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myCGS Overview

What Is myCGS?

The myCGS portal is a Web-based application developed by CGS that is available to suppliers of durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) who serve beneficiaries in Jurisdictions B and C. Using myCGS is a fast and easy way to get Medicare claim and billing information.

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

- **Beneficiary Eligibility**
  Find beneficiary eligibility, Medicare Secondary Payer, Medicare Advantage Plan, home health episode, hospice, and inpatient stay information.

- **Claim Status**
  Check on the status of claims you’ve submitted to Jurisdiction B (or C)

- **Same or Similar Information**
  Search beneficiary claim history for same or similar items

- **Redetermination and Reopening Status**
  Check the status of your Redetermination and Reopening requests directly through myCGS

- **ADMC and Prior Authorization Status**
  Check the status of your ADMC and Prior Authorization requests directly through myCGS

- **And More!**

This manual contains the information you need to navigate myCGS and take advantage of its many helpful features. The instructions in this manual assume that you are familiar with basic Medicare rules and regulations as they pertain to DMEPOS suppliers. For a detailed overview of Medicare DMEPOS rules and regulations, refer to our Supplier Manual. The Supplier Manual is the first resource that you should use for Medicare billing questions. You can access the Supplier Manual at the links below (depending on your jurisdiction).

- **DME MAC Jurisdiction B Supplier Manual:**

- **DME MAC Jurisdiction C Supplier Manual:**

For news and updates regarding myCGS, as well as other important DME MAC articles and information, be sure to subscribe to our ListServ, the CGS electronic mailing list. To join the ListServ, visit our website at http://www.cgsmedicare.com.

If you have any questions that cannot be answered in this manual or the Supplier Manual, contact our Customer Service Department at one of the following phone numbers (be sure to call the correct jurisdiction):

- **Jurisdiction B:** 1.866.590.6727
- **Jurisdiction C:** 1.866.270.4909

Who Can Use myCGS?

Any DMEPOS supplier or affiliate who serves beneficiaries in Jurisdictions B and/or C may register for myCGS. All myCGS users must be approved through the CMS Enterprise Identity Management (EIDM) website before receiving the ability to use myCGS. For assistance with registering for myCGS, refer to the myCGS Registration Guide (http://www.cgsmedicare.com/jc/myCGS/pdf/myCGS_RegistrationGuide.pdf).

There are two different types of myCGS user roles—the End User role and Approver/Admin roles (which may be listed as Designated Approvers, Authorized Officials, or Backup Authorized Officials). The majority of the functionality within myCGS is available to all user roles. The
additional feature of being able to maintain user privileges is available only to Approver/Admin roles.

Logging In to myCGS

Before you can use myCGS, you must complete the registration process and receive an EIDM user ID and password. Refer to the myCGS Registration Guide (http://www.cgsmedicare.com/jc/myCGS/pdf/myCGS_RegistrationGuide.pdf) for instructions on how to register.

Once you have successfully registered, follow these steps to log in to myCGS:

2. Click on the Login to DME myCGS link.
3. Read and accept the EIDM Terms and Conditions.
4. Login using your EIDM User ID and Password.
   
   If you have an issue with your EIDM user ID and/or password and are unable to login, follow the onscreen instructions for resetting your password. If you are still unable to login, contact our Provider Contact Center.
5. Read the myCGS Terms and Conditions, select your DME Jurisdiction (B or C) and press the OK button.

   **NOTE:** You can easily switch back and forth between Jurisdictions B and C without having to log out of myCGS. Refer to the Switching between Jurisdictions section below.

7. Once you have successfully logged in, you will be taken to the myCGS Home screen.

   Once logged in (as an End User), you will see nine menu selections across the top of the myCGS portal—Home, Beneficiary Information, Claims, Claim Preparation, Finance, Reprocessing, News & Information, Privacy Notice, and My Account. To get started, click on the menu that contains the information you need. In this manual, you will find a section devoted to each of these menu screens.

   **NOTE:** If you are registered for myCGS in an Approver role (Designated Approver, Authorized Official, or Backup Authorized Official), then you will be taken directly to the Admin section of myCGS when you first log in. Press the Home menu to go to the End User section. Refer to the Admin section in this manual for additional information.
If one or more of your menu options has a locked icon, then you do not have permission to view/use that menu. Request access to any locked menus from your Designated Approver. You will not be able to access a locked menu until your Designated Approver updates your user permissions. Refer to the Locked Menus section below.

myCGS Interface Overview

myCGS contains nine primary menu options, as well as help and feedback sections. Use the sections throughout this manual to find detailed information about all of the myCGS functions and capabilities.

The image below shows the main areas of myCGS:

Switching Between Jurisdictions

If you are a supplier who services beneficiaries in both Jurisdictions B and C, myCGS allows you to easily switch back and forth between the two jurisdictions. To do so, simply click on the appropriate jurisdiction radio button in the top-center of your screen.

You can always know which jurisdiction you are currently viewing based on the color scheme of myCGS, as well as the JB or JC label at the top of the screen. As you can see in the screen images below, yellow is Jurisdiction B, and green is Jurisdiction C.

Change NPI/PTAN

Most of the functional capabilities in myCGS depend on your supplier information—your NPI and PTAN. If you represent a company that uses only one NPI/PTAN, then you do not need to
worry about changing NPI/PTANs—your correct NPI/PTAN information will always populate automatically in any screen that requires supplier information in myCGS. But if you represent a company that has multiple NPI/PTAN combinations, then you need to make sure you are using the appropriate NPI/PTAN for the information you are requesting.

