# Interactive Voice Response (IVR) System

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## Disclaimer

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Introduction

The CGS Jurisdiction 15 (J15) Interactive Voice Response (IVR) System (1.877.220.6289) is designed to assist home health and hospice providers in obtaining answers to numerous inquiries through this self-service option.

Information available on the CGS IVR System includes:

- Patient eligibility information;
- Claim status and deductible information;
- Redetermination status;
- Check information; and
- General information.

The IVR is available 24 hours a day, 7 days a week with the exception of system upgrades or routine maintenance. However, the IVR menu options that require system access (claim, beneficiary, and check information) are only available Monday – Friday 5:00 a.m. – 8:00 p.m. and Saturday 5:00 a.m. – 5:00 p.m. Central Time (CT).

Our customer service representatives (CSRs) continue to be available to answer difficult, claim specific questions, in addition to other complex inquiries that a provider might encounter. However, please note that the CSRs will only answer questions that cannot be answered by the IVR. The Centers for Medicare & Medicaid Services (CMS) Medicare Contractor Beneficiary and Provider Communications Manual, (Pub. 100-09), Chapter 6, section 50.1 (http://www.cms.gov/manuals/downloads/com109c06.pdf) states:

Providers shall be required to use the IVR system to access claim status and beneficiary eligibility information. CSRs shall refer providers back to the IVR system if they have questions about claims status or eligibility that can be handled by the IVR system. CSRs may provide claims status and/or eligibility information if it is clear that the provider cannot access the information through the IVR system because the IVR system is not functioning.

Required Information

To obtain information via the IVR, please have the following information available.

- National Provider Identifier (NPI)
- Provider Transaction Access Number (PTAN) (formerly known as the Legacy or OSCAR provider number)
- Provider Tax Identification Number (TIN) (last 5 digits)

Menu Options

Upon accessing the IVR the following options will be provided.

- For claim status and redetermination status press 1.
- For beneficiary information press 2.
- For check information press 3.
- For general information press 4.
- To repeat these choices press 7.

Claim Status and Redetermination Status Information

If you press 1 to obtain claim status and redetermination status information, the following options will be provided.

- press 1 for claim status
- press 2 for redetermination status
Note: The IVR will provide the status of redeterminations that are received by CGS 125 days from the current date.

If you press 1 or 2 to obtain claim status or redetermination status information, you will be prompted to enter the following information. Please be advised that the most recent redetermination request will be available at this prompt. The information given will be for the NPI and the PTAN entered:

**NPI, PTAN, TIN**

- Enter your NPI (10 digit number) then press the pound (#) key.
- If your provider number is numeric, press 1. If alpha/numeric, press 2.
- Enter your provider number followed by the # key.
- Enter the last five digits of your TIN (tax ID) followed by the # key.

The IVR will repeat the NPI. If the NPI is correct, press 1. If you would like to reenter the NPI, press 2.

If the NPI or PTAN are not located in our system, or are an invalid combination, you will be prompted to re-enter the NPI number. If the TIN is not located in our system, or is invalid, you will be prompted to re-enter the last five digits of the TIN.

Please note that if you press 2, the IVR will return to the main menu.

**Medicare Number/Beneficiary Name**

Once the NPI, PTAN, and TIN are validated, you will be asked to press 1 for the MBI (Medicare Beneficiary Identifier), or press 2 for the HICN (health insurance claim number).

If you pressed 1 for the MBI, you will be prompted to enter the MBI. Press * and then # for information about entering the MBI. For assistance, refer to the IVR and CTI Converter Tools at [https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp](https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp), which will provide the characters that you need to enter.

If you selected 2 for the HICN, you will be prompted to enter the following information:

- If the Medicare number begins with a letter press 1, otherwise press 2.
- Enter the first nine digits of the beneficiary’s Medicare number.
- If the Medicare number is followed by:
  - A press 1
  - B press 2
  - C press 3
  - D press 4
  - M press 5
  - T press 6
  - W press 7
  - To repeat these choices press the * key

- If there is a number following the letter you just entered, press 1, if there is another letter following the letter, press 2. If there is nothing following the letter press the # key, to return to the previous menu press the * key. To repeat this press 7.
- Enter the beneficiary’s first initial using the letter on your telephone keypad.
- Enter the first six letters of the beneficiary’s last name using the letter on your telephone keypad followed by the # key (e.g., Johnson, you’d enter 5 – 6 – 4 – 6 – 7 – 6). If the beneficiary’s last name is less than six letters, enter all letters followed by the # key (e.g., Brown#). For assistance with entering the beneficiary’s last name, refer to the CGS IVR and CTI Converter Tools at [https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp](https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp).
If you chose to obtain the redetermination status, the IVR will prompt you to enter the beneficiary’s date of birth.

