

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)
Transmittal 819	Date: August 17, 2018
	Change Request 10876

SUBJECT: Adding a Targeted Probe and Educate (TPE) Sub-Section Into Section 3.2 of Chapter 3 in Publication (Pub.) 100-08

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to create a new sub-section in section 3.2 of Chapter 3 in Pub. 100-08 that will cover the TPE process for medical review.

EFFECTIVE DATE: September 17, 2018

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: September 17, 2018

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	3/Table of Contents
N	3/3.2/3.2.5/Targeted Probe and Educate (TPE)

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

**Business Requirements
Manual Instruction**

Attachment - Business Requirements

Pub. 100-08	Transmittal: 819	Date: August 17, 2018	Change Request: 10876
-------------	------------------	-----------------------	-----------------------

SUBJECT: Adding a Targeted Probe and Educate (TPE) Sub-Section Into Section 3.2 of Chapter 3 in Publication (Pub.) 100-08

EFFECTIVE DATE: September 17, 2018

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: September 17, 2018

I. GENERAL INFORMATION

A. Background: On October 1, 2017, CMS and the MACs implemented the national TPE Program. This program was preceded by two pilots (the first was implemented in August of 2016, and the second was implemented in July of 2017). Updates to the reporting were also sent via CR and Technical Direction Letter.

This CR will add a new sub-section to section 3.2 of chapter 3 in Pub. 100-08 regarding the TPE medical review process.

B. Policy: This CR does not involve any regulatory, legislative or statutory changes.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
10876.1	The contractor shall use this section as overall guidance regarding the TPE medical review process.	X	X	X	X					

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
---------------------------------	---

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Heather Wetherson, 410-786-5657 or Heather.Wetherson@cms.hhs.gov , Dr. Scott Lawrence, 410-786-4313 or Scott.Lawrence1@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0

Medicare Program Integrity Manual

Chapter 3 - Verifying Potential Errors and Taking Corrective Actions

Table of Contents *(Rev. 819)*

Transmittals for Chapter 3

3.2.5 - Targeted Probe and Educate (TPE)

3.2.5 - Targeted Probe and Educate (TPE)

(Rev. 819; Issued: 08-17-18; Effective: 09-17-18; Implementation: 09-17-18)

This section applies to MACs.

A. Overview

The purpose of Targeted Probe and Educate (TPE) is to decrease provider burden, reduce appeals, and improve the medical review/education process.

This section describes requirements that MACs shall follow when performing medical review as part of TPE.

TPE reviews can be either prepayment or postpayment and involve MACs focusing on specific providers/suppliers that bill a particular item or service.

A round of TPE typically involves the review of 20-40 claims, per provider/supplier, per service/item, and corresponding education. In rare circumstances, CMS may approve a probe sample of other than 20-40 claims. This process is repeated for up to three rounds. MACs discontinue the process if/when providers/suppliers become compliant. Providers/suppliers who remain non-compliant after three rounds of TPE are referred to CMS for further action.

B. Provider Selection

The MACs shall initiate a provider-specific, prepayment or postpayment review based upon data analysis, as discussed in §3.2.1. MACs shall also initiate targeted, provider-specific, prepayment or postpayment review upon referral from the Recovery Auditor Contractor (RAC), Comprehensive Error Rate Testing (CERT), Unified Program Integrity Contractor (UPIC), Office of Inspector General (OIG), or Government Accountability Office (GAO) when directed by CMS. MACs shall target providers/suppliers who have historically high claim denial rates, who have billing practices that vary from their peers, or when evidence suggests that there is a potential risk to the Medicare Trust Fund.

Probe Selection

The MACs shall select probe samples of typically 20-40 claims. Probe samples of different sizes may be deemed appropriate on a case-by-case basis, with approval by CMS.

Provider Notification Letter

The MACs shall send a notification letter to providers/suppliers being targeted for review that:

- Outlines the targeted probe & educate process,*
- Explains the process by which providers/suppliers will be able to receive one-on-one education and the types of education that will be available,*
- Notifies providers/suppliers that MACs shall have the option to refer providers/suppliers to the RAC or UPIC as a result of non-response to Additional Development Requests (ADRs), and*
- Includes the following language to remind providers of 42 CFR §424.535*

“In addition, we remind you that our regulation at 42 CFR §424.535 authorizes us to revoke Medicare billing privileges under certain conditions. In particular, we note that per 42 CFR §424.535(a)(8)(ii), CMS has the authority to revoke a currently enrolled provider or supplier’s Medicare billing privileges if CMS determines that the provider or supplier has a pattern or practice of submitting claims that fail to meet Medicare requirements.”

C. TPE One-On-One Education

For the TPE process, one-on-one education is defined as teleconference calls, face-to-face visits, electronic visits using webinar technology, or other similar technologies that enable direct communication between the MAC educator and the provider/supplier. MACs shall record these activities in monthly reporting to CMS as well as document and maintain the results of the education, and/or attempts for education, for data analysis and possible future reporting.

Intra-Probe Education

The MAC may identify errors in the claim(s) that can be easily resolved during the course of provider's/supplier's probe reviews. Easily curable errors include, but are not limited to, missing documentation that can be resolved through the submission of additional documentation and missing signatures that can be resolved with a signature attestation. When the MAC identifies an easily curable error, the MAC shall contact the provider to address the error and allow the provider to submit missing documentation, etc.

Post-Probe Education

The MAC shall contact the provider/supplier via telephone (or face-to-face, electronic visits using webinar technology, or other similar technologies as they become available) to offer a one-on-one educational session after each round of probe review. If the provider/supplier declines the offer for one-on-one education, MACs shall maintain record of the effort and the reason for denial. The purpose of this one-on-one education is to:

- 1) Alert the provider of errors identified and how they may be resolved for future claim submissions; and*
- 2) Provide education regarding the review topic to help prevent new issues from arising during future rounds of review. This post-probe one-on-one education should be individualized, claims-specific, and conducted in a format that is interactive, allowing the provider/supplier to ask questions as needed.*

The MAC shall provide a minimum of 45 days after each post-probe educational session, before selecting new claims for review, to allow time for the provider/supplier to cure identified errors.

D. Post-Probe Activity

Final Results Letter

The MAC shall send the provider/supplier a letter detailing the results of the claims reviewed at the conclusion of each round of review. The MAC shall include details regarding the provider's/supplier's specific claim errors.

Determining the Need for Additional TPE

The MAC shall calculate the provider/supplier claim error rate at the conclusion of each round of TPE. The MAC shall use the provider/supplier claim error rate to determine whether an additional round of TPE is appropriate.

Closure and Monitoring

The MAC shall conduct a maximum of three rounds of TPE. If a provider/supplier continues to have a high error rate at the conclusion of three rounds of TPE, the MAC shall refer to CMS for further action.

A provider/supplier may be removed from TPE after any round if they demonstrate low error rates or sufficient improvement in error rates, as determined by the MAC. MACs shall use data analysis to monitor the providers/suppliers who have been discontinued from the TPE process. MACs shall conduct follow-up

review in one year or sooner if data analysis indicates changes in billing patterns or when potential risk to the Medicare Trust Fund is identified.

E. Referrals

The MAC shall refer providers/suppliers for potential escalation to CMS at their discretion after three rounds of TPE review. Referrals shall include details regarding the reason the provider/supplier was selected for TPE review, TPE review results, any education provided (or offered and refused), and any other relevant information that may be helpful in determining appropriate next steps.

The MAC shall refer suspected fraudulent providers to the UPIC at any time during the TPE process.