

CIGNA

Moderator: James Herren
June 23, 2008
1:00 p.m. CT

Operator: Good day everyone and welcome to this Jurisdiction C Ask the Contractor Teleconference call.

Today's conference is being recorded.

For opening remarks and introductions, I would like to turn over the conference over to our host Mr. James Herren; please go ahead, sir.

James Herren: Thank you. Good afternoon everybody and welcome to today's Ask the Contractor Teleconference call. My name is James Herren and I am with the Provider Outreach and Education Department for CIGNA Government Services the Jurisdiction C DME MAC.

Today's call is scheduled to last for the next two hours and is open to your questions about general DME issues as well as those on competitive bidding and CEDI.

Before we get started, I would like to remind suppliers to please limit your questions to one per call. We do we have a lot of people on today's call; we would like to get to everybody's question, so we would ask that you limit your questions to one per call.

Also we will be unable to answer claim specific questions. If you do have a claim specific question, please contact the Jurisdiction C Customer Service Department and those experts will be able to answer your question.

We're joined today by subject matter experts from our various operational areas at CIGNA Government Services. We're also joined by the competitive bidding contractor as well as the CEDI contractor.

For today's call, we will lead off with competitive bidding, so during the initial Q&A session, we would ask that you limit your questions to competitive bidding only. I'm going to read a little bit of information on competitive bidding and then we are going to turn it over to your questions about competitive bidding. After that, we will then go to CEDI; they will follow the competitive bidding contractor. So again during that time, please limit your questions to those for CEDI only.

So during the initial Q&A session, we will talk about competitive bidding, then after that we will go to CEDI and then we will finish it up with just your general questions about DME and Jurisdiction C

As I said, we're going to start off with competitive bidding and I do have a little bit of information I want to read first before we go to your questions.

The Medicare Modernization Act 2003 amended the Social Security Act to mandate competitive bidding programs replace the current DMEPOS fee schedule payment amount for selected items. The competitive bidding program changes the way that Medicare pays for certain items by utilizing bids submitted to DMEPOS suppliers to establish payment amounts. Bids were evaluated and contracts were awarded based on the supplier's eligibility including accreditation for the product category for which the supplier submitted a bid financial stability and the bid price.

The competitive bidding plan called for the creation of ten competitive bidding areas to be created in the initial round. These areas are Charlotte, North Carolina; Cincinnati and Cleveland, Ohio – that's two separate ones, one in Cincinnati and one in Cleveland; the Dallas/Fort Worth area of

Texas and that is one CBA – Dallas/Fort Worth; Kansas City, Missouri; Miami, Florida; Orlando, Florida; Pittsburgh, Pennsylvania; Riverside, California and San Juan, Puerto Rico.

There are zip codes based in each of these CBAs that determine whether or not a beneficiary is a part of that CBA, so check the CBIC web site for the zip codes for the CBAs that are a part of the program.

In addition to this, there are ten product categories in the competitive bidding program. They are oxygen, standard power wheelchairs and scooters, complex rehabilitative power wheelchairs, mail-order diabetic supplies, enteral nutrients equipment and supplies, CPAP and RAD devices and their related supplies, hospital beds, negative pressure wound therapy pumps and supplies, walkers and support services – and for support surfaces, this is group two mattresses and overlays only and this is only for the Miami CBA.

CMS has announced an additional 70 CBAs for round two. For information on those CBAs and the timeline for implementation in those areas, please also, I will refer you to the CBIC web site that is dmecompetitivebid.com, that's competitivebid.com and it is the CBIC web site.

To bill for one of the product categories in a CBA, you must be a contract supplier. That is, you must have been awarded a contract by CMS. The regulations require that a contract supplier comply with all terms of its contract for the full duration of the contract period. Most contracts are for a three year period with the exception of mail-order diabetic testing supplies. Suppliers providing mail-order diabetic testing supplies have a shorter contract period due to the possibility of a national mail-order program starting after 2009.

Suppliers cannot discriminate against Medicare beneficiaries. The items a contract supplier furnishes to Medicare beneficiaries under its contract must be the same items and services

furnished to all other customers. Contract suppliers must also accept assignment on all items included in the competitive bidding program.

There are new areas to Medicare policy that accompany the competitive bidding program and first is grandfathering. The competitive bidding program includes a special grandfathering provision for rental agreements in place at the time a competitive bidding program is effective in a CBA. The grandfathering provision only applies to oxygen and oxygen equipment, capped rental DME and inexpensive, routinely purchased DME furnished on a rental basis such as a walker. Purchased items and enteral nutrient supplies and equipments may not be grandfathered.

Now, suppliers may choose to be a grandfathered supplier or not; however, if a supplier agrees to be a grandfather supplier for one item, then that supplier must serve as a grandfather supplier to all eligible beneficiaries who receive that item from them. If a supplier declines to become a grandfathered supplier, then the supplier must notify the beneficiary and pick up its equipment and then the beneficiary must choose a contract supplier to assume responsibility for furnishing the item and the supplier should have done this by now.

Beneficiaries in a CBA may choose to continue renting items that they began renting before July 1 of 2008, and this is from their current supplier even if that supplier chooses to be a grandfather supplier or is awarded a contract, so let me repeat that.

A beneficiary has the choice to continue using a supplier if that supplier chooses to be a grandfathered supplier or is awarded a contract or the beneficiary may choose to switch to a contract supplier. A beneficiary may switch to a contract supplier at any time and the contract supplier is required to accept the beneficiaries as customers. So this does give the beneficiary choice in this matter.

Competitive bids are based upon a beneficiary's permanent address. So when a beneficiary travels, there are special considerations to keep in mind when supplying them with an item for a product category.

If a beneficiary lives in a competitive bidding area and then travels to another competitive bidding area, the rules governing the program remain in place. If a beneficiary from a competitive bid area travels to a non-competitive bid area and obtains an item from one of the product categories that's a part of the competitive bidding program, then any supplier may supply the item. That is either a contract or a non-contract supplier and they will be paid a single payment amount for the CBA where the beneficiary resides. If a beneficiary from non-CBA travels to a CBA, then they must obtain the item in one of the ten product categories from a contract supplier.

Finally beneficiaries from a non-CBA to another non-CBA, that is they travel from a non-competitive bid area to another non-competitive bid area, will fall under the current Medicare payment structure. The competitive bid program does not come into effect in that instance. So this is for traveling beneficiaries that I've just spoke about.

Finally for physicians, who are acting as referral agents, please be conscious of where you refer beneficiaries when prescribing an item that is a competitively bid item in a CBA. You can review the contract suppliers for a particular CBA at the competitive bid web site; again, that address is dmecompetitivebid.com.

