


<b>Physicians' Billing Office</b>		
<b>SECTION:</b>	DENIAL MANAGEMENT	POLICY NUMBER: D103
<b>POLICY TITLE:</b>	<b>MEDICAL RECORD REQUESTS</b>	PAGE: 1 of 3
<b>APPROVALS:</b> FPG B&F Committee: 05/24/2010	PBO: 05/24/2010	ISSUED: 05/03/2010 EFFECTIVE: 07/01/2010
<b>SUPERSEDES: N/A</b>		

**PURPOSE:**

1. To improve the **efficiency** of PBO billing and collections operations by establishing standard medical record request and retrieval processes across all PBO units.
2. To promote **compliance** with state and federal regulations.
3. To maintain a fair and balanced **provider compensation** model.
4. To manage **FPG account receivables** more effectively, and expedite collections for services requiring medical review by retrieving and submitting provider documentation to the payors in a timely and efficient manner.

**POLICY:**


- A. Patient medical records are often needed by PBO coding and claim processing personnel to review for appropriate procedural and diagnostic coding, as well as other pertinent information for proper billing purposes.

Furthermore, claim rejections by governmental and private payors, requiring copies of properly signed patient medical records for further adjudication of the claim are a common occurrence in our billing and collection practices.

Therefore, in order to expedite claim billing and collection processes, it is the policy of FPG PBO to establish standard procedures around retrieval, review and submission of required patient medical records to payors in a timely and efficient manner.

- B. PBO recognizes that patient records may be stored and available electronically in various electronic repositories, as well as handwritten in the patient's chart and maintained in the Health Information Management Systems (HIMS).
- C. PBO managers will ensure that all personnel processing these rejected claims have proper access (when applicable) to all electronic repositories, and appropriate training needed for retrieval and submission of medical records.
- D. If the PBO representative **and** his/her supervisor are unable to:
  - i) locate the electronic medical records online, and/or the record is not signed by the provider per payor specifications, or
  - ii) the records are not found in the patient's chart,

PBO will send two requests to the FPG clinic (the second request will include the provider, CAO and/or department manager).

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If after two requests (14 calendar days from the initial request) the signed medical record is not received by PBO, or made available online, the charges are reversed.

FPG providers who are compensated based on work RVU production will not be credited for these services. PBO sends a monthly report summarizing adjusted work RVUs to the respective providers for their reference.

- E. If the medical record is received by PBO after the charge has been reversed in the FPG practice management system, and prior to the expiration of the payor appeal filing deadline, PBO will re-enter previously reversed charges into the practice management system and submit the record to the payor.

FPG providers who are compensated based on work RVU production will be credited back with work RVUs associated with re-entered charges.

- F. All medical records received by PBO from FPG clinics and HIMS will be scanned into an electronic repository by PBO Scanning unit for future PBO reference.

**POLICY CROSS REFERENCES:**

N/A

**APPLICABILITY:**

This policy applies only to FPG PBO Customers.

**MONITORING / ACCOUNTABILITY:**


Each PBO billing unit must conduct frequent, regularly scheduled quality reviews to ensure adherence with this policy. Immediate corrective actions must be taken as necessary. These may include:

- a) Training and re-training of staff;
- b) Disciplinary actions;
- c) Escalating non-compliance to PBO director.

**COGNIZANT OFFICE:**

For interpretations of this policy, resolution of problems and special situations, contact:

Grace Barba  
 Director of Physician Billing Office  
[gbarba@mednet.ucla.edu](mailto:gbarba@mednet.ucla.edu)

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**POLICY AUTHORITY:**

UCLA Faculty Practice Group

**REVISION HISTORY:**

Original Policy issued: 05/03/2010

Revisions: None