- Enter the beneficiary’s eight digit date of birth (e.g., If the date of birth is January 3, 1932, enter 01031932).

The IVR will validate the beneficiary’s information that was entered. If invalid, press 1 to reenter this information, otherwise, press 2. Please note that if you press 2, the IVR will return to the main menu. If the beneficiary’s information is valid, the IVR will prompt you to enter the date of service for this claim.

- Enter the “from” date of service in a MMDDYY format. For example, the date of service of June 13, 2014, is entered as 061314.
- Enter the “through” date of service in a MMDDYY format.

The IVR will validate the dates of service.

If claim status information was requested, and the claim information is found, the IVR will provide the status of the claim, (e.g., processed, pending, denied, returned to provider, rejected), when it was received, the type of bill, total charges, and claim location.

For information on the next claim, press 1. For detailed information on this claim, press 2. Press 3 to continue.

If you press 3, or the IVR is unable to validate the dates of service, the following options will be provided:

- For information for different dates of service, press 2.
- For information for a different Medicare number, press 3.
- To have this information repeated, press 7.
- To return to the main menu, press 8.
- For information for a different NPI, press 9.

If redetermination status information was requested, the IVR will provide one of the following messages:

- Our records show that a redetermination request for Medicare number [###...] was received on [date of receipt] and is currently pending review. The redetermination will be completed within 60 days of receipt of the request unless additional documentation is submitted by the provider and received by the Contractor prior to issuance of the dismissal and/or decision notice.
- CGS has not received a redetermination request matching the data you entered. If you submitted the request less than five days ago, please call again later. If the request was submitted more than 125 days ago, please contact the Provider Contact Center at 1.877.299.4500.
- CGS completed the review of your redetermination request that was received on [date of receipt]. You will receive notification by mail should additional action be needed by you.

After the appropriate message is provided, the following options will be provided.

- For redetermination information for a different Medicare number, press 1.
- To have this information repeated, press 7.
- To return to the main menu, press 8.
Beneficiary Information

If you press 2 to obtain beneficiary information, you will be prompted to enter the following information.

NPI, PTAN, TIN
- Enter your NPI (10 digit number) then press the pound (#) key.
- If your provider number is numeric, press 1, if alpha/numeric press 2.
- Please enter your provider number followed by the # key. If you made this choice by mistake and need to go back to the previous menu, press the * key.
- Enter the last five digits of your TIN (tax ID) followed by the # key.

The IVR will repeat the NPI. If the NPI is correct, press 1. If you would like to reenter the NPI, press 2.

If the NPI or PTAN are not located in our system, or are an invalid combination, you will be prompted to re-enter the NPI number. If the TIN is not located in our system, or is invalid, you will be prompted to re-enter the last five digits of the TIN. Please note that if you press 2, the IVR will return to the main menu.

Medicare Number/Beneficiary Name

Once the NPI, PTAN, and TIN are validated, you will be asked to press 1 for the MBI (Medicare Beneficiary Identifier), or press 2 for the HICN (health insurance claim number).

If you pressed 1 for the MBI, you will be prompted to enter the MBI. Press * and then # for information about entering the MBI. For assistance, refer to the IVR and CTI Converter Tools at https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp, which will provide the characters that you need to enter.

If you selected 2 for the HICN, you will be prompted to enter the following information:
- If the Medicare number begins with a letter press 1, otherwise press 2.
- Enter the first nine digits of the beneficiary’s Medicare number.
- If the Medicare number is followed by:
  - A press 1
  - B press 2
  - C press 3
  - D press 4
  - M press 5
  - T press 6
  - W press 7
  - To repeat these choices press the * key
- If there is a number following the letter you just entered, press 1, if there is another letter following the letter, press 2. If there is nothing following the letter press the # key, to return to the previous menu press the * key. To repeat this press 7.

Once the MBI or HICN is entered, you will be prompted for the following information.
- Enter the beneficiary’s first initial using the letter on your telephone keypad.
- Enter the first six letters of the beneficiary’s last name using the letter on your telephone keypad followed by the # key (e.g., Johnson, you’d enter 5 – 6 – 4 – 6 – 7 – 6). If the beneficiary’s last name is less than six letters, enter all letters followed by the # key (e.g., Brown#). For assistance with entering the beneficiary’s last name, refer to the CGS IVR and CTI Converter Tools at https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp.
The IVR will validate the Medicare number and beneficiary name that was entered. If invalid, you will be prompted to enter the correct Medicare number or name. If the Medicare number and beneficiary name is valid, the IVR will prompt you to enter the beneficiary’s date of birth.

- Enter the beneficiary’s eight digit date of birth (e.g., If the date of birth is January 3, 1932, enter 01031932).

The IVR will validate the beneficiary information that was entered. If the first initial, last name, or the date of birth do not match the Medicare number, the IVR will ask you to reenter this information.

