

## Provider Contact Information

### Medicaid Health Plan

- [Medicaid Health Plan Website](#)
- [List of Medicaid Health Plan Contact and Service Listing](#)

### Integrated Care Organization

- [MI Health Link Website](#)
- [List of Integrated Care Organizations and Service Listing](#)

### Prior Authorization (PA)

- 1-800-622-0276

### Provider Enrollment

- [Provider Enrollment Website](#)
- 1-800-292-2550
- [ProviderEnrollment@Michigan.gov](mailto:ProviderEnrollment@Michigan.gov)

### Provider Support

- [www.Michigan.gov/MedicaidProviders](http://www.Michigan.gov/MedicaidProviders)
- 1-800-292-2550
- [ProviderSupport@Michigan.gov](mailto:ProviderSupport@Michigan.gov)

### SIGMA

- [www.Michigan.gov/SIGMAVSS](http://www.Michigan.gov/SIGMAVSS)
- 517-284-0550
- [SIGMA-Vendor@Michigan.gov](mailto:SIGMA-Vendor@Michigan.gov)
- [SIGMA Vendor Self Serve \(VSS\)](#)

## Beneficiary Contact Information

### Beneficiary Helpline

- 1-800-642-3195

### MI Bridges

- [www.Michigan.gov/mibridges](http://www.Michigan.gov/mibridges)

Sign up for Dental [Listserv](#) email notifications


## Additional Resources



[CHAMPS Website](#)

[Training Website](#)

[Provider Alerts](#)

 [Learn More](#)

# Medicaid Dental Provider Beginner Guide

New to Michigan Medicaid? Follow the steps below to register for access to the Community Health Automated Medicaid Processing System, (CHAMPS) and start billing.

## Step 1. New Dental provider

All providers who serve Michigan Medicaid beneficiaries are required to be screened and enrolled. [Enroll as a Dental Provider](#) website

- ✓ Determine CHAMPS Enrollment Type
- ✓ Register in [SIGMA VSS](#) to receive payments
- ✓ Register for MILogin and request CHAMPS access  
[CHAMPS Overview](#) [CHAMPS FAQ](#)

## Step 2. Verification Requirement

### ELIGIBILITY

- ✓ Check beneficiary eligibility prior to services: Reference [Eligibility Inquiry](#)  
Is your patient in a Health Plan? Reference the [Medicaid Health Plan Dental Vendor Contact Resource](#)  
[Dental Responsibilities at a Glance](#)  
Michigan Medicaid eligibility policy >> [Michigan Medicaid Provider Manual](#) >> Chapter Beneficiary Eligibility

### CODING\*\*

- ✓ Is this a covered procedure code? Does it require a Prior Authorization?  
Are there other restrictions? Patient in a MHP or ICO? Please remember you must reach out to the Plan for coding specifics.
  - [Medicaid Code and Rate Reference Tool](#)
  - [Dental Fee Schedule](#)
  - [Prior Authorization webpage / PA Screen Navigation](#)

## Step 3. Claim Submission

- ✓ Submit a fee for service claim in CHAMPS via Direct Data Entry (DDE)?
  - [Dental Resource](#)
 Electronically:
  - [Submitting Claim Files Electronically](#)

## Step 4. After the Claim has Processed

- ✓ Status the claim >> [Claim Status Instructions](#)
  - What is a [suspended claim](#)? Claim has been submitted but requires manual review.

How to locate a paper Remittance Advice (RA) >> [Retrieving a Medicaid Paper RA](#)

How to locate the Washington Publishing Company for Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) explanation >> [External Links Quick Reference](#)

\*\*Medicaid Health Plans (MHPs) and Integrated Care Organizations (ICOs) must provide the full range of covered services described in policy at a minimum and may choose to provide services over and above those specified. MHPs and ICOs may develop prior authorization (PA) requirements and review criteria that differ from Medicaid requirements. For beneficiaries enrolled in an MHP or ICO, the provider must check with the beneficiary's health plan for PA requirements.