

# Interactive Voice Response (IVR) System



1.866.290.4036

## IVR Information Accessed

## Availability

Options 1-5 and 7

**Monday – Friday:** 5:00 a.m. – 8:00 p.m. Central Time (CT)  
**Saturday:** 5:00 a.m. – 5:00 p.m. Central Time (CT)

Option 6

**24 hours a day, 7 days a week** (with exception to routine maintenance or system upgrades)

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**IVR Reminders and Tips:**

- Please use a telephone handset or headset. *Use of cell phones or speaker phone is **not** recommended.*
- Review and gather the **Required Information** before calling. *You have **3 opportunities** to enter the requested information or enter the requested information correctly before you will be **requested to call back and then disconnected**.*
- To assist with entry of beneficiary information, we strongly encourage use of our MBI Converter and IVR Beneficiary Name to Number Converter Tools ([https://www.cgsmedicare.com/medicare\\_dynamic/j15/ivr\\_mbi\\_converters.asp](https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp)).

**Introduction**

The CGS Jurisdiction 15 (J15) Part B Interactive Voice Response (IVR) System (1.866.290.4036) is designed to assist Part B providers in obtaining answers to numerous inquiries through this self-service option. In addition to retrieving status of submitted claims and appeals, you may review beneficiary eligibility information, order duplicate remittance notices, and complete telephone reopenings via the CGS J15B IVR system. You can also obtain the following:

- Medicare Part B deductible status and therapy limitations;
- Medicare Secondary Payer information;
- ESRD, Smoking cessation, and Hepatitis B screening information;
- Allowable for procedure codes;
- Claim denial reasons;
- Outstanding check amounts and issued EFTs;
- Offset information;
- NPI and PTAN validation; and
- Other claim processing information.

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.

**IVR Options**

**Available States**

The CGS J15B IVR System provides information for providers servicing the states of Kentucky and Ohio. Following the IVR Greeting, one of the following states must be selected in order to continue to the Main Menu of the IVR:

Key Selection	State
1	Kentucky
2	Ohio

After keying in the state selection, you may press either:

- **Pound (#) Key** for the **Customer Service Closure Schedule** OR
- **Any key** to continue to the **IVR main menu**.



### Main Menu Options

After keying **1 for KY** or **2 for OH** and then **any key** to continue, the IVR Main Menu will provide the following options:

Key Selection	Menu Option
1	<a href="#">Claim Status and Redetermination Status</a>
2	<a href="#">Eligibility and Deductible Information</a> (including Therapy Limitations)
3	<a href="#">Financial Information</a>
4	<a href="#">Other Inquiries</a>
5	<a href="#">Validate NPI Information</a>
6	<a href="#">General Medicare Information</a>
7	<a href="#">Telephone Reopenings</a>
8	Repeat Above Choices
0	Customer Service Line Phone Number

**Note:** You may select any hyperlinked option above to direct you to another part of this guide, which illustrates the flow of available information under that specific IVR option.

### Required Information

Before calling the IVR, you will need the following provider information:	If calling on a specific beneficiary or claim, you will need the following:
<ul style="list-style-type: none"> <li>National Provider Identifier (NPI)</li> <li>Provider Transaction Access Number (PTAN) <i>(formerly known as the Legacy or OSCAR provider number)</i></li> <li>Provider Tax Identification Number (TIN) <i>(last 5-digits)</i></li> </ul>	<ul style="list-style-type: none"> <li>Beneficiary Name</li> <li>Beneficiary Date of Birth</li> <li>Beneficiary Medicare Number <i>(Medicare Beneficiary Identifier (MBI) or Health Insurance Claim Number (HICN))</i></li> <li>Date of Service <i>(if applicable)</i></li> </ul>

### How to Enter Required Information Using Your Phone's Keypad

#### Entering Provider Information - NPI, PTAN, and TIN

**1st NPI**

Enter your NPI (10-digit number). Then press the pound (#) key.

**Note:** 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. The IVR automatically disconnects after 3 failed attempts.

**2nd PTAN**

If your Provider Number is **numeric**, press **1**.

Enter your **Provider Number** followed by the **# key**.

If **alphanumeric**, press **2**.

*For help entering PTAN Letters, listen to prompts or review the PTAN Letter Conversion Chart to the right.*

After entry of PTAN letters, enter the **numbers** followed by the **# key**.

**3rd TIN**

Enter the **last five digits** of your tax ID followed by the **# key**.

**Note:** 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.

PTAN Letter Conversion Chart			
A > 21	H > 42	O > 63	U > 82
B > 22	I > 43	P > 71	V > 83
C > 23	J > 51	Q > 11	W > 91
D > 31	K > 52	R > 72	X > 92
E > 32	L > 53	S > 73	Y > 93
F > 33	M > 61	T > 81	Z > 12
G > 41	N > 62		



## Entering the Beneficiary's Medicare Number

### Press 1 for the MBI (Medicare Beneficiary Identifier)

Enter the MBI.

