

NGS Medicare Virtual Conference

Fall 2021

Provider Self-Service Tools

11/9/2021



Today's Presenters

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Objectives

- Introduce provider job aids and self-service options
 - Address common claim errors
 - Avoid a call to the PCC

Agenda

- Introduction to provider self-service options
 - FISS/DDE
 - CWF/HETS
 - IVR
 - NGSConnex

Introduction to Provider Self-Service Options

What Is Provider Self-Service?

- Not all issues and questions require calling the Provider Contact Center!
- National Government Services has many provider self-service tools to
 - Verify beneficiary entitlement and eligibility
 - MSP
 - Hospice and home health periods
 - MAO plan enrollment
 - Help avoid coding errors that cause claims to RTP or reject

Fiscal Intermediary Standard System (FISS)/Direct Data Entry (DDE)

What Is FISS DDE?

- Process that allows remote user connectivity to Medicare mainframe
- NGS uses FISS DDE to
 - process claims
 - maintain records
- Providers access through online computer system

What Is FISS DDE?

- Providers use FISS DDE to
 - Research coding
 - Submit claims
 - Track submitted claims
 - Correct, adjust and cancel claims
 - View reports

Accessing FISS DDE

- FISS logon ID and password required
 - [NGS Website](#)
 - Resources > EDI Enrollment
 - EDI Guided Enrollment User Guide
- User logon ID and password are for individual use only
 - Do not share with coworkers or other staff

Navigating Through FISS DDE

Program function key	Screen movement
F3/PF3	Return to menu/submenu or originating screen when using SC field
F4/PF4	Exit entire online system by terminating session
F5/PF5	Scroll backward within page of screen data
F6/PF6	Scroll forward within page of screen data
F7/PF7	Move backward one page at a time
F8/PF8	Move forward one page at a time
F9/PF9	Save, update, submit

Navigating Through FISS DDE

Program function key	Screen movement
F10/PF10	Return to left viewing screen
F11/PF11	Move to right viewing screen
<Ctrl>	Move down one line at a time
<Home>	Move to SC field
<Tab>	Move to next field on screen
SC field	Navigate to specific inquiry file utilize the F3/PF3 to return to the original page
Page field	Move to specific page within claim

FISS Main Menu

MAP1701
MXG9282

NATIONAL GOVERNMENT SERVICES, #13001 UAT
MAIN MENU

ACMFA561 11/03/20
A20204CP 11:01:27

- 01 INQUIRIES
- 02 CLAIMS/ATTACHMENTS
- 03 CLAIMS CORRECTION
- 04 ONLINE REPORTS

ENTER MENU SELECTION: _

PLEASE ENTER DATA - OR PRESS PF3 TO EXIT

Inquiries Submenu

MAP1702
MXG9282

NATIONAL GOVERNMENT SERVICES, #13001 UAT
INQUIRY MENU

ACMFA561 03/11/20
A2020200 13:18:11

BENEFICIARY/CWF	10	ZIP CODE FILE	19
DRG (PRICER/GROUPER)	11	OSC REPOSITORY INQUIRY	1A
CLAIM SUMMARY	12	CLAIM COUNT SUMMARY	56
REVENUE CODES	13	HOME HEALTH PYMT TOTALS	67
HCPC CODES	14	ANSI REASON CODES	68
DX/PROC CODES ICD-9	15	CHECK HISTORY	FI
ADJUSTMENT REASON CODES	16	DX/PROC CODES ICD-10	1B
REASON CODES	17	CMHC PAYMENT TOTALS	1C
INVOICE NO/DCN TRANS	88	PROV PRACTICE ADDR QUER	1D
		NEW HCPC SCREEN	1E

ENTER MENU SELECTION:

PLEASE ENTER DATA - OR PRESS PF3 TO EXIT

Claims/Attachments Submenu

MAP1703
TC98548

NATIONAL GOVERNMENT SERVICES, #13001 UAT
CLAIM AND ATTACHMENTS ENTRY MENU

ACMMA561 02/13/13
C201313P 12:09:44

CLAIMS ENTRY

INPATIENT	20
OUTPATIENT	22
SNF	24
HOME HEALTH	26
HOSPICE	28
NOE/NOA	49
ROSTER BILL ENTRY	87

ATTACHMENT ENTRY

HOME HEALTH	41
DME HISTORY	54
ESRD CMS-382 FORM	57

ENTER MENU SELECTION: █

PLEASE ENTER DATA - OR PRESS PF3 TO EXIT

Claims Correction Submenu

MAP1704 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 09/27/21
MXG9282 CLAIM AND ATTACHMENTS CORRECTION MENU A20214CF 11:48:57

CLAIMS CORRECTION

INPATIENT	21
OUTPATIENT	23
SNF	25
HOME HEALTH	27
HOSPICE	29

CLAIM ADJUSTMENTS

INPATIENT	30
OUTPATIENT	31
SNF	32
HOME HEALTH	33
HOSPICE	35

CANCELS

50
51
52
53
55

ATTACHMENTS

PACEMAKER	42
AMBULANCE	43
HOME HEALTH	45

ENTER MENU SELECTION: _

PLEASE ENTER DATA - OR PRESS PF3 TO EXIT

Online Reports Submenu

(R1) Summary of Reports

MAP1671 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMA561 02/13/13
TC98548 ONLINE REPORTS SELECTION INQUIRY C201313P 13:27:43
REPORT NO

SEL	REPORT NO.	FREQUENCY	DESCRIPTION
■	050	DAILY	CLAIMS RETURNED TO PROVIDER
	201	WEEKLY	PENDING/RETURNED/PROCESSED CLM
	211	WEEKLY	SUBMITTED CREDIT BALANCES
	212	WEEKLY	OUTSTD MED AMT CREDIT BALANCES
	213	WEEKLY	DELETED CREDIT BALANCES
	630	WEEKLY	PROVIDER DISCLOSURE STATEMENT
	702	DAILY	ACS APPEALS RECEIVED

PROCESS COMPLETED --- NO MORE DATA THIS TYPE
PLEASE MAKE A SELECTION, ENTER NEW KEY DATA, OR PRESS PF3 TO EXIT

FISS DDE User Tip: SC Field

- Use these keyboard shortcuts to move throughout the system
 - SC field: allows you to navigate to another page within menu/submenu without having to return to main menu/submenu screen
 - F3/PF3 to return to previous screen

Common Working File

What Is CWF?

- Maintains national beneficiary records
 - Entitlement, date of birth, date of death
 - Recent benefit periods (including any deductibles due)
 - HH episode
 - Preventive services
 - Hospice enrollment
 - MSP information
- Assists in verifying patient's eligibility

Accessing CWF

- Providers access through FISS system
 - Inquiry submenu (01)
 - Beneficiary/CWF option (10)

MAP1702
MXG9282

NATIONAL GOVERNMENT SERVICES,#13001 UAT
INQUIRY MENU

ACMFA561 11/03/20
A20204CP 11:03:25

BENEFICIARY/CWF	10	ZIP CODE FILE	19
DRG (PRICER/GROUPER)	11	OSC REPOSITORY INQUIRY	1A
CLAIM SUMMARY	12	CLAIM COUNT SUMMARY	56
REVENUE CODES	13	HOME HEALTH PYMT TOTALS	67
HCPC CODES	14	ANSI REASON CODES	68
DX/PROC CODES ICD-9	15	CHECK HISTORY	FI
ADJUSTMENT REASON CODES	16	DX/PROC CODES ICD-10	1B
REASON CODES	17	CMHC PAYMENT TOTALS	1C
INVOICE NO/DCN TRANS	88	PROV PRACTICE ADDR QUER	1D
		NEW HCPC SCREEN	1E

ENTER MENU SELECTION: _

PLEASE ENTER DATA - OR PRESS PF3 TO EXIT

CWF: Preventive Services Information (MAP175J)