Also on the site, you will find information governing the special provision allowing physicians who are also DME suppliers that is those physicians who have completed the CMS 855S enrollment form. These physician/suppliers do have the option of providing competitively bid items to beneficiaries residing in a CBA, even if the physician/supplier is not a contract supplier.

There are three requirements governing this policy; for the first phase of the program, the only item that fits this special provision is a walker so that's point number one. For the first part of the program, only a walker fits this provision.

A second, the item can only be supplied by physician to his or her own patients. So if you have a beneficiary who comes to you and needs a walker after you have evaluated them, you can then provide that item to them and the item must be billed to a DME MAC using a DMEPOS billing number. You cannot bill that item to a Part B carrier; you can only bill it to a DME MAC.

For more information on the topics that I just addressed and for an overview of the program, please visit the competitive bid web site; again, that is dmecompetitivebid.com. You may also visit the CMS site at cms.hhs.gov for information on the program. I recommend you read MLN Matters Articles SE that is S as in Sierra E as in Echo 0805, so SE0805, SE0806, and SE0807. There are three different articles that I recommend you read. These articles are available on the CMS web site and they do give you a wealth of information on the program.

OK so we are now going to turn the call over to your questions about the competitive bid program. During this time that we do ask you limit questions to only those about the competitive bid program and please limit them to one per call. We would like to get to as many of you as possible and your questions on this program.

Joining us on today's call is Cindy Dreher from the competitive bid contractor and (Kimberly), we'll go ahead and take our first call now.

Operator: Thank you, sir. The question in the answer session will be conducted electronically. To ask your question, please press star one on your telephone keypad at this time. If voice prompts on your phone line will indicate when your line is open to ask a question. Please state your name before posing your question. If you find your question has been answered, you may remove

yourself from the key by pressing star two. Once again, that is star one to ask a question we will take our first question.

Jennifer Possado: This is Jennifer Possado and I am with AmMed Direct. We are provider of diabetes testing supplies. And I was curious, do we know at this point, say if we provide supplies to a beneficiary in one of the CBAs; do we know what denial codes are going to be used at this point?

James Herren: I believe we do. And I'm going ahead to let Ellen Edenfield with the CIGNA Government Services answer for you that for you.

Jennifer Possado: Thank you.

Ellen Edenfield: Yes we have received the instructions from a CMS as to how to deny this claims and I'm sorry I don't have that CR number with me but we will post it with the answer to the question.

Jennifer Possado: Great thank you

James Herren: Jennifer you are our member of listserv for CIGNA Government Services? We will send that through a listserv announcement.

Jennifer Possado: OK great thank you

Operator: Thank you. Once again as a reminder to our audience, that's star one if you have a question or comment.

James Herren: OK go ahead, caller.

Operator: It appears we have no further questions at this time.

James Herren: We have no questions about competitive bidding program at this time? Remember suppliers, if you do have a question, the ACT calls are there for you to ask questions.

We do have a representative of the competitive bidding program on the line with us so if you do have a question for her she's more than willing to take it right now is that correct. Cindy?

Cindy: That's right. I am here.

Operator: And it does appear we have one more questions; we will take our next question.

Female: Do you have to pre-register in order to be able to submit this in round two?

Cindy: Yes, you will have to pre-register. So even if you bid in the first round, you will have to register again to participate in the second round; registration is not yet opened. And I will encourage you if you have not yet done so to register on the competitive bidding web site to receive the e-mail updates and you will receive notification when the registration is opened.

James Herren: OK; do you get – did that answer your question caller?

Operator: Thank you. Moving on, we'll take our next question.

Female: Yes, I would like some clarification on the home delivery of diabetic supplies.

Cindy: CMS expects to issue some clarification on that very, very shortly. At this point, I don't have anything further to share with you other than that what's already been said, but I do know that they as of the end of last week said they will be submitting some additional information on that very soon.

Female: Thank you.

Operator: Thank you. Moving on, we will take our next question.

Operator: Caller, your line is open; please proceed. Caller, if you are on the speakerphone, would you please pick up your handset or depress your mute function we are unable to hear you.

Female: Hello. Hello; I am sorry. I just wanted to ask again and you have already answered this question; when someone traveled out of town like for a walker because I am not in a non-bid area at this point and when the patient comes – we're a coastal community and when the patient comes here, I just to make sure that I am able to give them the equipment because I was told no actually Friday.

Cindy: So you said you are in an area that's not included in competitive bidding?

Female: That's correct. And that the patient came from a competitive bid area and they were injured here and I needed to get them a walker. Am I able to do that?

Cindy: Sure, you can provide the walker to them, you just need to put the KT modifier on the claim.

Female: KC modifier on claim?

Cindy: T as in travel, KT

Female: KT

Cindy Dreher: Yes and that would indicate that the beneficiary is traveling. And then you would be reimbursed the single payment amount, which is the new competitive bidding payment amount. And you would also be required to accept assignment on that claim.

Female: That's not a problem.

Cindy Dreher: All right?

Female: Well, I do have another question if that's quite all right. Yes, when you, the competitive bid you said you have to reregister for the next session that's correct?

Cindy: Yes. When the bidding registration window opens, you will have to register to receive a password to access the system.

Female: OK so the previous passwords will no longer be valid?

Cindy Dreher: Right.

Female: And will that come out on listserv as well?

Cindy Dreher: It will and also too to remind everyone to make sure that all the information with the NSC is up to date and accurate, because the registration piece will hit up against the data NSC database. And if that's not accurate then you won't be able to get access into the registration system.

So we encourage you to make sure that all that information is correct, and also that there is more than one authorized official so what we're calling aback up authorized officials. So in case something should happen, there would be someone else there they can fulfill that role.

Female: Those are all my questions, thank you.

Operator: Thank you; moving on, we will take our next question.

Teresa Bush: Hi this is Teresa Bush with Mediwell in Ft. Worth, Texas. I have a question about the KG modifier is on the web site I downloaded a list of the modifiers with the KG that says the DMEPOS item subject to competitive bidding program under round one. Does that mean that I have to have that KG modifier on all competitively bid items then I submit my claims?

James Herren: Yes, I will let Ellen Edenfield take that one.

Ellen Edenfield: OK. The KG modifier is used for items that could be in more than one category, so. And I think on the listserv that went out there was an example of a wheelchair accessory that can go with the complex rehabilitation chair or just a standard power chair and one of them would use the KG and other of the KK, so you would just need to know which area, which category your item is being providing on and use the appropriate modifier?

Teresa Bush: OK I see what you are saying. OK, thank you so much.

Operator: Thank you; moving on, we will take our next question.

Male: Hi, my question was already answered. Thanks.

James Herren: Thank you, sir.

Operator: Thank you; moving to our next question.

