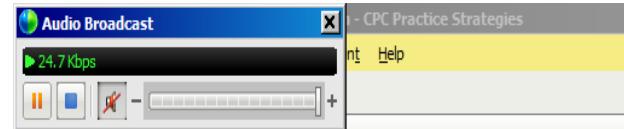


Thank you for joining us!

- 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 your speaker volume; make sure you are not muted).
 - Dialing 1-415-655-0001 (passcode 2308 045 2123) (limited to 500 callers).





CBR202210: *Bronchodilator* *Nebulizer Medications*



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

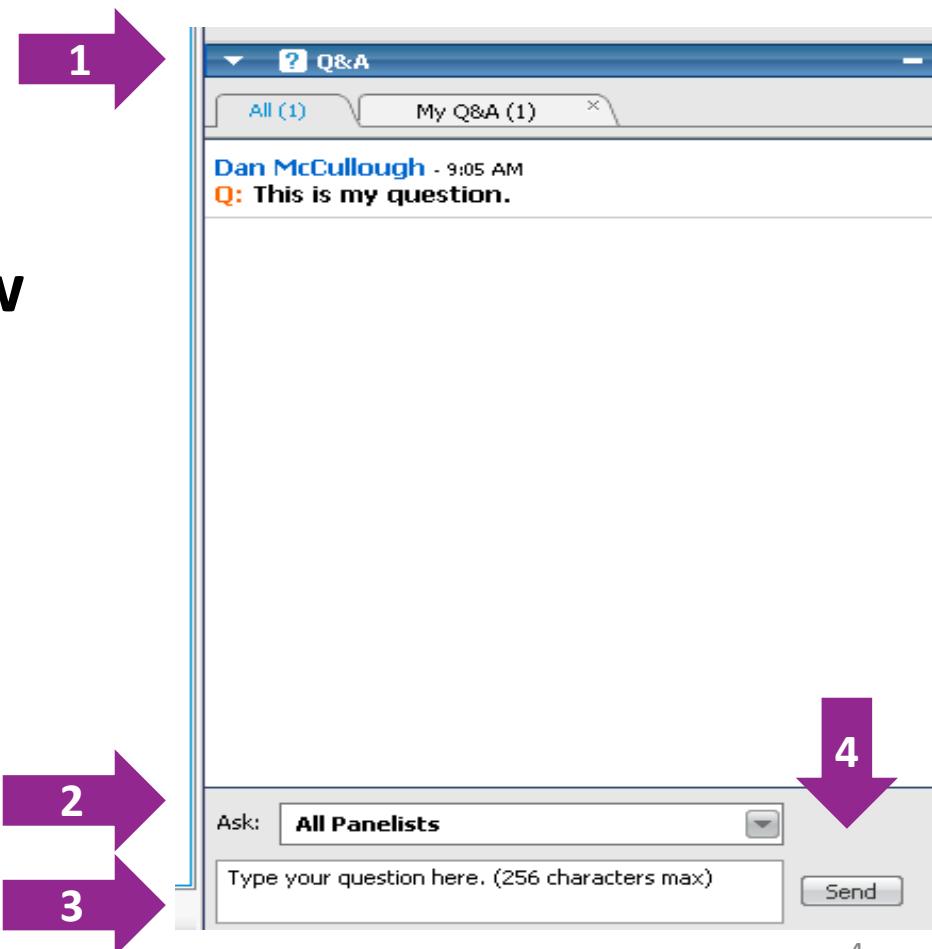


A “Q&A” document will be developed and posted at CBR.CBRPEPPER.org

To Ask a Question in Split Screen

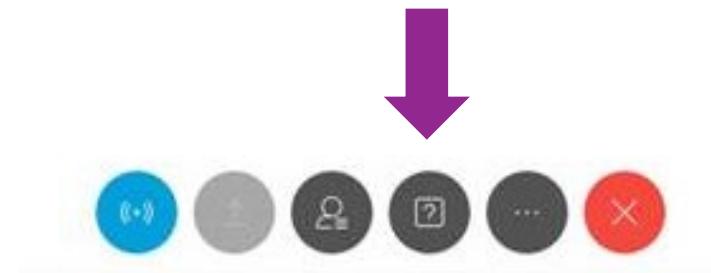
*Ask your question in Q&A
as soon as you think of it.*

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 and handout



Coding guidance document



Webinar Q&A will be posted at
CBR.CBRPEPPER.org



CBR Help Desk:
<https://cbr.cbrpepper.org/Help-Contact-Us>

Webinar Objectives

- Understand the purpose and use of Comparative Billing Reports (CBRs)
- Comprehend the function of *CBR202210: Bronchodilator Nebulizer Medications*
- Gather resources for further questions and inquiries

Webinar Agenda

- What is a CBR?
- How to access your CBR
- Review a sample CBR
- *CBR202210*
- Helpful resources

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 information about vulnerabilities to the Medicare Trust Fund
- Informs providers whose billing patterns differ from those of their peers

Five Things a CBR Is Not

An indication of wrongdoing

An audit

A medical review CBR

A prompt to change your clinical care

A request for a response

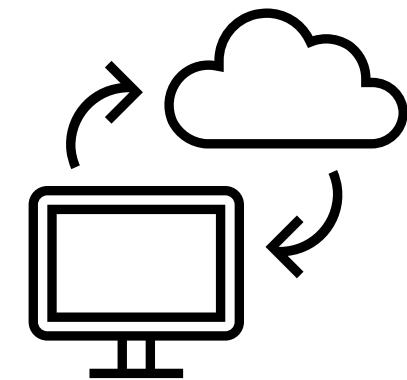
Why did I receive a CBR?

- 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.



