

## **CGS ADMINISTRATORS, LLC (CGS) & NORIDIAN HEALTHCARE SOLUTIONS (NORIDIAN) SELF SERVICE TOOLS & RESOURCES**

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**As the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs), CGS and Noridian are responsible for processing and paying Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) for Medicare beneficiaries.**

**The permanent address of the Medicare beneficiary determines the jurisdiction responsible for processing claims. Below is a breakdown of each jurisdiction and the associated states:**

- **Jurisdiction A DME MAC is administered by Noridian** for the states of Connecticut, Delaware, Massachusetts, Maine, Maryland, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, and District of Columbia.
- **Jurisdiction B DME MAC is administered by CGS** for the states of Illinois, Indiana, Kentucky, Michigan, Minnesota, Ohio, and Wisconsin.
- **Jurisdiction C DME MAC is administered by CGS** for the states and U.S. territories of Alabama, Arkansas, Colorado, Florida, Georgia, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, Puerto Rico, South Carolina, Tennessee, Texas, US Virgin Islands, Virginia, and West Virginia.
- **Jurisdiction D DME MAC is administered by Noridian** for the states and U.S. territories of Alaska, Arizona, California, Hawaii, Idaho, Iowa, Kansas, Missouri, Montana, Nebraska, Nevada, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming, American Samoa, Guam, and the Northern Mariana Islands.

The tools and resources contained in this document will assist you in receiving timely Medicare updates, accessing beneficiary eligibility, claim status, same or similar information, and more.

CGS and Noridian are committed to supporting DMEPOS suppliers as partners in Medicare beneficiary care.



## Whom to Contact at Noridian Jurisdictions A & D DME MAC

<b>Claim Status, Eligibility, &amp; Same or Similar</b>	<b>JA &amp; JD Portal:</b> <ul style="list-style-type: none"> <li>• <b>JA:</b> <a href="https://med.noridianmedicare.com/web/jadme/topics/nmp">https://med.noridianmedicare.com/web/jadme/topics/nmp</a></li> <li>• <b>JD:</b> <a href="https://med.noridianmedicare.com/web/jddme/topics/nmp">https://med.noridianmedicare.com/web/jddme/topics/nmp</a></li> </ul> <b>JA IVR:</b> 1.866.419.9458 <b>JD IVR:</b> 1.877.320.0390
<b>Duplicate Remittance Advice &amp; PECOS Information</b>	<b>JA IVR:</b> 1.866.419.9458 <b>JD IVR:</b> 1.877.320.0390
<b>Claim Specific Questions &amp; General Medicare Information</b>	<b>JA Supplier Contact Center (SCC):</b> 1.866.419.9458 <ul style="list-style-type: none"> <li>• <b>Hours:</b> Monday – Friday: 8:00 a.m. – 5:00 p.m. ET</li> </ul> <b>JD Supplier Contact Center (SCC):</b> 1.877.320.0390 <ul style="list-style-type: none"> <li>• <b>Hours:</b> Monday – Friday: 8:00 a.m. – 6:00 p.m. CT</li> </ul>
<b>Request a Reopening</b>	<b>JA Telephone Reopenings/SCC:</b> 1.866.419.9458 <b>JD Telephone Reopenings/SCC:</b> 1.877.320.0390
<b>Enrollment</b>	<b>National Provider Enrollment (NPE)</b> <b>East:</b> 1.866.520.5193 <ul style="list-style-type: none"> <li>• <b>Hours:</b> 9:00 a.m. – 5:00 p.m. ET</li> <li>• <b>Website:</b> <a href="https://www.novitas-solutions.com/webcenter/portal/DMEPOS">https://www.novitas-solutions.com/webcenter/portal/DMEPOS</a></li> </ul> <b>West:</b> 1.866.238.9652 <ul style="list-style-type: none"> <li>• <b>Hours:</b> 10:00 a.m. – 6:00 p.m. ET</li> <li>• <b>Website:</b> <a href="https://www.palmettogba.com/palmetto/npewest.nsf">https://www.palmettogba.com/palmetto/npewest.nsf</a></li> </ul>
<b>Electronic Billing</b>	<b>Common Electronic Data Interchange (CEDI):</b> 1.866.311.9184 <ul style="list-style-type: none"> <li>• <b>Hours:</b> 9:00 a.m. – 6:00 p.m. ET</li> </ul> <b>Website:</b> <a href="http://www.ngscedi.com">http://www.ngscedi.com</a>
<b>Coding Assistance</b>	<b>Pricing, Data Analysis and Coding Contractor (PDAC):</b> 1.877.735.1326 <ul style="list-style-type: none"> <li>• <b>Hours:</b> Monday – Friday: 9:30 a.m. – 5:00 p.m. ET</li> </ul> <b>Website:</b> <a href="https://www.dmepdac.com/">https://www.dmepdac.com/</a>
<b>JA Portal Availability</b>	<b>Eligibility:</b> 24 hours per day/7 days per week <b>All other functions:</b> Monday – Friday: 7:00 a.m. – 9:00 p.m. ET Saturday: 8:00 a.m. – 4:00 p.m. ET
<b>JD Portal Availability</b>	<b>Eligibility:</b> 24 hours per day/7 days per week <b>All other functions:</b> Monday – Friday: 6:00 a.m. – 8:00 p.m. CT Saturday: 7:00 a.m. – 3:00 p.m. CT
<b>JA IVR Availability</b>	<b>General:</b> 24 hours per day/7 days per week <b>Claim-specific:</b> Monday – Friday: 7:00 a.m. – 9:00 p.m. ET Saturday: 7:00 a.m. – 4:00 p.m. ET
<b>JD IVR Availability</b>	<b>General:</b> 24 hours per day/7 days per week <b>Claim-specific:</b> Monday – Friday: 6:00 a.m. – 8:00 p.m. CT Saturday: 6:00 a.m. – 3:00 p.m. CT

