*The minutes below are a summary of the CGS Advisory Group meeting topics, group discussion, actions, and outcomes as a result of this meeting.*

## MEETING DETAILS

**Date:** July 8, 2025

**Facilitator:** Ariel Taylor, *Sr. Provider Relations Representative*
Nykesha Scales, *CGS J15 POE Manager*

**Attendees:** 25 state/national association representatives alongside CGS and CMS

## AGENDA ITEMS

### Welcome/Purpose

- The primary function of the Advisory Group (CMS Manual link for review: https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/com109c06.pdf) is to assist the contractor in the creation, implementation, and review of provider education strategies and efforts. The Advisory Group provides input and feedback on training topics, provider education materials, and dates and locations of provider education workshops and events. The group also identifies salient provider education issues and recommends effective means of information dissemination to all appropriate providers and their staff, including the use of the Provider Contact Center (PCC) to disseminate information to providers.

  - Jurisdiction 15 Home Health & Hospice Provider Outreach and Education (POE) Advisory Group (https://www.cgsmedicare.com/hhh/education/advisory_groups.html) – Houses manual, covenant, group member list, meeting dates, past minutes. New members recognized and welcomed.

  - Provider Outreach & Education (POE) Advisory Group (AG) Covenant (Home Health & Hospice) (https://www.cgsmedicare.com/hhh/education/pdf/hhh_poe_ag_covenant.pdf) – Covenant reviewed and discussed to cover responsibilities of membership as outlined.

### Follow-Up Items from Previous AG Meeting

- CGS Webinar Platform Feedback: (https://cvent.me/0X5dDB) **SIGN UP TODAY!**

  - Feedback On:

    • Ease of Access
    • Different Modalities (Live, Recorded, On-Demand, Polls, Lecture)-
      » POE offered a CVENT/calendar of events demo to display how previous POE AG recommendations were incorporated.

### Current Tasks

**Targeted Probe & Educate (TPE)**

- Several members shared how helpful the TPE process has been in their learning experience and expressed their appreciation for the Medical Review staff.

- One member posed a question regarding invalid election statements and whether they should discharge and readmit. Medical Review advised the AG member to follow their company policy procedure for discharging and readmitting.The group recommends clarification on the round timeframes and when it is ended.

- AG reminded to email to the Medical Review TPE Mailbox for specific questions concerning TPE, J15HHPROBEANDEDUCATION@CGSADMIN.COM.

**KEEP, START, or CHANGE Roundtable**

- **myCGS**: Multiple members advised that they like the new changes in the portal relating to Medical Review and Appeals, and they agree that myCGS is easy to navigate.
- **Greenmail** (myCGS User Manual - Admin [https://www.cgsmedicare.com/mycgs/mycgs_user_manual_admin.html#admin_main]): No feedback.
- **myCGS Terms of Use (TOU) Violations:**
  - CGS is seeing more portal TOU violations which range from extreme/excessive eligibility queries and the use of automated interfacing to obtain eligibility information. As such, POE added the terms of use to the myCGS webpages as a sub-topic, myCGS Terms of Use (https://cgsmedicare.com/parta/mycgs/terms.html).
  - Answers to bot questions.
    - Definition: A bot, or robot, is essentially any automated software program designed to complete a task.
    - EMRs that may be using automation to check various status inquiries outside of just eligibility: By that definition, yes, the EMR tool would qualify as a bot.
    - Yes, our Terms of Use prohibit the use of bots / automated tools. That EMR feature is in violation of our TOU.
    1. **Security Concerns:** Automated tools can pose significant security risks, including unauthorized access and data breaches. By restricting their use, we aim to protect sensitive information and maintain the integrity of our systems.
    2. **System Performance:** The use of automated interfaces can lead to increased load on our servers, potentially causing performance issues and affecting the user experience for all providers accessing the portal.
    3. **Data Accuracy:** Automated processes may not always handle data with the same level of accuracy as manual input, leading to potential errors and inconsistencies in the information submitted through the portal.
    4. **Compliance:** Our policies are designed to ensure compliance with CMS security regulations, specifically those that govern access and identity management. Restricting the use of automation helps us maintain these standards and protect both our organization and our users.
- **Interactive Voice Response** R12858OTN | CMS (https://www.cms.gov/medicare/regulations-guidance/transmittals/2024-transmittals/r12858otn): No Feedback. POE staff reminded the group as of February 28, 2025, eligibility information is no longer obtainable via the Interactive Voice Response (IVR) system per R12858OTN | CMS. Education has been ongoing since late 2024 and will continue to ensure provider awareness.
- **Website:** No feedback.
- **Call Center:** No feedback.
- **Education:** Suggestion for education on the Proposed Rule.
- **Provider Contact Center:** No feedback.

