submitted documents.
 - View documents and associated correspondence history.

What is DMP? (cont.)

- Directly upload documents.
- Create cover sheets and fax documents.
- Search existing uploaded documents.
- Have messaging capabilities.
- Receive notifications when documents are approved.

How to Access DMP

Access Points

- CHAMPS Provider Portal – External Links
- CHAMPS Direct Data Entry – Claim submission.
- CHAMPS Manage/Adjust Claim

- Click on Document Management Portal (DMP) in the External Links drop-down.
- DMP will launch in a new window. (Make sure your pop up blockers are turned off.)
- It is possible to work within DMP and CHAMPS simultaneously. (However in order to do this you must open the document and close the DMP screen.)
- DMP remains open until closed.

- Tabs located at the top of the page are used to navigate features within DMP.
- These tabs are similar to the tabs in Champs.

Search Documents

Documents Search

Document Type :	<input type="text" value="Select"/>	Document Title :	<input type="text" value="▼"/>
TCN :	<input type="text"/>	Status :	<input type="text" value="Select"/>
Sender Name :	<input type="text"/>	Sender Phone :	<input type="text"/>
NPI :	<input type="text"/>	Beneficiary ID :	<input type="text" value=""/>
Date of Service From :	<input type="text"/> <input type="text" value=""/>	Date of Service To :	<input type="text"/> <input type="text" value=""/>
Loaded On :	<input type="text"/> <input type="text" value=""/>	Include History :	<input type="checkbox"/>
ID :	<input type="text"/>	Invoice Type :	<input type="text" value="Select"/>

Search Results

Show entries Search:

ID	Document Title	Document Type	Invoice Type	TCN	NPI	Beneficiary Id	Date Of Service From	Loaded On	Status	View Message	Send Message
No data available in table											

Showing 0 to 0 of 0 entries ◀ Previous Next ▶

- When DMP is launched, the NPI is prepopulated based on the NPI that is selected at login.
- Any past uploaded documents are shown at the bottom.
- Search for documents by entering different data in the search fields. If no date is entered, then the last 500 documents in history will display.
- Provider may search by document id number that can be found in history once documentation has been uploaded or within the accepted message once the upload is completed.
- Provider may also search by invoice type when searching by a TCN or beneficiary id number.

**Tip: For best results Search by Beneficiary ID*

Documents Search

Document Type :	<input type="text" value="Consents"/>	Document Title :	<input type="text" value="Select"/>
TCN :	<input type="text"/>	Status :	<input type="text" value="Hysterectomy Form"/>
Sender Name :	<input type="text"/>	Sender Phone :	<input type="text"/>
NPI :	<input type="text"/>	Beneficiary ID :	<input type="text"/>
Date of Service From :	<input type="text"/> <input type="button" value="Calendar"/>	Date of Service To :	<input type="text"/> <input type="button" value="Calendar"/>
Loaded On :	<input type="text"/> <input type="button" value="Calendar"/>	Include History :	<input type="checkbox"/>
ID :	<input type="text"/>	Invoice Type :	<input type="text" value="Select"/>
<input type="button" value="Search"/> <input type="button" value="Clear"/>			

When searching for documents it may be helpful to select a specific document type and then narrow it down by document title.

There are 4 options for Document Type:

- Consents
- Claims
- Letter
- MP Predictive Modeling.

If Consents are selected, there are two selections available for Document Title:

- Hysterectomy Form
- Voluntary Sterilization Form

Documents Search

Document Type :	Consents	Document Title :	Select
TCN :		Status :	Select
Sender Name :		Sender Phone :	
NPI :		Beneficiary ID :	
Date of Service From :		Date of Service To :	
Loaded On :		Include History :	<input type="checkbox"/>
ID :		Invoice Type :	Select

Search Results

Show 10 entries

Search:

ID	Document Title	Document Type	TCN	NPI	Beneficiary Id	Date Of Service From	Loaded On	Status	View Message	Send Message
-	Hysterectomy Form	Consents	-	-		-	2015-10-08 11:24:16 AM	Rejected	-	
-	Hysterectomy Form	Consents	-	-		-	2015-10-08 11:23:29 AM	Rejected	-	
-	Hysterectomy Form	Consents	-	-		-	2015-10-08 11:05:14 AM	Rejected	-	

Showing 1 to 3 of 3 entries

Previous Next

The status of a consent can be viewed by searching:

- Beneficiary ID &
- Document Type = consents.



Documents Search

Document Type :	Select	Document Title :	
TCN :	3119111111111111000	Status :	Select
Sender Name :		Sender Phone :	
NPI :		Beneficiary ID :	
Date of Service From :		Date of Service To :	
Loaded On :		Include History :	<input type="checkbox"/>
ID :		Invoice Type :	Select
<input type="button" value="Search"/>		<input type="button" value="Clear"/>	

- Another way to search for documentation is by the TCN number. If you know that the documentation was uploaded to the TCN then you may enter the TCN above.
- When searching by TCN, the Header TCN must be entered (must end in 000).
- All search filters **must** match documents in history or search will not yield any results.