**NOTE:** myCGS will automatically give you access to all of the NPI/PTAN combinations that are associated with your Tax ID.

Switching between NPI/PTANs in myCGS is easy. In the upper-right corner of myCGS, you will always see the NPI/PTAN associated with your account that is currently selected. This NPI/PTAN will auto-populate in any functional screen within myCGS that requires supplier information.

To change to a different NPI/PTAN, simply click on the NPI or PTAN that is currently showing in the top-right corner of your screen. A pop-up window will appear that allows you to switch to a different NPI/PTAN. Enter the first digit (or several digits) of the appropriate NPI into the NPI field, and then select the NPI/PTAN combination you need from the drop-down menu. Note that you may need to wait a few seconds after typing the digits in the NPI field before the drop-down menu appears.

**Locked Menus**

Your organization’s Designated Approver has the ability to grant or take away user permissions specific to your user profile. These permissions control which features you can and cannot use in myCGS. If one of your function menus shows a closed lock icon, then you do not have permission to use this function and will not be able to access the menu.

If you need access to a menu which is currently locked, contact your Designated Approver and request access.

**Beneficiary Information**

**Beneficiary Information Overview**

There are three main menu options found under Beneficiary Information: Eligibility (default option), SNF/Hospital, and CBA Information. Hover your cursor over the Beneficiary Information menu and select the option you wish to use. If you click directly on Beneficiary Information, it will take you to the default screen, which is Eligibility.
The Beneficiary Information menu gives you access to a variety of information about Medicare beneficiaries, including:

- Medicare Part A and Part B effective and termination dates
- Current year deductible to be met
- Previous year deductible to be met
- The DME MAC jurisdiction in which the beneficiary resides
- Medicare Advantage Plan (MAP) information
- Medicare Secondary Payer (MSP) records
- Hospice records
- Home health episodes
- Skilled nursing facility (SNF) and hospital stays
- Competitive Bidding Area (CBA) information

Eligibility

The Eligibility screen gives you access to basic beneficiary eligibility records, including Medicare Part A and B effective dates, current and previous year deductible, date of death (if applicable), and the DME MAC jurisdiction in which the beneficiary current resides.

On the Eligibility screen, there are several secondary options: Summary, MAP, MSP, Hospice, and HHE (which stands for Home Health Episodes). To use any of these secondary options, you must always begin by performing a search on the Eligibility Summary screen.

The Eligibility screen, like all search screens in myCGS, automatically populates your NPI and PTAN; therefore you do not need to manually enter this information. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, change your NPI/PTAN by following the instructions in the Change NPI/PTAN section in this manual.

To search for beneficiary eligibility, enter the following beneficiary information, and press the SUBMIT button:

- HICN
- Beneficiary Last Name (first six letters)
- Beneficiary First Name (first initial)
- Beneficiary Date of Birth (six digits)
NOTE: When entering the beneficiary’s date of birth, myCGS will automatically add slashes; you only need to enter the six digits of the date of birth. This is true of all date fields in myCGS.

After clicking the SUBMIT button, myCGS will return basic eligibility information, including Part A and B effective dates, deductible, date of death (if applicable) and DME MAC jurisdiction of residence. Additionally, myCGS will list indicators for other eligibility information that may be on file, including Medicare Advantage Plan (MAP), Medicare Secondary Payer (MSP), hospice records, and home health episodes. “Yes” and “No” radio buttons are listed next to each of these indicators, letting you know if such a record does exist on file. If the indicator shows “Yes” then you can click on the indicator hyperlink (or select the appropriate menu option) to see the details of the information.

The image below shows eligibility results for a beneficiary who has a Medicare Advantage Plan. Clicking on the Medicare Advantage Plan (MAP) hyperlink will take you to a screen with more details about the plan.

In addition to the four subsets of eligibility shown above, you can also check to see if the beneficiary was billed for a skilled nursing facility (SNF) or hospital stay on a specific date of service. To do so, use the SNF/Hospital menu option. Refer to the SNF/Hospital section below for more information.

**Medicare Advantage Plan (MAP)**

A Medicare Advantage Plan (MAP) is an alternative to the traditional fee-for-service Medicare plan. The Eligibility screen in myCGS allows you to determine if a beneficiary is enrolled in a MAP. To find MAP information, search for beneficiary eligibility as described in the **Eligibility** section above. If MAP information is found, the “Yes” radio button next “Medicare Advantage Plan (MAP)” will be marked.

When myCGS finds MAP enrollment, the following information will be displayed on the MAP Information screen:

- Plan name
- Plan address
- Plan phone number
- Plan ID
- Enrollment date
- Plan type
- End date

The following screen image shows an example of a beneficiary currently enrolled in a MAP:
Medicare Secondary Payer (MSP)

The term Medicare Secondary Payer (MSP) refers to situations when a beneficiary has another form of insurance which would pay a claim before Medicare. When a beneficiary has an MSP plan, you may need to submit his/her claim to the primary insurance before submitting a claim to CGS.

The Eligibility screen in myCGS allows you to determine if a beneficiary has an MSP plan. To find MSP information, search for beneficiary eligibility as described in the Eligibility section above. If MSP information is found, the “Yes” radio button next “Medicare Secondary Payer (MSP)?” will be marked.

