



ATTENTION PART B PROVIDERS!

Comparative Billing Reports (CBRs) are Now Available through myCGS!

The purpose of the Comparative Billing Report (CBR) is to show providers/suppliers their specific billing pattern data in comparison to peer groups within the state and the CGS jurisdiction. This information is helpful in conducting education and self-audit activity.

We are pleased to announce that CBRs are now available to Part B providers via the myCGS Web portal!

How Do I Request a CBR?

To request a CBR, follow these steps:

- Step 1:** Once you are logged into myCGS, select the FORMS tab.
- Step 2:** From the 'Select a Topic' drop-down menu, click the 'Medical Review' option.
- Step 3:** From the 'Select a Type' drop-down menu, click the 'CBR' option.
- Step 4:** Click on the 'CBR: CBR-J15-B' link to view the request form.

The screenshot shows the myCGS web portal interface. The 'Forms' tab is highlighted in the top navigation bar. Below the navigation bar, there are fields for 'User:' and 'Provider:' with a 'Logout' button. A message box indicates 'You have 19 unread message(s) and 0 alerts.' Below this, there is a 'Secure Forms' section with a notice about Pre-Claim Review (PCR) for Illinois and Florida. The main content area contains a 'Select a Topic' dropdown menu with 'Medical Review' selected, a 'Select a Type' dropdown menu with 'CBR' selected, and a link for 'CBR: CBR-J15-B'. The footer includes the CGS logo, CMS logo, and a disclaimer.

Once the form loads, you will find some information pre-populated with identifying information for your PTAN/NPI.

- Step 5:** From the 'Date Range' drop-down menu, select the 3-month timespan for which you would like to receive data. Click the 'Submit' button.



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Step 6: Enter the performing provider's PTAN and click on the 'Validate' button.

NOTE: The performing provider PTAN must be associated with the Group PTAN.

Home Claims Remittance Eligibility Financial Tools Messages Forms Support Admin My Account

User: Provider: Logout

Get Status You have 19 unread message(s) and 0 alerts. Help Go To Page Select Form

Comparative Billing Report: PTB

Provider Information

Contract Region: Part B Kentucky
 Provider Name: Part B Provider
 Provider Number (PTAN): XXXXX
 National Provider Identifier (NPI): XXXXXXXXXXX

Comparative Billing Report

5 Date Range: * October 01, 2017 - December 31, 2017
 HCPCS / CPT: * 99213
 6 Performing PTAN: * XXXXXXXX Validate

7 Submit Clear

* Required Field

**** Please note the report is selected based on date of service and not processed date. Information may change for claims finalized if report is requested for the same dates of service multiple times.**

Step 7: Once the performing provider PTAN entered is validated, you may click on 'Submit' to send your request.

Next, an eSignature box will ask you to verify the information entered on the form is correct and if you are an authorized requester for this information.

Step 8: If the information on the form is correct and you are authorized to receive a CBR for your PTAN/NPI, click the 'OK' button.

e-Signature

Please review the information entered carefully.

By clicking on the Ok button you are signing the form and are authorized to submit the information.

8 Ok Cancel

A secure message will be delivered to your myCGS inbox noting that a CBR request was received.

Action	Date	Subject	Unique Identifier	Submission ID	Archive
<input type="checkbox"/>	Thu Nov 2 08:23 EDT 2017	9 CBR Received		No Submission ID	



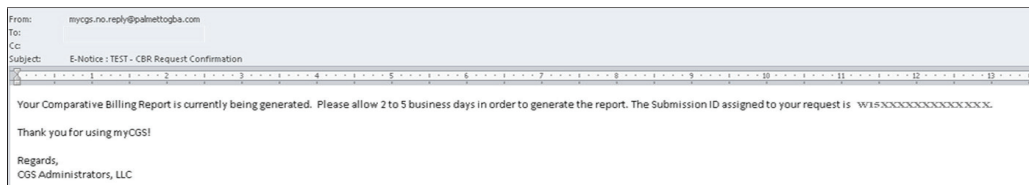
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Step 9: Click on the link to display the message.

Action	Date	Subject	Unique Identifier	Submission ID	Archive
<input type="checkbox"/>	Thu Nov 2 08:23 EDT 2017	9 CBR Received		No Submission ID	

Shortly thereafter, you will receive an email message acknowledging that your CBR is being generated. The email will include a Submission ID that may be used to check the status of your request.



The same message will be delivered to your myCGS inbox.

