Thank you for joining us!

- We will start at 3 p.m. EST.
- You will hear silence until the session begins.
- Handout: Available at CBR.CBRPEPPER.org.
- A recording of today’s session will be posted at the above location within two weeks.

Please listen in by either:

- Using your computer speakers (recommended): You automatically join the audio broadcast when entering the meeting (remember to increase speaker volume; make sure you are not muted).
- Dialing 1-240-454-0887 (passcode 738 042 596) (limited to 500 callers).
About Today’s Presentation

Phone lines will be muted the entire duration of the training.

Submit questions pertinent to the webinar using the Q&A panel.

Questions will be answered verbally, as time allows, at the end of the session.

A “Q&A” document will be developed and posted at CBR.CBRPEPPER.org.
To Ask a Question in Split Screen

Ask your question in Q&A as soon as you think of it.

1. Go to the “Q&A” window located on the right side.

2. In the “Ask” box, select “All Panelists.”

3. Type in your question.

4. Click the “Send” button.
To Ask a Question in Full Screen

1. Click on the “Q&A” button to bring up the Q&A window.

2. Type in your question (as in the previous slide).

3. Click the “Send” button.

4. Click “-” to close window to see full screen again.
Webinar Resources

- Webinar Slides
- Webinar Recording
- Webinar Handout
- Webinar Q&A will be posted at CBR.CBRPEPPER.org

CBR Help Desk:
https://cbr.cbrpepper.org/Help-Contact-Us
Webinar Objective

• Understand the purpose and use of Comparative Billing Reports (CBR).

• Comprehend the function of the Comparative Billing Report CBR201904: Vitamin D Testing.

• Gather resources for further questions and inquiries.
Webinar Agenda

• What is a CBR?
• CBR201904
• Review a sample CBR
• How to access your CBR
• Helpful resources
• Questions
What is a CBR?

• CBR, as defined by CMS
• History of the National CBR program
• Purpose of CBRs
• Why does CMS issue CBRs?
• CBR formatting
The CMS Definition of a CBR

• CBRs are free, comparative data reports.

• CMS defines a CBR as an educational resource and a tool for possible improvement.
History of the National CBR Program

The national CBR program is separate and not related to comparative billing reports that are produced by Medicare Administrative Contractors (MACs) in support of their individual provider education activities.

- **2010**
  - CMS implemented a national program to produce and disseminate CBRs to physicians, suppliers, pharmacies, and other health care providers.

- **2018**
  - CMS combined the CBR and the Program for Evaluating Payment Pattern Electronic Reports (PEPPER) programs into one contract.

- **2019**
  - RELI Group and its partners—TMF Health Quality Institute and CGS—begin producing CBRs and PEPPERs.
Why Does CMS Issue CBRs?

CBRs provide value to both CMS and Providers

Value to CMS

• Supports the integrity of claims submission
• Summarizes claims data
• Provides an educational resource for possible improvement by providing coding guidelines information

Value to Providers

• Reflects providers’ billing patterns as compared to their peers
• Provides specific coding guidelines and billing information
• Informs providers whose billing patterns differ from those of their peers
CBR Formatting

1. Introduction
   – Explanation of billing area and description of findings of the CBR

2. Coverage and Documentation Overview
   – Identification of claims data and CPT® code information

3. Basic Coding Guidelines
   – Itemization of CPT® codes and details of billing processes

4. Metrics
   – Explanation of the data and analysis used for the CBR
   – Detailed list of CPT® codes and the effect that the billing guidelines have on the CBR results

5. Methods and Results
   – Overall analysis results and individualized results comparing CBR recipients to other providers

6. References and Resources
   – Resources used for the CBR
Vitamin D Testing

• Vitamin D Testing submitted by Referring Providers and in relation to Office Visits
CBR201904 CBR Focus

• Providers who ordered Vitamin D Testing for which a Medicare Part B claim was then submitted and paid
  – Vitamin D Testing is submitted with CPT® code 82306

• Evaluation and Management visits for New and Established Patients for these identified providers
  – New Patient Visits CPT® codes 99201–99205
  – Established Patient Visits CPT® codes 99211–99215
CBR201904 CBR Provider Focus

• The CBR team identified clinical specialties for inclusion in the CBR analysis

• Claims were submitted during the time period between Nov. 1, 2017, and Oct. 31, 2018
The “Top Specialties” are as follows:

- Internal Medicine (11)
- Family Practice (08)
- Nurse Practitioner (50)
- Physician Assistant (97)
- Rheumatology (66)
- Endocrinology (46)
- Hematology/Oncology (83)
- Geriatric Medicine (38)
- Cardiology (6)
CBR201904 CBR Diagnoses Focus

