

September 2017

### Who Will be a Target for Probe and Educate?

The Centers for Medicare & Medicaid Services (CMS) has announced a new auditing strategy - Targeted Probe and Educate (TPE) - to begin before the end of 2017. Some physician anesthesiologists may have already seen TPE when it was a pilot program. TPE was initiated in one Medicare Administrative Contractor (MAC) in June 2017. It expanded to three MACs in July 2017 and is to expand to all MACs later this year. Each MAC will be responsible for TPE in its jurisdiction, including the selection of the topic for review as well as the providers most likely to be submitting non-compliant claims.

TPE is part of CMS's attempts to prevent improper payments in a manner that does not increase the administrative burden on providers, and reduce the number of appeals. Each MAC, through TPE, will target only selected providers of a service rather than all who deliver that service. Specifically, data analysis will be used to identify statistical outliers in the historical claims billing data to identify specific providers. Once identified, the probe will include a request for medical documentation to be used in the review of 20 to 40 claims. These could be pre-or post-payment reviews. The MAC will report the audit results to the targeted provider along with specific education if the claims and/or documentation are non-compliant with billing requirements.

TPE will include up to three rounds of targeted probes. The number of rounds will depend on the results of each audited round. After rounds one and two, the MAC will provide education regarding the errors identified in the audit. Once that education has been provided, the MAC will allow at least 45 days between rounds for the targeted provider to make the recommended changes in billing before conducting the next probe. If the review shows claims and supporting documentation to be "error-free", the TPE process for that provider will be discontinued for at least one year. The MAC will continue to track that provider's claims via data analysis to determine if additional probes are needed at the end of the year period.

On the other hand, if high claim errors are still found at the third round, the MAC may refer the provider to CMS for possible further action. Such action can include extrapolation of percentages of past claims for repayment to CMS, on-going prepayment audits, and/or referral to other CMS auditing and fraud contractors.

CMS hopes to see continued success in the expansion of this program which the agency states could be demonstrated by "an increase in the acceptance of provider education as well as a decrease in appealed claims decisions".

For more information on TPE, please see:

[CMS Targeted Probe and Educate \(TPE\)](#)  
[TPE Pilot Flow Chart \(08/14/17\)](#)  
[Medicare Program Integrity Chapter 2 – Data Analysis](#)  
[CMS Change Request 10249](#)  
[Reducing Provider Burden](#)