Procedure Statement

The purpose of this procedure is to outline the process for responding and tracking of External Audit Requests within all departments of Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso).

Procedure

1. Obtain a representative from each department
   a. Billing Compliance Director (BCD) to maintain master list for committee contact information, to include MPIP representative and Medical Records (HIM)
   b. BCD will be responsible for:
      i. Scheduling meetings,
      ii. Meeting minutes,
      iii. Tracking and alerting responsible parties to upcoming deadlines

2. Develop education and process for recipients of letters to forward and share with Compliance.

3. The (BCD) will compile a master spreadsheet with the following information:
   a. Entity requesting information
   b. Date letter was sent to TTUHSC El Paso
   c. Date BCD received letter
   d. Department being audited
   e. Number of records requested
   f. Audit case specific information to track appeal process
   g. Deadline(s)
   h. Reason for request
   i. Refund/Recoupment Y/N
   j. Amount Refunded
   k. Amount Rebilled
   l. Letter mailed to
   m. Date when records mailed/faxed
   n. Date of response from requesting entity
   o. Tracking of Response of requesting entity via External Audit Tracking Spreadsheet
      • Develop process to track audit through to completion (i.e., refund, appeal, no finding(s), Send spreadsheet to departments to record their progress/steps

4. Present monthly to Billing and Collections Committee (BAC)

5. Schedule meetings prior to BAC with all department representatives
6. BAC to make recommendations

7. Each response staff team member will present updates monthly prior BAC
   a. A letter will be sent to all administrators requiring the attendance of each representative
   b. Those not in attendance will receive “No Show” letters with a copy to department administrator and requesting a written update

8. BCD will present a quarterly report to Billing Compliance Advisory Committee (BCAC)

9. Develop summary reports for Institutional Compliance Working Committee

10. Develop and distribute a monthly survey to each department requesting them to acknowledge or deny the receipt of audit requests for the prior month.

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

*Review Date:* January 2016

*Revision Date:*