When myCGS finds an MSP result, the following information will be displayed on the MSP Information screen:

- Plan name
- Plan address
- Policy number
- MSP type
- Effective date
- Termination date

**NOTE:** It is possible for a beneficiary to have multiple MSP plans. Be sure to pay attention to the effective and termination dates of any MSP plans listed.

Hospice

When a beneficiary is enrolled in hospice coverage, all DMEPOS claims related to the service must be billed through the hospice, not to the DME MAC.

The Eligibility screen in myCGS allows you to determine if a beneficiary is enrolled in hospice. To find hospice information, search for beneficiary eligibility as described in the Eligibility section above. If hospice information is found, the “Yes” radio button next “Hospice Record?” will be marked.

When myCGS finds hospice enrollment, the following information will be displayed on the Hospice Information screen:

- Start date
- End date
- Hospice NPI

You can use the NPI to find the name and contact information of the hospice by visiting the NPI Registry.
Home Health Episode (HHE)

When a beneficiary is under a home health plan of care, payment for certain items must be made through the home health agency overseeing the home health plan. The Eligibility screen in myCGS allows you to determine if a beneficiary is currently being billed for a home health episode (HHE).

To find HHE information, search for beneficiary eligibility as described in the Eligibility section above. If HHE information is found, the “Yes” radio button next “Home Health Episode (HHE)?” will be marked.

When myCGS finds a home health episode, the following information will be displayed on the HHE Information screen:

- Start date
- End date
- Home Health Agency NPI

You can use the NPI to find the name and contact information of the home health agency by visiting the NPI Registry (https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do).

SNF/Hospital

When a beneficiary is enrolled in a Part A covered Skilled Nursing Facility (SNF) or Hospital stay, most claims are not payable by the DME MAC. The Beneficiary Information menu in myCGS allows you to determine if a beneficiary is enrolled in a SNF or hospital stay on a specific date of service. To find SNF/Hospital information, search for beneficiary eligibility as described in the Eligibility section above. Once eligibility is returned, select the SNF/Hospital menu option.

Once you have navigated to the SNF/Hospital screen, enter the date of service in which you wish to check for Part A stay information, and then press the SUBMIT button.

HINT: If the only piece of eligibility information you need is SNF or hospital information, you can go directly to the SNF/Hospital screen without performing a search for beneficiary eligibility. In this case, you must enter all of the appropriate beneficiary data (HICN, last name, first name, and date of birth), along with the date of service you need to check.

When myCGS finds a SNF or hospital stay, the following information will be displayed on the SNF/Hospital Information screen:

- Start Date
- End Date
- Patient Status
- Admitted Date
- Discharge Date
- Facility Type
- Facility NPI

You can use the NPI to find the name and contact information of the SNF/Hospital by visiting the NPI Registry (https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do).
CBA Information

The CBA Information screen allows you to easily determine if a beneficiary resides in a Competitive Bidding Area (CBA). After navigating to the CBA Information screen, simply enter the zip code where the beneficiary resides, and press the **SUBMIT** button. If the zip code is included in a CBA, then myCGS will display specific information about the CBA, including the CBA number and effective dates.

Claims

Claims Overview

The Claims menu gives you access to a variety of information about the claims that you have submitted to Jurisdiction B or C, including:

- Claim status
- Explanation of denied/reduced claims
- Pending claim information
- Ability to order a duplicate Remittance Advice (RA) and view an RA summary

Within the Claims menu, there are three main menu options: Claim Status (default), Pending Claims, and Order RA. Use the Claim Status screen to search for claim status and claim explanations. To find the total number of pending claims for your NPI/PTAN, go to the Pending Claims screen. If you need to order a duplicate Remittance Advice (RA) or view an RA summary, go to the Order RA screen (note that you can also order a duplicate RA after performing a claim status search).

All screens within the Claims menu automatically populate your NPI and PTAN; therefore you do not need to manually enter this information. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, follow the instructions in the **Change NPI/PTAN** section in this manual.
Claim Status

The Claim Status screen in myCGS allows you to find the status of any claim you have submitted to Jurisdiction B or C (depending on which jurisdiction you have selected). Within the Claim Status screen, you can find detailed information about your individual claims, including claim denial explanations. To access claim status, select the **Claim Status** option in the Claims menu.

Searching for Claims and Explanations

To search for the status of a claim, enter the following information on the Claim Status Request screen:

- HICN
- Beneficiary Last Name
- Beneficiary First Name
- Date of Service From
- Date of Service To (optional)

**NOTE:** When entering the date of service, myCGS will automatically add slashes; you only need to enter the six digits of the date of service. This is true of all date fields in myCGS.

Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. The search results will be limited to only display claim history for the NPI/PTAN listed in the search criteria. You can change the NPI/PTAN by clicking on the NPI or PTAN shown in the upper-right corner of your screen.

Note that the “Date of Service To” field is optional. If you are looking for only one specific date of service, leave this field blank. If you would like to see all claims that you have submitted for a beneficiary over a certain period of time, then use this field to span the date range in your search.

After entering the claim data, press the **SUBMIT** button.

![Claim Status Request](image)

Your NPI and PTAN will automatically populate

Claim Status Summary

After clicking the **SUBMIT** button, myCGS will return claim information found for the search criteria. The following information will be displayed on screen:

- Claim Control Number (CCN)
- Remit Date
- Deductible Applied (DED)
- Paid Amount
- Status
- Place of Service
- HCPCS Code
- From Date
- To Date
- Number of Services
- Submitted Amount
- Allowed Amount
- Claim explanation (if applicable)
If you would like to order a duplicate copy of a Remittance Advice (RA), press the Order RA button. A duplicate RA will then be printed and mailed to your address on file. You can also order a duplicate RA from the Order RA screen (refer to the Order RA section below).

