



CBR201904: Vitamin D Testing
Webinar Questions and Answers
May 7, 2019

Q: What is a CBR?

A: A CBR is a Comparative Billing Report, and it is created to compare providers' billing statistics to those of their peers on a state or specialty, and nationwide level.

Q: Within an organization, who receives the CBR?

A: Each CBR contains specific guidelines as to how a provider is included in the CBR analysis. If a provider meets the criteria to receive a CBR, a notice is sent to the email address filed in the [Provider Enrollment, Chain, and Ownership System](#) (PECOS) and [National Plan and Provider Enumeration System](#) (NPPES) system. The notice informs the provider that a CBR is available and includes information for obtaining the CBR.

Q: Is there a way to receive a list of providers who received CBRs within a group practice or receive information for a large group of providers?

A: The providers who receive a CBR will receive individual notifications via the email address or fax number listed in PECOS. If there is a question as to whether or not all notifications were received for a group of providers, our Help Desk can assist with lists of National Provider Identifier (NPI) numbers.

Q: How can I receive emails in regard to the CBR reporting?

A: A link to join our email list can be found on our home page: <https://cbr.cbrpepper.org/home>.

Q: Where would a CBR be sent if our provider was identified as an outlier? How can I change the contact information regarding where the CBR is sent?

A: If a provider is eligible to receive a CBR using the metrics explained in the webinar, an email is sent to the email address available in the NPPES database. If a valid email address is not available, the notice is sent via fax to the fax number in the NPPES database. Providers that do not have a valid email address or fax number in NPPES received their notification in hard-copy through the mail. Please ensure your email address and fax number are updated in the NPPES

and the PECOS. The CBRs are not sent out; rather, they are available in the secure CBR Portal at cbrfile.cbrpepper.org by using the unique validation code included in the email, fax, or mail notification.

Q: Where can I obtain the validation code to obtain my CBR report?

A: The validation code is sent upon distribution of the CBR to the provider by email, fax, or regular mail.

Q: I would like to view this webinar again; how can I find the recording, slides, and handout for the webinar?

A: The webinar slides, handout, recording, and transcript are posted on the CBR homepage: <https://cbr.cbrpepper.org>.

Q: Is the provider who qualified for a CBR the only individual who can obtain the CBR and data?

A: The CBR and validation code information is sent to the contact data listed in the NPPES system. Those who can access the email, fax receipts, or mail will therefore be in a position to view the CBR access information.

Q: We did not receive a CBR. Can we request a CBR be sent for our providers or find a CBR on the website, even if the providers do not meet all the listed qualifications?

A: CBR reports are produced only if a provider meets the criteria for receiving a CBR, and the reports are not produced for providers upon request.

Q: What Vitamin D level is considered Vitamin D Deficiency? Is there a benchmark level for a repeat Vitamin D Test order?

A: The National Institute for Health and Care Excellence (NICE) report referenced in the CBR contains clinical evaluation information about Vitamin D Testing. The report can be found [here](#).

Q: Are there any actions items that should be taken with the receipt of a CBR?

A: Receiving a CBR is not an indication or precursor to an audit. No response to the CBR is required.

Q: Which ICD-10 codes support the medical necessity for Vitamin D Testing?

A: ICD-10 codes are not an indication that there was a medical necessity for Vitamin D Testing; the provider documentation and patient status would determine medical necessity. The following is a list of ICD-10 codes that are generally accepted as appropriate to support Vitamin D Testing:

- E55.9-Vitamin D deficiency, unspecified
 - M81.0-Age-related osteoporosis without current pathological fracture
 - M85.50-Aneurysmal bone cyst, unspecified site
 - N18.3-Chronic kidney disease, stage 3 (moderate)
 - Z79.899-Other long term (current) drug therapy
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Q: Were Independent laboratory providers and claims analyzed in this report?

A: No; this report and analysis focused on referring providers only.

Q: Do providers need a CLIA waiver to bill for Vitamin D Testing, code 82306?

A: A Clinical Laboratory Improvement Amendments (CLIA) Certificate of Waiver is a registration with the U.S. Department of Health and Human Services that allows physicians or medical office personnel to collect a sample and perform a laboratory test within their office. The presence of a CLIA Waiver is not analyzed in this report.

Q: Why would a provider receive a CBR if their practicing specialty is not listed on the “Top Specialties” list?

A: The specialty classification identified in the CBR is determined from the clinical specialty submitted on Part B claims data. If there is confusion regarding the clinical specialty identified within the CBR, we suggest a review of the clinical specialty that is submitted on the provider’s Part B claims to ensure it accurately reflects the provider’s specialty.

Q: Will this CBR topic affect the payment of our office visit submissions in the future?

A: This CBR analysis was created as an educational tool and a report that allows you to compare your billing practices to those of your peers in your clinical specialty and in the nation. The CBR has no impact on reimbursement for provider services.

Q: Does this analysis include Vitamin D Testing claims submitted with a -GZ modifier?

A: Yes; any claims submitted with CPT® code 82306 were analyzed, regardless of any modifiers.