Documents Search

Document Type :	<input type="text" value="Select"/>	Document Title :	<input type="text" value=""/>
TCN :	<input type="text" value=""/>	Status :	<input type="text" value="Select"/>
Sender Name :	<input type="text" value=""/>	Sender Phone :	<input type="text" value=""/>
NPI :	<input type="text" value=""/>	Beneficiary ID :	<input type="text" value=""/>
Date of Service From :	<input type="text" value=""/>	Date of Service To :	<input type="text" value=""/>
Loaded On :	<input type="text" value=""/>	Include History :	<input type="checkbox"/>
ID :	<input type="text" value=""/>	Invoice Type :	<input type="text" value="Select"/>

Search Results




Show entries

ID	Document Title	Document Type	TCN	NPI	Beneficiary Id	Date Of Service From	Loaded On	Status	View Message	Send Message
-	NA	Consents				02/28/2018	2018-05-25 12:18:14 PM	-	-	
-	NA	Consents				02/28/2018	2018-04-27 10:04:11 AM	-	-	
-	NA	Consents				02/28/2018	2018-04-03 10:53:17 AM	-	-	
	Forms	Claim	-			10/01/2017	2018-06-19 02:17:32 PM	-	-	
	EOB Insurance	Claim	-			01/10/2019	2019-06-13 03:46:20 PM	-	-	

Showing 1 to 5 of 5 entries

- Example above searched by beneficiary ID.
- Search results will be listed at the bottom of the screen in sortable fields.
- Click on the Document Title hyperlink to bring up document. (In blue)
- Click view Message Icon to see messages associated with the document.
- Click send Message Icon to send a message regarding this document.
- If you're looking for all uploaded documentation you may click search without entering any filters with the exception of the prepopulated NPI. However I don't recommend this as it will pull all documentation that was uploaded by the NPI previously and will bog down the system. Resulting in slower search times.

Documents Search

Document Type :	<input type="text" value="Select"/>	Document Title :	<input type="text" value=""/>
TCN :	<input type="text"/>	Status :	<input type="text" value="Select"/>
Sender Name :	<input type="text"/>	Sender Phone :	<input type="text"/>
NPI :	<input type="text"/>	Beneficiary ID :	<input type="text"/>
Date of Service From :	<input type="text"/> 	Date of Service To :	<input type="text"/> 
Loaded On :	<input type="text"/> 	Include History :	<input type="checkbox"/>
ID :	<input type="text"/>	Invoice Type :	<input type="text" value="Select"/>
<input type="button" value="Search"/> <input type="button" value="Clear"/>			

Searching by status will display the status of the document:

- Approved
- Hold
- Rejected
- Review/ In Process.

Document Upload

- *A maximum of 5 attachments per upload
- *A maximum of 30MB per attachment



Document Upload

Instructions.

- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Title is 'PREDICTIVE MODELING'.
- TCN entered must be header TCN (ending in 000).
- A maximum of 5 TCN numbers can be entered. Separate each TCN with a semicolon (e.g. 764528810024212000;93428810024212000).
- A maximum of 5 NPI numbers can be entered. Separate each NPI with a semicolon (e.g. 1234567890;1987654321).
- Allowable file extensions for uploading: .pdf, .doc, .docx, .xls, .xlsx, .jpg, .jpeg, and .zip .

* Beneficiary ID :	<input type="text"/>	* NPI :	<input type="text"/>
* Beneficiary First Name :	<input type="text" value="First Name"/>	Beneficiary Last Name :	<input type="text" value="Last Name"/>
* Sender Name :	<input type="text"/>	* Sender Phone :	<input type="text"/>
No of documents to upload :	<input type="text" value="1"/>	Invoice Type :	<input type="text" value="Invoice Type"/>

Document Type *	Document Title *	Date of Service From *	Date of Service To *	TCN *	Message	Attach *
<input type="text" value="Select"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Browse..."/>
		<input type="button" value="Submit"/>	<input type="button" value="Clear"/>			

- To upload documentation directly from your computer please click on the Document upload tab across the top of the document management portal.
- All upload instructions are located at the top of the page within the highlighted area.
- When uploading documentation all fields marked with an asterisk are required.

Document Upload
Instructions:

- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Title is 'PREDICTIVE MODELING'.
- TCN entered must be header TCN (ending in 000).
- A maximum of 5 TCN numbers can be entered. Separate each TCN with a semicolon (e.g. 764528810024212000;93428810024212000).
- A maximum of 5 NPI numbers can be entered. Separate each NPI with a semicolon (e.g. 1234567890;1987654321).
- Allowable file extensions for uploading: .pdf, .doc, .docx, .xls, .xlsx, .jpg, .jpeg, and .zip.