In message inbox Displaying 1-8 of 13. [First/Prev] 1, 2 [Next/Last]

Action	Date	Subject	Unique Identifier	Submission ID	Archive
<input type="checkbox"/>	Thu Nov 2 08:28 EDT 2017	10 CBR Confirmation		W15XXXXXXXXXXXXXXXXX	
<input type="checkbox"/>	Thu Nov 2 08:23 EDT 2017	CBR Received		No Submission ID	

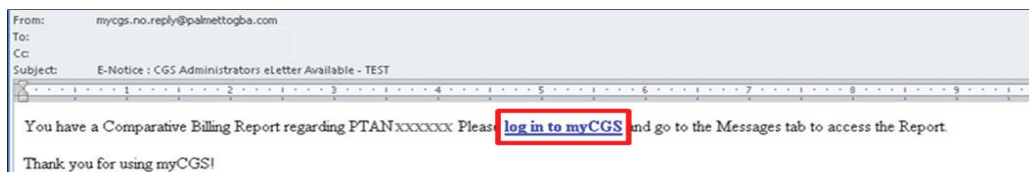
Step 10 Click on the link to display the message.

Once the message displays, you may click on the Submission ID to check the status of the request.

In message inbox Displaying 1-8 of 13. [First/Prev] 1, 2 [Next/Last]

Action	Date	Subject	Unique Identifier	Submission ID	Archive
<input type="checkbox"/>	Thu Nov 2 08:28 EDT 2017	10 CBR Confirmation		W15XXXXXXXXXXXXXXXXX	
<input type="checkbox"/>	Thu Nov 2 08:23 EDT 2017	CBR Received		No Submission ID	

When the CBR request is completed and ready to view, you will receive an email to let you know. The email will include a link to take you directly to the myCGS log-in page.



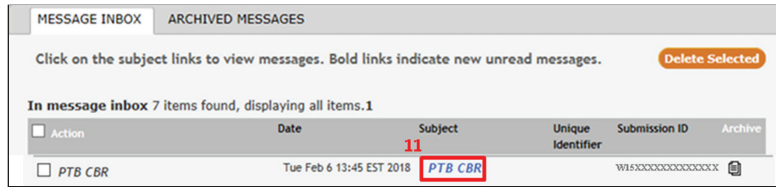
Once logged in, select the MESSAGES tab to view your inbox.



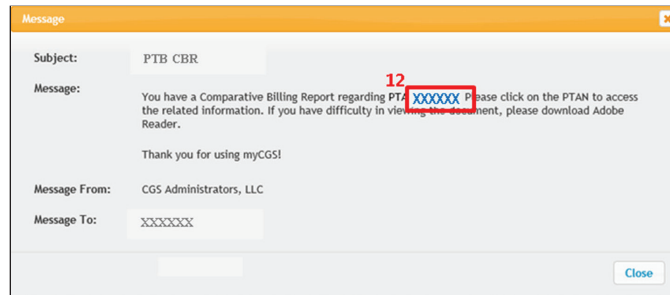
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Step 11: Click on the link to display the message.




Step 12: Once the message opens, click on your PTAN to view your CBR.



CBRs: A Comparative Billing Report (CBR) provides comparative billing data to an individual health care provider. CBR's contain actual data-driven tables and graphs with an explanation of findings that compare provider's billing and payment patterns to those of their peers within your state and the CGS jurisdiction. Graphic presentations contained in these reports help to communicate a provider's billing pattern more clearly

Submission ID: W15XXXXXXXXXXXXX February 8, 2018 1:18 PM 2

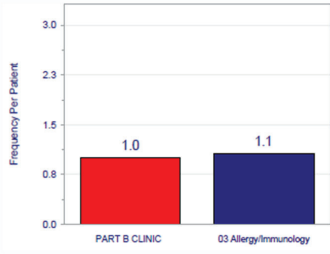

Comparative Billing Report
 Prepared for: PART B CLINIC
 PTAN: XXXXXXXX / NPI: XXXXXXXXXX
 Specialty: 03 Allergy/Immunology

How you compare to your peers in this specialty billing 99213 service

Specialty Peer Comparison for Same Procedure Code

Providers Billing 99213		
Specialty: Allergy/Immunology		
Providers in Specialty Submitting for this Service: 68		
Quarter for Comparison: 01JUL2017 - 30SEP2017		
Provider	Allowed Amount	Allowed Services
Peer17	\$3,100.95	45
Peer18	\$3,100.95	45
Peer19	\$2,963.13	43
Peer20	\$2,894.22	42
Peer21	\$2,894.22	42
Peer22	\$2,882.00	44
Peer23	\$2,226.49	33
Peer24	\$2,161.50	33
Peer25	\$2,067.30	30
PART B CLINIC	\$1,996.39	29

Average Services Allowed per Patient for Code: 99213
Quarter for Comparison: 01JUL2017 - 30SEP2017



Source: Data Mining and Analytics Team, CGS Administrators, LLC
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Take advantage of this enhancement and other features by registering for myCGS (<https://www.cgsmedicare.com/mycgs/index.html>)!