

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: March 18, 2025

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

Attendees: 33 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:** Some group members expressed concerns about the calendar of events and CVENT not displaying upcoming events. POE advised it's better to avoid going through CVENT and just utilizing the calendar of events widget on the home page of the CGS website.
 - POE offered a CVENT/calendar of events demo to display how previous POE AG recommendations were incorporated to make the registration process to enhance the customer experience.
 - Recommendations:
 - » Sharing events on social media
 - » Add educational events to the top of email notifications
 - » Add a color to 'join electronic mailing' list so it stands out
 - » More education on the electronic mailing list and its offerings
 - » Revisit calling it ListServ instead of Electronic Mailing list – per Communications and CMS guidance, we must use electronic mailing list
 - » Help with navigation to MR claim denials
 - » Add welcome to Medicare to the Welcome to CGS events

- POE commented the J15 webpages are being evaluated and compared to DME webpages for consistency and brand improvement. It was also mentioned that POE was updating the calendar of events to distinctly show events held in the Teams platform vs the CVENT platform. This has been completed.

Current Tasks

Targeted Probe & Educate (TPE)

- Concerns raised about some agencies not knowing where they stand with TPE, when the next round of claims will be pulled, when TPE may be ending, what reporting periods determine outliers, and long delays between rounds without communication. These members were asked to reach out to the TPE mailbox for assistance.
- Members asked can providers request a recalculation. Does CGS check to see if there has been an overturn? Per Medical Review (MR) staff, those are taken into consideration. Providers have a right to appeal up to the Administrative Law Judge (ALJ).
- Discussion also surrounded the appeals process and why level ones are upheld but overturned during subsequent levels such as the ALJ. POE shared these concerns with our Appeals Department. Please remember that when a claim denial is reviewed by an Appeals reviewer, this is a completely new set of eyes reviewing the claim. We can't speak to the processes at the ALJ level. However, additional information is likely submitted at the level of appeal. Each case is treated independently based on review of the additional information submitted against the applicable policy and if a case is overturned at level 1, we do not send a written response. The overturned and approved claim is processed. Please refer to the following resource for more information about the appeals process:
<https://www.cms.gov/files/document/mln006562-medicare-parts-b-appeals-process.pdf>
- Kudos were offered for the TPE Team for great collaboration, timely responses and generous assistance with navigating the process.
- AG reminded to email to the Medical Review TPE Mailbox for specific questions concerning TPE, J15HHPROBEANDEDUCATION@CGSADMIN.COM.

Introductions of New MR Staff:

- Dr. Vidya Nagamangala, replacement for Dr. Sandler for CGS Part A/HHH.
- Lanee Barton, New HHH MR Manager

KEEP, START, or CHANGE Roundtable

- **myCGS**
- **Greenmail** (myCGS User Manual - Admin [https://www.cgsmedicare.com/mycgs/mycgs_user_manual_admin.html#admin_main]): POE reported not many myCGS users are taking advantage of this option and there is low adoption rate. POE has included a greenmail push strategy to our annual plan to encourage more providers to opt in to save paper. Education on this topic has ensued and will continue.
- **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>). Those in violation will be contacted via email for awareness and termination.
 - A member asked if the use of outsource billing could cause TOU violations. Those in violation will be contacted via email for awareness and termination.
- **Website:** AG members stated CGS website is the best and the educational materials are superior.
- **Provider Contact Center:** No feedback.
- **Education:** No feedback from the group. AG members were informed of Online Education Center (OEC) refresh and encouraged to view updated courses such as Hospice Beginner Billing Courses, Parts 1 and 2.

- **IVR:** POE staff reminded group as of February 28, 2025, eligibility information is no longer obtainable via the Interactive Voice Response (IVR) system per R128580TN | CMS (<https://www.cms.gov/medicare/regulations-guidance/transmittals/2024-transmittals/r128580tn>). Education has been ongoing since late 2024 and will continue to ensure provider awareness.