Once the beneficiary information is validated, the IVR will provide Medicare Part A and Part B entitlement dates. To receive eligibility about a specific date range, press 1, otherwise press 2. If you press 1 you will be prompted to enter a date with no more than 3 years prior to today’s date followed by the # key in a MMDDYY format. If nothing is pressed you will receive current eligibility information as of the date of your call.

The following choices will then be provided for you to obtain additional eligibility information.

- For home health, Medicare Advantage (MA) plan, Medicare Secondary Payer (MSP), and hospice information, press 1.
  - To verify if this beneficiary is enrolled in a MA plan, press 1.
  - To verify if this beneficiary is in a home health episode, press 2.
  - To verify MSP/ESRD information for this beneficiary, press 3.
  - To verify if this beneficiary is in a hospice, press 4.
  - To have this information repeated, press 7.
  - To go back to the previous menu, press 8.

- For deductible information, press 2.
  - For current deductible information, press 1.
  - For previous deductible information, press 2.
  - To have this information repeated, press 7.
  - To go back to the previous menu, press 8.

- For hospital and skilled nursing facility information, press 3.
  - For hospital days information, press 1.
  - For skilled nursing facility days information, press 2.
  - To have this information repeated, press 7.
  - To go back to the previous menu, press 8.

- For physical and occupational therapy limit information, press 4.
  - For occupational therapy limit information, press 1.
  - For physical therapy (including speech-language pathology) limit information, press 2.
  - To have this information repeated, press 7.
  - To go back to the previous menu, press 8.

After each of the eligibility choices, the IVR will prompt you to:

- Press 5 to access beneficiary eligibility information for a different HICN or MBI;
- Press 7 to have this information repeated;
● Press 8 to return to the main menu; or
● Press 9 for information for a difference NPI.

Check Information

NPI, PTAN, TIN
If you press 3 to obtain check information, you will be prompted to enter the following information.

- To obtain check information about the last three checks, press 1.
- For information on a specific check, press 2.
- Enter your NPI (10 digit number) followed by the pound (#) key.
- If your provider number is numeric, press 1, if alpha/numeric press 2.
- Enter your provider number followed by the # key. If you made this choice by mistake and need to go back to the previous menu, press the * key.
- Enter the last five digits of your TIN (tax ID) followed by the # key.

The IVR will repeat the NPI. If the NPI is correct, press 1. If you would like to reenter the NPI, press 2.

Information About the Last Three Checks
The IVR will validate the provider information, then it will provide the date and amount of the most recent check. The following choices will then be provided to obtain information on the next check.

- For information on the next check, press 1
- To continue, press 2. The IVR will provide the following options.
  - For information for a different provider, press 2.
  - To have this information repeated, press 7.
  - To return to the main menu, press 8.
  - For information for a different NPI, press 9.

If the NPI or PTAN are not located in our system, or are an invalid combination, you will be prompted to re-enter the NPI number. If the TIN is not located in our system, or is invalid, you will be prompted to re-enter the last five digits of the TIN.

Please note that if you press 2, the IVR will return to the main menu.

Information on a Specific Check

● The IVR will prompt you to enter the date of the specific check in a MMDDYY format.

General Information

If you press 4 to obtain general information, you will be prompted to enter the following information.

- For frequently requested telephone numbers, press 1.
  - For the Electronic Data Interchange (EDI) department number, press 1.
  - For the Benefits Coordination and Recovery Center (BCRC) telephone number, press 2.
  - To have this information repeated, press 7.
- To go back to the previous menu, press 8.

- For frequently requested addresses, press 2.
  - For Part A frequently requested addresses, press 1.
  - For Part B frequently requested addresses, press 2.
  - For home health and hospice frequently requested addresses, press 3.

- For the hours of operation, press 3.
  - To have this information repeated, press 7.
  - To return to the main menu, press 8.
  - To get information about a different NPI, press 9.

- To receive remittance advice code definitions, press 4.
  - If the remittance advice code starts with one or more letters, press 1, otherwise, press 2.
  - Your remittance code consists of a series of letters followed by a series of numbers, please enter those letters. For instructions on entering those letters, press 00.
  - If you press 1, you will be prompted to enter the second letter.
  - Enter the number that follows the letter(s) you just entered followed by the # key.

  To enter a letter, you will press two keys. First, press the key that corresponds with the letter. Then press the number one, two, or three, depending upon the position of that letter on that key. For example, to enter the letter ‘A’, press 2, then 1; to enter the letter ‘M’, press 6 then 1.

  Note: Where the letter ‘Q’ appears with P, R, and S on key 7, assume that R and S are the second and third positions respectively. Assume that Q and Z are on the 1 key. Q would be positioned as the first letter and Z as the second.

  For example, to enter Z, press 1 then 2.

- For appeal rights information, press 5.