

NGS Medicare Virtual Conference

Fall 2021

Targeted Probe and Educate

11/9/2021



Today's Presenters

- Provider Outreach and Education Consultants
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 - Gail O'Leary
 - Michelle Coleman, CPC

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- Attendees/providers are **never** permitted to record (tape record or **any** other method) our educational events
 - This applies to our webinars, teleconferences, live events and any other type of National Government Services educational events

Objectives

- To gain an understanding of the targeted probe and educate process including documentation timeframes, record requests and where to find helpful resources to assist with record preparation
- Goal: Assist in reducing your claim denials and appeals

Agenda

- NGS Medical Review
- Targeted Probe and Educate
- Record Preparation and Submission
- FISS DDE
- NGSConnex Secure Portal
- References and Resources

NGS Medical Review

Objectives for Medical Review Activities

- Objectives of medical review
 - Identify and prevent inappropriate payment
 - Identify potential risk to the Medicare Trust Fund
 - Educate providers
 - Decrease provider burden
 - Appropriately pay for covered services
- **Note:** Not included in TPE medical review
 - Automated claim reviews
 - Prior authorization requests

NGS Prepayment Review Versus Postpayment Review

- NGS Prepayment review
 - Reviewer makes “initial determination” on claim; prior to claim payment
 - Example: TPE
- NGS Postpayment review
 - Reviewer makes a claim determination after the claim was initially covered by Medicare
 - Determination may result in
 - No change to initial determination
 - Revised determination
 - Either overpayment or underpayment

COVID-19 Public Health Emergency and Medical Review

- 3/30/2020 – CMS suspended most Medicare FFS medical review – included TPE and postpayment reviews
- 8/17/2020 – MACs resume postpayment review of items/services with DOS prior to 3/1/2020
 - CMS Program Integrity efforts to protect the Medicare Trust Fund against inappropriate payments
 - Update: Effective 9/1/2021, NGS Medical Review is no longer sending Postpayment Additional Documentation Requests

Update

- Targeted Probe and Educate reviews restarted effective 9/1/2021
 - Old rounds of TPE in progress prior to the PHE are closed
 - One-on-one education remains available regarding our postpayment reviews and Comparative Billing Reports per request
 - * Reminder: Case Management mailboxes are for educational purposes only
 - * Do not send PHI to these mailboxes*
 - » J6ACaseManagement@Anthem.com
 - » JKACaseManagement@Anthem.com