Refer to our **MBI Converter Tool** ([https://www.cgsmedicare.com/medicaredynamic/j15/ivr\\_mbi\\_converters.asp](https://www.cgsmedicare.com/medicaredynamic/j15/ivr_mbi_converters.asp)) for the characters needed to enter for the MBI.

The system will **repeat back to the MBI** you entered and **ask if it is correct**:

- **Press 1 - Yes** (Correct)
- **Press 2 - No** (You will re-enter the MBI).

**Note:** The IVR automatically disconnects after 3 failed attempts to enter a beneficiary's Medicare number.

### Press 2 for the HICN (Health Insurance Claim Number)

If the **HICN begins with a letter** press 1, otherwise press 2 (i.e. HICN begins with a number).

Enter the **first 9-digits of the HICN**.

If the HICN is followed by:

- A - **Press 1**    C - **Press 3**    M - **Press 5**    W - **Press 7**  
 B - **Press 2**    D - **Press 4**    T - **Press 6**    Repeat Choices - **Press \***

If following this letter is:

- a **number** - **Press 1**
- another **letter** - **Press 2**
- **nothing** - **Press #**
- **Press \*** to return to the previous menu
- **Press 7** to repeat above

## Entering the Beneficiary's Name

### First Initial of First Name

Enter just the first initial of the beneficiary's first name using the number for the letter on your phone keypad.

- For the name Susan, enter 7 for the first initial S.

### Last Name

Enter the first 6 letters of the last name using the letters on your phone keypad and follow with # (e.g. for Johnson, you'd enter 5-6-4-6-7-6 #).

- For a last name less than 6 letters, enter all letters and follow with # (e.g. for Angel, enter 2-6-4-3-5 #).
- For a last name less than 6 letters but with a suffix, add the letters up to 6 and follow with # (e.g. for Lee Jr., see it as leejr and enter 5-3-3-5-7 #).
- Ignore spaces or hyphens between last names (e.g. for Smith Davis, see it as smithd and enter 7-6-4-8-4-3 #).

For additional assistance, refer to our **IVR Beneficiary Name to Number Converter Tool** at [https://www.cgsmedicare.com/medicare\\_dynamic/j15/ivr\\_mbi\\_converters.asp](https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters.asp).

## Entering the Beneficiary's Date of Birth and Applicable Dates of Service

### Beneficiary's Date of Birth

- Enter the **8-digit date of birth (MM-DD-CCYY)**
- Example: January 3, 1932 should be entered as 01031932

If inquiring about beneficiary eligibility information, the IVR will validate the patient's date of birth. If invalid, the IVR will ask you to re-enter the date of birth before proceeding.

### Beneficiary's Date of Service

- Enter the **6-digit "from" date of service in a MM-DD-YY format.**
- Example: January 3, 2019 should be entered as 010319

If inquiring about claim status or redetermination status, the IVR will ask for the beneficiary's date of service before releasing data. These dates are also validated before proceeding.



**Navigating the IVR Menu Options – Option 1 (Status – Claim)**

**Option 1: Claim Status and Redetermination**

**Claim Status (Press 1)**

**Redetermination Status (Press 2)**

**Key in Required Information:**

- NPI
- PTAN
- Last 5 Digits3 of Tax ID
- Medicare Number (Press 1 - MBI or 2- HICN)
- Beneficiary's First Name Initial
- Beneficiary's Last Name (First 6 Letters)
- Date of Service (MMDDYY)

