

## ***Policies and Procedures – Compliance Office***

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|---|--|------------------------------------|-----------------------------|
| <b>SECTION:</b><br><b>BILLING COMPLIANCE PLAN</b>                               | <b>Approved:</b><br>01/15/01           | <b>Effective Date:</b><br>02/01/01 | <b>Revised:</b><br>01/06/12 |
| <b>CHAPTER:</b><br><b>GENERAL PROCEDURES</b>                                    | <b>Replaces Policy Dated: 03/16/04</b> |                                    |                             |
| <b>POLICY:</b><br><b>RETENTION AND DESTRUCTION OF COMPLIANCE OFFICE RECORDS</b> | <b>Retired:</b>                        |                                    |                             |
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### **I. PURPOSE**

To ensure that documents related to the University's Compliance Plan for Health Sciences Billing and Patient Services (the "Compliance Plan") are maintained, retained and destroyed in a consistent manner and to allow access to necessary documentation to support actions taken under the Compliance Plan.

### **II. POLICY**

The Billing Compliance Office ("Compliance Office") shall maintain, retain and destroy its records and documents related to billing compliance activities in accordance with the procedures set forth in this policy. No record or document shall be destroyed prior to the time period set forth in this policy. After the relevant retention period has elapsed, the Compliance Office may destroy the records and documents in such a manner as to assure confidentiality of any individually identifiable health information that may be contained in those records or documents.

### **III. SCOPE**

This policy applies to the Compliance Office.

### **IV. PROCEDURE**

#### **A. Billing Compliance Committees Minutes of Meetings**

The Compliance Director or his/her designee shall be responsible for creating, maintaining and retaining the original minutes from Billing Compliance Committee meetings. Copies of minutes, with any attachments, shall be distributed to all members of the Compliance Committee for review prior to the next meeting. The Billing Compliance Office shall retain the original minutes, including any attachments, for at least ten (10) years.

#### **B. Audit Documents.**

1. New Provider and Annual Audit Documents. Reports on New Provider and Annual Physician Audits provided by the Creighton Medical Associates Coding Director or Physician Coding Audit personnel shall be retained by the Compliance Office for seven (7) years from the date of the report.

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2. Compliance Office Audits. The Compliance Office shall retain audit records related to audits conducted by the Compliance Office for seven (7) years from the date of the final audit report. Any medical records obtained for purposes of conducting the audits shall be destroyed one (1) year after the final audit report is issued.
  
3. Corrective Action Documents. The Compliance Office shall retain any correspondence it creates or receives from a clinical department related to corrective action taken against a provider for seven (7) years from the date of completion of the corrective action.

**C. Payer Materials**

1. Coding Resources. The Compliance Office shall retain one yearly publication of CPT-4 (or later version); ICD-9 (or later version) and HCPCS for ten (10) years from the end of the calendar year in which it was published.
  
2. Correspondence from Payers. Any written documentation (including e-mails) received by the Compliance Office from a payer representative in response to a question regarding the appropriate method of coding and/or billing for health care services(s), supplies, and/or item(s) shall be retained by the Compliance Office for ten (10) years from the date received.

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### **D. Training Records**

1. Compliance Office Billing Compliance Training Sessions. The Compliance Office shall retain a written copy of each compliance training session he/she conducts for house officers and clinical providers within the School of Medicine for ten (10) years. Any attendance list (including Acknowledgement Forms) maintained by the Compliance Office for any house officer or department compliance training session shall be retained for ten (10) years from the date of the training session.
2. Training Required Under the Corrective Action Policy. Any documented training sessions (including attendance records) conducted under the Corrective Action Plan by the Compliance Office shall be retained for ten (10) years.
3. Orientation Training. The Compliance Office shall track new employee/provider orientation and shall retain the signed Acknowledgment Forms of the Compliance Plan in its files for ten (10) years from the date of signature.

### **E. Suspension of Destruction Authority Granted Under this Policy.**

In the event of a federal or state investigation of billing non-compliance, including allegations of fraud/abuse, violations of Anti-Kickback and/or Stark statutes, all authority granted under this Policy to destroy Billing Compliance records shall be suspended until further notice provided by General Counsel.

### **V. ADMINISTRATION AND INTERPRETATION**

Questions regarding this policy may be addressed to the Compliance Director, or General Counsel.

### **VI. AMENDMENTS OR TERMINATION OF THIS POLICY**

This policy may be amended or terminated at any time.

### **VII. RELATED POLICIES**

Department Audit Guidelines