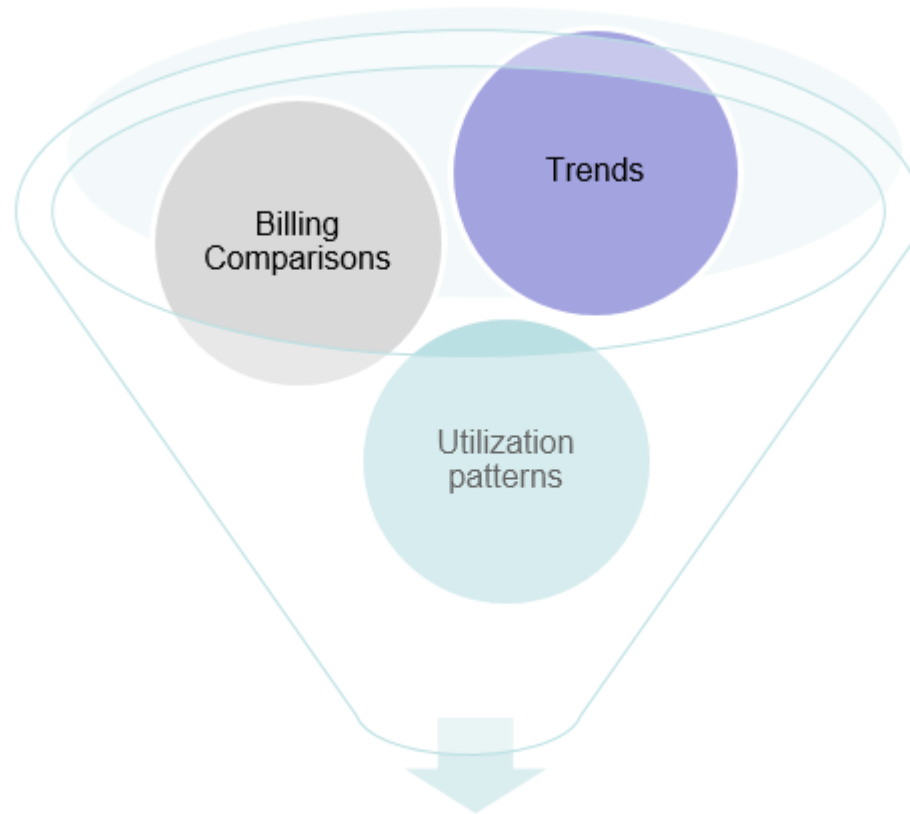
Part B Case Management Mailboxes

- Reminder: Case Management mailboxes are for educational purposes only
 - jkbprobe&educate@wellpoint.com
 - j6bprobeandeducate@wellpoint.com

TPE Education for Providers

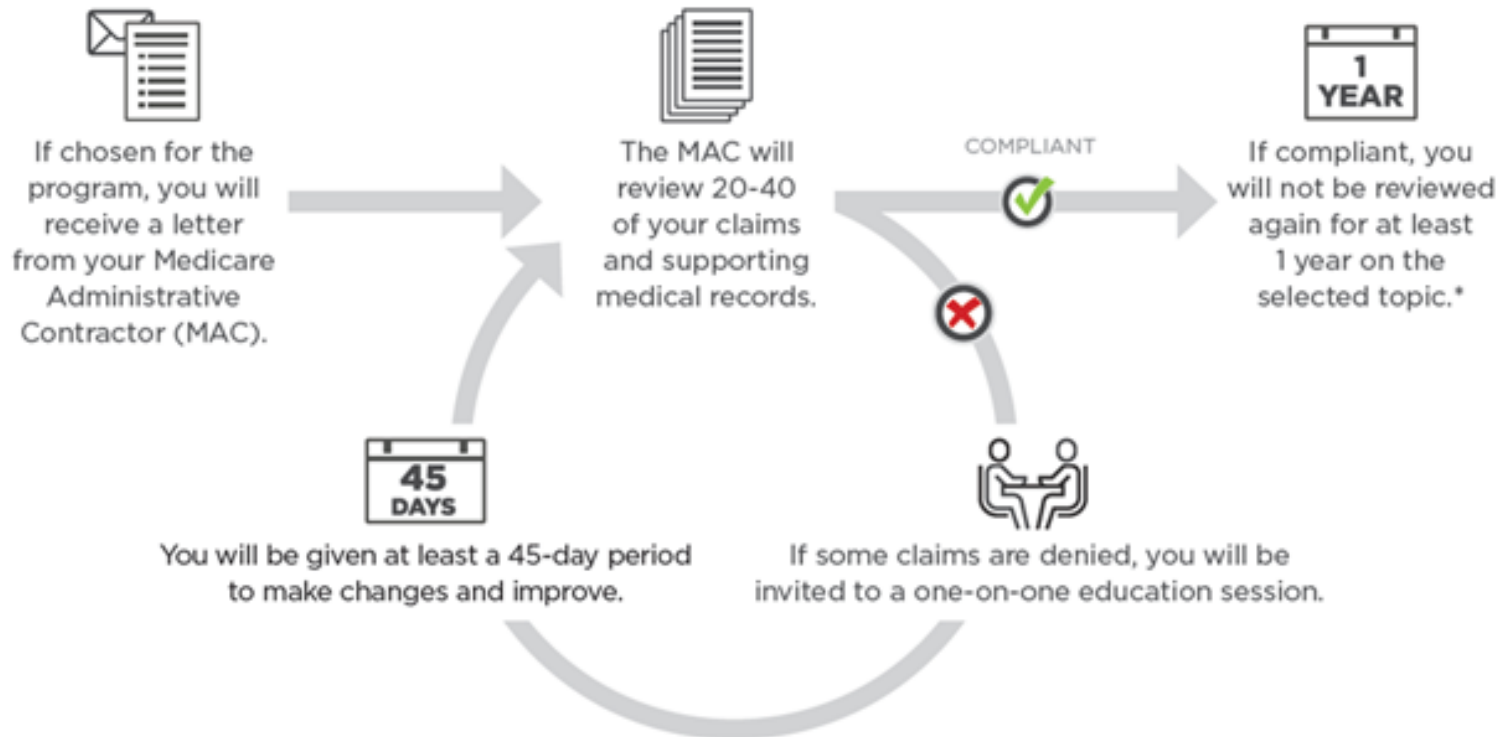
- You are encouraged to take advantage of TPE education when offered
 - **Essential:** Provide a point of contact with a working phone number and email address
 - **Suggestion:** Designate specific staff with clinical knowledge to handle TPE claims and education

Data Analysis



Data Analysis

How Does TPE Work?



