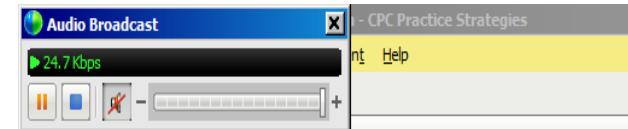


Thank you for joining us!

- We will start at 3 p.m. ET.
- 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 your speaker volume; make sure you are not muted).
 - Dialing 1-415-655-0001 (passcode 731 981 810) (limited to 500 callers).





CBR201913: Mohs Microsurgery

January 7, 2020, 3 p.m. ET



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.

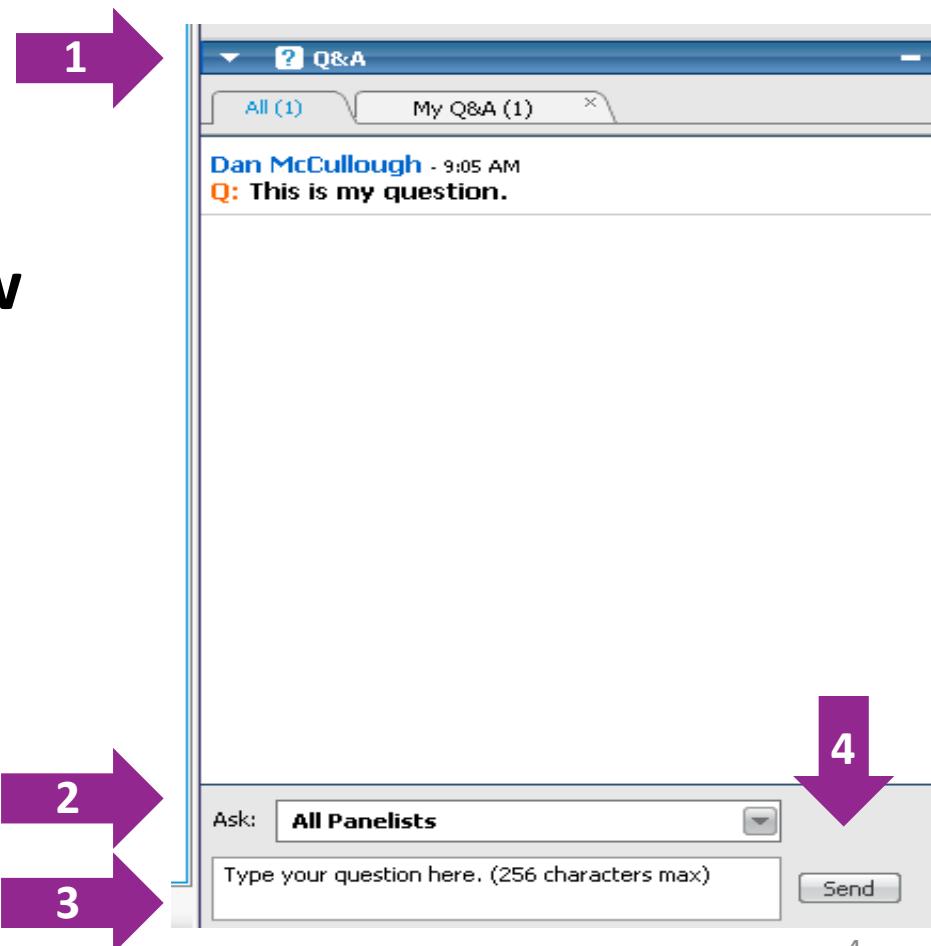


A “Q&A” document will be developed and posted at CBR.CBRPEPPER.org.

To Ask a Question in Split Screen

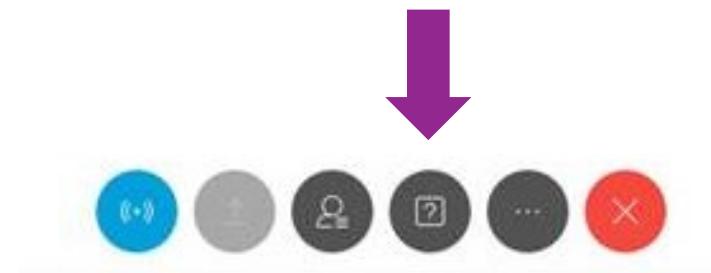
Ask your question in Q&A as soon as you think of it.

