

CMS accelerates Medicare Advantage audits: A practical guide to staying compliant in 2025 (+checklist)



DOCTUSTECH

Side-by-side grid: documentation, coding, and operational gaps

| Doc | Coding | Ops | Notes |
|-----|--------|-----|-------|
| ... | ... | ... | ... |
| ... | ... | ... | ... |
| ... | ... | ... | ... |
| ... | ... | ... | ... |

Urgency levels: what to do now

When everything feels urgent, it helps to sort tasks by priority. Here's a framework to help you decide what to fix first, what to automate, and what to keep an eye on.

- Fix Immediately**
 - Train providers on MEAT documentation.
 - Review high-risk charts before submission.
 - Clean up known data inconsistencies.
- Automate**
 - Train providers on MEAT documentation.
 - Review high-risk charts before submission.
 - Clean up known data inconsistencies.
- Monitor**
 - Train providers on MEAT documentation.
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CMS just raised the stakes: every Medicare Advantage plan will now face annual audits, with thousands of new auditors and faster clawbacks. It's not if you'll be audited—it's when.

Overwhelming? Maybe. But with the right prep, you can stay ahead and avoid costly surprises.

This guide breaks down what's happening in plain language, no jargon, no legalese. Inside, you'll find:



- A clear timeline of what's changing and when.
- The most common gaps in documentation, coding, and operations that lead to revenue clawbacks.
- An easy framework to decide what to **fix immediately, automate, and monitor**.
- Quick wins you can put in place within 30 days.

Whether you manage coding, oversee compliance, or support providers, this resource will help you get your team ready, stay compliant, and protect your revenue without adding extra headaches.

Summary of the new CMS audit expansion & timeline

Here's what's driving all the urgency right now. In June 2025, CMS announced a comprehensive new strategy to enhance oversight of Medicare Advantage plans. This isn't a minor tweak; it's a significant shift in how audits will work going forward.

But what exactly is changing?

- **Annual RADV audits for everyone**
Until now, many contracts have been selected randomly for review. From now on, every eligible MA contract will be audited annually.
- **Thousands of new auditors**
CMS is adding 2,000 auditors to handle the volume. That means more eyes on your data and a lower chance of it slipping through the cracks.
- **Closer partnership with the OIG**
CMS and the Office of the Inspector General are teaming up to identify and recover overpayments more quickly.
- **Accelerated clawbacks**
When unsupported diagnoses are flagged, repayment timelines get much shorter.

Key milestones to know

| When | What happens |
|-----------------|---|
| Q3 2025 | CMS begins sending expanded audit notifications |
| Q4 2025 | The first round of annual RADV audits kicks off |
| 2026 and beyond | Yearly audits of all Medicare Advantage contracts become the new normal |

This shift means plans can no longer afford to be reactive. Staying prepared throughout the year is the only way to avoid rushed clean-ups—and costly repayments—once the audit notice arrives

In summary...

- **Expect annual scrutiny:**
You can no longer rely on random sampling to avoid review.
- **Faster repayment demands:**
If diagnoses are not supported, repayment deadlines will be tightened.
- **Higher operational burden:**
Coders, clinicians, and compliance teams must work in sync.
- **Increased visibility:**
Audit findings may be shared publicly, potentially impacting star ratings and reputation.
- **Automation is essential:**
Manual workflows alone can't keep up.



Remember:

These changes affect every part of your organization, from coding to compliance to provider documentation. Staying ahead requires a shared understanding across all teams.

Side-by-side grid: documentation, coding, and operational gaps

It can be tricky to keep track of where gaps happen and which ones are most likely to trigger clawbacks. This simple grid lays it all out so you can see your risks at a glance.

| Area | Common Gaps | Impact | Urgency |
|----------------------|--|------------------------------------|--------------------|
| Documentation | <ul style="list-style-type: none">- Insufficient MEAT evidence- Copy-pasted A&Ps (Assessment and Plan)- Missing progress notes | Clawbacks due to a lack of support | Fix immediately |
| Coding | <ul style="list-style-type: none">- Missed chronic conditions- Upcoding/downcoding | Incorrect risk scores and revenue | Automate / Monitor |
| Operational | <ul style="list-style-type: none">- Delayed chart reviews- Poor audit preparation- Lack of coder-provider collaboration | Failed audits, increased costs | Fix Immediately |

Use this chart as a quick reference during team meetings or audits. Even one or two gaps can lead to big problems if they aren't addressed early.

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Fix immediately

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Medicare Advantage audit readiness checklist (2025) Quick wins to implement in 30 days

Feeling pressed for time? You're not alone. These quick wins are designed to help you demonstrate measurable progress within the first month.



| Check, if YES | Area | Key Questions to Consider |
|--------------------------|---|---|
| <input type="checkbox"/> | Perform a Focused Chart Audit | <ul style="list-style-type: none">• Pull 100 high-risk charts.• Check for clear MEAT criteria. |
| <input type="checkbox"/> | Update Provider Training Materials | <ul style="list-style-type: none">• Create short guides on 2025 audit expectations.• Emphasize specific examples of compliant documentation. |
| <input type="checkbox"/> | Automate High-Volume Reviews | <ul style="list-style-type: none">• Deploy tools to pre-screen claims for risk.• Prioritize flagged records for manual validation. |
| <input type="checkbox"/> | Establish a Rapid Response Team | <ul style="list-style-type: none">• Designate point people in coding, compliance, and clinical.• Run weekly check-ins on audit readiness. |
| <input type="checkbox"/> | Communicate with Leadership | <ul style="list-style-type: none">• Share an executive summary of the CMS strategy.• Align resources and budget for compliance investments. |

Small improvements now can prevent big headaches later. Even if you only pick a few of these actions, you'll be ahead of the curve when CMS ramps up enforcement.

Get ahead of CMS audits today

Use this guide to train teams, prepare your workflows, and avoid revenue clawbacks.



Want help automating chart review and MEAT validation?

[👉 Schedule a Free Compliance Consultation](#)