



Complete Update

for Blues Medicaid providers



April 2017

Providers required to enroll into the Community Health Automated Medicaid Processing System

All current and new Michigan Medicaid providers, including out-of-state providers, are now required to access the Community Health Automated Medicaid Processing System to register for the Michigan Medicaid program.

CHAMPS is the Michigan Department of Health and Human Services' Medicaid web-based processing system.

Effective January 1, 2018, claims submitted by providers who have not fully completed the provider enrollment in CHAMPS will be rejected or not appear on a remittance advice.

If you haven't already registered, get the MDHHS login instructions located at www.michigan.gov.*

State issues notice of Healthy Michigan copayment increase

The Michigan Department of Health and Human Services issued a notice of copay increase for Healthy Michigan plan beneficiaries for dates of service on or after April 1, 2017.

For a list of covered services that include copay increases, visit www.michigan.gov/healthymichiganplan*.

Providers should check for beneficiary eligibility using the Community Health Automated Medicaid Processing System also known as CHAMPS.

Also starting April 1, 2017, eligibility responses in CHAMPS will provide tiered copay amounts applicable to the beneficiary.

As a reminder, Healthy Michigan beneficiaries enrolled in a health care plan are not responsible for copays at the point of service as long as plan covers the service.

Copays are collected through the MI Health Account. Healthy Michigan beneficiaries are still required to receive information on potential copays from providers at the point of service.

State announces early refills for prescription drugs

The Michigan Department of Health and Human Services announced that starting April 1, 2017, early refill overrides may be granted one time per drug per 12 months to replace medications that have been lost, stolen or destroyed or for the purpose of vacation or travel. Early refills will not exceed a 34-day supply.

Please note, MDHHS or its designee may limit the number of early refill overrides if they suspect fraud or abuse, and may request additional documentation before approval.

To request an override for an early refill, the pharmacy can call the MDHHS Pharmacy Benefits Manager Technical Call Center at 1-877-624-5204.

Blue Cross Complete paper claims and appeals process

As a reminder, Blue Cross Complete's paper claims and appeals should be sent to the following addresses:

- **Paper claims** – Blue Cross complete Claims, P.O. Box 7355. London, KY 4074
- **Provider claims appeals** – Blue Cross Complete Claims Appeals – P.O. Box 7361, London, KY 40742
- **UM appeals** – Medical Appeals Dept. – 4390 Belle Oaks Dr. Ste. 400 Charleston, SC 29405

Do not send claims or appeals to this address:
Blue Cross Blue Shield of Michigan
600 E. Lafayette
Detroit, MI 48226

Blue Cross Complete provider account executive territory assignment

The Blue Cross Complete provider account executive territory assignment can be located at mblucrosscomplete.com/providers.

* Blue Cross Complete does not control these sites and is not responsible for their content.