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 (CBRs).
- Comprehend the function of *CBR201913: Mohs Microsurgery*.
- Gather resources for further questions and inquiries.

Webinar Agenda

- What is a CBR?
- How to access your CBR
- Review a sample CBR
- *CBR201913*
- Helpful resources
- Questions

The CMS Definition of a CBR

- CBRs are free, comparative data reports.
- The Centers for Medicare & Medicaid Services (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—began 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

Why did I receive a CBR?

- A CBR was issued because your billing patterns differ from your peers' patterns, based on comparisons on a state, specialty, and/or nationwide level.
 - Receiving a CBR is not an indication of or precursor to an audit.



How to Access Your CBR

<https://cbrfile.cbrpepper.org/>



CBR Portal

Our Team is committed to ensuring and maintaining the confidentiality of each provider's Comparative Billing Report (CBR). All CBR recipients are expected to maintain and safeguard the confidentiality of privileged data or information.

I certify that I am the CEO President Administrator Compliance Officer Owner/Healthcare Provider and that I have the actual authority to receive this CBR and all other confidential information concerning this health care provider. If a provider does not have a management position with any of these titles, the person who has the authority to make decisions on behalf of the provider should check the box for the title that best describes their position.

Your Information	Provider Information
First Name <input type="text"/>	Last Name <input type="text"/>
Email <input type="text"/>	Provider Name <input type="text"/>
Confirm Email <input type="text"/>	Provider City <input type="text"/> Provider State / Territory <input type="button" value="▼"/>

How did you learn about your CBR?

Received an email notifying me that I had a CBR
 Received a fax notifying me that I had a CBR
 Received a tweet from CMS that prompted me to check for a CBR
 From my national or state provider/professional association
 Received a notice from my Medicare Administrative Contractor (MAC)
 Heard an announcement on a recent CMS Open Door Forum
 OTHER
 None of the above

CMS National Provider Identifier (NPI)

Optional: [Search for an NPI at the NPI Registry](#)

Validation code

SUBMIT

How to Access Your CBR

<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 [1-800-771-4430](tel:1-800-771-4430)

PEPPERS: Go to help desk or phone [1-800-771-4430](tel:1-800-771-4430)

This website is developed and maintained by RELI 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>.

CBR201913 Formatting

1. Introduction

- Explanation of CBR focus and billing area vulnerability
- Criteria for receipt of a CBR

2. Coverage and Documentation Overview

- Identification of Current Procedural Terminology® (CPT®) codes
- Summary of provider's utilization

3. Metrics

- List of the metrics and outcomes analyzed with the CBR
- Definition of state and national peer groups

4. Methods and Results

- Overall analysis results
- Individualized results comparing CBR recipients to other providers

5. References and Resources

- Resources used for the CBR

Mohs Microsurgery Vulnerability

- A study published by the International Open Access Journal of the American Society of Plastic Surgeons found the following:
 - “From 1992 to 2009, the rate of Mohs micrographic surgery (MMS) increased by 700%”
 - “From 1992 to 2009, MMS increased by 700%, whereas surgical excisions increased by only 20%”
 - Mohs microsurgery procedures typically have Medicare payments 120% to 370% more than surgical excision
 - “On average, 1 in 4 cases of skin cancer is treated with MMS”

CBR201913 CBR Provider Focus

- *CBR201913* focuses on the following:
 - Claims submitted by rendering providers who submitted claims for Mohs microsurgery with or without add-on codes for additional stages of Mohs microsurgery.



CBR201913 Analysis and Results

- *CBR201913* summarizes statistics for services with dates of service from August 1, 2018, through July 31, 2019.
- There were 2,930 rendering providers with combined allowed charges of over \$46.6 million for claims submitted for Mohs microsurgery.

Metrics of *CBR201913*

This report is an analysis of the following metrics:

1. Percent of Mohs microsurgery procedures billed with add-on codes for additional stages
2. Average dollars per procedure for Mohs microsurgery with add-on codes for additional stages
3. Percent of beneficiaries receiving Mohs microsurgery with add-on codes for additional stages

Metric 1 of *CBR201913*

Metric 1 analyzes the following:

- Percent of Mohs microsurgery procedures billed with add-on codes for additional stages

Metric 2 of *CBR201913*

Metric 2 analyzes the following:

- Average dollars per procedure for Mohs microsurgery with add-on codes for additional stages