## Whom to Contact at CGS Jurisdictions B & C DME MAC

<b>Claim Status, Eligibility, Same or Similar, Duplicate Remittance Advice, &amp; Ordering/Referring Physician Information</b>	<b>JB &amp; JC Portal:</b> <a href="https://mycgsportal.com/mycgs/">https://mycgsportal.com/mycgs/</a> <b>JB IVR:</b> 1.877.299.7900 <b>JC IVR:</b> 1.866.238.9650
<b>Claim Specific Questions &amp; General Medicare Information</b>	<b>JB Customer Support Center:</b> 1.866.590.6727 • <b>Hours:</b> Monday – Friday: 7:00 a.m. – 4:00 p.m. CT <b>JC Customer Support Center:</b> 1.866.270.4909 • <b>Hours:</b> Monday – Friday: 7:00 a.m. – 5:00 p.m. CT
<b>Request a Reopening</b>	<b>JB &amp; JC Portal:</b> <a href="https://mycgsportal.com/mycgs/">https://mycgsportal.com/mycgs/</a> <b>JB Telephone Reopenings:</b> 1.844.240.7490 • <b>Hours:</b> Monday – Friday: 8:00 a.m. – 5:00 p.m. ET <b>JC Telephone Reopenings:</b> 1.866.813.7878 • <b>Hours:</b> Monday – Friday: 7:00 a.m. – 5:00 p.m. CT
<b>Enrollment</b>	<b>National Provider Enrollment (NPE)</b> <b>East:</b> 1.866.520.5193 • <b>Hours:</b> 9:00 a.m. – 5:00 p.m. ET • <b>Website:</b> <a href="https://www.novitas-solutions.com/webcenter/portal/DMEPOS">https://www.novitas-solutions.com/webcenter/portal/DMEPOS</a> <b>West:</b> 1.866.238.9652 • <b>Hours:</b> 10:00 a.m. – 6:00 p.m. ET <b>Website:</b> <a href="https://www.palmettogba.com/palmetto/npewest.nsf">https://www.palmettogba.com/palmetto/npewest.nsf</a>
<b>Electronic Billing</b>	<b>Common Electronic Data Interchange (CEDI):</b> 1.866.311.9184 • <b>Hours:</b> 9:00 a.m. – 6:00 p.m. ET <b>Website:</b> <a href="http://www.ngscedi.com">http://www.ngscedi.com</a>
<b>Coding Assistance</b>	<b>Pricing, Data Analysis and Coding Contractor (PDAC):</b> 1.877.735.1326 • <b>Hours:</b> Monday – Friday: 9:30 a.m. – 5:00 p.m. ET <b>Website:</b> <a href="https://www.dmepdac.com/">https://www.dmepdac.com/</a>
<b>JB IVR &amp; Portal Availability</b>	<b>Eligibility:</b> 24 hours per day/7 days per week (except during system maintenance) <b>All other functions:</b> Monday – Friday: 6:00 a.m. – 9:00 p.m. ET Saturday: 6:00 a.m. – 4:00 p.m. ET
<b>JC IVR &amp; Portal Availability</b>	<b>Eligibility:</b> 24 hours per day/7 days per week (except during system maintenance) <b>All other functions:</b> Monday – Friday: 6:00 a.m. – 9:00 p.m. CT Saturday: 6:00 a.m. – 4:00 p.m. CT