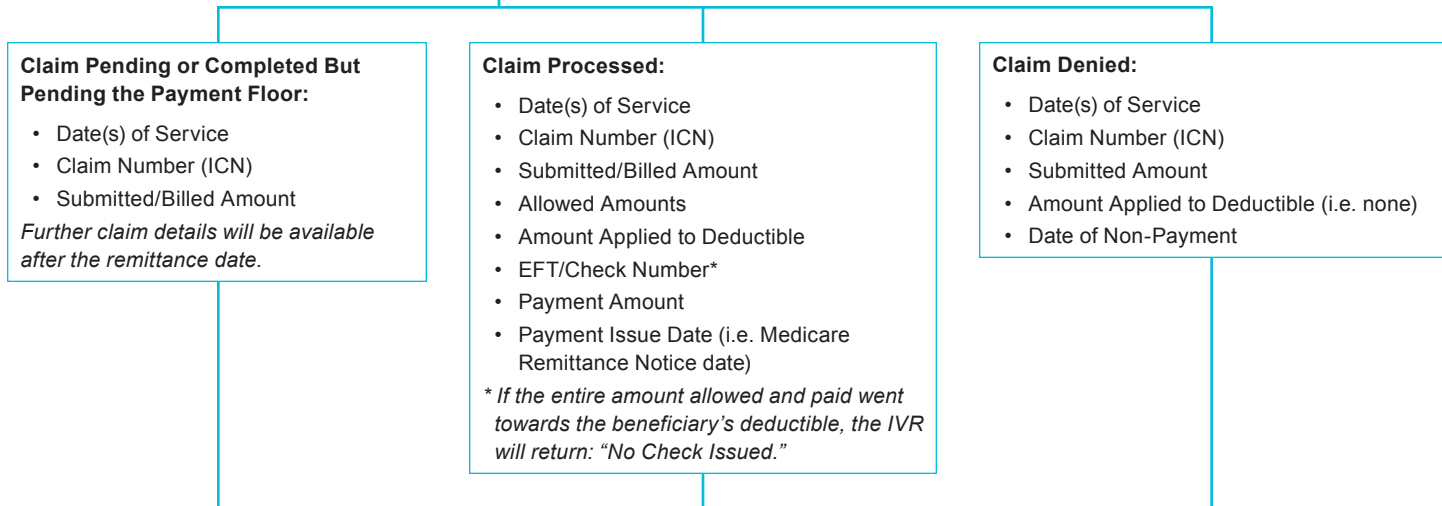
**Need help with keying? See pages 3-4!**

See [page 6](#).

**Constant IVR Prompts:**

- **Press 7** - Repeat
- **Press 8** - Main IVR Menu
- **Press 9** - Change NPI

**The Following Claim Status and Details will be Released:**



**Claim Pending or Completed But Pending the Payment Floor:**

- Date(s) of Service
- Claim Number (ICN)
- Submitted/Billed Amount

*Further claim details will be available after the remittance date.*

**Claim Processed:**

- Date(s) of Service
- Claim Number (ICN)
- Submitted/Billed Amount
- Allowed Amounts
- Amount Applied to Deductible
- EFT/Check Number\*
- Payment Amount
- Payment Issue Date (i.e. Medicare Remittance Notice date)

*\* If the entire amount allowed and paid went towards the beneficiary's deductible, the IVR will return: "No Check Issued."*

**Claim Denied:**

- Date(s) of Service
- Claim Number (ICN)
- Submitted Amount
- Amount Applied to Deductible (i.e. none)
- Date of Non-Payment

**Press 1 – Line by Line Information**

**Items Returned for the Line:**

- Procedure Code and Modifier(s) Billed
- Medicare Allowed Amount
- Denial Reason (if applicable)

**Press 1 – Next Line**

**Press 2 - Continue**

- **Press 1** - Claim Data for Same Date of Service
- **Press 2** - Claim Data for a Different Date of Service
- **Press 3** - Claim Data on Another Medicare Number
- **Press 7** - Repeat Information
- **Press 8** - Return to Main Menu, [page 3](#)
- **Press 9** - Enter a Different NPI

**Note:** Payment information for unassigned claims will not be released on the IVR.



Navigating the IVR Menu Options – Option 1 (Status – Redetermination)

**Option 1: Claim Status and Redetermination**

**Claim Status (Press 1)**

See [page 5](#).

**Redetermination Status (press 2)**

- Key in Required Information:**
- NPI
  - PTAN
  - Last 5 Digits of Tax ID
  - Medicare Number (Press 1 - MBI or 2- HICN)
  - Beneficiary's First Name Initial
  - Beneficiary's Last Name (First 6 Letters)
  - Date of Service (MMDDYY)

**Need help with keying? See pages 3-4!**

**Possible Information Provided:**

- Request Pending Review:**
- Date of receipt for Redetermination Request

- No Request Recieved for Data Entered:**
- If you submitted the request less than 5-days ago, you should call again later.
  - If the request was sent more than 125-days ago, the IVR will not have this data. You should contact the Provider Contact Center at 1.866.276.9558.

- Request Complete:**
- Date of receipt for Redetermination Request
  - Decision made (Upheld or Reversed)
  - Completion date
  - Date decision letter sent (if applicable)