Female: Yes, I am calling from Florida. I am trying to find out the status of – for round one competitive bidding, there seems to be bipartisan support to relook at competitive bidding for round one because there was so many flaws and I wanted to know what's the status of the bill itself is and if its implemented, where would it – what would happen from that point on?

James Herren: Cindy, do you want this one?

Cindy Dreher: Sure. The direction that we've gone to date is we're proceeding on with the implementation on the July 1, 2008. And until we receive any direction differently from CMS, that's where the program stands because at this point, it's still a bill and it has not changed the law which we're required to enforce.

Female: OK. But you do know exactly when they are voting for the bill?

Cindy Dreher: I do not.

Female: OK.

Cindy Dreher: Thank you.

Operator: Thank you. Moving on we will take the next question.

Chris Hettich: James, hi. This is Chris Hettich at Roadrunner.

James Herren: How are you today?

Chris Hettich: Good. All right, I want to clarify something and make sure that am correct and then I will ask my question. Replacement parts and accessories, suppliers are not required to be part of the CBA. That's correct?

James Herren: I am sorry.

Chris Hettich: For replacement parts and accessories of power wheelchairs and scooters is not required for the CBA?

James Herren: Cindy, do you have anything on that one?

Cindy Dreher: Yes. If the replacement part is part of the repair and any Medicare enrolled supplier can provide that with replacement part. And the supplier will be reimbursed the single payment amount or the new bid amount for that.

Chris Hettich: OK, that kind of leads into my question as to why were parts, and I will speak specifically to the riverside CBA, when the CBA does not require the contracted providers to do repairs but does requires any and all providers who do have services facilities to use those (bid derived reliable) prices?

Cindy Dreher: I am sorry; I didn't follow what you were saying.

Chris Hettich: If replacement parts there were only a select few that was included in that CBA. But a service provider providing only service or repairs was not required to win a contract. Why were those included when replacement parts and accessories, only a select few were included in there? Why does any other service provider have to use those bid derived prices?

Cindy Dreher: Because it is the competitively bid item, and the reason that any Medicare enrolled supplier can do the repair is because some contract suppliers may not have the capability, the technical abilities to do the repairs. And so in the final rule that comment was brought up by supplier community and CMS agreed. So they made the decision to allow any Medicare enrolled supplier to provide the replacement parts.

Chris Hettich: But only at those select few under the bid awarded level?

Cindy Dreher: The items that are included are listed under the product category sub six, six code. So if that particular item is not included in that product category is not considered to competitively with the bid item.

Chris Hettich: OK. All right, thank you.

James Herren: Thank you, Chris.

Chris Hettich: Thank you.

Operator: Thank you. Moving on to our next question.

Ellen: Hello. My name is Ellen. And I have the question regarding round two of the bidding. Have the zip codes been identified for the areas which will be affected in round two?

James Herren: Cindy Dreher, have they been identified yet?

Cindy Dreher: No. The zip codes have not yet been released for round two.

Ellen: Is there any idea of when that may happen?

Cindy Dreher: I don't have any timeline for that. I am sorry.

Ellen: OK. And then I guess a follow-up to that is if and when – if we were included, what happens if we do not get the contracts for a particular item and because again we are in a kind of vacation area, I'll say, and that patient comes and you know doesn't want to travel the further distance to where there is the next supplier, what do we do? Are we able to offer them that product? Or do we have to tell them well we just can't and you have to go elsewhere? Or what do we do in that case?

Cindy Dreher: I'm evening on today when the program is implemented on July 1 – so this is for round one and round two. If a beneficiary travels to a competitive bidding area into a CBA, like for example Orlando, and that beneficiary area should obtain in the competitive data item from a contract supplier. So regardless of where the beneficiary lives, if he travels into a CBA, they are required to obtain the bid item from a contract supplier.

Ellen: How are the recipients being advised of this?

Cindy Dreher: Yes they are.

Ellen: They are?

Cindy Dreher: That there's numerous Education issues and if that right now and also it is the suppliers responsibility to tell the beneficiary when they are coming to their establishment, that they are not a contract supplier and they must ((inaudible)) with the contract supplier in order to buy the item.

Ellen: So what position if any is a patient put into, if they just say well I'm just not going that far to wherever the next one is.

Cindy Dreher: The supplier may use an ABN or may be in to may be writing that they are not a contract supplier and therefore the bid – I mean the payment cannot be made for the item of the beneficiary will be financially responsible.

Ellen: OK, is there any particular – would we then use that KT modifier, because we're still really required to bill on their behalf.

Cindy Dreher: Yes, you could use the KT modifier in that case, but the claim will deny.

Ellen: It will deny, because the patient didn't go to where they needed to go.

Cindy Dreher: Right.

Ellen: OK, so really the responsibility is on the...

Cindy Dreher: ...on the supplier. If you provided a bid item to a beneficiary and you are in a CBA, then claim will deny and it will be the contract responsibility not the beneficiary responsibility.

Ellen: And as a supplier, you don't need to have the contract – have gotten the contract for each of the items or can you just bid on certain items?

Cindy Dreher: You've bid on a product category, for instance she would deal on oxygen and then it would be all items within that product category.

Ellen: OK.

James Herren: OK, thank you very much for the questions.

Ellen: Thank you.

Operator: Thank you. Moving on, we'll take our next question.

James Herren: Go ahead caller.

Terry: Hello, this is Terry. And I'm from the Dallas area. We have skill nursing facilities. We have a few on the outlier communities that are not in the CBA. Am I understanding correctly that our residents that are out in those facilities – sometimes we have people with Dallas, Denton zip codes, will reside in our outlier nursing homes. Now that nursing home can go ahead and continue to bill as long as they are outside the CBA?

Cindy Dreher: That's right. But the caveat there is if the beneficiary's permanent residence is within the CBA, then you would use the KT modifier on the claim.

Terry: OK.

Cindy Dreher: Consider that beneficiary the traveling beneficiary because their permanent residence...

Terry: OK and that is just regardless to how long they reside there.

Cindy Dreher: Right. Again, payment is always dependent upon the permanent residence of the beneficiary and this isn't changing in the competitive bidding program.

Terry: OK, all right, great, thank you.

Cindy Dreher: You're welcome.

Operator: Thank you; moving on, we'll take our next question.

James Herren: OK, go ahead, caller.

Ruth: Hi, my name is Ruth. I have a question regarding the fee schedule that will be replaced by a single payment amount. My question is before or when we submit our claim, we submit a submitted amount and an allowed amount. How do we then now submit our claim with competitive bidding?

James Herren: I'm going to let Ellen Edenfield take that one.

Ellen Edenfield: Are you saying you submit – you submit only your submitted amount, where do you submit your allowed amount?