MAP175J	NATIONAL GOVERNMENT SERVICES, #13001 UAT										ACMFA561 03/11/20		
MXG9282	SC	ACCEPTED										A2020200 13:28:53	
MID			NM		IT	DB				SX			
PRVN SERVC	TECH D	PROF D			PRVN SERVC	TECH D	PROF D			PRVN SERVC	TECH D	PROF D	
CARD/80061	060111	060111			DIAB/82951	060111	060111			AAA /	060111	060111	
CARD/82465	060111	060111			PCBE/G0101					PTWR/G9143	0000	060112	
CARD/83718	060111	060111								IPPE/G0402	060111	060111	
CARD/84478	060111	060111			PROS/G0102	060111	060111			IPPE/G0403	060111	060111	
COLO/G0104	060111	060111			PROS/G0103	060111	060111			IPPE/G0404	060111	060111	
COLO/G0105	060111	060111			PAPT/Q0091	GDR	GDR			IPPE/G0405	0000	060112	
COLO/G0106	060111	060111			GLAU/	060111	060111			PULM/G0424	0072	0072	
COLO/G0120	060111	060111			MAMM/	GDR	GDR			CR /	0000	0000	
COLO/G0121	060111	060111			PAPT/	GDR	GDR			ICR /	0000	0000	
FOBT/G0107	TERM	TERM			HIBC/G0445	110811	110811			AWV /G0438	100914	100914	
FOBT/G0328	060111	060111			HBV/	092816	092816			AWV /G0439	100914		
FOBT/82270	070107	070107			SETS/93668	0072				BEHV/G0447	112911	112911	
IPPE/G0344	SRV	SRV											
IPPE/G0366	SRV	SRV											
IPPE/G0367	SRV	0000											
IPPE/G0368	0000	SRV											
DIAB/82947	060111	060111											
DIAB/82950	060111	060111											
PROCESS COMPLETED --- PLEASE CONTINUE													
PRESS PF3-EXIT PF6-SCROLL FWD PF7-PREV PAGE PF8-NEXT PAGE													

CWF: Beneficiary and Benefit Period Information (MAP1755)

MAP1755 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 03/11/20
MXG9282 SC _ ACCEPTED A2020200 13:30:21

CLAIM NAME D.O.B. SEX INTER 58300

APP DT REASON CD 1 DATE/TIME 20200711328 REQ ID BDMS

DISP CD 01 TYPE 3 CENT D.O.B D.O.D

A:CURR-ENT DT 060111 TERM DT PRI-ENT DT TERM-DT

B:CURR-ENT DT 060111 TERM DT PRI-ENT DT TERM-DT

LIFE: RSRV 60 PYSCH 190

CURRENT

BENEFIT PERIOD DATA

FRST BILL DT 000000 LST BILL DT 000000 HSP FULL DAYS 60 HSP PART DAYS 30

SNF FULL DAYS 20 SNF PART DAYS 80 INP DED REMAIN 1408.00 BLD DED PNTS 3

PRIOR

BENEFIT PERIOD DATA

FRST BILL DT 000000 LST BILL DT 000000 HSP FULL DAYS

HSP PART DAYS

SNF FULL DAYS SNF PART DAYS INP DED REMAIN

BLD DED PNTS

CURR B: YR 20 CASH 198.00 BLOOD 3 PSYCH 02200.00 PT

OT

PRIR B: YR 19 CASH 185.00 BLOOD 3 PSYCH 02200.00 PT

OT

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: HMO Enrollment Information (MAP1756)

MAP1756 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 03/11/20
MXG9282 SC _ ACCEPTED A2020200 13:31:32

DATA IND 0004000000 NAME ZIP 13205

PLAN: ENR CD

CURR PLAN: CUR ID OPT 0 ENR TERM

PRIR PLAN: PRI ID OPT 0 ENR TERM

OTHER ENTITLEMENTS OCCURRENCE CD/DATE 0 / 0

ESRD CD/DATE /

CAT DATA: PSYCH 190 DISCHG IND 0 DAYS USED BLOOD

YR 89 APP MET 00560.00 BLD 3 CO 08 FL 142 FRM TO

IND INT ADM FRM TO APP

ADJ IND CALC DED CMS DT

YR 89 APP MET 00560.00 BLD 3 CO 08 FL 142 FRM TO

IND INT ADM FRM TO APP

ADJ IND CALC DED CMS DT

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: HHA Episode Information (MAP1757)

