



Policy No.: 305

Created: 6/2015

Reviewed: 7/2019

Revised: 7/2019

SUSPENSION OF THE MEDICAL RECORD

ETHICS & COMPLIANCE DEPARTMENT

SCOPE:

All Evolution Health colleagues associated with the billing and coding process in any way. For purposes of this policy, all references to “colleague” or “colleagues” include temporary, part-time and full-time associates, independent contractors, clinicians, officers and directors.

PURPOSE:

To establish the procedure to be followed by Evolution Health (the “Company”) billing entities regarding the suspension of medical records for the purpose of obtaining additional information necessary for billing.

POLICY:

The Company’s billing entities will submit claims for clinician services based **only** on clinician documentation in the chart. The clinician’s documentation must support the services provided to the patient and the chart must be signed and dated by the clinician. The claim must be submitted in the name of the clinician who signed the chart. Any documentation updated by the clinician subsequent to the initial completion of the original chart must be signed and dated by the clinician and labeled as an “ADDENDUM” or “LATE ENTRY.” The billing entity will only suspend a medical record to request additional information from the clinician under certain circumstances. In addition, the charts may be suspended in order to request additional information from the clinician that was excluded from the billing entity’s copy of the chart.

The claim must be coded using **only** the information included on the original chart, which may have a properly noted addendum per above, and the original chart must be signed and dated by the clinician who performed the services prior to submitting a claim for payment. The clinician must document only those services rendered to the patient. The billing entity must not request the clinician to alter a chart, and the clinician must not alter a chart or record false information. Any of these actions are subject to disciplinary action up to and including termination.

PROCEDURE:

The Company’s billing entities may not request additional information when there is insufficient documentation for history, physical exam and medical decision making.



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Outlined below are the **primary** reasons the billing entity may suspend charts and request additional information from the clinician.

- Signature missing.
- Dictation/physician notes missing.
- Clear copy needed.
- Clinical record missing/material page or pages missing.
- Other as appropriately set forth by the Compliance Department's policies and procedures.

The reason stated "Other" should only be used for specific requests for which no other description applies. Management approval must be obtained prior to using the "Other" category. Exceptions will be determined on a case by case basis.

Resolution of a suspended chart must occur in accordance with payor timely filing requirements.

Any questions regarding this policy may be directed to your supervisor or the Chief Compliance Officer.

POLICY REVIEW

The Ethics & Compliance Department will review and update this Policy and all HIPAA policies when necessary in the normal course of its review of the Ethics & Compliance Program.