## Noridian Jurisdictions A & D DME MAC Interactive Voice Response (IVR) At-A-Glance

<b>Option 1: Claim Status</b>	<ul style="list-style-type: none"> <li>• Number of claims in given date range</li> <li>• Claim status (processed, denied, pending, etc.)</li> <li>• Submitted amount</li> <li>• Remittance advice date</li> <li>• Total allowed</li> <li>• Total paid</li> <li>• Check number</li> </ul>	<b>Caller must say “details” to hear:</b> <ul style="list-style-type: none"> <li>• Claim Control Number (CCN)</li> <li>• HCPCS or NDC submitted</li> <li>• Units submitted</li> <li>• Allowed amount</li> <li>• Denial reason, if applicable</li> </ul>	
<b>Option 2: Eligibility</b>	<b>General</b> <ul style="list-style-type: none"> <li>• Part A and B effective/termination dates</li> <li>• Deductible information</li> <li>• Medicare primary, secondary, or HMO</li> </ul> <b>MSP</b> <ul style="list-style-type: none"> <li>• MSP name</li> <li>• Effective/termination date</li> <li>• MSP type</li> </ul>	<b>HMO</b> <ul style="list-style-type: none"> <li>• HMO name</li> <li>• Effective/termination date</li> </ul> <b>Inpatient/Skilled Nursing Facility (SNF)</b> <ul style="list-style-type: none"> <li>• Admittance/discharge date</li> <li>• Patient status</li> <li>• Facility NPI</li> </ul>	<b>Home Health</b> <ul style="list-style-type: none"> <li>• Effective/termination date</li> <li>• NPI</li> </ul> <b>Hospice</b> <ul style="list-style-type: none"> <li>• Effective/termination date</li> <li>• NPI</li> </ul>
<b>Option 3: Same and Similar</b>	<b>Same and Similar</b> <ul style="list-style-type: none"> <li>• HCPCS found</li> <li>• Initial date</li> <li>• Revised/recertification date</li> <li>• Purchase or rental</li> <li>• Number of payments</li> <li>• Last billing date</li> <li>• Supplier name</li> <li>• Supplier phone number</li> </ul>	<b>Same to Same</b> <ul style="list-style-type: none"> <li>• Number of HCPCS found</li> <li>• Date of service</li> <li>• Revised/recertification date</li> <li>• Supplier name</li> <li>• Supplier phone number</li> <li>• RT/LT modifier</li> </ul>	
<b>Option 4: Financials</b>	<ul style="list-style-type: none"> <li>• Order remittance advice</li> <li>• Number of total claims pending</li> <li>• Last three checks</li> <li>• Overpayment information</li> </ul>		
<b>Option 5: Prior Authorization</b>	Prior Authorization Requests (PARs), Condition of Payment (COP), and Advance Determination of Medicare Coverage (ADMC) <ul style="list-style-type: none"> <li>• Receipt date, status, and tracking number</li> </ul>		