**MACs may conduct additional review if significant changes in provider billing are detected*

Validation Phase

- Medical review of records for
 - Technical components
 - Physician certifications
 - Physician orders
 - Beneficiary election statements
 - Eligibility
 - Medicare coverage guidelines
 - Medical necessity
 - Documentation supports the services billed

Common Reasons for Denial

- Signature of the certifying physician was not included
- Encounter notes did not support all elements of eligibility
- Documentation does not meet medical necessity
- Missing or incomplete initial certifications or recertifications

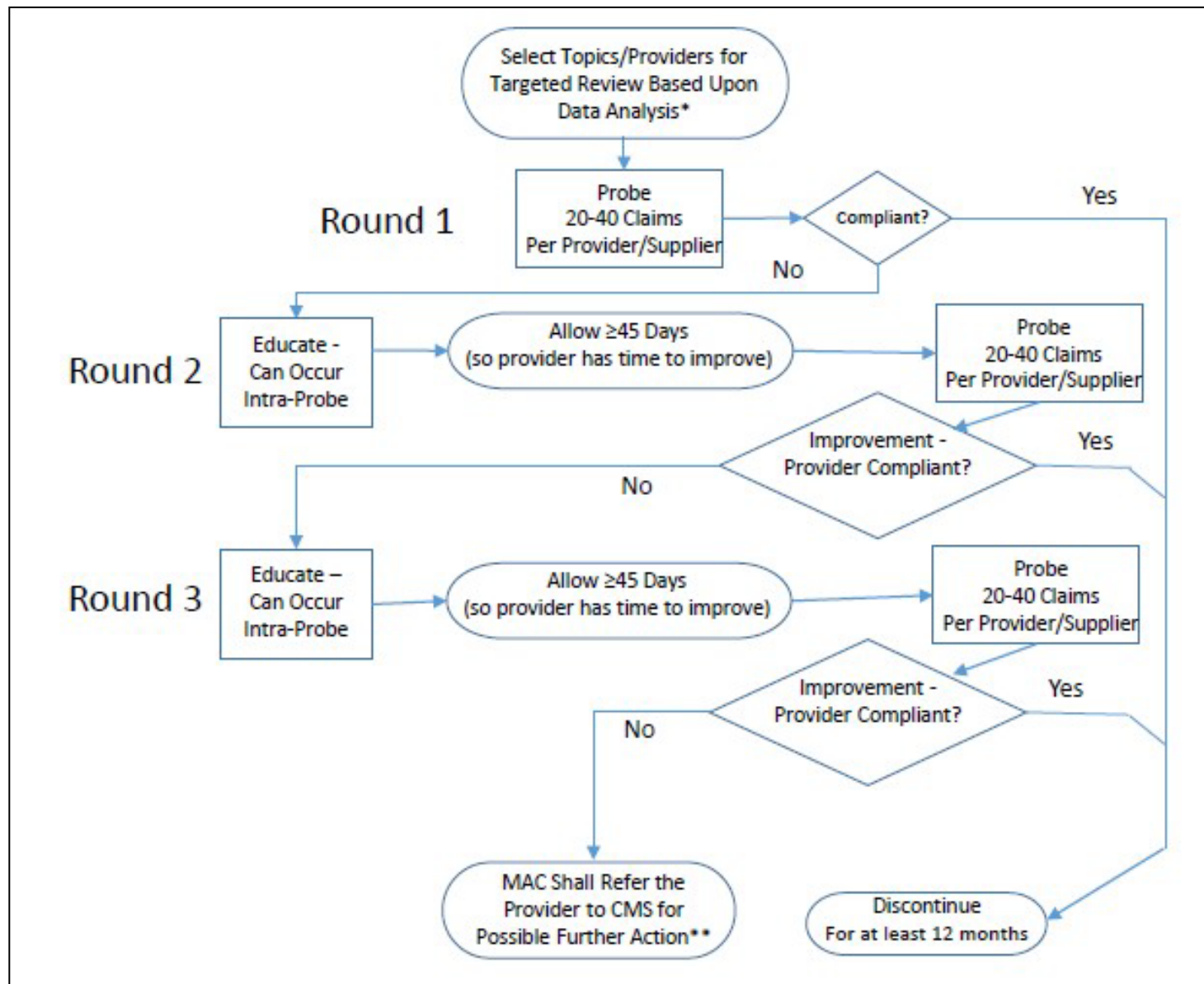
Appealing a Medical Review Decision