The image below shows an example of the Claim Status Summary screen:

![Claim Status Summary Image]

**Claim Explanations**

If a claim you have submitted has been denied or has paid at less than the submitted amount, myCGS will provide an explanation to help you understand the situation. Click on the View button in the Explanation column in order to see the claim explanation. A new window will pop up showing the explanation, as shown in the image below. Press the EXIT button to dismiss the message.

![Claim Explanation Image]

**Additional Claim Detail**

You can select a displayed claim to get more detail by clicking on the CCN of the claim. After clicking on the CCN, the Claim Status Detail Information window will appear. The following additional detail is available:

- Status
- Completed Date
- Provider Paid Amount
- Denial Code Explanations (if applicable)
- ADR Sent Date (if applicable)
- ADR Denial Date (if applicable)
- ADR Response Receipt Date (if applicable)
- Ordering/Referring Physician NPI
- Ordering/Referring Physician Name
- GR/REAS Codes, Remarks Codes, and their Corresponding Amounts

The following image shows an example of the Claim Status Detail Information window:
To return to the Claim Summary screen, press the EXIT button.

**Pending Claims**

The Pending Claims screen allows you to view information about the number of claims you have pending on either the payment floor, the Common Working Files (CWF), or in process. To access the pending claims, select the **Pending Claims** option in the Claims menu.

Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. You can change the NPI/PTAN by clicking on the NPI or PTAN shown in the upper-right corner of your screen.

To search for your pending claim information, press the **SUBMIT** button. myCGS will then display three types of pending claim information, as described below.

**Pending Claims on Payment Floor**

When a claim has been submitted to Medicare, it must wait a certain period of time before payment can be released. When a claim has been approved but has not yet reached the minimum waiting period, it is on the "payment floor." When searching for pending claim information, myCGS will display the number of your claims currently on the payment floor, as well as the dollar amount submitted and the projected payment amount for the claims. Note that the projected payment amount may differ from the actual Medicare payment/check that you will receive.

**Pending Claims at CWF**

When a claim has been approved for payment by CGS, it then must go to the Common Working Files (CWF) for final approval. Claims that are pending at CWF are one step closer to completion, but have not yet actually been approved.
Pending claim information in myCGS provides you with the total number of claims and dollar amount submitted that are currently pending at CWF.

**Other Pending Claims in Process**

Before CGS has made a claim decision, your claim is considered to be pending and in process. Pending claim information in myCGS allows you to see the total number of claims and dollar amount submitted that have been received by CGS, but in which a payment determination has not yet been made.

![Pending Claim Information](image)

**Order RA**

The Order RA screen allows you to view a summary of a Remittance Advice (RA) or to order a duplicate copy of an RA that will be sent via mail.

To view a summary or order a duplicate RA, follow these steps:

- In the Claims menu, select the **Order RA** option.
- Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. You can change the NPI/PTAN by clicking on the NPI or PTAN shown in the upper-right corner of your screen.
- In the “Remittance Advice Date From” field, enter the date of the RA you wish to view/order, and then press the **Submit** button.

A general summary of your RA will then be displayed, showing the provider paid amount, check amount, and offset amount. To order a duplicate RA via mail, press the **Order RA** button. To view a summary of your RA, press the **RA Details** button.
If you choose to view RA Details, your screen will expand to show the following fields:

- Claim totals (billed amount, allowed amount, deductible, coinsurance, provider paid amount, and check amount)
- Total assigned claims
- Financial details (previously paid amount, paid to beneficiary amount, interest, MSP, offset amount, and other adjustments)
- Offsets (CCN, patient number, DCN, and offset amount)
- Claim details (CCN, HICN, amount paid, check amount, and interest for each individual claim on the RA)

When viewing RA Details, you can also find details for each individual claim on the RA. Simply press the Claim Detail button, as shown in the image below, and a new window will pop up showing a summary of the individual claim.

You can view even more information about the claim by clicking on the CCN link from the Claim Detail window, as shown below.

**Claim Preparation**

**Claim Preparation Overview**

The Claim Preparation menu gives you access to a variety of information that you may need before filing a claim to CGS, including information about same or similar equipment that the beneficiary may have on file.
There are six main menu options in the Claim Preparation menu:

- **CMN Status** – allows you to search for a beneficiary’s CMN history
- **Ordering/Referring Physician** – allows you to determine the status of a physician's NPI
- **Diabetic Supplies/Shoes** – allows you to search for a beneficiary’s claim history for either diabetic testing supplies or diabetic shoes
- **Claim History** – allows you to find the past claim history of a specific item/HCPCS code billed to Jurisdiction B or C
- **Prior Authorization Status** – allows you to view the status of Prior Authorization requests
- **ADMC Status** – allows you to view the status of ADMC requests

Refer to the sections below for detailed information about each of these menu options.

All screens within the Claim Preparation menu automatically populate your NPI and PTAN; therefore you do not need to manually enter this information. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, follow the instructions in the **Change NPI/PTAN** section in this manual.

### CMN Status

The CMN Status screen in myCGS allows you to search a beneficiary’s CMN history. A beneficiary’s CMN history is important to know, because it can help you avoid same or similar equipment denials. For instance, if you need to know if a beneficiary has previously received oxygen equipment, you can use the CMN Status screen to search for an oxygen equipment HCPCS code, such as E1390. If you perform a CMN search for E1390, myCGS will show any related oxygen equipment CMNs that have been previously billed to Jurisdiction B or C (depending on which jurisdiction you have selected).