## CGS Jurisdictions B & C DME MAC Interactive Voice Response (IVR) At-A-Glance

Option 1: Beneficiary Information	Option 2: Claim Information	Option 3: Payment Information	Option 4: General Information
<b>Beneficiary Eligibility</b> (Enter MBI, beneficiary name, and date of birth) <ul style="list-style-type: none"> <li>• Part A/B eligibility date</li> <li>• Most recent entitlement reason (if available)</li> <li>• Deductible current &amp; previous year</li> <li>• Medicare Advantage Plan</li> <li>• MSP information</li> <li>• SNF/Inpatient hospital stay</li> <li>• Hospice information</li> <li>• Home Health information</li> </ul>	<b>Claim Status</b> (Enter MBI, beneficiary name, and date of service) <ul style="list-style-type: none"> <li>• By-line information</li> <li>• Payment floor</li> <li>• Reason for denial</li> <li>• Appeal rights</li> </ul>	<b>Pricing</b> (Enter State, HCPCS, & Modifier) <ul style="list-style-type: none"> <li>• Medicare allowed amount</li> </ul>	<b>Information on Your Appeal Rights</b>
<b>CMN Status</b> <ul style="list-style-type: none"> <li>• Same or Similar inquiries</li> <li>• Enter HCPCS</li> </ul>	<b>Pending Claim Information</b> <ul style="list-style-type: none"> <li>• Claims on payment floor</li> <li>• Pending claims at CWF</li> <li>• Other pending claims</li> </ul>	<b>Check Information</b> <ul style="list-style-type: none"> <li>• Outstanding checks w/i last 30 days</li> <li>• Last five checks</li> </ul>	<b>Customer Service Hours of Operation</b>
<b>Oxygen CMN Status</b> <ul style="list-style-type: none"> <li>• Most current stationary &amp; portable CMN</li> <li>• Last paid date w/ modifier</li> <li>• Total # of paid claims per modality</li> <li>• Other oxygen CMNs on file</li> </ul>	<b>Redetermination Information</b> <ul style="list-style-type: none"> <li>• Redetermination status</li> </ul>	<b>Offset Information</b> <ul style="list-style-type: none"> <li>• Claim details of original overpayment</li> <li>• Overpayment letter date &amp; current offset balance</li> </ul>	
<b>Diabetic Supplies &amp; Shoe Information</b> <ul style="list-style-type: none"> <li>• Claims for lancets &amp; test strips billed w/i 90 days before &amp; after date of service (DOS) entered</li> <li>• Claims for other diabetic supplies billed w/i 6 months before &amp; after DOS &amp; HCPCS entered</li> <li>• Claims for diabetic shoes &amp; inserts billed within the calendar year entered</li> </ul>	<b>Ordering a Duplicate Remittance</b> <ul style="list-style-type: none"> <li>• Enter payment date</li> </ul>	<b>EFT Application Status</b>	
	<b>Ordering/Referring Provider Information</b> <ul style="list-style-type: none"> <li>• Provider's NPI</li> <li>• Last name</li> </ul>		

# NORIDIAN MEDICARE PORTAL (NMP)

The Noridian Medicare Portal (NMP) is a free and secure, internet-based portal that allows users access to beneficiary and claim information. The portal login screen provides notification to users in the Availability section if an inquiry is under maintenance or unavailable. Important reminders are posted under the Notifications & Updates section.

Access the Portal Guide at <https://med.noridianmedicare.com/web/portalguide> to learn more.