**Constant IVR Prompts:**

- **Press 7** - Repeat
- **Press 8** - Main IVR Menu
- **Press 9** - Change NPI

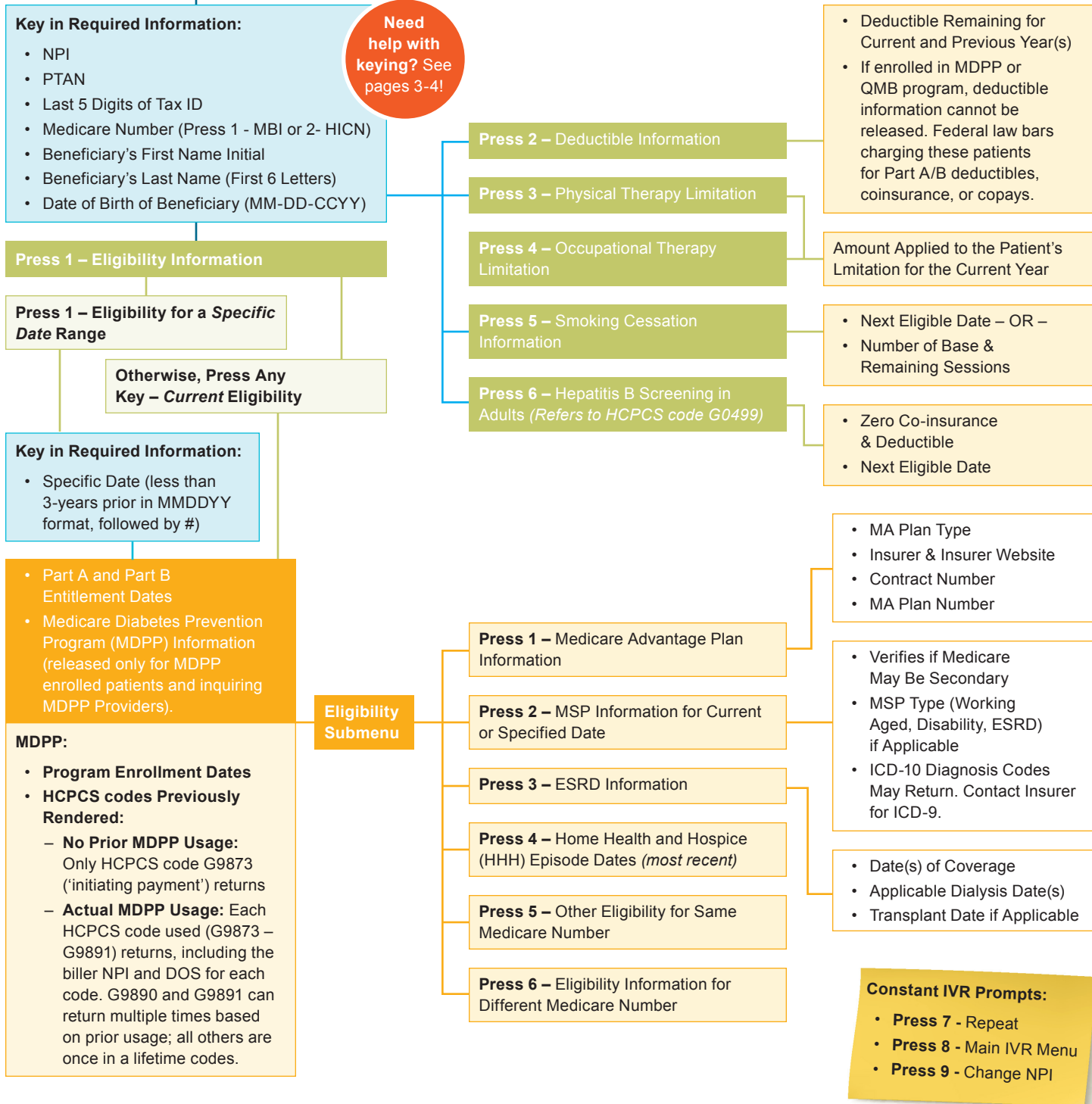
**After a response is provided, the following options will be offered:**

- **Press 1** - Redetermination information on a different Medicare Number
- **Press 7** - Repeat information
- **Press 8** - Return to Main Menu, [page 3](#)
- **Press 9** - To acquire information for a different NPI.