MAP1757 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 03/11/20
MXG9282 SC _ ACCEPTED A2020200 13:32:31

HH-REC CN NM IT DB SX

MAMMO RSK	MAMMO DATES	TECHCOM	PROCOM
		0000	0000
		0000	0000
		0000	0000

TRANSPLANT INFO:	COV IND	TRAN IND	DIS DATE
			000000
			000000
			000000

EPISODE START	EPISODE END	DOEBA	DOLBA
00000000	00000000	00000000	00000000

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: Hospice Period Information (MAP1758)

MAP1758 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 03/11/20
MXG9282 SC _ ACCEPTED A2020200 13:33:34

HOSPICE INFO FOR PERIODS 1 AND 2:

PERIOD	1ST	ST DATE	PROV	INTER
OWNER CHANGE	ST DATE		PROV	INTER
2ND ST DATE		PROV	INTER	TERM DATE
OWNER CHANGE	ST DATE		PROV	INTER
1ST BILLED DT		LAST BILLED DT		
DAYS BILLED		REVO IND		

PERIOD	1ST	ST DATE	PROV	INTER
OWNER CHANGE	ST DATE		PROV	INTER
2ND ST DATE		PROV	INTER	TERM DATE
OWNER CHANGE	ST DATE		PROV	INTER
1ST BILLED DT		LAST BILLED DT		
DAYS BILLED		REVO IND		

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: Smoking and Tobacco Use Cessation Information (MAP175K)

MAP175K NATIONAL GOVERNMENT SERVICES,#13001 UAT ACMFA561 03/11/20
MXG9282 SC A2020200 13:34:34

SMOKING AND TOBACCO USE CESSATION COUNSELING SERVICES

MID	LN	FI	DOB	SEX
COUNSELING PERIOD:				
TOTAL SESSIONS: 00 00 00 00 00				
HCPCS	FROM	THRU	PER QT TP PRF	HCPCS FROM THRU PER QT TP PRF

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: MSP Information (MAP1759)

MAP1759 NATIONAL GOVERNMENT SERVICES, #13001 UAT ACMFA561 03/11/20
MXG9282 SC _ ACCEPTED A2020200 13:35:52
MSP DATA PAGE 1 OF 3

EFFECTIVE DATE: 030512 SUBSCRIBER NAME:
TERMINATION DATE: 092712 POLICY NUMBER:
MSP CODE: D INSURER TYPE: A
PATIENT RELATIONSHIP: 01
REMARKS CODES:

INSURER INFORMATION

NAME: PREFERRED MUTUAL INSURANCE COMPA GROUP NO:
ADDRESS: 1 PREFERRED WAY NAME:

NEW BERLIN NY 134111800

EMPLOYER DATA

NAME: EMPLOYEE ID:
ADDRESS: EMPLOYEE INFO:

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

CWF: Home Health Certification Information (MAP175L)

MAP175L		NATIONAL GOVERNMENT SERVICES,#13001 UAT	ACMMA561 03/26/13
TC98548	SC	HOME HEALTH CERTIFICATION	C201323F 08:59:20

REQ DATE		DOB XXXXXXXX
032615	NAME XXXXXXXX.XXXXXX.X	

REC	HCPCS	FROM DATE	REC	HCPCS	FROM DATE
-----	-------	-----------	-----	-------	-----------

PROCESS COMPLETED --- PLEASE CONTINUE

PRESS PF3-EXIT PF7-PREV PAGE PF8-NEXT PAGE

FISS DDE/CWF Resources

- [NGS Website](#)
 - FISS DDE Provider Online Guide
 - HIQA Manual
- Medicare University CBTs
 - [Medicare University](#)

HIPAA Eligibility Transaction System (HETS)

What Is HETS?