Go to: <https://www.noridianmedicareportal.com>

Category	Contents Included
Eligibility	View Eligibility, HMO/MCO, MSP, Home Health, Hospice, Hospital, SNF, ESRD, and Preventive information. Eligibility inquiries can be conducted 12 months prior to the current date and four months after the current inquiry date.
Claim Status	View a specific claim for a beneficiary or a listing of all claims for that beneficiary billed by the provider. View nurse reviewer notes if a claim was held for supporting documentation review.
Self-Service Reopenings	Users may initiate reopenings regarding the billed amount, date of service, diagnosis, modifier, MSP type, place of service, or referring and rendering provider.
Appeals	Suppliers are highly encouraged to submit their redetermination requests and supporting documentation securely through the portal. Check the status of the prior 100 submitted redeterminations or written reopenings or search for a specific redetermination on file.
Remittance Advices	Claim-specific and full remittance advices are available.
Financials	Access the prior 50 checks and the billed amounts of claims pending on the payment floor. View a summary of claims that may have caused an overpayment. 1099 forms issued by Noridian are also available.
Same or Similar	Search by HCPCS code and date of service or search by a range of codes. NMP returns the submitted and approved HCPCS codes, initial date on file, recertification/revised date, last day item was billed, name and phone number of the supplier, type, status, and total rentals.
Prior Authorization	Check the status of PMD and PRSS prior authorization requests status, view the reviewer notes, and add/view related documents.


# myCGS WEB PORTAL

Each day, suppliers complete thousands of claims, eligibility-based inquiries, and other transactions through myCGS. The myCGS portal provides registered users with instant access to detailed information, ranging from beneficiary eligibility records to specific claims processing and payment information.

## myCGS Registration Guide:

<https://www.cgsmedicare.com/mycgs/regguide/dme/index.html>

myCGS User Manual: <https://www.cgsmedicare.com/mycgs/manual/dme/index.html>



Select Jurisdiction

☐ Jurisdiction B

☒ Jurisdiction C

IVR: 866-238-9650 | Customer Support: 866-270-4909  
1PW6696, Helpdesk My Account Log Out

HomeBeneficiary InformationClaimsSame/SimilarClaim PreparationFinanceReprocessingMBI Lookup ToolNews & Information

Welcome to myCGS!


Updates & Reminders

Alert: 09/20/24- We are aware that some users are receiving a timeout error when attempting to submit documentation for Prior Auth requests. We are working on a resolution and hope to have it fixed as soon as possible.

myCGS 8.9.1 has been installed! Refer to the Important News page for details.

TIP: If you receive a timeout when searching Same/Similar, try searching using only one jurisdiction at a time.

Have you tried CGS Connect? Our unique concierge-level service offers you the opportunity to receive professional review and evaluation of pre-claim documentation before submitting an initial claim to Medicare. Visit <https://cgsmedicare.com/jc/mr/cgsconnect.html> to learn more!



Feedback

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myCGS offers a wide range of functionality and support, such as:

- Beneficiary Eligibility
- Claim Status
- Same or Similar information
- ADR Viewing and Responding
- Redetermination and Reopening Status
- ADMC and Prior Authorization Submission and Status
- MBI Lookup Tool
- Redeterminations, Reopenings, and Claim Correction Submission

The myCGS web portal includes all of the functionality contained in the IVR, PLUS more detailed features than the IVR can provide.

## Educational Opportunities with Provider Outreach & Education (POE)

The main goal of POE is to reduce improper payments through education with emphasis on claims being adjudicated correctly upon initial submission. CGS and Noridian welcome you to explore and participate in our robust supplier outreach and education programs to achieve this goal.

Visit our education web pages to begin engaging with POE at in-person and virtual events.

- **Noridian Jurisdiction A** – <https://med.noridianmedicare.com/web/jadme/education>
- **CGS Jurisdiction B** – <https://www.cgsmedicare.com/jb/education/index.html>
- **CGS Jurisdiction C** – <https://www.cgsmedicare.com/jc/education/index.html>
- **Noridian Jurisdiction D** – <https://med.noridianmedicare.com/web/jddme/education>

Below is list of popular resources found on the respective education web pages.