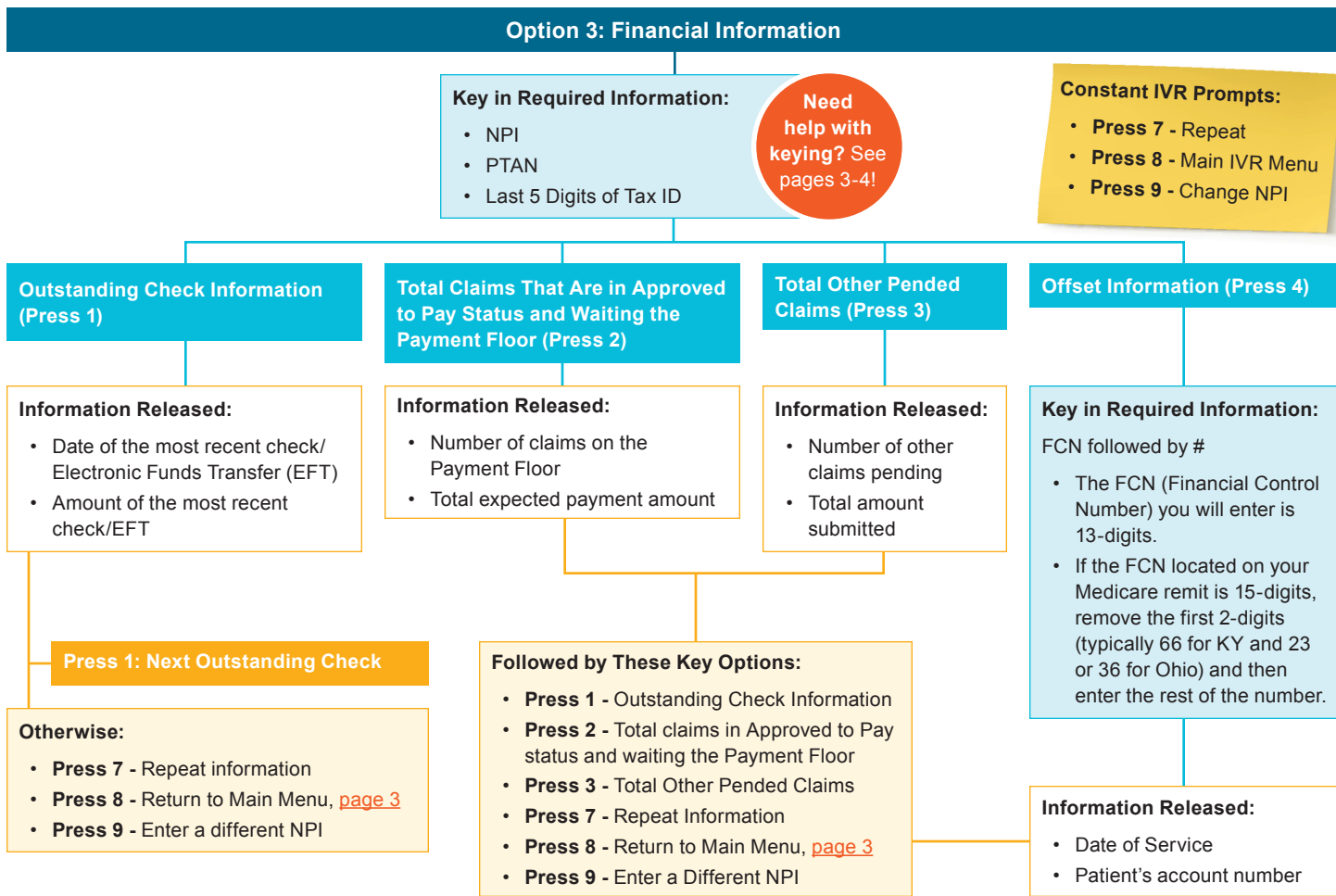
Navigating the IVR Menu Options- Option 2

**Option 2: Eligibility and Deductible Information**





Navigating the IVR Menu Options – Option 3







Navigating the IVR Menu Options – Option 4

**Option 4: Other Inquiries**

**Key in Required Information:**

- NPI
- PTAN
- Last 5 Digits of Tax ID

**Need help with keying? See pages 3-4!**

**Constant IVR Prompts:**

- **Press 7** - Repeat
- **Press 8** - Main IVR Menu
- **Press 9** - Change NPI

**Allowed Amount of a Specific procedure code (Press 1)**

**Key in Required Information:**

- Procedure code
- Modifier if applicable
- Type of Service (TOS)
- Zip code

**Enter procedure code:**

- **Press 1** - Code begins with a letter
- **Press 2** - Code begins with a number

- **Press 1** - There is a modifier
- **Press 2** - No modifier

**Enter Type of Service (TOS)**

- **Press 1** - TOS is a number
- **Press 2** - TOS is a letter

**Enter 5-Digit Zip Code**

**Allowed Amount Released**

- **Press 1** - Enter Another code
- **Press 7** - Repeat Information
- **Press 8** - Return to Main Menu, [page 3](#)
- **Press 9** - Enter a Different NPI

**Order a Duplicate Remit Notice (Press 2)**

**Key in Required Information:**

- Payment Date of Medicare remittance notice in **MMDDYY** format
- Note:** If you do not have the payment date or the correct date, you will need to contact the PCC Customer Service line 1.866.276.9558

**Summary of Response:**

- A duplicate remit will be mailed to your address on file.
- ETA: 7-10 Business Days

- **Press 1** - Request Another Remit
- **Press 8** - Return to Main Menu, [page 3](#)
- **Press 9** - Enter a Different NPI

