

What to Expect When

ENROLLING

CGS 4R's of Enrollment gives providers an idea of what to expect during the enrollment process. This Job Aid consists of provider's and contractor's actions and general time-frames.

RECEIVE

Providers can submit applications to CGS via standard or expedited mail or electronically through Pecos Web (faxed or emailed applications are no longer accepted). Within 10 days of receipt, providers can expect to receive a letter acknowledging receipt of the application.

REVIEW

≤ 20 days after receipt, applications are reviewed for missing or clarifying information. If additional information is needed, providers can expect to receive a letter requesting additional information. Providers have 30 days to submit additional information or the application will be rejected and closed.

If no additional information is needed, no request letter is sent; the application continues processing.

RECONCILE

≤ 30 days of receipt of a complete application and/or additional information, providers can expect the enrollment to be updated. Site visits, address validation, and CMS requirements can cause delays during this stage. Promptly responding to contractor's request will ensure your application is completed faster.

RESOLVE

Application is resolved and a final letter is issued. Click the applicable link to see average processing times for your application type

Part A: https://www.cgsmedicare.com/medicare_dynamic/cyctime/j15a.asp

Part B: https://www.cgsmedicare.com/medicare_dynamic/cyctime/j15b.asp

HHH: https://www.cgsmedicare.com/medicare_dynamic/cyctime/j15hhh.asp



CGS®

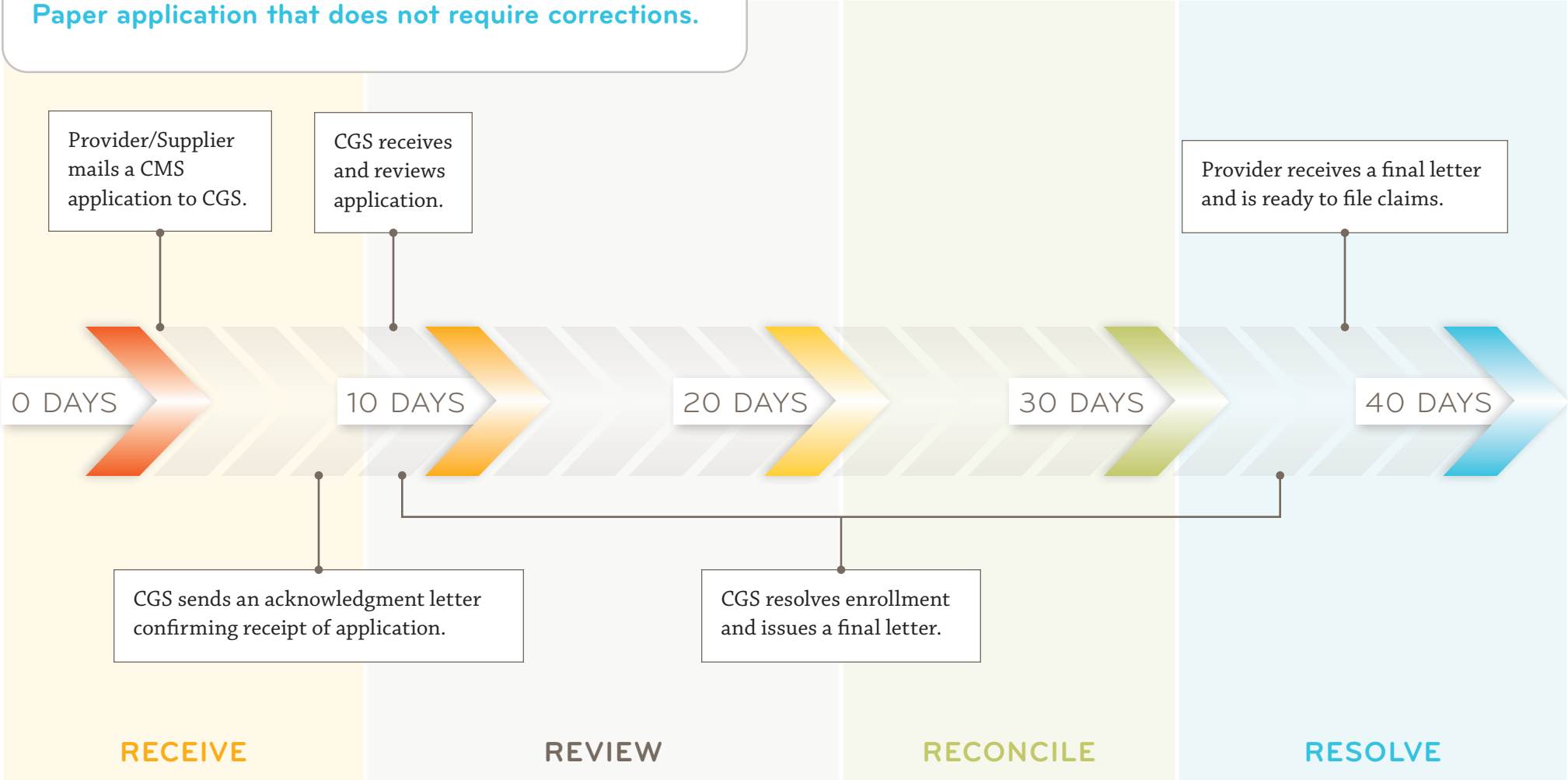
A CELERIAN GROUP COMPANY



What to Expect When

ENROLLING

When your CMS application is a . . .
Paper application that does not require corrections.



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When your CMS application is a . . .
Paper application that requires corrections.

Provider/Supplier mails a CMS application to CGS.

CGS receives and reviews application and emails a request for corrections, if needed.

CGS receives corrections or identifies application as complete and initiates enrollment in PECOS.

Provider receives a final letter and is ready to file claims.



CGS sends an acknowledgment letter confirming receipt of application.

Provider must return corrections or the application will be rejected and closed.

CGS resolves enrollment and issues a final letter.

RECEIVE

REVIEW

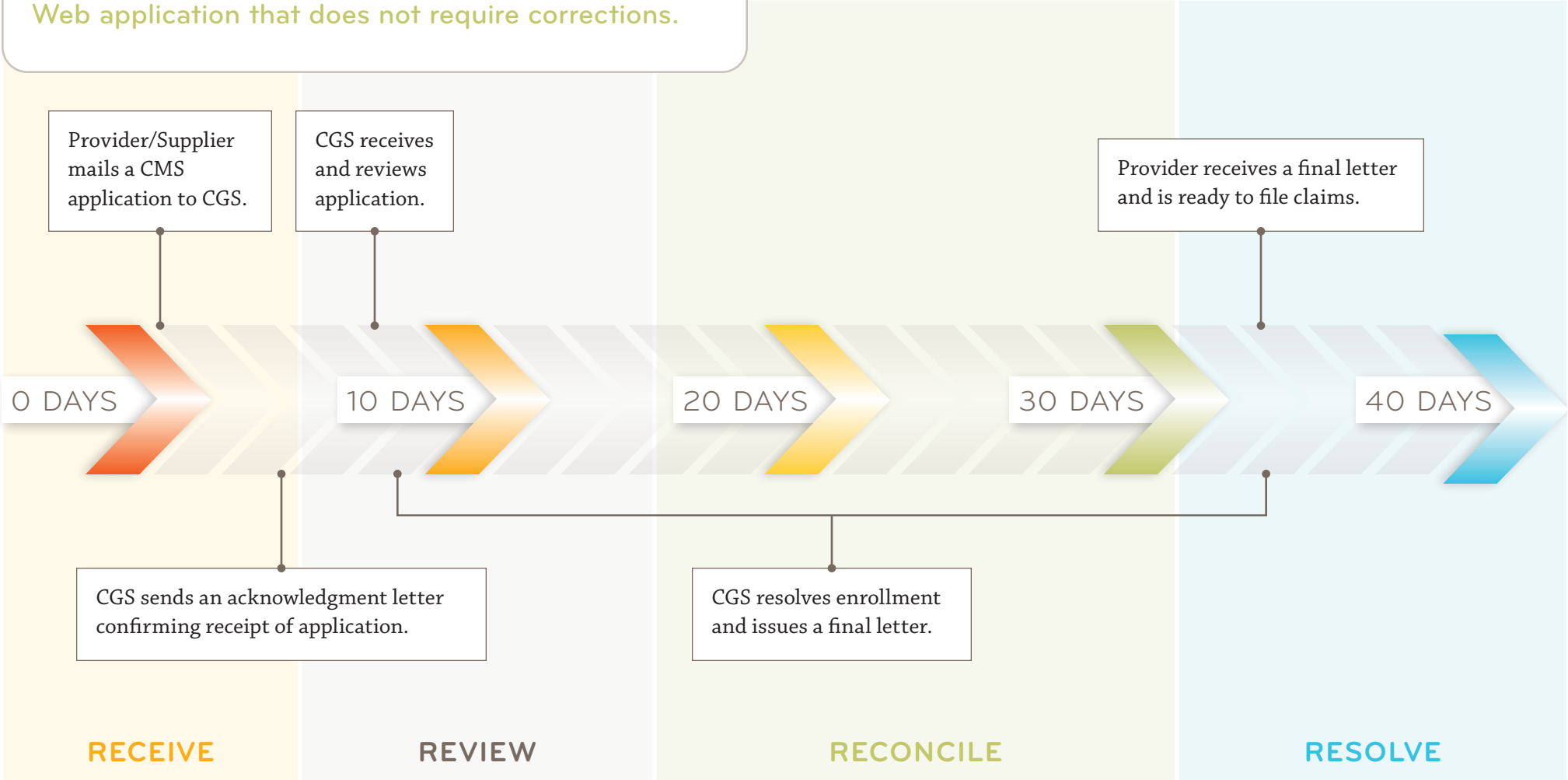
RECONCILE

RESOLVE

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When your CMS application is a . . .
Web application that does not require corrections.