* Beneficiary ID :	<input type="text" value="0123456789"/>	* NPI :	<input type="text" value="123456789"/>
* Beneficiary First Name :	<input type="text" value="TEST"/>	Beneficiary Last Name :	<input type="text" value="TEST"/>
* Sender Name :	<input type="text" value="MEDICAID TEST"/>	* Sender Phone :	<input type="text" value="(517) 555-5555"/>
No of documents to upload :	<input type="text" value="1"/>	Invoice Type :	<input type="text" value="Invoice Type"/>

Document Type *	Document Title *	Date of Service From *	Date of Service To *	TCN *	Message	Attach *
<input type="text" value="Select"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="Browse..."/>
		<input type="button" value="Submit"/>	<input type="button" value="Clear"/>			


When uploading documentation, documents can be shared across 5 different NPI numbers. Please separate each NPI with a semicolon.

For example: if a Medicaid beneficiary is having a hysterectomy and many doctors are involved you can share the approved consent form across 5 different NPI numbers so they may have access to the required documentation without having to submit their own consent form.

You may also attach documentation to up to 5 different TCN numbers at a time. Please separate each TCN number with a semicolon.

No of documents to upload : 5 Invoice Type :

Document Type *	Document Title *	Date of Service From	Date of Service To	TCN	Message	Attach*
Consents	Hysterectomy Form	01/01/2999		311911111111111000		<input type="button" value="Browse..."/>
Select						<input type="button" value="Browse..."/>
Select						<input type="button" value="Browse..."/>
Select						<input type="button" value="Browse..."/>
Select						<input type="button" value="Browse..."/>



The example above shows five documents that are selected to be uploaded at the same time –

- Options can be changed within each line. Such as Document type and title.
- Document Type, Title, & Document id number may be used to search documents once uploaded.
- Click Browse to choose file from your computer.
- Once the document is uploaded under a TCN, it will automatically be attached to the TCN and Beneficiary ID.
- Once the documentation has been uploaded it may be visible to the other NPI's, if selected.

When uploading documentation through the Document management portal -

- Only TCN numbers that are listed in CHAMPS as in process or suspended are eligible to attach a document within DMP.
- If there is not an in process or suspended TCN, it is still possible to upload documents to a Medicaid beneficiary id number.
- If submitting an electronic claim through a billing agent or a software vendor and the TCN number is unknown, please include the following note on the claim: “Documents sent via DMP” (loop 2300 NTE segment)
- When submitting documentation for Predictive Modeling, You must select Document type as claim and document title as Predictive modeling. If these options are not selected the claims processor will not look for the documentation. Resulting in claim denials.
- When submitting a consent form for approval, you may not submit a claim until the consent form has actually been approved. Once approved you may submit claim with notes stating “approved consent form on file”

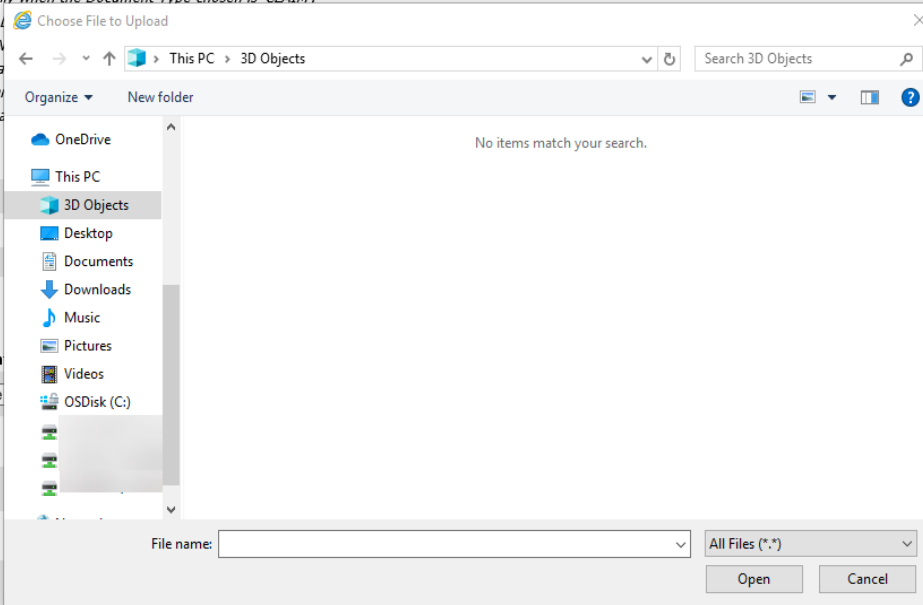
Document Upload

Instructions.

- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Type chosen is 'CLAIM'.
- TCN entered must be header TCN.
- A maximum of 5 TCN numbers can be entered.
- A maximum of 5 NPI numbers can be entered.
- Allowable file extensions for uploads are .pdf, .doc, .docx, .xls, .xlsx, .png, .jpg, .jpeg, .gif, .tiff, .tif, .bmp, .wmf, .emf, .eps, .ps, .rtf, .txt, .xml, .htm, .html, .css, .js, .json, .xml, .zip, .rar, .tar, .gz, .bz2, .7z, .iso, .dmg, .exe, .msi, .msc, .msd, .msp, .mst, .msh, .msh1, .msh2, .msh3, .msh4, .msh5, .msh6, .msh7, .msh8, .msh9, .msh10, .msh11, .msh12, .msh13, .msh14, .msh15, .msh16, .msh17, .msh18, .msh19, .msh20, .msh21, .msh22, .msh23, .msh24, .msh25, .msh26, .msh27, .msh28, .msh29, .msh30, .msh31, .msh32, .msh33, .msh34, .msh35, .msh36, .msh37, .msh38, .msh39, .msh40, .msh41, .msh42, .msh43, .msh44, .msh45, .msh46, .msh47, .msh48, .msh49, .msh50, .msh51, .msh52, .msh53, .msh54, .msh55, .msh56, .msh57, .msh58, .msh59, .msh60, .msh61, .msh62, .msh63, .msh64, .msh65, .msh66, .msh67, .msh68, .msh69, .msh70, .msh71, .msh72, .msh73, .msh74, .msh75, .msh76, .msh77, .msh78, .msh79, .msh80, .msh81, .msh82, .msh83, .msh84, .msh85, .msh86, .msh87, .msh88, .msh89, .msh90, .msh91, .msh92, .msh93, .msh94, .msh95, .msh96, .msh97, .msh98, .msh99, .msh100.

* Beneficiary ID :
* Beneficiary First Name :
* Sender Name :
No of documents to upload :

Document Type *	Document
Claim	Predictive
Select	Select
Select	Select
Select	Select
Select	Select



Attach*

	Browse...
	Browse...
	Browse...
	Browse...
	Browse...



- After all information is entered, click browse.
- A file upload box will launch.
- Select the location where the file is stored and click on file.
- The selected file will populate within the filename box.
- Once file is selected, click open.
- And submit.



miloginworkerqa.michigan.gov says

Document uploaded successfully. The Document ID is 20190627600001

Document Management Portal

Thursday, June 27, 2019

Deontey Banks

Return to CHAMPS

Search Documents

Document Upload

Work

OK

Tasks

Document Upload

Instructions.

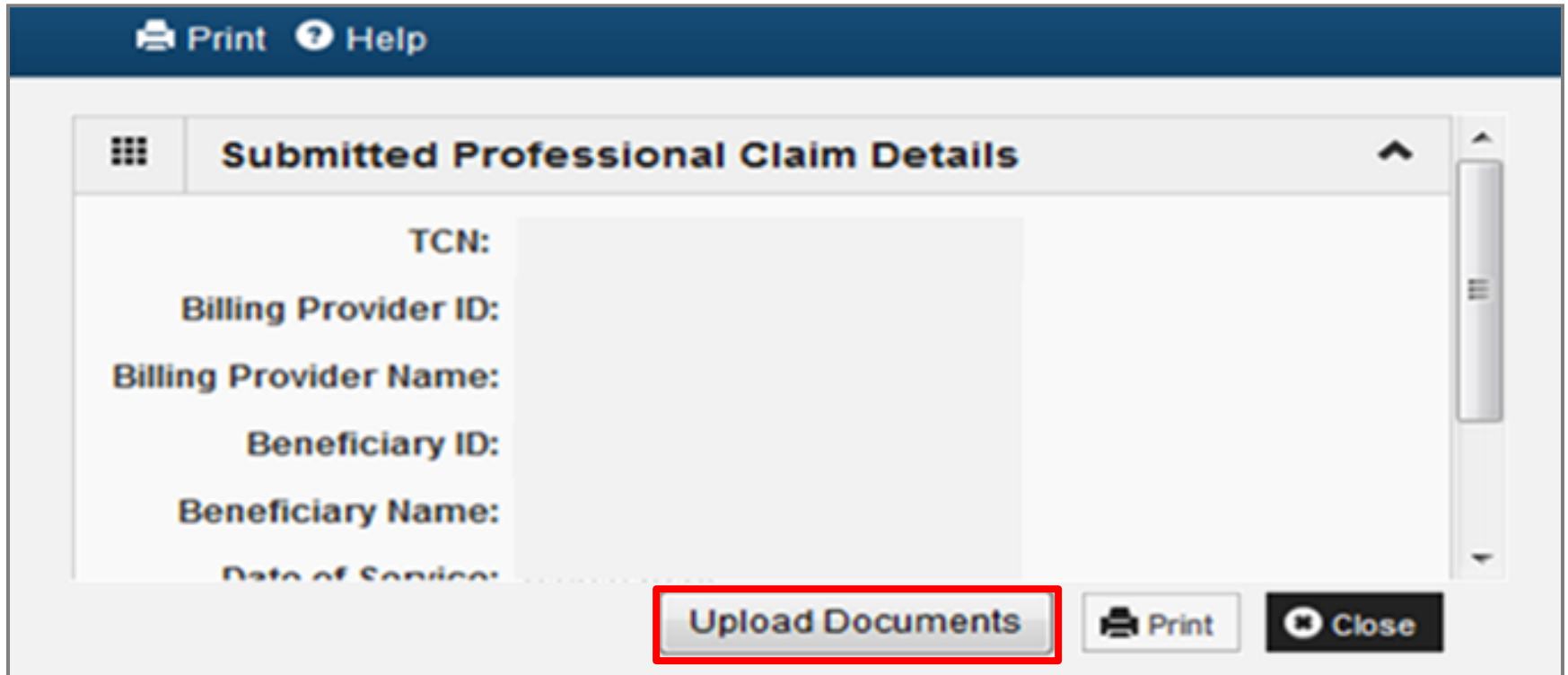
- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Title is 'PREDICTIVE MODELING'.
- TCN entered must be header TCN (ending in 000).
- A maximum of 5 TCN numbers can be entered. Separate each TCN with a semicolon (e.g. 764528810024212000;93428810024212000).
- A maximum of 5 NPI numbers can be entered. Separate each NPI with a semicolon (e.g. 1234567890;1987654321).
- Allowable file extensions for uploading: .pdf, .doc, .docx, .xls, .xlsx, .jpg, .jpeg, and .zip .