The Importance of Downloading Your CBR

- Download your CBR from the CBR Portal:
<https://cbrfile.cbrpepper.org>
- Guarantee the availability of the CBR to any department or employee tasked with reviewing it
- Provide easy access for compliance reviews



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"/>	Provider Name <input type="text"/>
Last Name <input type="text"/>	Provider City <input type="text"/>
Email <input type="text"/>	Provider State / Territory <input type="text"/>
Confirm Email <input type="text"/>	

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 letter via mail 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)
 OTHER

CMS National Provider Identifier (NPI)

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

Validation code

SUBMIT

The Purpose of *CBR202210*

- Protect the Medicare Trust Fund
- Increase providers' awareness about utilization of bronchodilator nebulizer medications
- Support providers' internal compliance processes
- Provide coding guidelines and requirements

Billing Vulnerability for Nebulizers and Related Drugs

- According to the *2021 Medicare Fee-for-Service Supplemental Improper Payment Data* report:
 - There is a 13.5% improper payment rate for nebulizers and related drugs, which represents over \$111 million in improper payments
 - 66.2% of this improper payment rate is attributed to insufficient documentation
 - 12.9% of this improper payment rate is attributed to medical necessity errors

CBR202210 Outline

1. Introduction

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

2. Coverage and Documentation Overview

- Identification of Healthcare Common Procedure Coding System (HCPCS) codes
- Summary of provider's utilization

3. Metrics

- List of the metrics and outcomes analyzed with the CBR
- Definition of specialty 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

CBR202210 Analysis and Results

- *CBR202210* summarizes statistics for services with dates of service from July 1, 2021, through June 30, 2022
- There were 151,583 rendering providers with combined allowed charges of over \$283 million for referring providers on claims for bronchodilator nebulizer medications

Provider Desired Behavior

- Help reduce the possibility of improper payments by taking the following actions:
 - Review HCPCS codes to ensure correct code assignment
 - Perform regular internal reviews of documentation and code selection to ensure accuracy and compliance

Metrics of *CBR202210*

This report is an analysis of the following metrics:

1. Average allowed units, per beneficiary, by category
2. Percent of paid claims for bronchodilator nebulizer medications submitted for J7620

The Criteria for Receiving *CBR202210*

- The criteria for receiving *CBR202210* are that a provider:
 1. Is significantly higher compared to either peer group or national averages or percentages in any of the comparisons in either of the two metric calculations (i.e., greater than or equal to the 90th percentile), and
 2. Has at least five total beneficiaries with claims submitted for HCPCS codes listed in Table 1, and
 3. Has at least \$150 in total allowed charges.

Peer Comparison Outcomes

- **Significantly Higher** — Provider's value is greater than or equal to the 90th percentile from the specialty or national mean
- **Higher** — Provider's value is greater than the specialty or national mean
- **Does Not Exceed** — Provider's value is less than or equal to the specialty or national mean
- **Not Applicable (N/A)** — Provider does not have sufficient data for comparison

About the 90th Percentile

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



Calculation of Metric 1

Average Allowed Units, per Beneficiary, by Category

- Metric 1 is calculated as follows:
 - The number of allowed units for each category is divided by the number of unique beneficiaries who received bronchodilator nebulizer medications for each category
- Category definitions:
 - Long-acting beta-agonists (LABAs): HCPCS codes J7605 and J7606
 - Short-acting beta agonists (SABAs): HCPCS codes J7613 and J7614
 - Combination short-acting beta agonist with anticholinergic (SABA/AC): HCPCS code J7620
 - Short-acting anticholinergic (SAAC): HCPCS code J7644

Calculation of Metric 2

Percent of Paid Claims for Bronchodilator Nebulizer Medications Submitted for J7620

- Metric 2 is calculated as follows:
 - The total number of paid claims submitted for J7620 is divided by the total number of paid claims submitted for bronchodilator nebulizer medications

CBR202210 Provider Trend Figure 1

- Figure 1: Total Number of Beneficiaries Who Had Paid Claims Submitted for Bronchodilator Nebulizer Medications, by Category, Trend Over Time
- The years for the graph are defined as follows:
 - **Year 1:** July 1, 2019 – June 31, 2020
 - **Year 2:** July 1, 2020 – June 31, 2021
 - **Year 3:** July 1, 2021 – June 31, 2022

CBR202210 Provider Trend Figure 2

- Figure 2: Total Number of Paid Claims Submitted for Bronchodilator Nebulizer Medications, per Month, for Year 3
- Each month of the analysis year is displayed for paid claims submitted for bronchodilator nebulizer medications

The Importance of the CBR Outcomes

- CBRs are educational and comparative tools for providers
- A CBR can help providers:
 - Ensure claims are correctly submitted to Medicare,
 - Complete self audits for compliance purposes, and
 - Review and confirm the importance of proper documentation and code assignment

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

- *HCPCS Level II Expert*. American Academy of Professional Coders.
- [*2021 Medicare Fee-for-Service Supplemental Improper Payment Data*](#). U.S. Department of Health and Human Services (HHS). CMS.gov.



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 202009 Critical Care

When: Wednesday, November 11, 2020
3:00 - 4:00 p.m. EDT

Topic: This session will review the Comparative Billing Report (CBR) 202009 Critical Care

[REGISTER](#)

CBR 202008:

Breast Re-Excision

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

CBR 202007:

Therapeutic Injections and Infusions

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

CBR 202006:

Office Visits, New and Established Patients by Nurse

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

CBR 202005:

Subsequent Nursing Facility E&M Services

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

CBR 202004:

Peripheral Vascular Intervention for Claudication

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

CBR 202003:

Lower Extremity Joint Replacement

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

CBR 202002:

Anesthesia Modifiers

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

CBR 202001:

Shoulder Arthroscopy

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

CBR 201913:

Mohs Microsurgery

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

Questions?