Suggested Topics

My company is seeing some TPE activity surrounding patients being admitted to the hospital while remaining on service for hospice (the TPE may not be CGS but another MAC). What is CGS's stance/recommendation in these situations?

1. What if the hospitalization is outside of the hospice plan of care?
 - a. When permissible, the hospital would bill with condition code 07, and this should not impact the hospice.
2. Could bi-weekly visits be made if the hospital will allow?
 - a. Yes, but most hospitals/state agencies require some sort of credentialing process (assuming the hospice is not owned by the hospital), so providers need to check on this. This normally includes verifying the license of the hospice staff, verification of malpractice insurance and providers need an 'overseeing' physician on the hospital staff. This varies from state to state, so it may or may not be necessary. Providers need to at least check.
3. Are there any contract implications such as the hospice provider has a GIP contract in place would a Routine Home Care Contract need to be obtained?
 - a. Answer is the same as above with the addition of the hospice needs to provide an emergency contact that would be available if the patient decompensates (that is in the Conditions of Participation (CoPs).
4. What is CGS's stance on both the hospice and the hospital billing concurrently?
 - a. As long as the reason for the hospitalization is unrelated and they bill with the condition code 07, there should be no problem.

Please see the, above, responses. CGS MR staff offered the following input: We've seen similar situations in the past. Think about how to identify if it is or isn't related.

Future Tasks

Review of Upcoming Educational Material

- Monthly Welcome Week for New Providers will continue.
- Hospice Focus Topics – Call for suggestions from the group
 - POE has noticed a decline in registration and overall attendance. 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
- Please allow at least 1 month for virtual education requests. For travel, more notice is needed to obtain necessary approvals.

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

Jan - Dec 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% |
| Total | 236,516 | 43,117 | 18.23% | 214,151 | 25,564 | 11.94% | 450,667 | 68,681 | 15.24% |

Hospice Claim Submission Error (CSE) Data: January 2025 – February 2025

Reason Code Search and Resolution Tool (https://www.cgsmedicare.com/medicare_dynamic/j15/j15hhh_reasoncodes/j15hhh_reasoncodes.aspx)

| Rank | Reason Code | Billing Error | # Of Errors |
|------|-------------|---|-------------|
| #1 | 37402 | Hospice sequential Billing Error | 4,228 |
| #2 | U5065 | The MBI eff or end date is not within the DOS submitted on the claim | 2,432 |
| #3 | U5106 | NOE falls within current hospice election | 1,882 |
| #4 | U523A | The dates of service on this claim are during both a hospice election period & Medicare Advantage Plan period that is Value-Based Insurance | 1,037 |
| #5 | 38200 | Duplicate claim | 993 |

Hospice Medical Review (MR) Denial Data: January 2025 – February 2025

Hospice Top Medical Denial Reason Codes (https://cgsmedicare.com/hhh/medreview/hos_denial_reasons.html)

| Rank | Reason Code | Denial Reason | # Of Denials |
|------|-------------|--|--------------|
| #1 | 5PM01 | Terminal prognosis not supported | 99 |
| #2 | 5PX06 | Notice of election is invalid | 58 |
| #3 | 5PC02 | Certification missing | 7 |
| #4 | 56900 | Requested medical records were not received within the 45-day time limit | 6 |
| #5 | 5PC10 | Hospice must obtain oral or written certification | 4 |

OPEN DISCUSSION

- POE staff advised The HHH Medicare Summit has been canceled for 2025 due to scheduling issues with the venue. Group members expressed their disappointment as this conference was affordable and a great opportunity for HHH providers.
- Group members expressed kudos to Ariel and Nykesha for always being supportive and quick to respond.
- The group was asked about in-person POE AG meetings and responses were mixed. The consensus is to combine in-person meetings with standing conferences when possible.

CGS ADVISORY GROUP NEXT MEETING DATE

July 15, 2025 – Hospice (Microsoft Teams)