



A CELERIAN GROUP COMPANY

HIGLAS - Healthcare Integrated General Ledger Accounting System

Length: 4:42

Date Recorded: 1.09.20

Hello, and welcome. My Name is David Heller, and I am a member of the CGS Provider Outreach and Education Team. We are providing this Educational recording, to inform you that both Jurisdiction B and C, CGS DME MACs, will be transitioning from the DME Shared System, to a new financial accounting system, referred to as, HIGLAS. HIGLAS stands for, the Healthcare Integrated General Ledger Accounting System. Implementation of the HIGLAS financial accounting system will enable the Centers for Medicare & Medicaid Services (or CMS) to track Medicare payments and to accurately pay claims. CGS will be Implementing HIGLAS first for Jurisdiction C, with a transition effective date of February 14, 2020; followed by Jurisdiction B, which has a transition effective date of February 21, 2020.

So, what does this means for you?:

First off, you should be aware that this change only involves our financial accounting system. That said, the new system will create a few functional changes that you should be aware of:

Claims and refund payments, may now be subject to offsetting to a third party payer (or TPP), such as the IRS.

In the current environment, when a supplier is subject to TPP, a supplier check is pulled and the payment is remitted to the third party, but no notification is provided on the Remittance Advice (or RA).

However, the HIGLAS system will communicate a TPP offset of a supplier's payment on the supplier's RA

Payment withholdings for affiliated suppliers

In HIGLAS, when two or more suppliers are affiliated and have the same Tax Identification Number (or TIN), payments may be withheld from one supplier, to collect

another supplier's overpayments.

These resulting Overpayment collections from affiliated suppliers, shall begin once HIGLAS is implemented. Therefore, if you believe the TIN associated with your supplier number is incorrect, please contact the National Supplier Clearinghouse (or NSC) at (866) 238-9652 for assistance. Also, please be aware that there will be a few temporary changes, taking place both immediately preceding the transition effective dates, as well as during the transition period itself:

To facilitate our transition, CMS, has temporarily approved waiver requests, to reduce the payment floor for both paper and Electronic Data Interchange (or EDI) claims during the transition period. This payment floor reduction will result in some claim payments (checks and EFTs) being issued earlier than normal.

JC will be applying this reduction over a two day period:

The first reduction will occur on February 11, 2020, with the payment floor being reduced to 7 days for EDI claims, and 14 days for paper claims.

On the following day, February 12th, the payment floor will be reduced to zero for both EDI and paper claims.

Meaning that payments will be released without delay for all claims as soon as they are approved for payment.

JB will be slightly different, as the payment floor will be reduced directly to zero on February 19, 2020.

This may give the appearance that your cash revenues have increased, when in fact, payments for your claims may have been made earlier than normal

Suppliers are encouraged to submit their claims as normal, monitor their payments, and make adjustments as necessary to prevent cash flow problems during the transition period CGS has webpages dedicated specifically to HIGLAS. Please visit our website at www.cgsmedicare.com, choose your jurisdiction, and click on the HIGLAS icon. There you will find additional information regarding the HIGLAS transition, as well as, other important dates.

Once again, I am David Heller with the CGS Provider Outreach and Education team, and I thank you for taking the time to allow us to keep you informed and up to date regarding this important transition.