Metric 3 of *CBR201913*

Metric 3 analyzes the following:

- Percent of beneficiaries receiving Mohs microsurgery with add-on codes for additional stages

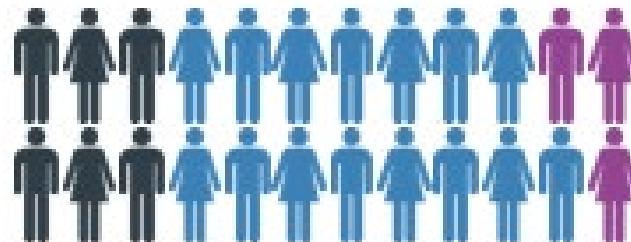
The Criteria for Receiving *CBR201913*

The criteria for receiving *CBR201913* is that the provider:

- Is significantly higher compared to either state or national percentages in any of the three metrics (greater than the 90th percentile), and
- Has at least 10 beneficiaries with CPT® codes 17311 or 17313, and
- Has at least \$9,500 or more in total allowed charges

Peer Comparison Outcomes

- There are four possible outcomes for the comparisons between the provider and his/her peer groups:
 - **Significantly Higher** — A provider's value is above the 90th percentile from the peer state or national mean.
 - **Higher** — A provider's value is greater than the peer state or national mean.
 - **Does Not Exceed** — A provider's value is not higher than the peer state or national mean.
 - **N/A** — A provider does not have sufficient data for comparison.



About the 90th Percentile

- Statistics were calculated for each provider in three metrics, as well as for all providers in the nation. Each provider's values were compared to his/her peer state group's values, as well as the national values.
- Providers receiving a CBR have an outcome of "Significantly Higher" in any of the metrics.
- These results look very different from the results of peers on a state or national level.



Calculation of Metric 1

Metric 1: Percent of Mohs microsurgery procedures billed with add-on codes for additional stages

- The sum of procedures submitted for primary codes with one or more add-on codes (numerator) is divided by the sum of all procedures submitted for primary codes (denominator).

$$\left(\frac{\text{Sum of procedures submitted for primary codes with one or more add-on codes}}{\text{Sum of all procedures submitted for primary codes}} \right) \times 100$$

Calculation of Metric 2

Metric 2: Average dollars per procedure for Mohs microsurgery with add-on codes for additional stages

- The total allowed amount for primary codes and add-on codes (numerator) is divided by the sum of units submitted for primary codes (denominator).

$$\left(\frac{\text{Total allowed amount for primary codes and add-on codes}}{\text{Sum of units submitted for primary codes}} \right)$$

Calculation of Metric 3

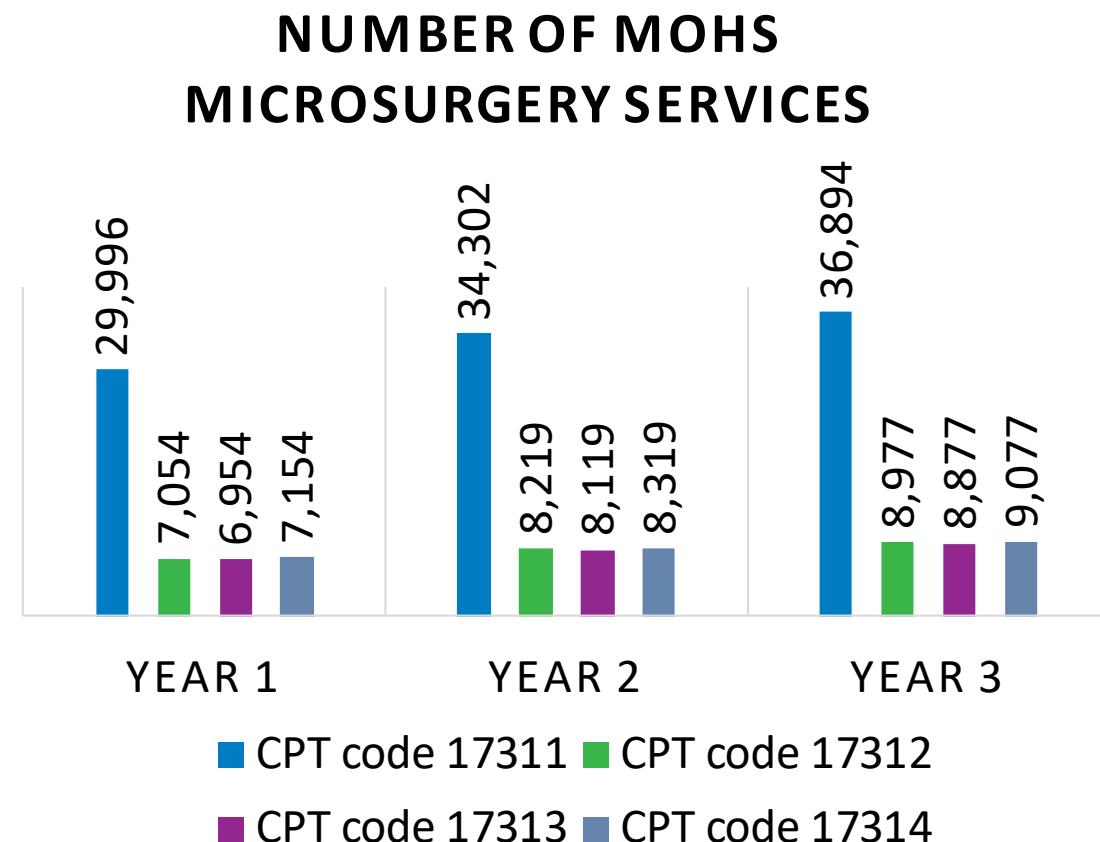
Metric 3: Percent of beneficiaries receiving Mohs microsurgery with add-on codes for additional stages