## Future Tasks

**Review of Upcoming Educational Material**

- Monthly Welcome Week for New Providers will continue.
- Home Health Focus Topics – Call for suggestions from the group
- The group was reminded to help with spreading the calendar of events and to attend events as this is part of their membership duties.

**Identify Collaboration Opportunities**

- Please identify and share collaboration opportunities for education/outreach.
- Please continue to attend, provide feedback and suggest future topics, https://www.cgsmedicare.com/medicare_dynamic/wrkshp/pr/hhh_report/hhh_report.aspx
- Members were advised that the POE team can provide education virtually for any of the upcoming conferences and events.

**Customer Experience Survey**
- Group reminded to take advantage of surveys when visiting our webpage, utilizing resources and participating in educational events.
  - Customer Experience Page Launch
    - https://www.cgsmedicare.com/hhh/pubs/reviews.html

**CGS Data Analysis**
- The group reviewed the top Claim Submission Errors (CSEs), and Medical Review denials.

**CGS Home Health & Hospice Data Analysis: January 2025 – December 2025**

January - December 2025

| Month | # of HH Claims Submitted | Total # of HH CSEs | HH CSE Error Rate | # of Hospice Claims Submitted | Total # of Hospice CSEs | Hospice CSE Error Rate | # of HH+H Claims Submitted | Total # of HH+H CSEs | HH+H CSE Error Rate |
|---|---|---|---|---|---|---|---|---|---|
| Jan-25 | 123,221 | 20,911 | 16.97% | 108,379 | 14,497 | 13.38% | 231,600 | 35,408 | 15.29% |
| Feb-25 | 113,295 | 22,206 | 19.60% | 105,772 | 11,067 | 10.46% | 219,067 | 33,273 | 15.19% |
| Mar-25 | 128,268 | 24,985 | 19.48% | 108,784 | 11,966 | 11.00% | 237,052 | 36,951 | 15.59% |
| Apr-25 | 126,288 | 18,530 | 14.67% | 108,396 | 10,514 | 9.70% | 234,684 | 29,044 | 12.38% |
| May-25 | 116,755 | 20,169 | 17.27% | 106,070 | 9,903 | 9.34% | 222,825 | 30,072 | 13.50% |
| | | | | | | | | | |
| Total | 607,827 | 106,801 | 17.57% | 537,401 | 57,947 | 10.78% | 1,145,228 | 164,748 | 14.39% |

**Home Health Claim Submission Error (CSE) Data: January 2025 – December 2025**

| Rank | Reason Code | Billing Error | # Of Errors |
|---|---|---|---|
| #1 | U537F | From date on NOA falls w/in an existing HH admission period | 14,697 |
| #2 | U5233 | Services w/in HMO Period and no Hospice involvement or services not w/in Hospice period | 8,764 |
| #3 | 37253 | No OASIS assessment found | 7,697 |
| #4 | 19963 | Statement From Date is on or after 01/01/2022 and less than 24 months from claim Admit Date and a matching Home Health NOA cannot be found | 6,779 |
| #5 | U537I | The From and Through dates on HH claim all | 4,305 |

**Home Health Medical Review (MR) Denial Data: January 2025 – February 2025**

| Rank | Reason Code | Denial Reason | # Of Denials |
|---|---|---|---|
| #1 | 5HC01 | Physician certification was invalid since the required face-to-face encounter was missing/incomplete/untimely | 115 |
| #2 | 5HN18 | Skilled nursing services were not medically necessary | 85 |
| #3 | 5HC09 | Initial certification was missing/incomplete/invalid; therefore, recertification episode is denied | 84 |
| #4 | 56900 | Requested medical records were not received within the 45-day time limit | 50 |
| #5 | 5HY01 | Medical documentation submitted did not show therapy services were reasonable and necessary and at a level of complexity which requires the skills of a therapist | 32 |

## OPEN DISCUSSION

- One group member inquired about community-to-community, face-to-face encounters and the following CGS reference was provided, https://www.cgsmedicare.com/hhh/pubs/news/2025/06/cope179519.html
- Group members were notified of the RAC contractor change for Region 5 from Performant to Cotiviti GOV Services LLC. Additional details can be found via the CMS site on the following link: https://www.cms.gov/data-research/monitoring-programs/medicare-fee-service-compliance-programs/medicare-fee-service-recovery-audit-program

## CGS ADVISORY GROUP NEXT MEETING DATE

October 14, 2025 – Combined Home Health and Hospice (Microsoft Teams)