* Beneficiary ID :	<input type="text"/>	* NPI :	<input type="text"/>
* Beneficiary First Name :	<input type="text" value="First Name"/>	Beneficiary Last Name :	<input type="text" value="Last Name"/>
* Sender Name :	<input type="text"/>	* Sender Phone :	<input type="text"/>

Waiting for miloginworkerqa.michigan.gov...

- Once the document is submitted, the DMP screen will flash.
- Upload Successful pop-up will display with document id number.
- Upload is complete.
- Click OK.

CHAMPS Direct Data Entry



- After completing all necessary information for entering a claim in CHAMPS via direct data entry (DDE), click submit and then a pop-up box will display. Please see above.
- The pop-up box now contains a new link that states **Upload Documents**.
- Click the upload document link to launch the DMP portal.

Documents Search

Document Type :	Select	Document Title :	
TCN :		Status :	Select
Sender Name :		Sender Phone :	
NPI :		Beneficiary ID :	
Date of Service From :		Date of Service To :	
Loaded On :		Include History :	<input type="checkbox"/>
ID :		Invoice Type :	Select
<input type="button" value="Search"/>		<input type="button" value="Clear"/>	

- Once you click on the document upload button from the DDE screen, DMP will open up onto the Search documents tab.
- Click on the Document Upload screen as shown below.
- After you click on the document upload screen information from the claim will be prepopulated.

Document Upload

Instructions:

- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Title is 'PREDICTIVE MODELING'.
- TCN entered must be header TCN (ending in 000).
- A maximum of 5 TCN numbers can be entered. Separate each TCN with a semicolon (e.g. 764528810024212000;93428810024212000).
- A maximum of 5 NPI numbers can be entered. Separate each NPI with a semicolon (e.g. 1234567890;1987654321).
- Allowable file extensions for uploading: .pdf, .doc, .docx, .xls, .xlsx, .jpg, .jpeg, and .zip.

* Beneficiary ID :	<input type="text" value="0012345678"/>	* NPI :	<input type="text" value="1234567890"/>
* Beneficiary First Name :	<input type="text" value="Test"/>	Beneficiary Last Name :	<input type="text" value="Test"/>
* Sender Name :	<input type="text" value="Medicaid Test"/>	* Sender Phone :	<input type="text" value="(517) 999-9999"/>
No of documents to upload :	<input type="text" value="1"/>	Invoice Type :	<input type="text" value="Invoice Type"/>

Document Type *	Document Title *	Date of Service From *	Date of Service To *	TCN *	Message	Attach *
Select		<input type="text" value="12/01/2999"/>	<input type="text" value="12/15/2999"/>	<input type="text" value="211911111111111000"/>	<input type="text" value="TEST"/>	<input type="button" value="Browse..."/>
		<input type="button" value="Submit"/>	<input type="button" value="Clear"/>			

- The NPI and name will be auto filled based on the profile selected at sign in.
- Changes can be made and messages to the processor can be added.
- Documents can only be updated to a TCN that is in process or suspended. If no TCN number is available, please upload by beneficiary id number.
- Follow previous Document Upload instructions.

CHAMPS Claim Adjustment

The screenshot shows the CHAMPS Provider Portal interface. At the top, there are navigation tabs: My Inbox, Provider, Claims (selected), Member, and PA. A dropdown menu is open under the 'Claims' tab, listing several options: CLAIM SUBMISSION (Submit Professional, Submit Institutional, Submit Dental, Search Template), MANAGE CLAIMS (Adjust/Void Claim Provider), INQUIRE CLAIMS (Claim Inquiry), and RA LIST (RA List). A red arrow points to the 'Adjust/Void Claim Provider' option. The background shows a sidebar with sections like 'Latest updates', 'My Reminders', and 'Notification'. The main content area has a 'Name:' field and a table with columns for 'Alert Date', 'Due Date', and 'Read'.