Ruth: When we submit – when we submit a claim is bid we have a submitted amount and then we get paid with the allowed amount. Now with the competitive bidding, do we submit just the single payment amount?

Ellen Edenfield: You would submit whatever your submitted amount is. Your payment is either going to be the fee schedule amount or the single payment amount depending on whether it's within CBA or not.

Ruth: OK, now my question under single payment I want to understand the single payment amount. It's – though I get it that those single payment amounts are like purchase because they are going to be paid just one time?

Ellen Edenfield: No there's rental items as well.

Ruth: OK.

James Herren: You know hospital beds were in round one of the products category so you have a rental payment on that hospital bed.

Ruth: So this single payment, this is a single payment a month for one month for the bed?

James Herren: Correct.

Ruth: Thank you very much.

James Herren: You are welcome. Thank you.

Operator: Moving on, we'll take our next question.

James Herren: OK go ahead, caller.

Luis: This is Luis from Ft. Lauderdale. My question is regarding sit-ups and non contracted providers who grandfather in there CPAP patience. My understanding is that we continue to provide the supplies until the CPAP gets to the thirteenth month. My question is what about CPAPs that are under maintenance in front of the six point plan category, can we continue providing for those particular patients?

Cindy Dreher: No, those supplies would have to be provided by contract supplier. You can go ahead and bill for your maintenance and service and you will be reimbursed the fee schedule amount for that, because maintenance and service is not competitively bit item, but the supplies and accessories would have to be provided by a contract supplier.

Luis: Thank you very much. That answers my question.

Cindy Dreher: You are welcome.

Operator: Thank you; moving on, we'll take our next question.

George: My name is George from Houston. For out of state bidders, are you going to require them to have the state licenses before you even consider them as part of the bidding program?

Cindy Dreher: Suppliers must be in compliance with all of the suppliers' standards which includes state licensures. So before they can become a contract supplier and provide the items in that area they must need all of those standards which includes the licensure.

George: If the provider doesn't have licenses even how then can they be considered in the bid properly?

Cindy Dreher: They have to meet all eligibility requirements and be in good standings with the NSC in order to submit a bid.

George: That's all I have thanks.

Cindy Dreher: You are welcome.

Operator: Thank you; moving on, we'll take our next question.

Nancy: Hi, this is Nancy north of Dallas/Fort Worth area. And I am confused about the zip codes?

James Herren: OK, well what's your question about the zip code, Nancy?

Nancy: OK, we're North of the Dallas/Fort Worth area, none of the zip codes that we supply are included in the Dallas/Fort Worth area. So, can we still continue to supply the diabetic supplies to our patients if we're not contracted?

James Herren: Cindy Dreher do you want to take that one?

Cindy Dreher: Sure, if you are located outside of a CBA, and the beneficiaries are outside of the CBA, you're not affected by the competitive bidding program and you can continue to provide those.

Nancy: OK, and that's just the diabetic supplies?

Cindy Dreher: There are zip codes for diabetic testing supplies and zip codes for all other items, and they are listed on the competitive bidding web site that way.

Nancy: I don't think any of my patients' addresses fall into any of those -- either of those categories.

Cindy Dreher: And we've put out a very useful tool, it's relatively new in the past couple of weeks, where you just have to enter in the patient's zip code and then a screen will pop up and let you know immediately whether that zip code is in a CBA or not. So you don't have to scroll through any list, you just know the zip code.

Nancy: Oh, good, OK. Thank you

Cindy Dreher: You're welcome.

James Herren: Is this on the competitive bidding web site?

Cindy Dreher: Yes, it is dmecompetitivebid.com, right on the homepage.

James Herren: OK, thank you.

Operator: Thank you and that does appear that's all the questions we have at this time.

James Herren: OK Cindy, thank you very much. We can go ahead and move on.

Cindy Dreher: OK, you're very welcome.

James Herren: Did you have anything you wanted to communicate?

Cindy Dreher: Just to let people know that if you have a question to please call our customer service center. And that number is 877-577-5331. Or you can also e-mail us. And that e-mail address is cbic.admin@palmettogba.com and that e-mail address and the phone number is also included on our web site under the contact us feature. And thank you for allowing us to a part of this today.

James Herren: OK, thank you very much, Cindy.

At this point we'll go ahead and turn the call over to Stacy McDonald and Sally Hopkins with CEDI, I think they had a couple of things they wanted to talk about before we took up questions for them.

Stacy McDonald: This is Stacy McDonald with CEDI and we also have Sally Hopkins with us today. I'm just going to give a quick brief update on our CEDI enrollment, and then Sally will provide an update on the help desk. And then we'll be available to answer any calls.

Right now, our CEDI enrollment team is processing requests that were received on May 21st, that day was a very large day that we received forms. It's approximately three times the normal daily

volume so it's taking us a little bit longer to get through that, we have brought in contractors and additional associates to help us work down this backlog and our goal is to get it to be within 10 days of current of the date of receipt that we got those forms as quickly as possible.

So, we do think that once we get through the 521 that we'll be processing a lot faster, that those days are going to be going a lot faster than they are.

We do send out e-mail confirmations if an e-mail address is provided on the request. We do have some that come back because spam filters are set to reject some of these e-mails. We are asking that if you do send in a CEDI enrollment, make sure that your spam filter will allow e-mails to come from the @wellpoint.com or @anthem.com so that those can get to you.

If we do receive fax and e-mail confirmation, because it was unable to be delivered, they will print a hard copy of the confirmation and send it out via the other US Postal Service.

So that's where we are with the enrollment. And I will let sally give an update of our help desk then again we will open up to question.

Sally Hopkins: Thank you Stacy, my name is once again, Sally Hopkins I am the CEDI help desk manager.

What we have done is bring in dispatchers to the help desk to clear out the queue and actually enable you to call our help desk.

We know that we have been receiving busy signals for so many calls that are coming in, so we felt like bringing in dispatchers to get the calls out of the queue so that that way you can get your issue reported.

Experienced help desk technicians take that information and they will give you a call back.

Right now we are running behind, that is just because so many calls now are coming in are allowed in and we are trying to keep up with those calls. But they are ranging between 24 hours and 72 hours.

But I do ask that you also do is sign up for our listserv, so that way you can get important information, whether it be you know our top calls that we are continuing to see, and then any problems that we may be experiencing on our connectivity issues.

Against I'll ask that you sign up on the listserv at web site at NGSCEDI.com and then tax top calls that we are receiving is basically MPI issues.

We have sent out a couple of listservs last week that indicated how to clear up if you are getting rejections on your final report, those commonly make sure that submit your MPI that you are only submitting MPI only.

You need to make sure that you do not have any legacy numbers in that transmission file because it will reject out the claim.