- All medical review decisions can be appealed and do not change the appeal process
 - First level of appeal is the redetermination
 - 120 days from date of receipt of the initial determination notice
 - May file an appeal
 - As soon as possible
 - Do not wait for final results letter or until education is completed!
 - Submit via
 - Your MAC provider portal (e.g. NGSConnex)
 - Mail

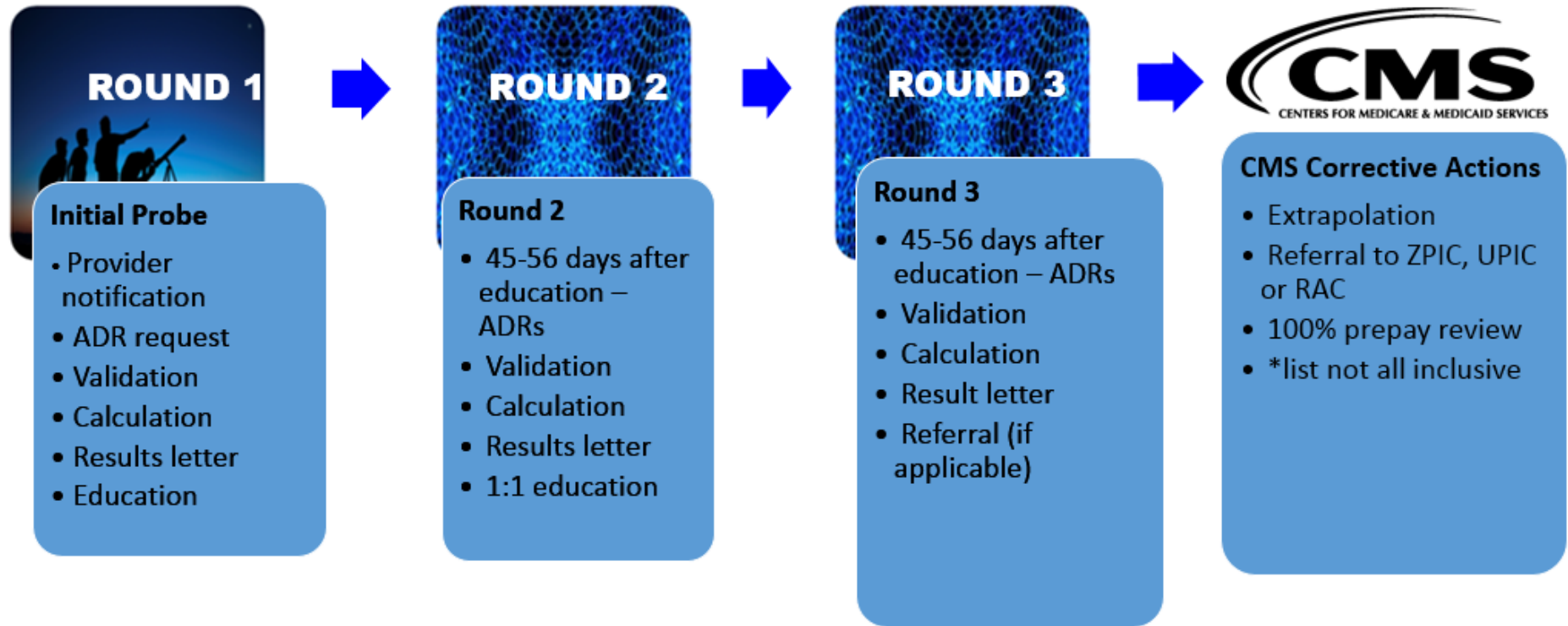
Targeted Probe and Educate

Medical Review TPE History

- TPE process became effective 10/1/2017
 - All lines of business
- TPE History
 - Demonstration projects for inpatient services and home health
 - Proved successful in lowering providers payment error rates
 - The TPE model changed some of the process but does not affect policy and procedures