From claims tab,
Under Manage Claims, select Adjust/Void Claim Provider.

The screenshot shows the 'Adjust Claims' form in the CHAMPS Provider Portal. The 'Claims' tab is selected in the top navigation. Below the navigation, there is a 'Close' button and a section titled 'Adjust Claims'. This section contains a 'TCN:' label followed by an input field and a 'Go' button.

Enter Header TCN that ends in all zero's to be adjusted or that needs documentation uploaded.

Header TCN: 4119

Beneficiary ID: [Redacted]

Name: KOCNA, STEPHANIE

Show

Header Details

Upload/View Documents

0

0

0

TCN: 4119

Original TCN: [Redacted]

No OF Lines: 1

Related Cause: NO

Claim Type:

Adjustment Source:

Medicare: N

Source: Web

Claim Status: In Process

Commercial: N

Beneficiary ID: [Redacted] *

Gender: F-Female *

Patient Account Number: 000101320629

Last Name: [Redacted]

DOB: 02/09/1994 *

Admit Date: [Redacted]

First Name: [Redacted]

Age: 0

Other Insurance

Place of Service: 11-Office

Billing Provider ID: [Redacted] * Type: NPI *

Billing Provider Taxonomy: [Redacted]

Rendering Provider ID: [Redacted] Type: NPI

Rendering Provider Taxonomy: [Redacted]

Supervising Provider ID: [Redacted] Type: NPI

Pay To Provider ID: [Redacted] Type: NPI

Referring Provider ID: [Redacted] Type: NPI

Referring Provider Taxonomy: [Redacted]

Primary Care Referring Provider ID: [Redacted]

Primary Care Referring Provider Taxonomy: [Redacted]

Type: [Redacted]

Auth #: [Redacted]

Diagnosis Codes: 1: M792 *

2: R51

3: R350

4: H9190

Delay Reason Code: [Redacted]

Referral #: [Redacted]

7: [Redacted]

8: [Redacted]

CLIA Number: [Redacted]

Diagnosis Code Category: ICD-10-CM *

Submitted Charges: \$142.00

Billed Amount: [Redacted]

Approved Amount: [Redacted]

Warrant/EFT Number: [Redacted]

RA Number: [Redacted]

Paid Date: [Redacted]

Adjust Void Save Cancel



- Make all changes to the claim that are necessary.
- Once the changes have been made, click save.
- The new TCN will then be visible at the top of the page. The new TCN will start with a 411.
- Please Note the new TCN.
- Click Save for the DMP to attach to the correct TCN.

Header TCN: [Redacted] Beneficiary ID: [Redacted] Name: [Redacted] Show ▾

Header Details Upload/View Documents 0 0 0 0

TCN: [Redacted] Claim Type: J - Professional Source: HIPAA
 Original TCN: [Redacted] Adjustment Source: Claim Status: Paid
 No Of Lines: 1 Medicare: N Commercial: Y
 Related Cause: NO ▾

Beneficiary ID: [Redacted] * Last Name: [Redacted] First Name: [Redacted]
 Gender: F-Female ▾ * DOB: [Redacted] 🗓 * Age: 24
 Patient Account Number: 000101320629 Admit Date: [Redacted] 🗓

Other Insurance
 Place of Service: 11-Office ▾

Billing Provider ID: [Redacted] * Type: NPI ▾ * **Pay To Provider ID:** [Redacted] Type: NPI ▾
 Billing Provider Taxonomy: [Redacted]
Rendering Provider ID: [Redacted] Type: NPI ▾ **Referring Provider ID:** [Redacted] Type: NPI ▾
 Rendering Provider Taxonomy: [Redacted] Referring Provider Taxonomy: [Redacted]
Supervising Provider ID: [Redacted] Type: NPI ▾ **Primary Care Referring Provider ID:** [Redacted] Type: ▾
 Primary Care Referring Provider Taxonomy: [Redacted]

Auth #: [Redacted] Referral #: [Redacted] CLIA Number: [Redacted]
 Diagnosis Codes: 1: M792 * 2: R51 3: R350 4: H9190 Diagnosis Code Category: ICD-10-CM ▾ *
 5: [Redacted] 6: [Redacted] 7: [Redacted] 8: [Redacted]
 Delay Reason Code: [Redacted] ▾

Submitted Charges: \$142.00 Billed Amount: \$12.11 Approved Amount: \$0.00
 Warrant/EFT Number: 101222880 RA Number: 78544721 Paid Date: 2018-10-11

Adjust Void Save Cancel

- Click upload/view documents button to add a document.
- DMP will launch in a separate window.