And then you also want to make sure that your MPI number is linked with your NSC number, you need to go to web site and ensure that those are both linked and if they are, and you are still having rejections, then do to the NSC to verify that everything is set up correctly there.

If everything is setup there, then contact the DME jurisdictions – jurisdiction A, B, C or D to ensure that everything is setup and there might be something incorrect in the system on our end.

And other top calls that we receive in this enrollment. Stacy did give you an update on wherever you at, where we go at in that enrollment process.

Our help desk technicians all are able to see if that yes we did receive your information.

We cannot expedite it. We are trying to get in order as received, so currently I have seen enormous amounts of calls into the help desk just to say where is my enrollment? And how can you do – what can you do to get it going faster I mean they are on they have even indicated that they were in maze – to enrollment at the 21st so allow them to get called out and it should have been going faster there soon. I know that in June we didn't receive as many enrollments.

And that is all that I have as far as the help desk. So, we'd be open to any questions that you may have.

James Herren: OK, thank you Stacy and Sally. Kimberly at this point we will open the lines up for questions now.

Operator: Great; we will take our first question but as a reminder to our audience, that is star one if you have a question today.

Josephine: My name is Josephine from Houston since this transition from EDI to CEDI, I'm having problems resetting our password on CSI since we are not using our submitter ID when we call the CEDI, they normally required us to use our case number saying that they cannot reset our password using the pin number.

Female: As far as I – I mean am trying to understand your question because you are breaking in and out on me, but if it's for claim status inquiry, the CEDI does not reset passwords for claim status

inquiry that is done at each jurisdiction. So you would need to contact the jurisdiction in order to have that password reset for CSI, Claim Status Inquiry. Does that answer your question?

Josephine: What number do I call for the jurisdiction?

Female: I can bring it up. James, do you have the number for CIGNA's customer care?

James Herren: Yes, give me one second. Would it be our general customer care service line?

Female: Yes, I think they are the other ones that provide the support for CSI.

James Herren: OK, that number is 866-270-4909.

Josephine: OK, thank you.

Operator: Thank you; moving on, we'll take our next question.

Susan Zajac: Yes, this is Susan with Generation Medical Equipment in Lynchburg, Virginia. I was checking we have had major trouble getting through to CEDI to get help back. What is happening is that we can sign on I've got a password change, everything works until I go to either transmit or receive and then it freezes my whole computer. And I called the help desk on the 10th of June and again on the 18th of June and got through to a person, supposed to have somebody contact me back and still haven't heard anything. And we are dead in the water.

Female: What I can do is – what is your sender ID number?

Susan Zajac: *****.

Female: Say that one more time, I'm sorry, * as in ****? OK.

Susan Zajac: *****.

Female: I can see where that is in the process. You should have gotten a call back by now.

Susan Zajac: Two times I've gotten through, the last time I spoke with Mike and he apologized and said
there will be another five days.

Female: No, it's not another five days. No, I will check for you and your name again is?

Susan Zajac: Susan Zajac, Z-a-j-a-c with Generation Home Medical Equipment in Lynchburg, Virginia.

Female: OK, Susan do you mind giving your phone number over the phone?

Susan Zajac: I don't mind at all, *****.

Female: OK.

Susan Zajac: I appreciate it. We are a very small DME supplier and we are in bad shape.

Female: OK, let me check to see where it's at.

Susan Zajac: OK

Female: And I will have them ...

Stacy: Susan, this is Stacy; what software do you use to transmit your claims?

Susan Zajac: QS1. And I have been in contact with them, they fast forwarded in and said ...

Female: No, they've had problems

Susan Zajac: Well, they said that it once I can passport it – once I can get in, they've watched as I get in.

Once I get into the system, I can bring a whole system up, it shows to press one to send and two to – it's gotten the whole log-in thing so that I can get in without any problem. But when I go to receive or send, it just freezes the whole thing and can't do either thing.

Fortunately, Medicare is willing to work with me as far as hardcopy claims right now because we haven't been able to do anything in you know two weeks.

Female: OK.

Susan Zajac: But the vendor said that it was on your end and your end said they didn't know what it was.

And I'm right in the middle!

Female: We can see if someone can work, I'm – we might even check to see if one of our tech support people can work on your issue because we can check your login and logout information.

Susan Zajac: OK.

Female: Either way I will let you know.

Susan Zajac: That would be wonderful, Stacy. Thank you so much.

Operator: Thank you. Moving on to our next question.

Marilyn: This is Marilyn outside of Denver. And we sent in our enrollment application on 12th of May and got a confirmation back that you got that, but we haven't had any other correspondence since then. Should we have had something?

Female: Yes, you should have received something back because we are processing on May 21st.

Marilyn: We were concerned maybe something got lost in the system.

Female: Sure. Was this for a brand new set-up or ...

Marilyn: No.

Female: OK. Was it – do you have an existing submitter I.D.

Marilyn: yes we do.

Female: What is that?

Marilyn: That submitter I.D is *****.

Female: And what was the request for?

Marilyn: Well, I just wanted to make sure you got our application in for the new system. We submitted that in on the 12th and got a confirmation – I mean we've got a confirmation on the enrollment on the 12th and we haven't heard anything else so I didn't know if we were supposed to or maybe we dint need this or .

Female: If you were already set up with the Jurisdiction C that information should have been transferred to us.

Marilyn: OK.

Female: And there wouldn't be anything additional that you should need to do. If you would like to give me your phone number I can give you a call and we can look up that paperwork and if there is any thing that we needed to be processed or maybe if it doesn't need to be processed at all.

Marilyn: Yes exactly. OK, phone number is *****.

Then I have one more question, I mean we have been, it sounds like one of those fortunate ones we have been in and transmitting and uploading and downloading and getting payments, but I do have a few problem-children so to speak. And even though we've have the doctors NPI in, and it appears in all the fields that I can see in anyway to our software, I'm still getting some front-end denials saying "ordering provider info missing." And I'm kind of at a loss and I don't know where else top put it. And I don't know if you had other issues with CEDI or this is just between us and our software vendor.

Female: It's probably an issue with your software vendor. But what we can do is we can take a look into that and I can talk to you about that when I call back.

Marilyn: Oh, that will be great, yes.

Female: Do you have a data transmission that Stacy can look at.

Marilyn: Sure, I've got saved paperwork that will be great.

Female: No just a date that you received that error message.

Marilyn: OK, it's dated the first date of 06/20/08.

Female: OK, perfect. OK, I can take a look at that and we will talk about that when I call you back.

Marilyn: That would be super. OK because I have put a couple of messages in through e-mail or voice and have yet to get a response to that. So it's been over a week. So apparently your CSRs are running way behind.