• Vitamin D Testing is appropriate when submitted for patients with specific diagnoses.
• These diagnoses were therefore excluded from this analysis.
• Excluded diagnoses are as follows:
  – 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
Vitamin D Testing

2018 Medicare Fee-for-Service Supplemental Improper Payment Data Report:

• Lab Tests are in the Top 20 Service Types with the highest improper payments for Part B Claims, estimated at 29.8 percent of payments for Lab Tests, representing $981 million

2017 OIG Report

• Vitamin D was among Top 5 billed laboratory tests, which had payments of $2.2 billion in 2017
CBR201904

Summarizes statistics for services with dates of service from Nov. 1, 2017, through Oct. 31, 2018

217,307 referring providers in the Top Specialties had allowed charges for CPT® codes 82306, 99201–99205, 99211–99215
CBR201904 Analysis and Focus

• Analysis of referring providers in the “Top Specialties” who billed CPT® codes 82306, 99201–99205, and 99211–99215 on Medicare Part B claims was extracted from the Integrated Data Repository, based on the latest version of claims as of Feb. 28, 2019.
Why did I receive a CBR?

• A CBR is presented because your billing patterns differ from your peers’ patterns based on comparisons on a specialty or nationwide level.
  – Receiving a CBR is not an indication of or precursor to an audit.
Peer Comparison Outcomes

• There are four possible outcomes for the comparisons between the provider and his/her peer groups:
  – *Significantly Higher* — Provider’s value is above the 95th percentile from the peer specialty or national mean
  – *Higher* — Provider’s value is greater than the peer specialty or national mean
  – *Does Not Exceed* — Provider’s value is not higher than the peer specialty or national mean
  – *N/A* — Provider does not have sufficient data for comparison
About the 95th Percentile

- Statistics were calculated for each provider, in three metrics, and all providers in the nation. Each provider’s values are compared to his/her peer specialty group’s values as well as the national values.
- “Significantly Higher” means that a provider’s value is above the 95th percentile from the peer specialty or national mean.
- These results look very different from the results of peers on a specialty or national level.
Why Did I Receive a CBR?

The criteria for receiving a CBR is that the provider:

• Has paid claims for office visits and appear as the referring provider for Vitamin D assay claims

• Has at least 10 paid claims for CPT® code 82306 with claims submitted for 82306 (excluding diagnoses on the Excluded Diagnoses list)

• Has at least 10 unique beneficiaries with claims submitted for 82306 (excluding diagnoses on the Excluded Diagnoses list)

• Has total allowed charges of $300 or more
Review of Sample 0201904 CBR

- Metrics
- Findings
- Methods and Results
- Provider Findings
Metrics of Sample CBR

This report is an analysis of the following metrics:

1. Ratio of Vitamin D testing to Office Visits
2. Percentage of Beneficiaries with Vitamin D Tests for Other Diagnoses
3. Average Number of Vitamin D Tests per Beneficiaries
Calculation of Metric 1

• Claim lines with a CPT® code of 82306 service, submitted with a diagnosis code other than the Excluded Diagnoses, were identified as Flagged Claim lines for 82306.

• Claim lines submitted with CPT® codes 99201–99205 and 99211–992015 with a diagnosis code other than the Excluded Diagnoses, were identified as Flagged Office Visits.

• The number of flagged claim lines for 82306 is divided by the total number of flagged New and/or Established Patient Office Visits:

\[
\frac{\text{Number of Flagged Claim lines for 82306}}{\text{Number of Flagged Office Visits}}
\]
Calculation of Metric 2

- The number of beneficiaries with CPT® code 82306, submitted with diagnosis other than the Excluded Diagnoses, is divided by the number of total beneficiaries with CPT® code 82306, submitted with all diagnosis codes:

\[
\frac{\text{Number of Unique Beneficiaries with 82306 excluding the “Excluded Diagnoses”}}{\text{Total Unique Beneficiaries with CPT® 82306}}
\]
Calculation of Metric 3

- The number of claims with CPT® code 82306 is divided by the number of beneficiaries with submissions for CPT® code 82306:

\[
\frac{\text{Number of Claims with CPT® code 82306}}{\text{Number of Unique Beneficiaries with CPT® code 82306}}
\]
Provider Trends

• Trend Over Time Analysis of Total Number of Claims (for CPT® code 82306)

Figure 1:

- Year 1 represents claims between Nov. 1, 2015, and Oct. 31, 2016.
- Year 2 represents claims between Nov. 1, 2016, and Oct. 31, 2017.
How to Access Your CBR

https://cbrfile.cbrpepper.org/
How to Access Your CBR, Continued

https://cbrpepper.org/

Welcome to CBR PEPPER

Welcome to the new combined website for Comparative Billing Reports (CBRs) and the Program for Evaluating Payment Patterns Electronic Reports (PEPPERS). CBRs and PEPPERS are educational tools made available by the Centers for Medicare & Medicaid Services (CMS) for providers' use in support of their efforts to protect the Medicare Trust Fund.