Documents Search

Document Type :	<input type="text" value="Select"/>	Document Title :	<input type="text" value="v"/>
TCN :	<input type="text"/>	Status :	<input type="text" value="Select"/>
Sender Name :	<input type="text"/>	Sender Phone :	<input type="text"/>
NPI :	1790746964	Beneficiary ID :	<input type="text"/>
Date of Service From :	<input type="text"/> <input type="button" value="calendar"/>	Date of Service To :	<input type="text"/> <input type="button" value="calendar"/>
Loaded On :	<input type="text"/> <input type="button" value="calendar"/>	Include History :	<input type="checkbox"/>
ID :	<input type="text"/>	Invoice Type :	<input type="text" value="Select"/>
<input type="button" value="Search"/> <input type="button" value="Clear"/>			

- Once you click on the uploads document button from inside the claim, DMP will open up onto the Search documents tab.
- Click on the Document Upload screen as shown below.

Header TCN: 3
Beneficiary ID:

TCN:
Original TCN:
No Of Lines:
Related Cause:

Beneficiary ID:
Gender:
Patient Account Number:
Other Insurance
Place of Service:

Billing Provider ID:
Billing Provider Taxonomy:
Rendering Provider ID:
Rendering Provider Taxonomy:
Supervising Provider ID:

Auth #:
Diagnosis Codes:
Delay Reason Code:
Submitted Charges:
Warrant/EFT Number:

Name: KOCNA, STEPHANIE

Document Upload - Internet Explorer

CHAMPS
Online Document Submission

FFS

Document Management Portal
Monday, June 24, 2019
Return to CHAMPS

Search Documents | Document Upload | Messages | FAX Cover Sheet | Tasks |

Document Upload

Instructions.

- All fields marked with an asterisk (*) are required.
- The date of service is required only when the Document Type chosen is 'CLAIM'.
- A TCN is required only when the Document Title is 'PREDICTIVE MODELING'.
- TCN entered must be header TCN (ending in 000).
- A maximum of 5 TCN numbers can be entered. Separate each TCN with a semicolon (e.g. 764528810024212000;93428810024212000).
- A maximum of 5 NPI numbers can be entered. Separate each NPI with a semicolon (e.g. 1234567890;1987654321).
- Allowable file extensions for uploading: .pdf, .doc, .docx, .xls, .xlsx, .jpg, .jpeg, and .zip.

* Beneficiary ID : 0012345678 * NPI : 1234567890

* Beneficiary First Name : TEST Beneficiary Last Name : TEST

* Sender Name : MEDICAID TEST * Sender Phone : (517) 999-9999

No of documents to upload : 1 Invoice Type : Professional

Document Type *	Document Title *	Date of Service From *	Date of Service To	TCN *	Message	Attach *
Select		07/31/2018	07/31/2018	311911111111111000		Browse...

Submit Clear

- Information from the claim in CHAMPS will be prepopulated in DMP.
- Verify the information is correct, and then complete the remaining fields.
- All boxes marked with an asterisk are required.
- Follow previous Document Upload instructions.

Submit Fax

Submit Fax

- A new fax cover sheet must be created for each document submission.
- Re-using the same fax cover sheet will result in the documents being attached to an incorrect beneficiary and/or claim and the possibility of a claim(s) being rejected.

CHAMPS

My Inbox Provider Claims Member PA

Last Login: 24 JUN, 2019 12:14 PM

Note Pad External Links My Favorites Print Help

Provider Portal

NPI: Name:

Latest updates

System Notification

Due to R10c-1.6 Release, the CHAMPS system will be down between 7:00 PM through 7:00 AM EDT Saturday, June 22nd, 2019. This outage will affect the C for all functionality.

My Reminders

Filter By

Go

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


24 June 2019
Monday

2019 June

We	Th	Fr	Sa	Su
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30
Today				→

- Please click on external links and select the Document Management Portal from the drop down.
- External links can be found along the top of CHAMPs under the tabs in the blue highlighted section.

GenerateCoverSheet - Internet Explorer

 **Document Management Portal**
Monday, June 24, 2019
Return to CHAMPS

FFS

Search Documents | Document Upload | Messages | FAX Cover Sheet

FAX Cover Sheet


* Beneficiary ID :

* NPI :

* Document Type :

* Document Title :

* TCN :


* Date of Service : 

* Sender Name :

* Sender Fax :

* Sender Phone :

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- Select fax cover sheet from top of DMP page.

[Search Documents](#) | [Document Upload](#) | [Messages](#) | **[FAX Cover Sheet](#)**

FAX Cover Sheet

* Beneficiary ID :	<input type="text" value="0123456789"/>
* NPI :	<input type="text" value="1234567890"/>
* Document Type :	<input type="text" value="Claim"/>
* Document Title :	<input type="text" value="Select"/>
* TCN :	<input type="text" value="Select"/>
* Date of Service :	<input type="text"/>
* Sender Name :	<input type="text"/>
* Sender Fax :	<input type="text"/>
* Sender Phone :	<input type="text"/>

- Select
- Ambulance
- Anesthesia Records
- Diagnostic Tests
- EOB Insurance
- Forms
- Medical Documentation
- NDC Drug Dosing & Cost Info
- Notes
- Reports
- Predictive Modeling
- Other

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- Complete all information regarding the documentation and click submit.
- All boxes marked with a red asterisk are required.
- A new cover sheet is required for each individual beneficiary. You must not reuse the same cover sheet.



