

ALABAMA QUALITY ASSURANCE FOUNDATION
Medical Peer Review

PRO GENERAL MEMORANDUM NO. 93/96-06

**FOR IMMEDIATE DISTRIBUTION TO YOUR MEDICAL STAFF
AND UTILIZATION REVIEW - QUALITY ASSURANCE DEPARTMENTS**

TO: ADMINISTRATORS AND CHIEFS OF STAFF - ALL ALABAMA HOSPITALS; AMBULATORY SURGERY CENTERS; SKILLED NURSING FACILITIES; AND HOME HEALTH AGENCIES

**FROM: H. TERRELL LINDSEY
PRESIDENT AND CHIEF EXECUTIVE OFFICER**

DATE: NOVEMBER 18, 1993

**SUBJECT: REIMBURSEMENT OF PHOTOCOPYING AND POSTAGE EXPENSE FOR
MEDICARE MEDICAL RECORDS**

- I. This General Memorandum revises and replaces General Memorandum number 90/93-07 referencing the same subject. Providers should follow the procedure outlined in this transmittal to receive reimbursement for photocopying and postage expense at HCFA approved rates.
- II. As all Medicare chart review is now conducted off site, the Foundation will request a copy of the Medicare beneficiary's medical record(s) be forwarded to our Central Office for review. Providers are required to forward requested information for PRO review in meeting "obligations" imposed by Section 1156(a) of the Social Security Act.
- III. The Foundation's written request for records will be in the form of: (1) review notification printout listing of cases; (2) preliminary technical denial letter; and (3) medical record request form.
- IV. Providers reimbursed for services under the Prospective Payment System will be paid **\$.07 per page plus First Class postage costs**, or at such other rate specified by HCFA. Exempt units and facilities, and others receiving "cost based" reimbursement are to include photocopying and postage in their respective "Cost Report."

GENERAL MEMORANDUM NO. 93/96-06

Page 2

V. PROCEDURE:

- A. Each "shipment" of records **MUST** include an invoice, in duplicate, listing those records in the shipment;
- B. The invoice must list each record, by patient name and Medicare number, number of pages per record, and first class postage for the "shipment";
- C. The provider may extend the invoice for number of pages at the current rate of **\$.07** per page; and
- D. A copy of the Foundation's written request for the medical record(s) **MUST** be included with the invoice.

VI. The Foundation will reimburse providers on a quarterly basis, or at such other frequency specified by HCFA, upon receipt of Federal funds. The duplicate copy of the provider's invoice will be returned with the Foundation's remittance advice.

VII. Invoices received without the accompanying records **CANNOT** be paid. HCFA requires an auditable procedure to be in place, both at the PRO and in the hospital. Therefore, an auditable invoice must be included with each "shipment" of records.

VIII. The Foundation will make every effort to expedite payment to providers for eligible photocopying and postage expenses. Your continued cooperation with the Foundation in our review activities is appreciated.

cc: J. Barnett and Robert Turkel, MD/FMQA; Juanita Dixon, PO/DHHS; Robert Toomey, RN, MR/DHHS; J. Michael Horsley/ALAHA; Lon Conner/MASA; Frazer Rolen/ALAHA-B'ham; Jane M. Cottos/OIG-DHHS; Joan Hicks, RRA/UAB; AQAF Board of Directors; Lynda Northcutt/BCBS