



CBR201910: Upper Lower Endoscopy Different Days of Service Webinar Questions and Answers

September 24, 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 level and a 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: Is it possible for us to receive a detailed list of the patients and dates of service that were included in the analysis for this CBR?

A: The CBR team is not able to provide a listing of claims/patients included in the CBR analysis. Providers should be able to identify those claims/patients by using the same claims inclusion/exclusion criteria that are specified in the CBR.

Q: What does the term “allowed amount” represent?

A: The “allowed amount” refers to the allowed dollar amount that is assigned to each CPT® code in the Medicare Fee Schedule. Due to the variance in billed amounts submitted by providers, use of the allowed amount creates a dollar amount that is comparable for all providers.

Q: What is the distribution date for this CBR? Were all the CBRs released on this date?

A: CBR201910 Upper and Lower Endoscopy on Different Dates of Service was released to CBR recipients on Sept. 20, 2019. Each CBR topic has a unique release date that is indicated on each sample CBR posted on the [CBR Homepage](#).

Q: Which procedures are included in the analysis of procedures performed on different dates of service? Is it possible that two upper endoscopy procedures were counted in the analysis?

A: The scenarios and procedures selected for analysis were those when an upper endoscopy and a lower endoscopy were performed on different days, within a 90-day period. Alternatively, the scenario in which an upper endoscopy was performed within 90 days of another upper endoscopy or in which a lower endoscopy was performed within 90 days of another lower endoscopy would not qualify for inclusion in this CBR.

Q: Should our review of our CBR results place higher significance on the state comparison or the national comparison?

A: The CBR is released to allow for comparison of your results to those of other providers who provide the same services. The state and national data and their respective comparisons should be used to gain perspective for each group. Neither is more important than the other, although the state comparison may reflect regional trends related to morbidity or practice patterns.

Q: Is clinical information considered within the metrics analyses and outcomes? There are times when it is in the best interest of patient care to perform procedures on separate days.

A: CBR reports are created using raw claims data and do not take clinical decisions into consideration. Receipt of a CBR is in no indication that a provider should change patient treatment that represents their best clinical judgment.

Q: If future procedures are performed more often on the same dates of service as opposed to different dates of service, would the percentage results on my CBR change?

A: Yes; the calculations for the metrics utilize data for procedures performed on different dates of service and procedures performed on the same date of service. Therefore, any future change in the data and claim numbers could potentially affect the metric outcomes.

Q: After receipt of a CBR, is there follow-up provided to re-review any changes in claims submission that may have taken place?

A: The CBR team does not conduct follow-up assessment of claims data to determine whether providers' billing patterns have changed after a CBR release. Please note: The CBR is not intended to suggest wrong-doing or improper activities, and receipt of a CBR does not require response or follow-up from a provider. While it is possible that a CBR topic may be repeated at some point in the future, there are no plans to do so for this CBR topic at this time.