To search for CMN status, select the **CMN Status** option in the Claim Preparation menu, and enter the following information on the CMN Status screen:

- **HICN**
- **Beneficiary Last Name** (first six letters)
- **Beneficiary First Name** (first initial)
- **Beneficiary Date of Birth** (six digits)
- **HCPCS**

**HINT:** You can 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, myCGS will return CMN results for any HCPCS code that begins with an E.

Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. You can change the NPI/PTAN by clicking on the NPI or PTAN shown in the upper-right corner of your screen.

After entering the information, press the **SUBMIT** button.
After clicking the **SUBMIT** button, myCGS will return CMN history found for the search criteria you entered, including the HCPCS code you entered and related HCPCS codes (i.e., same or similar). The following information will be displayed on screen:

- **HCPCS**
- **Type** (initial, revised, or recertification)
- **Length**
- **Initial Date**
- **Revised/Recert Date** (if applicable)

The image below shows an example of CMN status results. In this example, the user searched for HCPCS code E1390 (oxygen concentrator):

To get additional information about a CMN, click on the HCPCS code of the appropriate CMN. Upon clicking on the HCPCS hyperlink, the CMN Detail Information window will appear with the following CMN details:

- **Submitted HCPCS**
- **Approved HCPCS**
- **Type** (initial, revised, or recertification)
- **Length**
- **Initial Date**
- **Revised/Recert Date** (if applicable)
- **Supplier Name**
- **Supplier Phone Number**
- **Status**
- **Rental Months Paid**
- **Last Rental Date**

* The rental months paid displayed in myCGS account for payments made by Jurisdiction B or C (depending on which jurisdiction you have selected), but not for other DME MACs. If a beneficiary has resided in another jurisdiction, it is possible that additional rental months have been paid.

The following image shows an example of the CMN Detail Information window:
To return to the CMN Summary screen, press the EXIT button.

**A Few Notes about CMNs**

CMNs that appear in myCGS may be true CMNs or “dummy” CMNs. A true CMN is a CMN or DIF that was completed by a physician/supplier and submitted to Jurisdiction C with a claim. A dummy CMN is a CMN set up for the purposes of tracking payments on capped rental items or inexpensive and routinely purchased (IRP) items.

When a capped rental item has been extended beyond the initial 13 month rental period due to a break in billing, it will appear as a revised CMN in myCGS.

Accessories which are capped rental items or IRP items will be shown as their own CMN within myCGS for the sake of tracking payments, even if the accessory was listed on the same CMN as the base equipment.

**Ordering/Referring Physician**

Claims submitted to a DME MAC must include the ordering/referring physician’s NPI. The physician’s NPI must be enrolled in the Medicare Provider Enrollment, Chain, and Ownership System (PECOS) to be valid. You can use myCGS to check a physician’s NPI for valid PECOS enrollment.

To search for ordering/referring physician status, select the **Ordering/Referring Physician** option in the Claim Preparation menu, and enter the following information:

- Ordering/Referring Physician NPI
- Physician Last Name (first six letters only)

After entering the information, press the **SUBMIT** button.

myCGS will return a statement regarding the ordering/referring physician status found for the search criteria.

The image below shows a response for a physician who is currently enrolled in PECOS:
If you need to perform another physician NPI search, press the CLEAR button, and then enter the next physician’s information.

**Diabetic Supplies/Shoes History**

The Diabetic Supplies/Shoes History screen in myCGS allows you to check a beneficiary’s history of diabetic supplies and shoes claims. You can use this information on a pre-claim basis in order to determine if a beneficiary is eligible for additional supplies or shoes. You can also use this feature if you have had a claim denied due to overutilization and wish to find out if the beneficiary received supplies or shoes from another DMEPOS supplier. To access the Diabetic Supplies/Shoes History screen, select the **Diabetic Supplies/Shoes** option in the Claim Preparation menu.

The first step in searching for diabetic history is to choose the type of diabetic items you need to find. To do so, select the appropriate option in the History Type drop-down menu:

- **Testing Supplies A4253 and A4259** – This option will only search for HCPCS codes A4253 and A4259
- **Testing Supplies Other** – This option will search for all diabetic supply HCPCS codes other than A4253 and A4259
- **Shoes A5500 and A5501** – This option will only search for HCPCS codes A5500 and A5501
- **Shoes Other** – This option will search for all diabetic shoe insert HCPCS codes, but not A5500 and A550

After selecting your history type, enter the rest of the required search information, as detailed in the sections below.

**Diabetic Supplies**

To search for diabetic supply history, go to the Claim Preparation menu, and select **Diabetic Supplies/Shoes**.

After choosing the appropriate History Type, enter the following information:
After pressing the **SUBMIT** button, myCGS will return the following diabetic supply claim history found for the search criteria:

- From Date
- To Date
- HCPCS (with modifiers)

The following image shows an example of diabetic supply history for a beneficiary who has received HCPCS code A4253:

### Diabetic Shoes

To search for diabetic shoe history, go to the Claim Preparation menu, and select **Diabetic Supplies/Shoes**.

