

The e-claims have the same payment floor as electronic claims, meaning that they are processed in as few as 14 days. In addition to these benefits, you can correct rejected e-claims via myCGS. To access myCGS, go to <http://www.cgsmedicare.com/mycgs/index.html>.

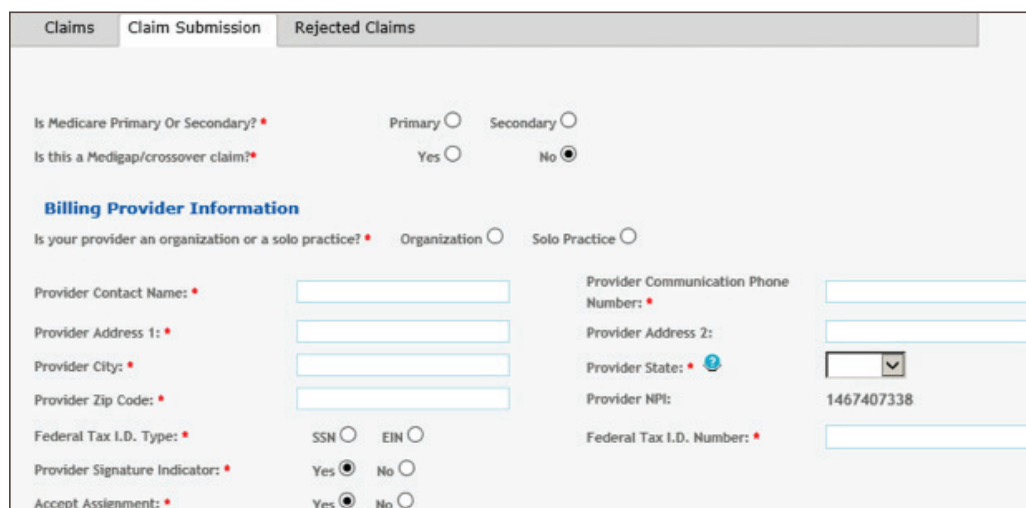
myCGS, the CGS free Web portal, has been enhanced to allow Part B providers to submit e-claims.

This option is available to all Part B providers – whether your office or practice currently submits Part B claims to CGS via Electronic Data Interchange (EDI), or using PC-ACE Pro32 electronic filing software, or if you are still approved to file paper claims.

If you're not already registered to use myCGS, you may be missing out on some important benefits:

- Free and immediate access to important Medicare information
- Ability to view beneficiary eligibility, claim status, online remittances and financial information
- Easy, electronic submission for first-level appeals (redeterminations) and offset requests.

The screen shot below highlights a portion of the myCGS Claim Submission tab.



The screenshot shows the 'Claim Submission' tab in the myCGS portal. It contains several sections with input fields and radio buttons:

- Is Medicare Primary Or Secondary? *** with radio buttons for Primary and Secondary.
- Is this a Medigap/crossover claim? *** with radio buttons for Yes and No (selected).
- Billing Provider Information** section:
 - Is your provider an organization or a solo practice? *** with radio buttons for Organization and Solo Practice.
 - Provider Contact Name: *** (text field)
 - Provider Address 1: *** (text field)
 - Provider City: *** (text field)
 - Provider Zip Code: *** (text field)
 - Federal Tax I.D. Type: *** with radio buttons for SSN and EIN.
 - Provider Signature Indicator: *** with radio buttons for Yes (selected) and No.
 - Accept Assignments: *** with radio buttons for Yes (selected) and No.
 - Provider Communication Phone Number: *** (text field)
 - Provider Address 2: *** (text field)
 - Provider State: *** (dropdown menu)
 - Provider NPI: *** (text field, value: 1467407338)
 - Federal Tax I.D. Number: *** (text field)

Tips for Submitting Claims through myCGS

If you are not already a registered user for myCGS, start here <http://www.cgsmedicare.com/mycgs/index.html>. You must have a signed EDI Enrollment Agreement (http://www.cgsmedicare.com/medicare_dynamic/edi_application/disclaimer.html) on file to use myCGS.

For **newly registered providers**, the Claim Submission tab will be available approximately 48 to 72 hours after registration. If users are not able to view the tab 72 hours after registration, contact the PCC at 1.866.276.9558 and select option 2.

Help Topic	Tips
Addresses	<ul style="list-style-type: none"> Street addresses must be submitted on the form. P.O. boxes are not allowed and will cause the claim to be rejected by the CMS Common Edit Module (CEM). ZIP codes must include the extra 4-digit suffix. The suffix "0000" is not allowed. If you do not know the extra 4-digit suffix, use http://www.USPS.com and click on "Look up a ZIP Code."
Organization or Solo Practice?	Entities such as Ambulance providers, who do not qualify as a group practice, will need to select "Solo Practice" and then key in the "Organization Name." Only solo practice physicians should complete the 'Provider Last Name' and 'Provider First Name' fields when the 'Solo Practice' option is selected.
Rendering provider	Group practices are required to input the rendering physician (at the service line level). This is not a requirement for solo practices.
Attachments	<p>Up to five (5) attachments may be submitted and each attachment can be no larger than 5 MB. The attachments must be in PDF format.</p> <p>Important: Only submit attachments when CGS has specifically indicated they are needed.</p>
Claim Acceptance	<ul style="list-style-type: none"> Each claim is submitted to the CEM as an initial claim. If a claim is rejected, correct the claim and resubmit it. However, if an attachment was included with the original claim submission, you must add the claim attachment again upon submitting the corrected claim. Please note that when you access the "Rejected Claims" tab, only claims that were submitted via myCGS will appear in the tab for editing When you edit a rejected claim, the rejection messages from the 277CA will appear at the top of the form. However, once the user selects the 'Submit' button, any form error message will overwrite the rejection messages at the top. Access your inbox message for the error list if it is still needed. If a claim is accepted by the CEM, CGS will assign an Internal Control Number (ICN) to that claim. If an attachment was submitted with an accepted claim, CGS will also assign a Document Control Number (DCN). Both numbers will display on the accepted inbox message.
Total Charges field	The " Total Charges " field at the bottom of the Part B Claim form is an auto-calculated field. In order to have the field auto-calculate from the service line charges, ensure you are clicking the 'Add Line Information' button after you key each service line.
Editing Claims	Click on the Edit icon every time you want to edit your claim.
Medicare Secondary Payer (MSP) Claims	<ul style="list-style-type: none"> Key in the information from the primary payer's remittance advice. If there are any Line adjustments that need to be added (i.e., Claim Adjustment Group or Reason Codes), you must key in those fields, then click 'Add Line Adjustments' to add them to the service line. After you add the information from the primary insurer, you may then key in what is being billed to Medicare in the 'Secondary Line Items' fields, then click 'Add Line Information' so the entire service line (with Primary and Secondary information) is added to the claim form. To edit rejected MSP claim lines with adjustments, first select "Edit" in the line information table. This will auto-populate the fields that the user previously keyed for both Primary and Secondary Line Items. To edit the Line Adjustments, click "Edit" in the Line Adjustments table next to each Group Code you wish to correct. You must need to do this individually for each Group Code combination.