Category	Contents Included
<b>Webinars</b>	Webinars are conducted free of charge using internet-based meeting software.
<b>In-Person Education</b>	CGS and Noridian host in-person workshops, provide DMEPOS education at a variety of state and national association meetings. POE also attends, exhibits, and educates at various tradeshows.
<b>Personalized Education Request</b>	POE can provide suppliers with individualized education that is specific to your company and tailored to specific educational needs.
<b>On Demand Education Courses</b>	On Demand Education Courses are pre-recorded online presentations that enable viewers to watch and listen to education segments at their convenience. These presentations cover a variety of topics and specialties.
<b>Question &amp; Answer Sessions</b>	Do you want to ask POE a question? Noridian hosts a Monday Live Chat each week at 3:00 p.m. ET. During the question and answer sessions, POE is available for suppliers to ask questions, either verbal or written.
<b>Ask the Contractor Meetings (ACMs)</b>	If you have a question on your mind and are not sure who to ask, the Ask the Contractor Meetings (ACMs) are your opportunity to speak directly to your contractor. Knowledgeable DME MAC staff from a variety of functions within CGS or Noridian are available to answer supplier questions during the AC teleconferences.



## TOOLS FOR SUCCESS

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CGS and Noridian have a variety of tools and calculators on our websites that provide helpful information and ensure that our suppliers are well informed.

### Tool & Calculators Locations:

- **Jurisdiction A** – <https://med.noridianmedicare.com/web/jadme/education/calculators-tools>
- **Jurisdiction B** – <https://www.cgsmedicare.com/jb/help/tools.html>
- **Jurisdiction C** – <https://www.cgsmedicare.com/jc/help/tools.html>
- **Jurisdiction D** – <https://med.noridianmedicare.com/web/jddme/education/calculators-tools>

Below is list of popular tools found on the respective web pages.

### Fee Schedule Lookup Tool

A fee schedule is a complete listing of fees used by Medicare to pay suppliers. This comprehensive listing of fee maximums is used to reimburse a supplier for items and services. The Fee Schedule Lookup Tool provides current and previous Medicare allowed amounts for DMEPOS items and a listing of past and present national drug, pharmacy supply, and dispensing fees.

### Documentation Checklists

Documentation checklists help suppliers ensure all applicable documentation is readily available as part of Medicare claims payment and processing activities. These checklists assist suppliers in understanding the documentation needed to allow for Medicare coverage.

### Dear Physician Letters

POE has teamed up with the DME MAC Medical Directors to convey proper dialogue to physicians and prescribing practitioners about policy requirements. Dear Physician Letters can be printed and given to physicians and prescribing practitioners with questions as to what meets Medicare guidelines.

### Calculators

CGS and Noridian offer various calculators to assist with submitting claim appeals timely, the proper number of units to supply and bill for nutrition, inhalation medication, and much more.

### Medical Review Audit Information

Looking for details on claims undergoing medical review? CGS and Noridian offer this information via the Medicare portals. You will find explanations of medical review denials, the status of Additional Development Requests (ADRs), and claim processing information.

Not a portal user? The CGS Wizard can help. The CGS Wizard contains processed claim details for all claims submitted to Jurisdictions B and C, as well as ADR statuses, medical review decisions, and other resources.

Enter a 14-digit CCN (claim control number), and the CGS Wizard will give you the claim and/or medical review denial details you need.

**Noridian ListServ (Electronic Mailing List) -**  
***Delivering timely information to our Medicare community***

Suppliers are encouraged to have all your staff register for the Noridian email listserv by completing a one-time, five-minute activity. Suppliers will be emailed notifications of Medicare updates, changes, education events, and time-sensitive information every Tuesday and Friday.

**Articles are categorized based on your registration:**

1. Subscribed Interests:
  - The articles are categorized and displayed based on your registration and categories of interest.
2. Recent Announcements Published to "Latest Updates":
  - Some articles apply to all and/or most providers/suppliers and are sent to all subscribers.
3. Additional Features:
  - Advertisements are included to draw attention to existing web site content that may have already been published but is still relevant.
  - Links to all articles, office closures, educational events, upcoming changes, and Medicare partners are provided as a convenience.
  - Manage your subscription.