FFS ▾

Document Management Portal

Monday, June 24, 2019

[Return to CHAMPS](#)

[Search Documents](#) | [Document Upload](#) | [Messages](#) | **[FAX Cover Sheet](#)**



FAX Cover Sheet

* Beneficiary ID :	<input type="text" value="0123456789"/>
* NPI :	<input type="text" value="1234567890"/>
* Document Type :	<input style="border: none; background-color: #f0f0f0; padding: 2px 5px;" type="text" value="Claim"/> ▾
* Document Title :	<input style="border: none; background-color: #f0f0f0; padding: 2px 5px;" type="text" value="Medical Documentation"/> ▾
TCN :	<input type="text" value="311911111111111000"/>
* Date of Service :	<input type="text" value="12/01/2999"/> <input type="button" value="📅"/>
* Sender Name :	<input type="text" value="Medicaid Test"/>
* Sender Fax :	<input type="text" value="(517) 999-9999"/>
* Sender Phone :	<input type="text" value="(517) 999-9999"/>



- Once all required fields are completed, please click submit.
- See next slide for sample coversheet.

- A fax cover sheet will launch in a new window.
- A new cover sheet must be created for each document submission to DMP.
- A barcode is created and used to store the PHI within previous screen and is different for each beneficiary.
- Print out fax cover sheet and attach to documents.
- Send fax to appropriate number listed on the top of the cover sheet.
- Add note to claim:
Documents sent via DMP
(Loop 2300 NTE segment)
- Allow 1 business day for document to be attached.

		ONLINE FAX COVER SHEET	
Consent Forms Approval Area Fax Number : 855-452-3353 Institutional Claim Documentation Review Area Fax Number : 855-452-3354 Predictive Modelling Claim Documentation Review Area Fax Number : 855-452-3356 Professional/Dental Claim Documentation Review Area Fax Number : 855-452-3355			
FAX Control Number :			
		OF20200408100002	
Beneficiary ID :		0123456789	
NPI :		1122334455	
TCN :			
Document Type :		Claim I	
Document Title :		EOB Insurance	
Date of Service :		01/01/2020	
Sender Name :		Provider	
Sender Fax :		517-555-0121	
Sender Phone :		517-555-0122	
<hr/> <p style="text-align: center;">Any Questions, call MDHHS Provider Inquiry: 1-800-292-2550</p> <p><small>CONFIDENTIALITY NOTICE: The transmitted documents are intended only for the use of the individual or entity named under "TO:" above. This may contain information that is privileged, confidential or exempt from disclosure under applicable law. If you are not the intended recipient, you are hereby notified that any disclosure, distribution or copying, or the taking of any action in regard to the contents of this information is strictly prohibited. If you have received this fax in error, please telephone us immediately so that we can correct the error and arrange for destruction or return of the faxed document.</small></p>			
		<small>MSA-0002-DMP (08-13)</small>	



Messages

Messaging







- DMP has messaging capabilities.
- Messages will be attached within submitted documentation.
- You may view/read them on the DMP messages screen.
- When a new message is added, email notification will go out to the email address that was included in your Mlogin account registration.
- Please add our email address to your address book so the email does not delete the notification or add to spam or junk mail.



User Messages

Show 10 entries

Search:

Received On	Beneficiary Id	To	From	Subject	Status
2013-12-18 02:35:30 PM 	9879384753	uatg1u9999		Requisition Status	UnRead
2013-12-18 02:34:42 PM 	9879384753	uatg1u9999		Requisition Status	Read
2013-12-16 03:11:37 PM 	9347958794	uatg1u9999		Requisition Status	Read
2013-12-16 02:57:33 PM 	7453242423	uatg1u9999		Requisition Status	Read
2013-12-09 11:42:48 AM 	6457364565	uatg1u9999		Test	Read
2013-12-09 09:08:12 AM 	6457364565	uatg1u9999		Test	Read

Showing 11 to 20 of 21 entries

◀ Previous Next ▶

- To view messages please click the Message tab across the top of the DMP.
- To read messages please click on the i icon in the received on column.

User Message :

Beneficiary Id : ██████████
Beneficiary First Name : ██████████
Beneficiary Last Name : ██████████
NPI : ██████████
TCN : -
Document Title : Hysterectomy Form
Document Type : Consents
From : ██████████
To : ██████████
Subject : Requisition Status
Message : The decision letter has been generated. Please click on View Document.

- Message notations are viewable here.
- Once in the message, there are options to reply to sender and view document associated with the message.
- Clicking ok returns to the Messages Screen.
- 1,000 character limit.

Provider Resources

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

Thank you for participating in the Michigan Medicaid Program