After choosing the appropriate History Type, enter the following information:

- HICN
- Beneficiary Last Name
- Beneficiary First Name
- Date of Birth
- Calendar Year*  
  
* myCGS will check for shoe claim history only in the calendar year you select.
After pressing the **SUBMIT** button, myCGS will return the following diabetic shoe claim history found for the search criteria:

- From Date
- To Date
- HCPCS (with modifiers)

The following image shows an example of claim history for a beneficiary who received diabetic shoes (A5500) in 2016:

![Claim History Image]

**Claim History**

The Claim History screen in myCGS allows you to find the claim history of a specific HCPCS code for a beneficiary. You can use this information on a pre-claim basis in order to determine if a beneficiary has previously received a specific item. Using the claim history search can help you avoid same or similar equipment denials.

**HINT:** If you are searching for same or similar history for a Capped Rental item or Inexpensive or Routinely Purchased (IRP) item, it is best to check CMN Status before searching Claim History. Using both of these options in myCGS will give you a more complete picture of a beneficiary’s equipment history.

To search for claim history, go to the Claim Preparation menu, select **Claim History**, and then enter the following information:

- HICN
- Beneficiary Last Name (first six letters)
- Beneficiary First Name (first initial)
- Beneficiary Date of Birth (six digits)
- HCPCS
- Claim History Starting Date*
- Claim History Ending Date*

* Although there is no limit to the date span range you use in the claim history search, a shorter date range will result in faster response times.
After pressing the **SUBMIT** button, myCGS will return the following claim history found for the search criteria you entered:

- **HICN**
- **From Date**
- **To Date**
- **HCPCS (with modifiers)**
- **Units**
- **Provider Name**
- **Provider Phone Number**
- **Status (Allowed or Denied)**

In the following image, the user searched claim history for HCPCS code L1833.

---

### Prior Authorization

On September 1, 2012, the Medicare Fee-for-Service Program began a prior authorization demonstration for certain power mobility devices, applying to beneficiaries who permanently reside in the Jurisdiction B states of Illinois, Indiana, Kentucky, Michigan, and Ohio, and the Jurisdiction C states of Florida, Georgia, Louisiana, North Carolina, Tennessee, and Texas. For information about the prior authorization demonstration, refer to our website ([http://www.cgsmedicare.com](http://www.cgsmedicare.com)) and/or the CMS prior authorization website ([http://go.cms.gov/PADemo](http://go.cms.gov/PADemo)).

The Prior Authorization screen in myCGS allows you to view the status of any Prior Authorization request you have submitted to Jurisdiction B or C (depending on which jurisdiction you have selected).

**Prior Authorization Status**

To search for Prior Authorization status, go to the Claim Preparation menu, select **Prior Authorization—Status**, and then enter the following information:
After pressing the **SUBMIT** button, myCGS will return the following information:

- **Status**
- **Action Taken** (Affirmed or Non-Affirmed)
- **Date of Receipt**
- **Date of Decision**
- **Denial Reason** (if the request was non-affirmed)
- **UTN**

The image below shows a request that was affirmed:

---

**ADMC**

Advance Determination of Medicare Coverage (ADMC) is an optional process by which the DME MAC provides you and the beneficiary with a coverage decision prior to delivery of an item. ADMC is available only for the certain wheelchair bases and related options/accessories. For information about ADMC, refer to our website ([http://www.cgsmedicare.com](http://www.cgsmedicare.com)).

The ADMC screen in myCGS allows you to view the status of any ADMC request you have submitted to Jurisdiction B or C (depending on which jurisdiction you have selected).

**ADMC Status**

To search for ADMC status, go to the Claim Preparation menu, select **ADMC—Status**, and then enter the following information:

- **HICN**
- **Beneficiary First Name (first initial)**
- **Beneficiary Date of Birth (six digits)**
- **Beneficiary Last Name (first six letters)**
- **HCPCS**

---
After pressing the **Submit** button, myCGS will return the following information:

- Status
- Action Taken (Affirmed or Non-Affirmed)
- Date of Receipt
- Date of Decision
- Action Taken (Affirmed or Non-Affirmed)
- Denial Reason (if the request was non-affirmed)
- UTN

The image below shows a request that was affirmed:

**Finance**

**Finance Overview**

The Finance menu in myCGS gives you access to a variety of financial information, including:

- The last five checks issued to your account
- Recent outstanding checks
- Offset information
- Pricing (fee schedules)
- EFT application status

Within the Finance menu, there are four options: Checks (default), Offsets, Pricing, and EFT Application Status. The **Checks** screen allows you to see the checks that have been issued to you recently, as well as any outstanding (not cashed) checks. The **Offsets** screen allows you to find information about overpayments that have resulted in an offset to your account, including the name and HICN of the beneficiary on the original overpayment. The **Pricing** screen provides a link to the current DME MAC fee schedules. The **EFT Application Status** screen allows you to check the status of any Electronic Funds Transfer (EFT) update requests that you have sent to CGS.

All screens within the Finance menu automatically populate your NPI and PTAN; therefore you do not need to manually enter this information. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, simply click on the NPI or PTAN that is currently showing in the top-right corner of your screen, and select the appropriate NPI/PTAN (refer to the Change NPI/PTAN section in this manual for assistance).
Checks

The Checks screen allows you to see the last five issued checks issued to your account by CGS, as well as outstanding checks that have been issued in the last 30 days. To search for your checks, select the Checks option in the Finance menu. Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. If you need to use a different NPI/PTAN than what is currently selected, simply click on the NPI or PTAN that is currently showing in the top-right corner of your screen, and select the appropriate NPI/PTAN (refer to the Change NPI/PTAN section in this manual for assistance).