Female: They are.

Female: They are talking, I am hearing them. They are chained to their desks.

Marilyn: A few more bodies and a few more phone lines maybe.

Female: That's right.

Operator: Thank you. Moving on, we will take our next question.

Walter Keen: Yes, good afternoon. My name is Walter Keen; I am calling from Forest Hill, North Carolina. And we were going by the Medicare Palmetto GBA information dispatch that was put out on probably March 2008 that said if I were a carrier transmitter tested successfully then we would be OK. We have had the same submitter number for over ten years, everything that we checked with our software providers QS1 also we have been unable to transmit we called in a temporary password and it just keeps kicking us out.

After four days and a hundred hours of calling the help desk, I was told that we had to resubmit for a provider number, billing number and which makes no sense.

We checked with GPA, Palmetto GPA, CGNA and they said down that CEDI that they even don't have a record of us. So you tell me what is going on we have been two weeks where we cannot bill?

Female: OK, we have had that this situation has come up that we did not receive all of the information from up the DME – well from the DME MACs that for some reason or another some of the submitter information the trading partner information was not forwarded to us.

And because we don't have that information, we do need you to resubmit that paperwork however...

Walter Keen: My question is if Palmetto GBA had it, the national clearing house has it, CIGNA has it, why do we have to go through the whole thing again in weeks and weeks when we are trying to keep our doors open?

Female: Because we don't have that paperwork but if you – what I need you to do is submit that paperwork.

Walter Keen: We have.

Female: And what I will do is as soon as we get – if I can get your phone number then I will provide you with my phone number if you will let me know as soon as it's faxed, we have a two hour turn around time for that paperwork for the missing trading partner information.

And we will have that setup for you within two hours.

Walter Keen: OK.

Female: So what is your – what was your name again?

Walter Keen: OK, I am out of the office but my office manager will be there her name is (Jennifer). The number is ***** option one and option four.

Female: OK.

Walter Keen: And that will take you over to DME. Thank you so much.

Female: Sure and like I will talk to her we will get all the necessary paperwork and get you set up.

Walter Keen: Thank you so much. Have a great day.

Female: Thank you.

Operator: Thank you. Moving on, we will take our next question.

Angela Jackson: Hi this is Angela Jackson; I am calling from MDI Clearing House. And how far are you guys today?

Female: Good how are you?

Angela Jackson: I am pretty well. I have been trying to get a response from Julie McVee, is she with your organization?

Female: She is with mine, she's my team lead.

Angela Jackson: OK well, we just have two basic and – well maybe two or three basic errors that we need resolved on behalf of our mutual providers and my problem or dilemma is we're not certain because there is no error code list like there used to be, we don't know who's actually rejecting the claims – is it CEDI or is it the actual regional DME like you know CIGNA or you know?

Female: Now, are you getting these error requests, rejection codes, are you getting them on your report or are you getting them on you RTP report?

Angela Jackson: It comes back, the name of the report is 716003 CL level air listing. Does that sound familiar? And I can even give you an actual code, it's a five digit code. One is 40022, and the other one is 40040. And there's actual messaging after the code. And we're just trying to figure out how we resolve these errors. And but no one you know as everyone knows, you can't really get to a person and no one will call me back.

Female: Angela, those are the standard DME MAC reports that were produced prior to CEDI that are still continuing to be produced because CEDI is not doing all of the front end editing at this point. So those are the same errors that you would have received prior to CEDI.

NGS Medicare still has their DME MAC EDI front end error code manual on their web site and we are in the process of creating one for CEDI that will include all of those error codes and putting that on the CEDI web site.

But you can go out to the NGS Medicare web site and go to the DME MAC portion and pull down that error code manual. But those are the same error codes that you were receiving prior to CEDI.

Angela Jackson: OK, so they are coming back from what system?

Female: The DME MAC system. Those were the same reports.

The claims come in to CEDI and we do a small portion of editing, those edits come back on the GEN report and then we send the claims to the appropriate DME MAC based on the beneficiary address...

Angela Jackson: OK.

Female: Where they then go through the next level of editing, where it will show if the claims were accepted or rejected by the DME MACs. And it will have up at the top of that report, it will list whether it's CIGNA, National Government Services or Noridian or NHIC.

Angela Jackson: OK.

Female: It will list the DME MAC on the heading of those reports.

Angela Jackson: And so if – depending on what report – the errors we need to call that MAC whatever.

Female: Well you probably would be better off pulling down that manual because the manual will tell you what's causing the error.

Angela Jackson: OK.

Female: And I would think that you would have already had those manuals because those edits are the same edits that they have already had in place for years.

Angela Jackson: OK, but I think there's something, there may be something conflicting going on because when we look at that outbound data, the data's there but it's still being rejected. So either way, I need to speak with someone so they can look at our raw data and see OK, this is exactly why and what you need to do to stop this rejection.

Female: Right. Are you on our vendor conference calls?

Angela Jackson: I don't – I've been on Region D, because my issue actually stems – it's Region D but, but you know everything goes through CEDI anyway, so I just jump on the C Call and see if I can get some answers. But, no I don't think I have that – how often is that?

Female: It's every other week.

Angela Jackson: OK.

Female: If you wanted to provide me with your e-mail address I could get you out to that distribution, we do have a call this Wednesday.

Angela Jackson: OK sure it's ajackson@*****.com. I appreciate it.

Female: OK.

Female: No problem.

Operator: Thank you; moving on, we will take our next question.

Evan Diame: Yes, this is Evan Diame; one from Peter's DME. I think you just answered my question from your previous call. But I have one of an additional question to that. Is it possible for you to

miss exactly what the DME – I'm sorry, what the jurisdictions are responsible for versus what CEDI is responsible for in terms of transmissions and rejections?

Female: We do have that on our NGSCEDI web site. There is the listing of the types of issues that CEDI will handle and the issues that are handled by the DME Max.

Evan Diame: Where is that located, I'm sorry?

Female: It's NGS, its www.ngsCEDI.com.

Evan Diame: OK.

Female: And from there if you go to outreach materials.

Evan Diame: OK.

Female: Let me go back here – I am sorry resource materials and then help desk support.

Evan Diame: OK.

Female: And it will provide a list and it also has the links to the other DME MACs.

Evan Diame: OK, very good thank you.

Female: You are welcome.

Operator: Moving on, we'll take our next question.

Paula Briveland: Yes, this is Paula with Jones County Medical. I wanted to know if you have had any problems with Mississippi Medicaid the NPI number not transmitting.

Alice Hopkins: This is Alice Hopkins at the CEDI help desk. I haven't heard of any issues with that.

Paula Briveland: OK well.

Alice Hopkins: Where are your rejections -- are you getting through CEDI and then it is getting rejected out of the jurisdiction?