TPE Process



Initial Probe (Round 1)

- During the initial probe providers can expect
 - Provider Notice of Review – Targeted Probe and Education includes
 - Reason for review
 - Request of between 20–40 claims
 - Do not send any documentation in response to this notification
 - Facility/office will be notified via ADR letter on each claim selected for review
 - Nonresponders may be referred to the RAC, ZPIC, or UPIC
 - Medical review will review documentation within 30 days of receipt
 - Medical review will make contact for one-on-one education upon completion of review
 - Automated reviews and prior authorizations are not part of the TPE program

Additional Rounds of Review

- TPE consists of three rounds, if the provider continues to have a high payment error rate
 - Initial Probe
 - Round 2
 - Round 3
- Additional rounds of review will include
 - One-on-one education with medical review after each round of review
 - Additional development request approximately 45-56 days after the education is complete
 - Detailed results letter

CMS Referral

- After three rounds of review and continued high denial rates CMS may instruct NGS as to any additional action which might include
 - Extrapolation
 - Referral to the Unified Program Integrity Contractor
 - Referral to the recovery audit contractor
 - 100 percent prepay review

Documentation Request

- Probe
 - ADR between 20–40 claims from the provider
 - Provider notification letter will advise your agency of how many claims will be requested
 - Provider has 45 days (based on ADR date) to respond to the contractor with medical records
 - This includes mail time and contractor processing time to a medical review location
 - Highly recommend as an internal best practice of sending documentation within 35-40 days
 - No response counts as an error

Calculations

- Medical review will calculate the providers payment error rate based on the payment determination made in medical review
 - Nonresponses are included in the calculation
- Payment error rates will not be adjusted based on the outcomes of the appeals process
 - Additional documentation is often received at the time of appeal that was not available at the initial medical review level
 - This is not a change from current medical review process

Detailed Provider Results Letter

- Detailed results letter at the conclusion of each round will include
 - Outline the TPE process
 - Reason for denials including the Medicare regulations
 - Denial rates – Payment Error Rate
 - Release or retention from medical review
 - Typically a PER of 15 percent or less in order to be released from additional rounds of review
 - One-on-one education information
- Read the letter in its entirety for important information regarding additional rounds of review

TPE: Common Questions

- If I appeal a TPE finding and it is overturned, does this impact my denial rate?
 - It would be taken into consideration in subsequent TPE rounds
 - If referred to CMS, CMS takes appeal results into consideration when determining need for additional action

TPE: Common Questions

- Are previous review results used to determine who will be included in the TPE process?
 - Previous results are one source of data used to select providers for review
 - CMS encourages MACs to use all available sources of data, such as billing and utilization patterns and provider-specific error rates

TPE: Common Questions

- What happens if there are errors found in the claims that are reviewed?
 - Providers will be sent a letter detailing the results of the reviews and offering a one-on-one education session
 - NGS will educate providers throughout the TPE review process, when easily resolved errors are identified

TPE: Common Questions

- What can providers expect during a one-on-one education session?
 - During a one on-one education session (usually held via teleconference), NGS will walk through errors in the claims
 - The provider will have the opportunity to ask questions regarding their claims and the policies that apply to the service reviewed

TPE: Common Questions

- Is each round of education furnished provider specific or general education given to all providers?
 - The education session in each round is developed based on the review findings and is not the same unless errors found in the reviewed claims are the same