- The number of beneficiaries with procedures for primary codes with one or more add-on code (numerator) is divided by the number of beneficiaries with primary codes (denominator).

$$\left[\frac{\text{Number of beneficiaries with procedures for primary codes with one or more add-on code}}{\text{Number of beneficiaries with primary codes}} \right] \times 100$$

Provider Trends

Figure 1: Trend Over Time Analysis of Total Number of Allowed Services (CPT® codes 17311, 17312, 17313, 17314).



CBR Help Desk

<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

Frequently Asked Questions

<https://cbr.cbrpepper.org/FAQ>

Frequently Asked Questions

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.

+	What is a CBR?
+	Why am I getting this report?
+	I have a question about the CBR I received. Who should I contact?
+	Can I get specific claim data related to this report?
+	I have a question about my claims. Who should I contact?
+	I did not receive a CBR. Can I request one?
+	How will I know if I have a CBR available?
+	Is there a sample CBR that I can view?

Helpful Resources

- *CPT Professional Edition*, American Medical Association
- [“The Economics of Skin Cancer: An Analysis of Medicare Payment Data,”](#) International Open Access Journal of the American Society of Plastic Surgeons
- [“Guidance To Reduce Mohs Surgery Reimbursement Issues,”](#) Department of Health and Human Services

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.

Success stories: How your peers have used CBRs.

[Go to Success Stories](#)

Upcoming Event: CBR 201911 Atherectomy Only as Initial Intervention

When: Wednesday, November 6, 2019
3:00 - 4:00 p.m. EDT

Topic: This session will review the Comparative Billing Report (CBR) 201911 on Atherectomy Only as Initial Intervention, released October 28, 2019

[REGISTER](#)

CBR 201911:

Atherectomy Only as Initial Intervention

- Training: Register

When: Wednesday, November 6, 2019
3:00 - 4:00 p.m. EDT

CBR 201908:

Breast Re-Excision

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

CBR 201905:

Air Ambulance Transports

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

CBR 201910:

Upper and Lower Endoscopy on Different Dates of Service

- Training: Recording Coming Soon
- Download Handouts
- Sample CBR: Mock Provider Data (PDF)
- National/State Data (XLSX)
- [Access Your CBR](#)

CBR 201907:

Modifier 25: Dermatology

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handouts
- National/State Data (XLSX)
- [Access Your CBR](#)

CBR 201904:

Vitamin D Testing

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handouts
- National/Specialty Data (XLSX)
- [Access Your CBR](#)

CBR 201909:

Venipuncture

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handouts
- National/State Data (XLSX)
- [Access Your CBR](#)

CBR 201906:

Emergency Department Services

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handouts
- National/State Data (XLSX)
- [Access Your CBR](#)

CBR 201903:

Subsequent Hospital Care

- Sample CBR: Mock Provider Data (PDF)
- Training: Recording and Handouts
- National/Specialty Data (XLSX)
- [Access Your CBR](#)

Questions?