- Allows users to submit HIPAA compliant 270 eligibility request files over a secure connection and receive 271 response files
 - [R2020Q100 HETS 270/271 Companion Guide](#)
- Replaces Common Working File eligibility transactions HIQA, HIQH, ELGA and ELGH
 - Provider access revocations began 2/1/2020
 - [CWF Eligibility Sunset Frequently Asked Questions \(FAQ\)](#)

HETS

- Available 24/7, except Mondays, 12:00—6:00 a.m. ET
- Provides same eligibility data as HIQA, with following exceptions
 - Currently does not provide
 - Lifetime psychiatric day availability
 - Hospice revocation information and election period breakdown*
 - Home health episode dates*
 - *Will be included in upcoming release

Where to Find Information on HETS

- CMS Website

- Research, Statistics, Data and Systems > HIPAA Eligibility Transaction System (HETS) Help (270/271)
- CMS website has section devoted to HETS, including
 - [Vendor and registration information](#)
 - [HIPAA Eligibility Transaction System \(HETS\) User Interface \(UI\) User Guide](#)

- MCARE Help Desk

- Monday through Friday, 7:00 a.m. to 7:00 p.m. ET
- mcare@cms.hhs.gov
- 1-866-324-7315

Interactive Voice Response Application

What Is the IVR?

- Interactive voice response
 - Research application used to provide general/common Medicare beneficiary and/or claim information
 - Text-to-speech technology
 - Uses natural language
 - Allows you to speak directly into the telephone to make a selection

Accessing the IVR

- Part A Toll-free number **877-567-7205**
- IVR Hours
 - Monday–Friday, 6:00 a.m.–7:00 p.m. ET
 - Saturday, 7:00 a.m.–3:00 p.m. ET
 - I Have a Question option available 24-hours/day, seven days/week

IVR Research (Main Menu) Options

- Patient eligibility
- Claims status
- Checks
- Remittance statements
- Provider enrollment status
- Patient status
- Appeal status
- I have a question

IVR - Patient Eligibility Available Information

- Part A and Part B effective and termination dates
- MSP type and insurer information
- MAO plan information
- Hospital inpatient, SNF, LTR benefit days
- Amount applied to Part B deductible, SLP/PT, OT limits (current and prior year)
- HH name and effective/termination dates
- Hospice name and effective/termination dates
- Date of death
- Corrected Medicare number
- Last pneumonia vaccine date or date eligible for vaccine

IVR - Patient Status Available Information

- Inpatient status
 - Start date
 - Facility type
- Hospice
 - Start date

Did You Know

- CMS mandates providers utilize the IVR instead of contacting a customer care representative to access beneficiary eligibility and general information
- Providers who call a customer care representative with a question that can be answered by the IVR are referred back to the IVR

IVR Resources

- [NGS Website](#)
 - National Government Services Part A Provider IVR User Guide
 - Part A IVR Flow Chart
 - Part A IVR Navigation Guide
 - IVR Conversion Tools
 - Beneficiary Name to Number Converter
 - PTAN and Beneficiary Medicare Number Converter
 - IVR Conversion Tables

Accessing the IVR

State	Toll-free IVR Telephone Number
Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, Vermont	877-567-7205
Illinois, Minnesota, Wisconsin and FQHC	877-309-4290

NGSConnex

What Is NGSConnex?

- Self-service web portal created and maintained by National Government Services
 - Alternative to FISS DDE, CWF/HETS, IVR, Provider Contact Center
- Available 24/7 except for options requiring CWF system access
 - Monday – Friday: 7:00 a.m.–6:00 p.m. ET
 - Saturday: 7:00 a.m.–3:00 p.m. ET

What Does NGSConnex Do?

- Allows provider to review
 - Claim status
 - Beneficiary eligibility
 - Financial data
 - Provider demographics
- Allows provider to submit
 - Appeals requests for claim denials
 - Requests for remittance advice statements
 - Audit and reimbursement reports
 - Credit balance report claim-specific inquiries online

Accessing NGSConnex

- [NGSConnex](#)
- User requirements
 - Internet access
 - Email address
- Customer Service
 - Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, Vermont,
 - 888-855-4356
 - Illinois, Minnesota, Wisconsin, FQHC
 - 877-702-0990

Thank You!

- Follow-up email
 - Attendees will be provided a Medicare University Course Code
- Questions?

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