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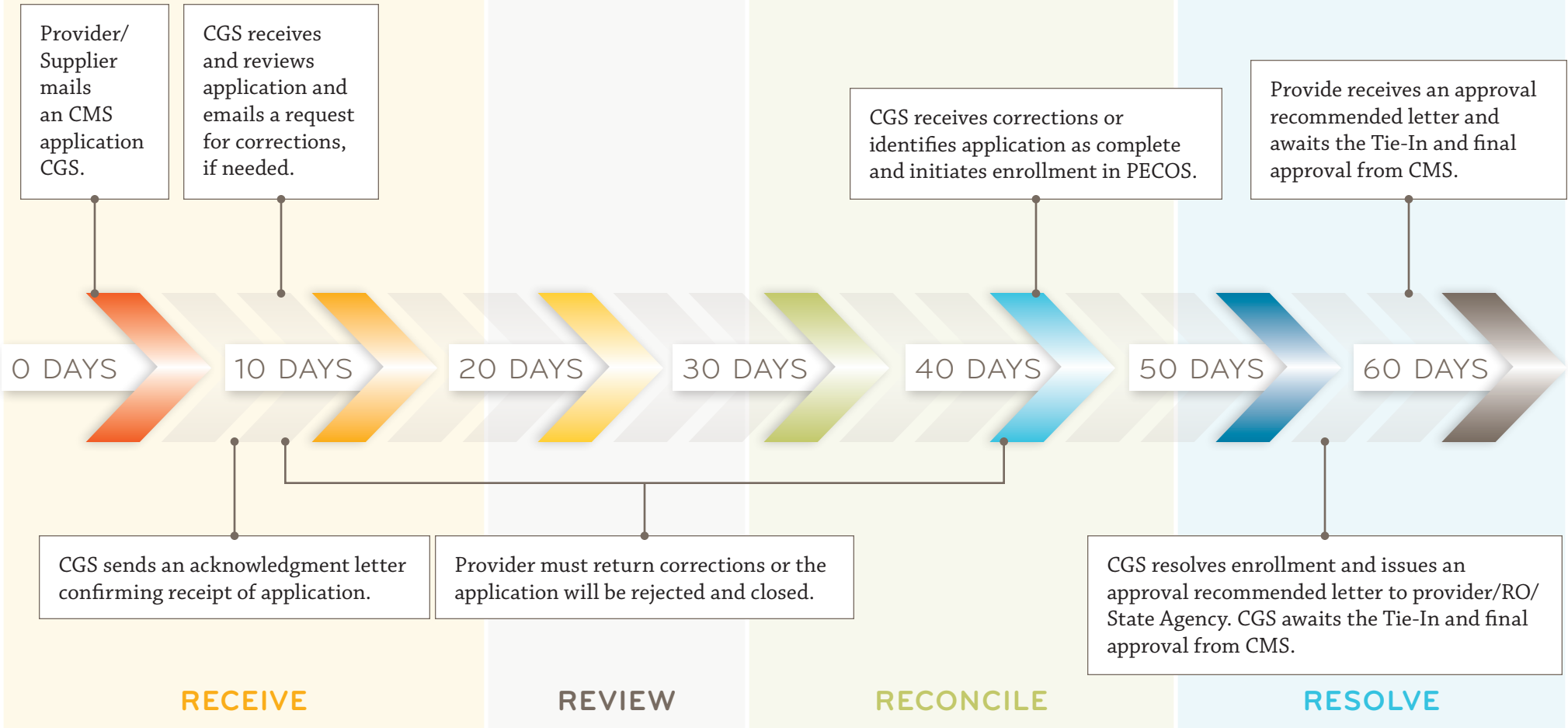
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What to Expect When

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When your CMS application is a
Paper or Web 855A or 855B Initial or CHOW for certified providers and requires approval from CMS Regional Office.



The tie in notice is issued after the State and CMS Regional Office completes their review. This process can take on average 6-9 months or longer. Once the MAC receives the tie in, it will be processed within CMS established guidelines. Once CGS completes their review, a final letter will be issued notifying the provider of updates made to their electronic funds transfer information.