

REFERENCE GUIDE

Beneficiary Eligibility	Claims	Same/Similar	Claim Preparation	Finance	Reprocessing	MBI Lookup Tool	News & Information	My Account
Information Needed:	Information Needed:	Information Needed:	Information Needed:	Information Needed:	Information Needed:	Information Needed:	Information Needed:	Information Needed:
MBI Last Name First Name Date of Birth Zip Code****	HICN/MBI Last Name First Name Date of Service RA Date*	MBI Last Name First Name Date of Birth Date of Service Product Category	MBI Last Name First Name Order/Refer NPI** Order/Refer	FCN***	CCN/DCN HICN/MBI	SSN Last Name First Name Date of Birth	N/A	N/A
Information Available: Part A Dates Part B Dates Deductible Jurisdiction Date of Death MAP MSP Hospice HHE SNF/Hospital	Information Available: Claim Status Explanation of Denial ADR Pending Claims Order RA	or HCPCS Information Available: Claim History CMN Summary	Name** Information Available: Ordering/ Referring Physician Prior Authorization Status/ Submission ADMC Status/ Submission	Information Available: Checks Offsets Pricing EFT Status	Information Available: Redeterminations Status/ Submission Reopenings Status/ Submission Claim Correction	Information Available: MBI	Information Available: Important News CSR Hours Appeals Rights	Information Available: User Account Update NPI/ PTAN Provider Profile

^{*} Applies to Order RA only

Online Jurisdiction B Web Guide: https://www.cgsmedicare.com/jb/mycgs/Ref_Guide.html Online Jurisdiction C Web Guide: https://www.cgsmedicare.com/jc/mycgs/Ref_Guide.html

Your NPI/PTAN is also needed but will automatically populate from your profile. If you wish to change to a different NPI/PTAN within your profile, click on the NPI or PTAN in the upper-right corner of myCGS and select the NPI/PTAN from the drop-down box. If you wish to change Jurisdictions, choose the radio button at the top of the page.





^{**} Applies to Ordering/Referring Physician option only

^{***} Applies to Offsets only

^{****} Applies to CBA Information only

Information Needed:

CCN/DCN

The CCN of the claim being reprocessed or the DCN of the reprocessing request.

Date of Birth

Beneficiary's date of birth.

Date of Service (in Claims column)

Date of service of the claim data you wish to receive.

Date of Service (in Same/Similar column)

The date of service will be used to apply the utilization parameters of the product category or HCPCS code in the search. myCGS will search for claims and CMNs seven years prior to and six months after the date of service entered, with the following exceptions: A4253 and A4259 (90 days before and 90 days after the date or service), other diabetic testing supplies (six months before and six months after the date of service), diabetic shoes and inserts (the calendar year of the date of service).

Date of Service/Year

Applies to Diabetic Supplies and Diabetic Shoes options. The date of service will be used to apply the utilization parameters of diabetic supplies. The year is used to check for diabetic shoes or accessories billed within that year.

FCN***

The FCN located on the remittance advice for offset information.

First Name

Beneficiary's first name (must match their Medicare card).

HCPCS

HCPCS or procedure code you wish to inquire about.

HICN/MBI

Beneficiary's Medicare number (must match their Medicare card).

Last Name

Beneficiary's last name (must match their Medicare card).

MBI

Beneficiary's Medicare Beneficiary Identifier.

Order/Refer Name**

The first six letters of the ordering/referring physician's last name.

Order/Refer NPI**

The NPI of the ordering/referring physician.

RA Date*

Remittance Advice date.

SSN

The beneficiary's Social Security Number.

Zip Code****

The ZIP Code of the beneficiary.

Information Available:

ADMC Status/Submission

You may receive the status of an existing ADMC request or you may submit an ADMC request through myCGS. Complete the e-form and attach up to 15 files (max 50 MB per file) of electronic documentation.

ADR

You may view a copy of an ADR letter sent on a claim by entering the CCN. You may respond to the letter through myCGS including up to 15 files (max 50 MB per file) of electronic documentation.

Appeal Rights

Appeal rights including what must be included in a Redeterminations request and the proper party to an appeal are provided.

CBA Information

The CBA zip code, CBA number, effective date and expiration date is provided if the zip code entered is in a Competitive Bidding Area (CBA).

Checks

The date, amount and status of the last five checks issued and the date and amount of any outstanding checks issued within 30 days are provided.

Claim Correction

Make simple corrections to claims that you have submitted to CGS. Only simple corrections can be made through this process.

Claim History

You will receive beneficiary claim history for the Product Category/HCPCS entered. This includes the name and phone number of the supplier and whether the claim was allowed or denied.

