

## **What You Don't Know About A CERT Claim Review That May Have Consequences For You And Your Peers**

You should be familiar from the numerous Medicare contractor bulletin articles, website articles, and meetings/workshops of the Medicare Comprehensive Error Rate Testing (CERT) program. You may have even had a claim selected for review by the CERT contractor but if you haven't already you may in the future. The CERT contractor's review of your claims is the first of a cascade of steps in Medicare's global payment safeguard program process.

The Medicare global payment safeguard program process consists of the CERT contractor, the Medicare administrative contractors (MACs), the payment safeguard benefit integrity contractors (PSCs, but soon to be called ZPICs), and the recovery audit contractors (RACs). The payment safeguard process begins with the CERT contractor reviewing a sample of claims from each MAC's region. Areas of the CERT contractor's denials, i.e. the services and/or provider types denied, are likely to then become the focus of the MACs' medical reviews. Those areas of focus by the MACs are likely to then become targets of the ZPICs and/or the RACs if the MAC makes a lot of denials in those areas or suspects fraud.

At the CERT level and the initial phase of the MAC level of the payment safeguard process not only are the CERT sampled providers with payment errors identified for individual progressive corrective action but so is their peer group if the overall CERT payment error rate for the peer group is significant. The MAC attempts to refine its review over time to focus only on the problem providers. The ZPICs and the RACs will either focus their review on individual providers or peer groups.

Therefore, it's extremely important to you and to your provider peer group that you respond thoroughly to the CERT contractor's review of each of your claims. Because the CERT contractor's review is a sample that then gets extrapolated there is no claim dollar value that is too small to respond to. If one of your claims is denied by the CERT contractor and you feel the denial decision was incorrect then you may submit an appeal to the MAC. CERT denials that are reversed during the appeals process are ultimately factored out of the payment error rate.

In order to prevent the cascade of payment safeguard events described above happening to yourself and to your peers you need to aggressively respond to each claim that the CERT contractor requests to review. If you are following Medicare billing, documentation, and coverage and policy instructions then you should be prepared. Don't let what you now know about a CERT claim review lead to consequences for you and your peers.