Policy Statement

All new and returning Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) health care Provider(s) shall receive orientation to the TTUHSC El Paso Billing Compliance Plan (HSCEP OP 52.07) and applicable documentation standards prior to having their billing number activated for the purpose of submitting claims.

Scope

This policy shall apply to all new or returning TTUHSC El Paso physician and non-physician providers in the School of Medicine, who bill for health care services or items under a TTUHSC El Paso tax ID number.

Policy

Providers shall complete initial online orientation to the TTUHSC El Paso Billing Compliance Plan before their billing number is activated for submission of claims to payers.

Definitions

For purposes of this policy, these terms shall have the meanings set forth below:

1. “Providers” include, but are not limited to Physicians (M.D. or D.O.), Advance Practice Nurses, Physician Assistants, Certified Nurse Mid-Wife, Licensed Clinical Social Worker, Certified Registered Nurse Anesthetists (CRNA) Psychologists, Pharmacist, Speech Language Pathologist, Audiologist and any other health care professional licensed and credentialed by TTUHSC El Paso to provide and bill for health care items or services, either using their own provider number or the number of a supervising TTUHSC El Paso physician.

2. “School of Medicine” means the TTUHSC El Paso Paul L. Foster School of Medicine (PLFSOM).
Procedure

1. **Notification of New Provider.**

   Each Clinical Department (Department) shall:
   
   - Notify the Billing Compliance Director (BCD) or designee of the anticipated arrival of each provider as soon as possible prior to the provider’s arrival, this includes the initial credentialing period

2. **Provider Billing Number.** The provider’s billing number shall not be activated for the purposes of submitting claims until the requirements described in this policy have been satisfied.

   a. The provider, shall receive, at a minimum, the following information:

      The website link to:
      
      o Media Space General Compliance Training
      o Electronic Attestation

      At the conclusion of the Initial Orientation, the provider will electronically sign the attestation statement agreeing with the provided education or contacting the BCD for clarification or additional information.

   b. The BCD or designee shall report to the Billing Compliance Advisory Committee (BCAC) those providers oriented and whose billing numbers have been activated for billing purposes since the previous BCAC meeting.

      The Institutional Compliance Officer (ICO) shall report to the Institutional Compliance Committee (ICC) the providers oriented and whose billing numbers were activated for billing purposes.

3. **Provider:** Each provider is responsible for reviewing and understanding the Billing Compliance Plan and applicable documentation standards or contacting the BCD for clarification or additional information.

4. **Activation of Provider Billing Number.** The BCD or designee shall notify Medical Practice Income Plan (MPIP) office as soon as the provider has completed the orientation requirements, at which point the provider’s billing number can be activated for purposes of submitting claims to payers.
Administration and Interpretations, Revisions or Terminations
Questions regarding this policy may be addressed to the appropriate BCD/ICO.

Refer to Billing Compliance Program Policy and Procedure 1.0 Policy Development and Implementation

Failure to comply with this policy shall result in appropriate disciplinary action.

Frequency of Review
This policy shall be reviewed no later than April each odd-numbered year.

Review Date: June 2016, May 2019

Revision Date: June 2015, June 2016, May 2019