



Complete Update

for Blues Medicaid providers



December 2017

Providers required to enroll into the CHAMPS

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

Effective January 1, 2018, providers must be enrolled in the MDHHS Community Health Automated Medicaid Processing System.

Beginning March 1, 2018, MDHHS will prohibit Blue Cross Complete from making payments to all typical rendering, referring, ordering and attending providers not enrolled in CHAMPS.

Effective for dates of service on and after May 1, 2018, MDHHS will prohibit payment for prescription drug claims written by a prescriber who is not enrolled in CHAMPS.

Please visit the CHAMPS section of the Michigan Department of Health and Human Services website located at Michigan.gov/mdhhs.

If you have any questions, contact your Blue Cross Complete provider account executive.

Vaccines and vaccine administration claims

To avoid a rejection of your claims, we'd like to remind you that each vaccine or toxoid must be reported along with the administration code on your claim.

Additionally, only one administration fee can be billed per vaccine. Please bill vaccines and vaccine administration codes on the same claim form.

If you have any questions, contact Blue Cross Complete Provider Inquiry at 1-888-312-5713 or your Blue Cross Complete provider account executive.

Medical record review is approaching

With HEDIS®* season just around the corner, Blue Cross Complete would appreciate your cooperation with our efforts to collect data from medical records of

members you've treated.

Blue Cross Complete of Michigan is required by the Centers for Medicare and Medicaid and the Michigan Department of Health and Human Services to conduct reviews of and report data collected from the medical records of our members to support our annual quality improvement program and HEDIS measures.

Blue Care Network will assist with our annual medical record review process. Blue Care Network employs licensed nurses who have significant experience in medical record review and quality measurement.

* HEDIS is a registered trademark of the National Committee for Quality Assurance

Remember to report your updates to NaviNet

When submitting updates regarding your office to Blue Cross Complete, be sure to submit your updates to Navinet as well. Some key items that are included in updates are:

- Provider name
- Address
- Phone number
- Fax number
- Office hours
- Open status
- Hospital affiliations
- Multiple locations

Contact NaviNet at 1-888-482-8057 or support @ navinet.net* to indicate the change that you made within your organization.

As a reminder, changes should be submitted at least 60 days in advance, if possible. Changes can be submitted on the Blue Cross Complete Provider Change Form, located on the Blue Cross Complete website at mibluccrosscomplete.com/provider.

If you have any questions, please contact your Blue Cross Complete provider account executive or Provider Inquiry at 1-888-312-5713.

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