**Medicare Administrative Contractor (MAC)**  
**Jurisdiction A**

**noridian**  
Healthcare Solutions

**Medicare Jurisdiction A DME Updates**

**Subscribed Interests**

**Competitive Bidding**

- Quarterly Update for the Temporary Gap Period of the DMEPOS CBP - July 2020 CR11718**  
Medicare updates the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP) files on a quarterly basis to implement necessary changes to the Healthcare Common Procedure Coding System (HCPCS), ZIP code, and supplier files. [Read the complete update](#)

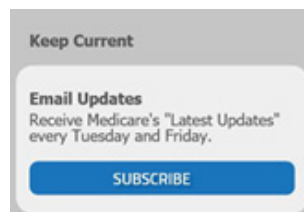
**Policies\_Coverage**

- Documentation Checklists - Updated**  
Check out our website for the most recent updated documentation checklists with current guidelines. [Read the complete update](#)

**CERT\_Reviews**

- Medical Review Program Webinar - April 30, 2020**

Sign Up Now by going to <https://med.noridianmedicare.com>. Choose the applicable jurisdiction and click on Subscribe on the bottom right corner of the page.



## CGS Electronic Mailing List - Stay updated on DME MAC news!

Sign up for the CGS DME MAC electronic mailing list today!

<https://www.cgsmedicare.com/email.html>

1. Enter your name, location, email address, and company
2. Choose the contract and/or specialty information that fits your business
3. Click "Submit"

### CGS Electronic Mailing List Registration

Get news from CGS Administrators, LLC in your inbox. Important: You must select one or more Medicare contract email list. You can also choose to receive targeted emails by selecting a specialty interest email list.

\* Email

\* First Name

\* Last Name

\* Phone

Street

City

State/Province

Postal Code

\* Company

\* Email Lists

☐ DME JB  
☐ DME JC  
☐ J15 HHA  
☐ J15 Hospice  
☐ J15 Part A KCY  
☐ J15 Part A OH  
☐ J15 Part A Specialty: Community Mental Health Center  
☐ J15 Part A Specialty: Comprehensive Outpatient Rehabilitation Center  
☐ J15 Part A Specialty: Critical Access Hospital  
☐ J15 Part A Specialty: End-Stage Renal Disease Facility  
☐ J15 Part A Specialty: Federally Qualified Health Center  
☐ J15 Part A Specialty: Histocompatibility Laboratory  
☐ J15 Part A Specialty: Hospital  
☐ J15 Part A Specialty: Indian Health Services Facility  
☐ J15 Part A Specialty: Organ Procurement Organization  
☐ J15 Part A Specialty: Outpatient Physical Therapy/Occupational Therapy/Speech Pathology Services  
☐ J15 Part A Specialty: Religious Non-Medical Health Care Institution  
☐ J15 Part A Specialty: Rural Health Clinic  
☐ J15 Part A Specialty: Skilled Health Facility  
☐ J15 Part B KCY  
☐ J15 Part B OH  
☐ J15 Part B Specialty: Ambulance Service Supplier  
☐ J15 Part B Specialty: Ambulatory Surgical Center  
☐ J15 Part B Specialty: Clinic/Group Practice  
☐ J15 Part B Specialty: Independent Clinical Laboratory  
☐ J15 Part B Specialty: Independent Diagnostic Testing Facility (IDTF)  
☐ J15 Part B Specialty: Mammography Center  
☐ J15 Part B Specialty: Mass Immunization (Roster Editor Only)  
☐ J15 Part B Specialty: Medicare Diabetes Prevention Program Supplier (MDPP)  
☐ J15 Part B Specialty: Opoid Treatment Program Provider (OTPP)  
☐ J15 Part B Specialty: Portable X-ray Supplier  
☐ J15 Part B Specialty: Radiation Therapy Center

By submitting this form, you are consenting to receive marketing emails from: CGS Administrators, LLC, 28 Century Blvd, Ste 57010, Nashville, TN 37214-3625, US. You can revoke your consent to receive emails at any time by clicking the [Unsubscribe](#) link found at the bottom of every email. (Emails will not be sent to Unsubscribed contacts)

Sign Up!