TPE: Common Questions

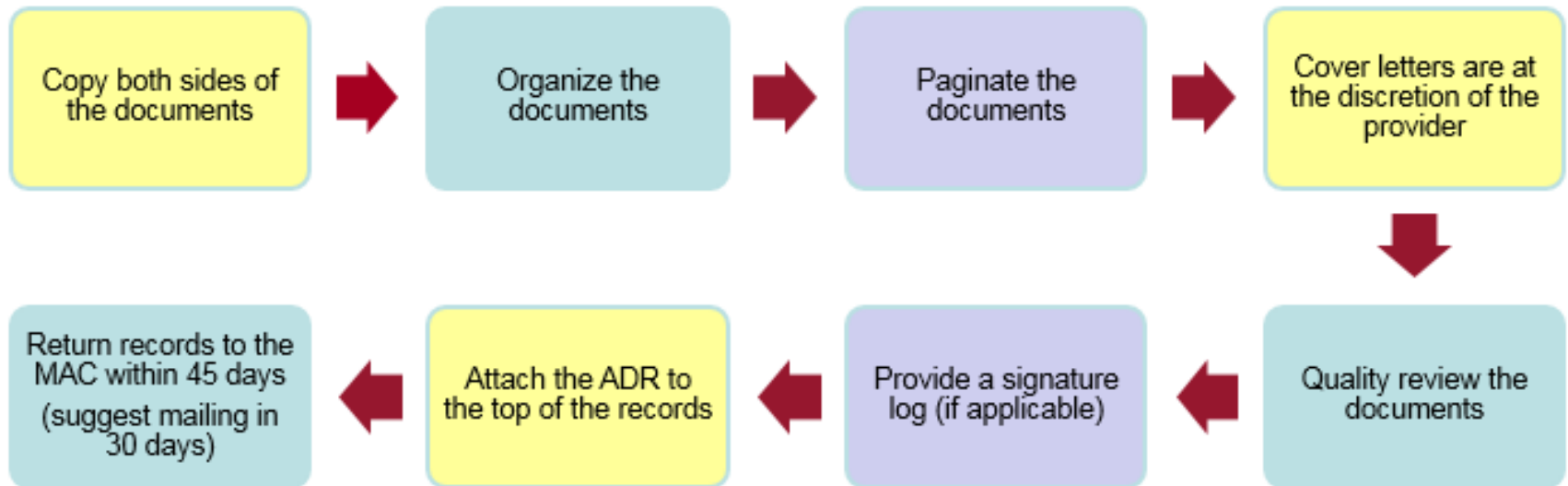
- If an additional round of review is required, when will it start?
 - Claims with dates of service no earlier than 45 days after the previous probe one-on-one education
 - Gives providers time to make changes based on education received
 - If no one-on-one education scheduled, subsequent reviews occur on claims with dates of service no earlier than 45 days from education offer

TPE: Common Questions

- Can providers be included in multiple TPE probes at the same time?
 - Yes, if a provider has multiple PTANs/NPIs, each NPI could be subject to TPE review
 - Additionally, if a provider submits claims to Medicare for more than one service, each service could be subject to a separate probe

Record Preparation and Submission

Preparing Your Documentation



Preparing Your Documentation



Helpful Tips

- Speak to whomever handles your mail to watch for and act quickly upon receipt of correspondence from NGS (contains notification letter)
 - NGS MR results letter is sent in a pink envelope
- Designate someone at your facility/practice location to handle these requests
 - ADR provides method to submit contact person
- If you do not see ADRs within one month of the notification letter use the mail address in the letter to contact us
 - ADRs might be going to a different address

Helpful Tips

- Provide contact person upon receipt of notification letter including
 - Name
 - Email address
 - Phone number
- Ask a clinician to check the records to ensure correct documentation is submitted
- Please be sure reach out for education within two weeks of receiving your results letter

Ensure Timely Response to ADR

- Responding to an ADR
 - Avoid claim processing delays
 - Respond in complete/timely manner
 - CMS allows 45 days from the date of the ADR
 - NGS recommends responding within 35-40 days
 - NGS [“Additional Development/Documentation Request Timeline Calculator”](#)
 - Send each response separately and attach a copy of corresponding ADR
 - Include all records necessary to support the services for the dates requested
 - No response counts as an error

J6 Part A

Submission of Medical Record Documentation



NGSConnex
esMD



National Government
Services Inc.
8115 Knue Rd
Indianapolis, IN 46250
Attn: Mail &
Distribution



National Government
Services Inc.
PO Box 6474
Indianapolis, IN
46206-6474



FAX: 315.442.4154

Always check www.NGSMedicare.com for the most current information

JK Part A

Submission of Medical Record Documentation



NGSConnex
esMD



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8115 Knue Road
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Distribution



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46207-7108



FAX: 315.442.4390

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J6 Part B

Submission of Medical Record Documentation



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esMD



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46206-6475



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JK Part B

Submission of Medical Record Documentation



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esMD



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Services Inc.
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Indianapolis, IN
46207-7108



