

Policies and Procedures – Compliance Office

SECTION: BILLING COMPLIANCE	Approved: 01/15/01	Effective Date: 02/01/01	Revised: 03/16/04
CHAPTER: GENERAL PROCEDURES	Replaces Policy Dated: 02/01/01		
POLICY: RETENTION AND DESTRUCTION OF COMPLIANCE OFFICE RECORDS	Retired:		
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I. PURPOSE

To ensure that documents related to the University's Billing Compliance Program are maintained, retained and destroyed in a consistent manner and to allow access to necessary documentation to support actions taken under the Billing Compliance Program.

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 personally 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

1. Billing Compliance Committee. The Compliance Director 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 as soon as possible after the meeting. The Billing Compliance Office shall retain the original minutes, including any attachments, for at least ten (10) years.
2. Billing Compliance Liaison Physician Committee. The Compliance Director shall be responsible for creating, maintaining and retaining the original minutes from the Billing Compliance Liaison Physician

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Committee meetings. Copies of minutes, with any attachments, shall be distributed to all members of the Compliance Liaison Physician Committee and all members of the Compliance Committee as soon as possible after each meeting. The Compliance Office shall retain original minutes, including any attachments for at least two (2) years.

B. Audit Documents.

1. New Provider Audit Documents. New Provider Audit findings submitted to the Compliance Office shall be retained for three (3) years from the date the New Provider Audit findings are approved by the Compliance Office and the new provider's billing flag is initiated. The Compliance Office shall destroy any medical records that may be submitted by the Department in support of the New Provider Audit after the findings have been confirmed by the Compliance Office.

2. Regular Department Audit Documents. Department audit reports and related documents submitted to the Compliance Office shall be retained by the Compliance Office for three (3) years from the end of the calendar year in which the information is submitted to the Compliance Office. The Compliance Office shall destroy any medical records that may be submitted by the Department in support of the quarterly audit after the findings have been confirmed by the Compliance Office.

3. Compliance Office Audits. The Compliance Office shall retain audit records related to audits conducted by the Compliance Office for three (3) 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.

4. 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 at least three (3) years from the date of completion of the corrective action.

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C. Payer Materials

1. Medicare Communiques. The Compliance Office shall download and retain one (1) set of paper Communiques as they are issued by the Carrier. The Compliance Office shall maintain Carrier Communiques for ten (10) years from the date of publication.
2. 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 was published.
3. 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.

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.

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D. 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

Billing Helpline (hotlink)

Billing Compliance Hotline (hotlink)

Department Audit Guidelines (hotlink)