After confirming the NPI and PTAN are correct, press the SUBMIT button.

myCGS will return the following check information:

• The date, amount, and status of the last five checks issued to your NPI/PTAN
• The date and amount of any outstanding checks issued to your NPI/PTAN within the last 30 days

Note that if you have outstanding checks that are greater than 30 days old, they will not be reflected in the check results.

The following image shows an example of check results in myCGS:

Offsets

The Offsets screen gives you access to information about overpayments that have resulted in an offset. To use the Offsets screen, you will need the Financial Control Number (FCN) of the overpayment.

To search for an offset, select the Offsets option in the Finance menu. Once on the Offsets screen, enter the FCN of your offset. You can find the FCN on your remittance advice. Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. If you need to use a different NPI/PTAN than what is currently selected, simply click on the NPI or PTAN that is currently showing in the top-right corner of your screen, and select the appropriate NPI/PTAN (refer to the Change NPI/PTAN section in this manual for assistance).

After clicking the SUBMIT button, myCGS will return the following offset information:

• Original overpayment date
• Current offset balance (if any)
- HICN of the beneficiary on the original overpayment
- Name of the beneficiary on the original overpayment
- Date of service of the claim that was overpaid

The image below shows an example of the Offset screen:

![Offset Information]

Pricing

The DME MAC fee schedules are available for download or online viewing on the CGS website. The Pricing screen in myCGS gives you a direct link to the fee schedule page on our website.

To access pricing information, select the **Pricing** option in the Finance menu. From the Pricing screen, click on the pricing hyperlink. A new window will open, taking you directly to the Jurisdiction B or C fee schedule page on [http://www.cgsmedicare.com](http://www.cgsmedicare.com).

EFT Status

If you have submitted an application for Electronic Funds Transfer (EFT), the **EFT Status** screen provides the current status of your application.

To search for your EFT status, select the **EFT Status** option from the Finance menu. Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. If you need to use a different NPI/PTAN than what is currently selected, simply click on the NPI or PTAN that is currently showing in the top-right corner of your screen, and select the appropriate NPI/PTAN (refer to the **Change NPI/PTAN** section in this manual for assistance).

**NOTE:** Only EFT requests that have been submitted to CGS are available in myCGS. The status of an EFT request submitted to any other contractor is not available.

After clicking the **SUBMIT** button, myCGS will return the following information regarding your EFT application:

- Date in which your request was received
- Status of your request

The following image shows an example of the EFT Application Status screen:
Reprocessing

Reprocessing Overview
The Reprocessing menu in myCGS gives you the ability to view the status of Redetermination and Reopening requests. There are two main menu options in the Claim Preparation menu: Redeterminations and Reopenings.

Refer to the sections below for detailed information about each of the Reprocessing menu options.

Redeterminations Status
The Redeterminations Status screen provides current status of redetermination requests that you have submitted to Jurisdiction B or C (depending on the jurisdiction you have selected). You can search for a redetermination in myCGS by either the Document Control Number (DCN) of the request or the Claim Control Number (CCN) of the original claim.

To search for Redetermination status, go to the Reprocessing menu, select Redeterminations—Status, and then enter the following information:

• DCN or CCN (as appropriate)
• HICN of the beneficiary on the claim which you have appealed

Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, follow the instructions in the Change NPI/PTAN section in this manual.

After pressing the SUBMIT button, myCGS will return following information about your request:

• Date of Receipt
• Status
• Date of Decision

The following image shows an example of redetermination status:
Reopenings Status

The Reopenings Status screen provides current status of reopening requests that you have submitted to Jurisdiction B or C (depending on the jurisdiction you have selected). You can search for a reopening in myCGS by either the Document Control Number (DCN) of the request or the Claim Control Number (CCN) of the original claim.

To search for Reopening status, go to the Reprocessing menu, select Reopenings—Status, and then enter the following information:

- DCN or CCN (as appropriate)
- HICN of the beneficiary on the claim

Your NPI and PTAN will be auto-filled based on the NPI/PTAN you have selected from your profile. If you have more than one NPI/PTAN and need to use a different NPI/PTAN than what is currently selected, follow the instructions in the Change NPI/PTAN section in this manual.

After pressing the SUBMIT button, myCGS will return following information about your request:

- Date of Receipt
- Status

The following image shows an example of reopening status:

News & Information

News & Information Overview

The News & Information menu contains a variety of useful information for suppliers and myCGS users, including the following information:

- News about myCGS and other DME MAC happenings
- Hours of operation for CGS Customer Service Representatives
- Information about your appeal rights for Medicare claims
**Important News**

The Important News screen in myCGS contains information about upcoming system outages, recent myCGS revisions, and addition DME MAC news. As a myCGS user, you should visit the Important News screen on a regular basis in order to keep up with the latest myCGS news.

To access the Important News screen, select the **Important News** option from the News & Information menu.

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**CSR Hours**

The CSR Hours screen in myCGS lets you view the times and days when DME MAC Jurisdictions B and C Customer Service Representatives (CSRs) are available to assist you. It also informs you of our holiday closure schedule.

To access the CSR Hours screen, select the **CSR Hours** option from the News & Information menu.

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**Appeal Rights**

The Appeal Rights screen in myCGS contains information about your right to appeal Medicare claims.

To access the Appeal Rights, select the **Appeal Rights** option from the News & Information menu.