FAX: 315-442-4231

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CD/DVD to Submit Medical Records

- Records should be submitted in PDF format via an encrypted electronic media (CD, USB)
- To protect PHI, encryption using Secure-Zip is suggested
- Please do not submit the password information with the CD
- Provide the password in a separate mailing
- Each beneficiary should be saved as a separate file
- Please provide a contact name and phone number in the event an electronic media cannot be opened or read
- Electronic media that cannot be read or opened will be returned after five days with no response

NGS Contact Information

- Check for updates to contact information, including mail address and more
 - Log into [NGS Website](#) with your contract LOB and state > Resources > Contact Us

NGSConnex Secure Portal: Preferred Method to Submit Medical Records and More

NGSConnex

- Medical Review Additional Documentation Requests Portal
 - View ADR letter content to help ensure you submit required documentation
 - Respond to medical review ADRs
 - Submit supporting documentation electronically
 - Obtain detailed status information on MR ADR
 - Regardless of who from your provider organization responded or how it was responded to (i.e., electronically, mail, etc.)

NGSConnex

- View detailed ADR status information such as
 - Date documentation was received
 - Date the nurse started to review your documentation
 - Date the nurse completed the review of your documentation
 - Nurse review decision
 - Appeals outcome
- Not yet registered for NGSConnex?
 - Visit [NGSConnex](#) and click 'New User' to register today
- Registration instructions can be found on [NGSConnex web page](#) and video tutorials are available to you on our [YouTube channel](#)

Benefits of NGSConnex

- Benefits of NGSConnex
 - Saves time
 - More dependable than a fax or mail, you will receive a confirmation that your records were received and you will be able to see the documentation you submitted
 - Ensures NGS receives your documentation submissions the same day sent
 - Saves money (no postage/copy fees)
 - Access via [NGS Website](#)
- *Please use Google Chrome, Microsoft Edge, Mozilla Firefox, or Apple Safari browsers to access*

References and Resources

CMS Resources

- CMS website: [Targeted Probe and Educate \(TPE\)](#)
- CMS YouTube Video: [Targeted Probe and Educate – 2019 CMS National Provider Compliance Conference](#)
- CMS YouTube Video: [Targeted Probe and Educate](#)

CMS Resources

- CMS YouTube Video: [Provider Minute: The Importance of Proper Documentation](#)
- CMS [Targeted Probe & Educate Flow Chart](#)
- CMS website: [Reducing Provider Burden](#)
- CMS CR10249, effective 10/1/2017: [Targeted Probe and Educate](#)

NGS Resources

- NGS Resources > [Medicare Compliance](#) > [NGS Medical Review Process](#)
- NGS Resources > [Medicare Compliance](#) > [Targeted Probe and Educate](#)
 - Includes specific information on submitting medical records
 - Ensure you are on correct contract and jurisdiction
- NGS YouTube Video: [Targeted Probe and Educate \(TPE\) Medical Review Strategy](#)

NGS Resources

- [Part A TPE Manual](#)
- [Part B TPE Manual](#)
 - What is the Targeted Probe and Educate?
 - Notification Letters
 - Address Corrections for Providers
 - Additional Development Request Letters Overview
 - How to Find and Respond to TPE ADR
 - Methods for Submitting an ADR
 - Medical Review Portal in NGSConnex
 - Results Letters
 - Tips for Common Issues
 - Medial Documentation Signature Requirements
 - Part A Denial Reason Finder
 - Part B Frequently Used Denial Reasons and top Claim Denials
 - Appeals

NGS Resources

- Part A: [NGSConnex Information](#)
- Part B: [NGSConnex Information](#)
 - Note: NGSConnex is the preferred method for submission of medical records documentation
- Mailing addresses, and additional information about contacting NGS: go to the **Resources** section on [NGS Website](#) and select “**Contact Us**”
 - Ensure you log in with your LOB and Jurisdiction!

NGS Resources

- YouTube Video [*How to Use the Medical Review Additional Documentation Request Portal in NGSConnex*](#)
 - Comprehensive self-service tool
 - Respond to medical review ADRs
 - View a list of all claims for which a medical review ADR letter was issued
 - Check status and obtain detailed information about claim selected
 - Examples: Date documentation received; Date nurse started documentation review; Date nurse completed documentation review; Nurse review decision; Appeals outcome

Thank You!

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

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