**Information about Appeal Rights (Press 3)**

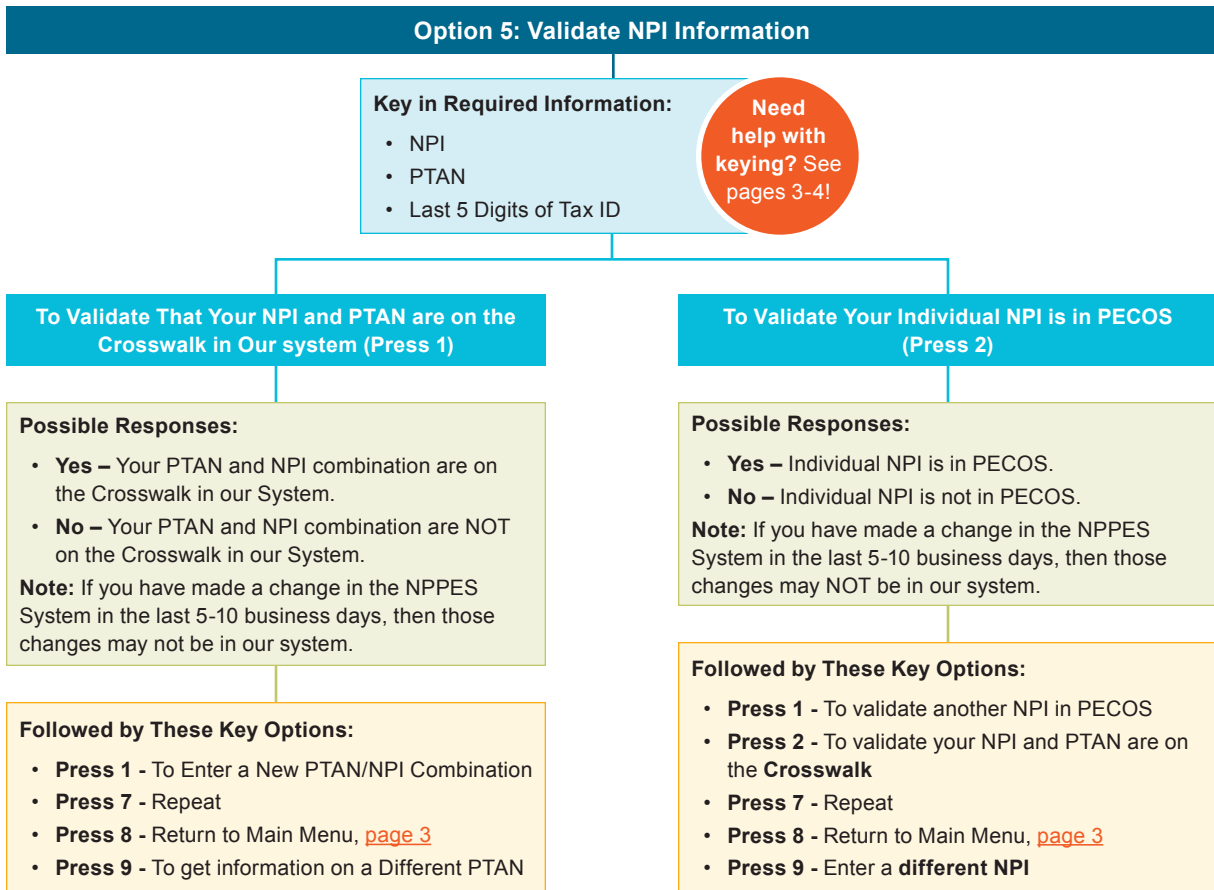
**Summary of Response:**

- You do not agree with what we approved for a service, you may appeal the decision.
- You have to **write us** (i.e. complete a redetermination request) **within 120-days of initial notice** unless you have a valid reason for being late.

- **Press 7** - Repeat Information
- **Press 8** - Return to Main Menu, [page 3](#)
- **Press 9** - Enter a Different NPI