Paula Briveland: Yes. When Medicare is crossing it over there saying is coming in with all nines in the NPI sealed. And our NPI is going with the Medicare claims, because they are processing it but when it gets to EDS with Mississippi Medicaid they are saying it's not coming in and of course they said it's not their fault.

Alice Hopkins: What you need to do is to work with that jurisdiction that -- I'm assuming is what jurisdiction? Jurisdiction ...

Paula Briveland: Jurisdiction C.

James Herren: It should be us. Let me go ahead and get you our contact information and what we'll do is look into that for you.

Paula Briveland: OK great. My name is Paula Briveland and my number is *****.

James Herren: We'll have someone look into that and we'll give you a call right back.

Paula Briveland: Thanks.

Operator: Thank you; moving on, we'll take our next question.

Mary Anne: Hi, my name is Mary Anne. I'm with Southern Pulmonary. And my question is we have been transmitting through CEDI and getting all of our front-end reports and everything my problem is, I can't seem to pull down my, what used to be the Medicare remittance notices. I'm getting a check, but I'm not getting the report.

Female: What software systems are using?

Mary Anne: We are use the thirty two.

Female: Are you pulling through the reports?

Mary Anne: Yes Ma'am, I get something that comes up it's like.

Female: It's named something different compared to what you ate used to also. And I'm trying to remember also, Stacy do you remember, I think you could also report used to be called – oh Stacy, help me.

Stacy: I don't remember.

Female: I don't either. But it's a different report name than what you are used to.

Mary Anne: OK. I get – I can pull up the gen report and everything and then I get an RPT like 20080611 and I don't know if that is the remittance notice I'm looking for or if it's a different one. And like for example I have report that says 835.008165

Female: That is it, that's your RA.

Mary Anne: OK what I'm doing when I try to pull it back, it won't open it and I don't know what to open it with maybe.

Female: When you pull back that remittance how do you read it? What software do you use to read it besides Pro 32?

Mary Anne: I've used everything – oh like Word or Notepad.

Female: Are you just planning to print it?

Mary Anne: Yes. To pull it up where I can read it and print it off.

Female: Well you probably need to send it through the M Rep software.

Female: That's what I'm thinking too.

Mary Anne: Oh, OK.

Female: M Rep actually makes it look pretty too. It's a free software that CMS supplies ...

(Mary Anne): OK.

Female: ... to suppliers and you can pull that off of our web site, I believe that is on our CDI web site.

Mary Anne: OK, So go to CEDI.

Female: NGSCEDI.com.

Female: And then go to software downloads. And it's at the very bottom of the page.

Female: OK and it just M Rep.

Female: Right.

Mary Anne: OK, well thank you so much.

Operator: Thank you; moving on, we'll take our next question.

Female: I also have comment for CEDI my first thing, when I have called with some of the problems that I have it has taken four and half hours of hold time to finally get one person to able to try and get something to be taken care of, until the lady called me from a contact area is the only I had my issue resolved so you know. But the good news is I am getting paid and we're not having any problems. So for everybody out there who is having problems, they can be resolved...

Female: Thank you.

Female: That's why we put the dispatch team in place because I didn't like that either that you were on hold for four hours you had better things to do than be on hold for customer service .

Female: But it does get – we have got everything – knock on wood now – but everything is getting through. We are receiving checks and I am getting my checks electronically submitted you know when I do my reports I get all that, so it is nice, so that every thing works out.

Female: Well that's good to hear.

Female: But I have one more question for you on the competitive bidding. For small DME companies like we are a small DME company verses a manufacturer, are manufacturers able to do the competitive bid process?

James Herren: Yes. Only if they are DME, they have a DME license – they are on license with NSC is the only way.

Female: So you say though you have a Medicare contract then they can probably do the competitive bidding.

James Herren: They will be allowed as long as you are in good standing with Medicare just like anyone else.

Female: That's what I heard. And that was my question, thank you so much.

James Herren: OK thank you, ma'am.

Operator: OK moving on, we will take our next question.

Frank: Yes my name is Frank here in Florida. And we have been submitting claims without major problems. But when the RPT reports come back, some of my claims on for region A, they are missing, I don't get the RPT report for that region, however when we called in that region those claims seem to be in process. Is this something that has happened before are expecting more of that or ...

Female: So you didn't get an RPT report.

Frank: For that region.

Female: For that region.

Frank: Right.

Female: Assuming – I assume that we could do possibly retrace because your claims are in Jurisdiction
A.

Frank: Correct, we have verified that the claims are.

Female: How old is that? We can go back I believe 45 days to pull – to get that information and put a
report back out to you.

Frank: OK this will.

Female: You know if you have got a report that shows when it was, when you transferred it, will be able
to go back out and recreate that report.

Frank: I believe that was general report 06/20.

Female: I am not sure.

Female: On the 20th

Frank: Yes.

Female: What is your submitter ID number?

Frank: Sorry, that would be, sorry its 18, on the 18th.

Female: On the 18th, OK.

Frank: And our submitter ID, Charlie, *****.

Stacy: And this is Stacy, when you call back you report, do you, and after you forward them back do you only see one report?

Frank: No I get various – I get report for each region.

Female: OK.

Frank: Which is different from what it used to be.

Female: Right.

Frank: So – but when you get that report, I was missing region A and this is the second time it has happened. I can't remember when was the last but we have been OK with it because once you call region A, the claims they are being processed. We just never got the RPT back. And this is on region A.

Female: And your company name is?

Frank: Advanced Medical Products.

Female: Frank and your phone number is?

((Frank): Yes, *****.

Female: What I will do is go look for that transmission on the 18th and recreate that report for you and give you a call back, OK?

Frank: I did get the transmission on the 18th in that region A is just working on that. I got all the other regions that went along with the report but we didn't get A – and let me ask you that was my second question. Once I have downloaded the report, can I have one reopened? Because whenever I list the report they don't show there, what if I want to download another again another report?

Female: Stacy, does M2 allow you to do a recreate online yet? I don't believe it does.

Stacy: You can re-queue it. If you've downloaded the report and it shows that you've downloaded it, you can go and restage it yourself to re-download.

Frank: To re-download?

Female: Yes.

Frank: How can I reset that?

Female: Sally will have to give you those instructions.

Frank: Sorry I didn't catch that?

Female: Sally, the other lady on the phone. She and her team can provide those instructions.

Female: I don't have those.

Female: I don't have them either but I can get them for you Frank and I can give you a call. I actually have one of our Techs to call you.

Frank: That would be great, because our software is having a little bit of problem analyzing the report. So sometimes I get the report I download it and the analyzer is just way off and they go into a batch file, then picking out the report was going to be more time consuming than just reopen it from you guys and downloading it again.