About CBR

Comparative Billing Reports (CBRs) are disseminated to the Medicare provider community to provide insight into Medicare policy and regional billing trends.

Learn More About CBRs

Access Your CBR

About PEPPER

The Program for Evaluating Payment Patterns Electronic Reports (PEPPERS) summarizes provider-specific Medicare claims data statistics for Medicare Part A discharges and services that have been identified as vulnerable to improper Medicare payments.

Learn More About PEPPERS

Access Your PEPPER

Need Assistance?

CBRs: Go to help desk or 1-800-777-7443
PEPPERS: Go to help desk or phone 1-800-777-7443

This website is developed and maintained by RKLIC Group, under contract with the Centers for Medicare & Medicaid Services.

For information about the availability of auxiliary aids and services, please visit http://www.medicare.gov/about-us/nondiscrimination/nondiscrimination-notice.html.
Helpful Resources

https://cbr.cbrpepper.org/Help-Contact-Us

CBR Help Desk

Welcome to our support page. View a list of frequently asked questions or click on the button below to submit your question.

Prior to submitting a request for assistance, to reduce the possibility that email replies from our help desk are blocked due to tightened email security (strong spam filters), please add our email Internet domain @tmf.org to your email Safe Senders List.

Submit a New Help Desk Request

Frequently Asked Questions
Helpful Resources, 2

- [2018 Medicare Fee-for-Service Supplemental Improper Payment Data](#)
- [Medicare Payments for Clinical Diagnostic Laboratory Tests in 2017: Year 4 of Baseline Data](#)
Helpful Resources, 3

https://cbr.cbrpepper.org/home

- Sample CBR
- Training materials
- Resources and references
- Join our email list
- Provide feedback on CBRs
- Submit a CBR success story
Welcome to CBR Resources

This is the official site for information, training and support related to Comparative Billing Reports (CBRs).

CBRs are disseminated to the Medicare provider community to provide insight into Medicare policy and regional billing trends. The CBRs that are distributed to the provider community contain an analysis of billing practices across geographic and service areas. Medicare Administrative Contractors (MACs) have been producing and disseminating comparative billing reports to providers in their jurisdiction as part of their provider education efforts for many years. The Centers for Medicare & Medicaid Services (CMS) has formalized and expanded the program to the national level.

A CBR will present the results of statistical analyses that compare an individual provider’s billing practices for a specific billing code or policy group with the billing practices of that provider’s peer groups and national averages. Each CBR is unique to a single provider and is only available to that individual provider. CBRs are not publicly available.

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**Upcoming Event: CBR 201904: Vitamin D Testing**

*When:* Tuesday, May 7, 2019
*Time:* 3:00 - 4:00 p.m. EDT
*Topic:* This session will review the Comparative Billing Report (CBR) 201904 on Vitamin D Testing, released April 29, 2019.

**Upcoming Event: CBR 201905: Air Ambulance Transports**

*When:* Thursday, May 9, 2019
*Time:* 2:00 - 3:00 p.m. EDT
*Topic:* This session will review the Comparative Billing Report (CBR) 201905 on Air Ambulance, released April 29, 2019.

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**CBR 201903: Subsequent Hospital Care**

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording coming soon and Handout (PDF)
- National/State Data (XLSX)
- Access Your CBR

**CBR 201902: Office Visits, New and Established, Family Practitioners**

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handout
- National/State Data (XLSX)
- Access Your CBR

**CBR 201901: Intensity-Modulated Radiation Therapy**

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handout
- National/State Data (XLSX)
- Access Your CBR
# Frequently Asked Questions

[https://cbr.cbrrpepper.org/FAQ](https://cbr.cbrrpepper.org/FAQ)

The following questions represent frequently asked questions (FAQs) from the provider community about Comparative Billing Reports (CBRs) and the CBR project in general. FAQs pertaining to a specific CBR release/topic are available with the resources specific to each CBR release/topic.

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