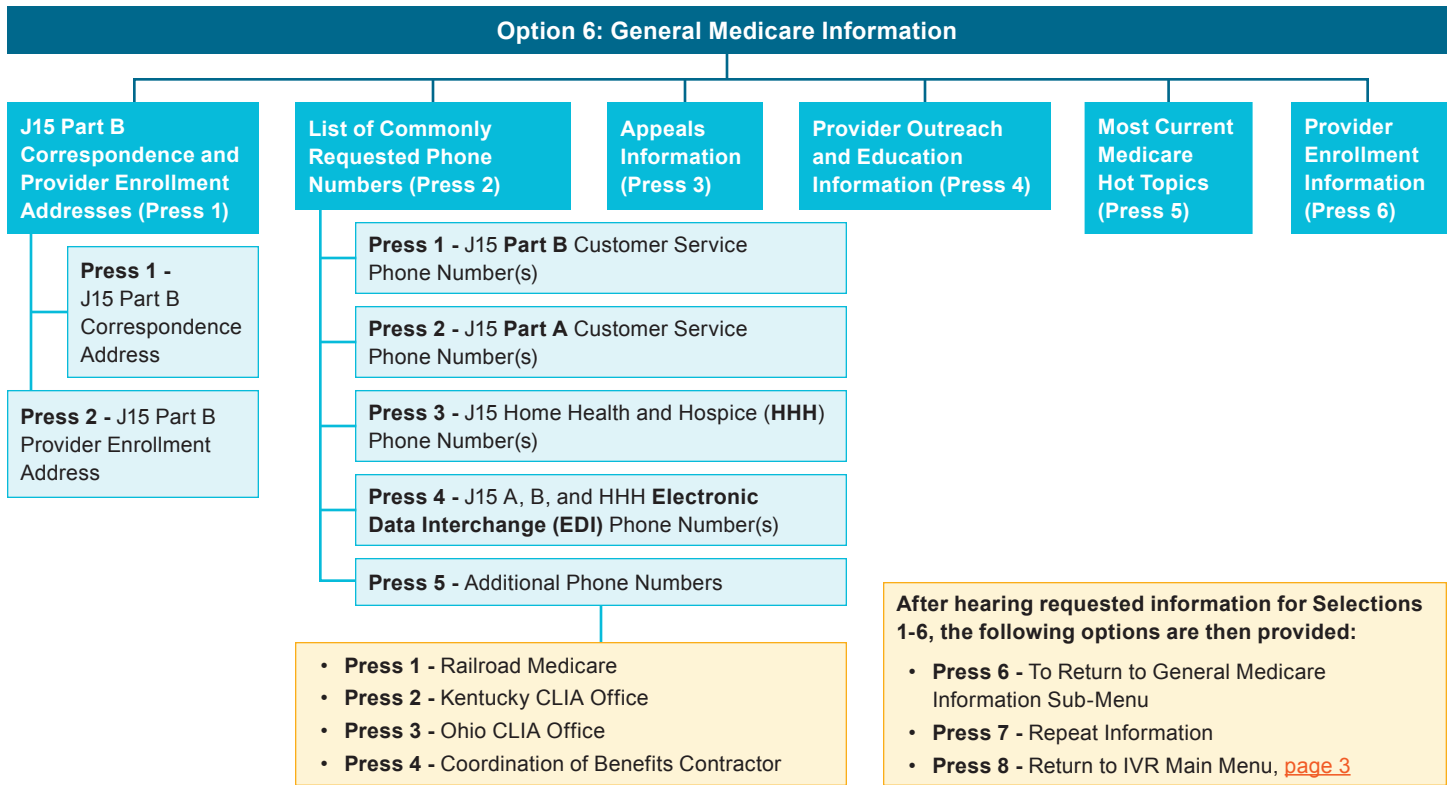


Navigating the IVR Menu Options – Option 5





Navigating the IVR Menu Options – Option 6





Navigating the IVR Menu Options – Option 7 TRO

**Option 7: Telephone Reopenings**

**Note:** A supplemental Job Aid for Requesting Telephone Reopenings through the IVR is available at: [https://www.cgsmedicare.com/partb/cs/requesting\\_tele\\_reopen\\_ivr.pdf](https://www.cgsmedicare.com/partb/cs/requesting_tele_reopen_ivr.pdf).