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Claim Status

The CCN, remit date, deductible amount applied, paid amount, order RA, place of service, HCPCS, from date, to date, number of services, submitted amount and allowed amount are provided for claims within the date(s) of service entered. Click on the CCN and receive denial code information and the GR/REAS, Remarks, amount and date from your remittance advice.

CMN Status

The HCPCS, CMN type, length of need, initial date, revised/recert date are provided for the HCPCS entered. Click on the HCPCS and the supplier name, phone number, CMN status, rental months paid and last rental date are provided. You may search for more than one HCPCS code at a time by using an asterisk (*) as a qualifier. For instance, if you enter e* in the HCPCS field you will receive CMN results for any HCPCS code that begins with an E.

CMN Summary

A list of CMNs is displayed for the Product Category/HCPCS entered. Information includes the HCPCS, CMN type, length of need, initial date, revised/recert date, supplier name, status, and HCPCS description. Click on the HCPCS to view additional information, including the submitted HCPCS, approved HCPCS, rental months paid, supplier phone number, and last rental date.

CSR Hours

Customer Service Representatives hours of operations and holiday schedule are available.

Deductible

The previous and current year deductibles are provided.

Diabetic Supplies

If you select Testing Supplies A4253 and A4259 you will receive claim details of any claim for these items within 90 days prior to and after the date of service entered. If you select Testing Supplies Other you will receive claim details of any claim within 6 months prior to and after the date of service entered. The claim details include the from date, to date, HCPCS, units, provider name, phone number and whether or not the claim was allowed or denied.

EFT Status

The date of receipt and the status of your EFT application will be provided.

Explanation of Denial

Click on the Explanation View button from the Claim Status Summary screen and receive a custom denial explanation that is available anytime the claim was allowed at a lower dollar amount than was submitted. The explanation includes suggestions for what can be done to either correct or appeal the claim decision.

HHE

The Home Health episode start date, end date and the Home Health Agency NPI are provided. There is also a link to the NPI Registry available.

Hospice

The Hospice start date, end date and NPI are provided. There is also a link to the NPI Registry available.

Important News

Important news for suppliers will be posted on this page.

Jurisdiction

The DME MAC jurisdiction in which the beneficiary resides is provided.

MAP

The Medicare Advantage Plan name, address, phone number, enrollment date, end date and plan type are provided.

MSP

The primary insurer's name and address, policy number, MSP type, effective date and termination date are provided.

MBI Lookup Tool

Lookup the MBI of a beneficiary.

Offsets

The original overpayment date, current offset balance, HICN/MBI, beneficiary name and date of service for the FCN entered are provided.

Order RA

You may order a copy of a remittance advice be mailed to you by providing the remittance date.

Ordering/Referring Physician

Enter the ordering/referring physician name and NPI and you will receive a message stating whether or not the physician is enrolled in PECOS.

Part A Dates

The Part A eligibility effective and termination dates are provided.

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Part B Dates

The Part B eligibility effective and termination dates are provided.

Pending Claims

The number of claims, submitted amount and projected payment amount for pending claims currently on the payment floor are available. Also the number of claims and submitted amounts for pending claims at CWF and other pending claims in process are available.

Pricing

A link to the Fee schedule on the CGS website is available.

Prior Authorization Status/Submission

You may receive the status of an existing prior authorization request or you may submit a prior authorization request through myCGS. An e-form will display to be completed and you may also attach up to 15 files (max 50 MB per file) of electronic documentation.

Privacy Notice

Displays the CGS Privacy Policy.

Provider Profile

You may view the Provider profile information on file with the DME MAC.

Redeterminations Status/Submission

The date of receipt and the status of your Redetermination request will be provided based on the CCN or DCN entered. You may also submit a Redeterminations request through myCGS from the Reprocessing Tab. Enter the CCN(s) and select the claim lines you wish to include in the Redetermination request. Most fields of the form will be prepopulated with the supplier and beneficiary information and the claim details of the

claims selected. You may also attach up to 15 files (max 50 MB per file) of electronic documentation. You will receive a message if the claim selected is not eligible for this option.

Reopenings Status/Submission

The date of receipt and the status of your Reopenings request will be provided based on the CCN or DCN entered. You may also submit a Reopenings request through myCGS from the Reprocessing Tab. Enter the CCN(s) and select the claim lines you wish to include in the Reopenings request. Most fields of the form will be prepopulated with the supplier and beneficiary information and the claim details of the claims selected. You may also attach up to 15 files (max 50 MB per file) of electronic documentation. You will receive a message if the claim selected is not eligible for this option.

SNF/Hospital

The start date, end date, facility type, patient status, admitted date, discharged date and facility NPI are provided for the date of service entered. There is also a link to the NPI Registry available.

User Account

You may update your user account information from this screen.