Female: OK.

Frank: Thank you.

Operator: Thank you. Moving on, we'll take our next question.

Sophia: Hello?

James Herren: Yes Ma'am.

Sophia: Yes, my name is Sophia. I'm calling with the Medical Center and Respiratory in Wilmington, North Carolina. My problem is that we are all setup and we are getting reports and able to transmit, but every so often – I had two days back to back when I did not receive a gen RPT report or a record of RPT report. Is there any way because every time I try call CEDI it is very busy or the long wait. How do I get that particular report? I got all the rest of them except for the RPT to let me know whether it has been accepted or not?

Female: Did you receive back the TRN report?

Sophia: Yes I did.

Female: OK.

Female: What's your submitter ID number?

Sophia: C as in Charlie *****.

Female: And the date of your transmission?

Sophia: June 17 and June 16.

Female: You just need the RPT report for both of those.

Sophia: Yes, ma'am.

Female: The 15th and 17th?

Sophia: Yes, ma'am.

Female: And your phone number, Sophia?

Sophia: *****.

Female: What we'll do is recreate those reports for you.

Female: OK.

Sophia: Have you gone back out to see if they are there?

Female: Yes, I tried that.

Sophia: OK, let me have some one re-queue those reports and I'll give you a call right back. OK?

Female: OK, thank you. Have a great day.

James Herren: Thank you Sophia. And Kimberly, can we make this the last question for Stacy and Sally?

Operator: That is correct that is fine. Moving on we will take our last question.

Margaret: Yes. My name is Margaret and I'm calling from Morris Sales in Parkersburg. And we had submitted a form to you all by fax after printing it from your customer service to combine our submitter ID numbers to one and that was on the 20th of May. And we have had no response of any kind that you have received it, that it's in processing. And I have an e-mail thing through the surf that you guys were working on the 21st.

Female: That's correct and unfortunately, the request to combine trading partner IDs have been put on hold because we felt that the new submitters and getting submitters set up for EDI took a precedence over these. What I can do is I can verify that we do have your request on file and give you a call back and let you know that we do have it and we will be processing it.

Margaret: OK.

Female: And you know it's an inconvenience for you to have the multiple Ids, but you are still able to yes to use those.

Margaret: Yes I can try and submit for the one but I cannot transmit work for both correct.

Female: No you can use both.

Margaret: Yes we can still use both

Female: Yes you can use both. And then once we get you combined well you will just using one.

Margaret: Oh, OK. That will be wonderful. We didn't know can do that. That's not that much of concern then.

Female: Yes, What is your submitter ID?

Margaret: Submitter ID is C***** and that was the Region C and we have a different one for Region B do you want it also.

Female: Sure

Margaret: It's B*****.

Female: OK and Margaret, what's your phone number?.

Margaret: *****.

Because one of my concerns are we had sent an e-mail on the 13th of May trying to get the form yes because it was not available online and I got a confirmation back today that it was deleted without being read.

OK that kind of concerns me about sending an e-mail to check on it.

Female: Was that in our e-mail box?

Margaret: Yes, it was to use the CEDI@wellpoint.

Female: OK and yes one thing we would like to mention with those e-mails if you do get one that comes back and says that it was deleted without being read we use outlook and it has a viewing pane for those e-mails and if we are going through them and we see this needs to be forwarded to another department.

Margaret: OK

Female: It's forwarded for follow up and then helps us delete it. So it looks like it has been deleted because it has not actually been double clicked on to open it but it has been read and forwarded.

Margaret: That's wonderful.

Female: Yes.

Female: That's still and I, we defect with it and that's kind of funny that you ask that question because Stacy and I both asked her that question and that's what's exactly what happening. She is like an e-mail jail right now trying so many e-mails that come in. So she had to delete some of them and

usually she does keep those until she knows for sure that they have been responded to you from another area.

Margaret: OK I appreciate that.

Female: Thank you very much.

Female: Thank you.

James Herren: Thank you, Sally and Stacy thank you very much.

Female: You are welcome, thank you. Thank you for having us.

James Herren: And we will go ahead and move now to the general part of the Q&A. I did want to mention a few things before we start. We would like to remind suppliers that when you receive a CO173 or CO176, that is an ANSI code 173 or 176 denial you are allowed to resubmit those claims with the proper documentation attached. It is not necessary to submit those claims to re-openings or re-determinations for resolution.

For instance if you submit an initial oxygen claim and fail to append the CMN you will receive a denial from missing documentation or an ANSI code 173 or 176 you can resubmit the claim to CIGNA Government Services with the CMN attached. Please do not send these claims to re-openings or re-determinations. When you send these claims to re-openings and or re-determinations it creates an unnecessary delay in the processing of your claim and then will delay your payment.

So again, when receiving a denial with ANSI code 173 or 176, your resolution will be to submit the claim with the proper documentation attached.

Also one final thing before we take calls, if you find yourself in the Miami or Orlando area or you happen to live in the Miami or Orlando area or if you would like to come see us, provider outreach and education will be having workshops in Orlando on July 14th and Miami on July 16th.

The workshops will be all day events and will cover a variety of issues; we will have someone from the competitive bidding contractor there. We'll discuss CIGNA Government Services role in competitive bidding. We'll go over some top denials and resolutions; we'll also discuss CERT error rates and ways that we can reduce error rates and how they will benefit the supplier community, so we would love to have you there. Please visit our web site, CIGNAgovernmentservices.com, the Jurisdiction C portion of it, look under education and you'll see a link for our web site or our workshop.

So again if you'd like to come see us, we would love to have you out there. We'll also have future workshops in the coming months; just check that web site as well.

So, now, Kimberly, will go ahead and turn the call over to general portion of the act call for us.

Kimberly?

Operator: Yes, sir.

James Herren: If you're ready, we'll go ahead and take the first call.

Operator: Thank you; once again as a reminder, that's star one if you have a question.

Male: No one holding for us, Kimberly?

Operator: It appears we have no questions at this time, sir.

Male: OK, just as a reminder we are here for the next 40 minutes or so, and we would love to answer your questions, we have a room full of experts here, at least I think they're experts. So if you have a question or two for us, please feel free to ask.

Operator: Thank you. Once again as a reminder to our audience, that is star one if you have a question or comment today.

James Herren: I'm going to start singing pretty soon and nobody wants that, OK, so feel free to ask.

Operator: And it does appear we still have no questions at this time, sir.

Male: Well, OK. In that case since we've answered everyone's questions today, Kimberly, we can wrap this up.

Operator: Thank you. Ladies and gentlemen, that does conclude today's teleconference. We would like to thank everyone for their participation in today's call, have a great rest of your day.

END