**Key in Required Information:**

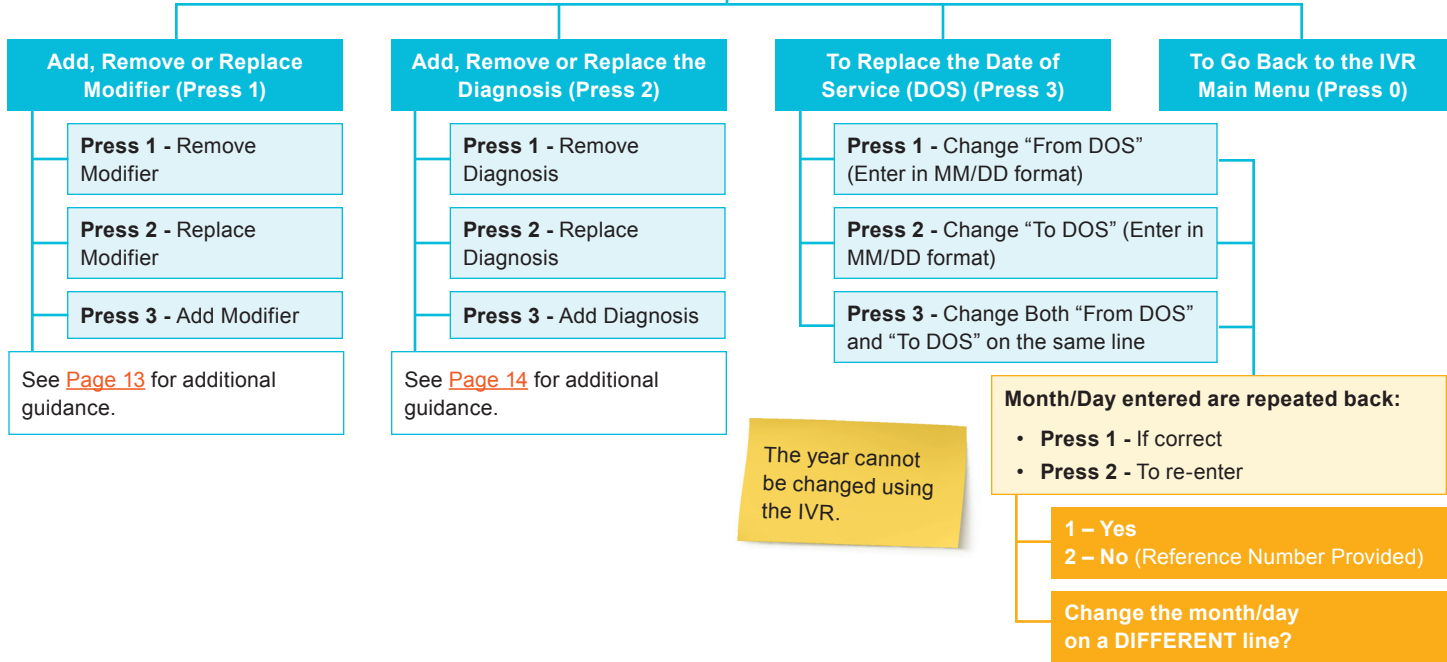
**Provider Information:**

1. **NPI**, followed by #
2. **PTAN**, followed by #
3. Last 5 Digits of **Tax ID**
4. **Caller Name**, followed by # (See letter conversion chart on [Page 3](#))
5. **Provider Phone Number**, followed by #

**Need help with keying? See pages 3-4!**

**Beneficiary/Claim Information:**

6. **Medicare Number** (Press 1 - MBI or 2- HICN)
7. **Initial of First Name**
8. **Last Name** (First 6 Letters), followed by #
9. **13-Digit Internal Claim Control Number** (If claim was previously adjusted, appealed or needs documentation, it cannot be serviced by the IVR. Please call the Customer Service Line.)





Navigating the IVR Menu Options – Option 7 TRO

**Option 7: Telephone Reopenings**

**Press 1 - To Add, Remove or Replace Modifier**

**Press 1 - Remove Modifier**

Enter the **LINE Number** of the procedure code containing the modifier you want to **remove**.

- To **Remove** the **Modifier** from:
- Position 1 – **Press 1**
  - Position 2 – **Press 2**
  - Position 3 – **Press 3**
  - Position 4 – **Press 4**
  - Return to TRO Menu – **Press 5**

**Remove another modifier on the SAME line?**

Press 1 - Yes      Press 2 - No

**Remove another modifier on ANOTHER line?**

Press 1 - Yes      Press 2 - No

**Press 2 - Replace Modifier**

Enter the **LINE Number** of the procedure code containing the modifier you want to **replace**.

- To **Replace** the **Modifier** from:
- Position 1 – **Press 1**
  - Position 2 – **Press 2**
  - Position 3 – **Press 3**
  - Position 4 – **Press 4**
  - Return to TRO Menu – **Press 5**

**Then press the key that corresponds to the replacement modifier that you would like to place in the selected position:**

**Press 3 - Add Modifier**

Enter the **LINE Number** of the procedure code to which you want to **add** a modifier.

**Then press the key that corresponds to the modifier that you would like to add:**

Modifier	Key
Modifier 24	Press 1
Modifier 25	Press 2
Modifier 57	Press 3
Modifier 58	Press 4
Modifier 78	Press 5
Modifier 79	Press 6
Modifier 59	Press 7
Modifier 50	Press 8
Modifier 26	Press 9
Any Other Modifier	<b>Press 0</b>

**If you selected 0:**

- Enter the Numeric Modifier.
- To enter a letter, press \* followed by the key with the letter. Then press 1, 2, or 3 to designate the position of the letter on that key (e.g. press \*21 for A).

**REPLACE/ADD another modifier on the SAME line?**

Press 1 - Yes      Press 2 - No

**REPLACE/ADD another modifier on ANOTHER line?**

Press 1 - Yes      Press 2 - No

When the reopening request is complete, a reference number is provided. If you would you like to continue corrections to the same ICN:

- **Press 1 – Yes** (Return to TRO Menu, [page 12](#))
- **Press 2 – No** (Reopen Any Other ICN)
- **Press 3 – Return to IVR Main Menu**, [page 3](#)



Navigating the IVR Menu Options – Option 7 TRO