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**My Account**

**My Account Overview**

The My Account menu in myCGS allows you to view information about your user account, such as your NPI/PTAN information. There are three options in the My Account menu:

- **User Account/Info** – view your basic profile and contact information
- **View NPI/PTAN** – view the NPI/PTAN combinations associated with your account
- **Provider Profile** – view the supplier information on file for your NPI/PTAN, such as your PTAN’s effective dates, location and payee addresses, and more
When you are finished viewing any screen within the My Account section, click on the Home menu to return to the myCGS home page, where you can continue to use the functions and features of myCGS.

### User Account/Info

To view your basic user profile information (such as your address or telephone number), select the User Account option in the My Account menu. The User Info screen will appear, showing your basic contact information.

The contact information in your user account comes from EIDM. To update your contact information, you must do so in EIDM ([https://portal.cms.gov](https://portal.cms.gov)).

Once you are finished viewing your profile, press the Home menu to return to the main functional areas of myCGS.

### View NPI/PTAN

Registration in myCGS is based on your company’s Tax ID/EIN. When you register for myCGS, all of the NPI/PTAN combinations associated with your Tax ID are automatically added to your myCGS account.

To view a list of all the NPI/PTAN combinations associated with your account, select the View NPI/PTAN option in the My Account menu. The View NPI/PTAN screen will appear, showing a list of all of your NPI/PTANs.

If your company has more than one Tax ID, then you will need to submit a request to add the additional Tax IDs to your myCGS account. Refer to the myCGS Registration Guide for instructions ([http://www.cgsmedicare.com/jc/myCGS/pdf/myCGS_RegistrationGuide.pdf](http://www.cgsmedicare.com/jc/myCGS/pdf/myCGS_RegistrationGuide.pdf)).

Once you are finished viewing your NPI/PTAN profile, press the Home menu to return to the main functional areas of myCGS.
**Provider Profile**

The Provider Profile screen in myCGS allows you to view basic records about your PTAN as maintained by the National Supplier Clearinghouse (NSC) and PECOS. To view your provider profile, select the **Provider Profile** option in the My Account menu.

The Provider Profile screen is based on the NPI/PTAN you currently have selected in myCGS. If you have more than one NPI/PTAN and wish to view the Provider Profile for a PTAN different than what is currently selected, follow the instructions in the **Change NPI/PTAN** section in this manual.

On the Provider Profile screen, you will find the following information about your PTAN:

- Supplier Name
- Payee Name
- Location Address
- Payee Address
- Phone
- Fax
- Last Standard Paper Remit Date
- Biller ID
- Participation Information
- PTAN Effective and Termination Dates
- Notes on your account

Any changes to your supplier information must be made through the appropriate entity (i.e., NSC).

Once you are finished viewing your provider profile, press the **Home** menu to return to the main functional areas of myCGS.
Approver/Admin

Admin Overview
If you are registered for myCGS in an Approver role, you have access to user maintenance screens in myCGS that other users in your company cannot access. In fact, when you first log in to myCGS, you are taken directly to the Admin Home screen, rather than to the normal home screen that End Users see.

On the Admin Home screen, you will see four tabs across your screen:

• Admin Home
  Go to this tab to see news and updates about myCGS. Also use this tab to return to the administrative features if you have navigated to the End User sections of myCGS.

• Home
  Press this tab to go to the End User sections of myCGS, such as Beneficiary Information, Claims, etc.

• Users w/new Requests
  This screen is currently not in use in myCGS. All user approval requests are completed in EIDM. Refer to the myCGS Registration Guide for instructions (http://www.cgsmedicare.com/jc/myCGS/pdf/myCGS_RegistrationGuide.pdf).

• Modify Users
  Use this screen to search for existing myCGS users and modify their permissions.

Modify Users
The Modify Users screen allows you to make changes to the user accounts of the individuals who are registered in myCGS under your company’s Tax ID. When a new user first registers for myCGS, they automatically have full access to all of the NPI/PTANs associated with their approved Tax ID. If for any reason you wish to limit a user’s access to certain functions or specific NPI/PTANs, then you can do so in the Modify Users screen.

Searching for Users
To modify a user, first you need to search for the user, myCGS allows you to search for users by entering any of the following four pieces of user information: User ID, User Name, NPI, or PTAN. You can use as many of the search criterion fields as you wish.

In the User ID and User Name field, you can enter as few or as many characters as you want. For instance, if you enter “smith” in the User Name field (leaving the other fields blank), myCGS will return any user who has “smith” in their name, be it Jill Smith, Stan Smith, Karen Smithson, or Smith Jones.
Once you have entered the appropriate search criteria, press the **SUBMIT** button.

**Modifying Users**

After performing your search, myCGS will display the profile information for any users who match your search criteria. Note that if you have more than one NPI/PTAN, multiple rows may exist for a single user who shares the same multiple NPI/PTAN information.

To add or remove permissions to the Beneficiary Information, Claim Preparation, Claims, Finance, and Reprocessing menus within myCGS, check or uncheck the appropriate checkbox (a check means the user has permission to the function menu; unchecked means they are not permitted to use the menu).

Once you have made the appropriate changes to the user’s profile, press the **SUBMIT** button.

<table>
<thead>
<tr>
<th>User ID</th>
<th>First Name</th>
<th>Last Name</th>
<th>NPI</th>
<th>PTAN</th>
<th>Check Amount</th>
<th>Eligibility</th>
<th>Claim Preparation</th>
<th>Finance</th>
<th>Reprocessing</th>
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<td>Smith</td>
<td>123456789</td>
<td>987654321</td>
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<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
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</tbody>
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