Policy: The purpose of this policy is to outline the procedure for processing billing compliance refunds and identified underpayments. Compliance audits are conducted regularly and timely by the Office of Institutional Compliance. Charge correction of invoices and refund of overpayment is required within 60 days when a billing discrepancy is identified.

Procedures:

1) The Office of Institutional Compliance meets with department coders and provides audit findings. Coders submit charge corrections within 10 days of discovery to the Medical Plan Income Practice Plan (MPIP) business office using the MPIP SharePoint website located at https://sharepoint.elpaso.ttuhs.edu/support/mpip/lists/Charge%20Correction%20Request/Active%20only.aspx. MPIP submits corrected claims to payer within 7 days of receipt of charge correction.

2) Medicaid charge corrections completed within initial and corrected claim filing deadline of 90 days for NM Medicaid and 95 days for Texas Medicaid are submitted to the Medicaid plan by the department for reprocessing as corrected claims within 7 days of charge correction posting.

3) Medicare and Railroad Medicare charge corrections completed within the 180 day corrected claim filing deadline are completed by MPIP using the NovitaspHERE online portal or faxed Medicare Redetermination form within 7 days of charge correction posting.

4) Commercial charge corrections completed within the 180 day corrected claim filing deadline are completed by MPIP using the method available by each payer within 7 days of charge correction posting.

5) Self-pay charge corrections are not restricted to a filing deadline. Patient balances resulting from undercoded charges are billed to the patient; patient overpayments resulting from upcoded charges are refunded to the patient within 30 days of discovery.
6) Charge corrections completed after a payer's corrected filing deadline are not eligible for reprocessing. Overpayments due to upcoding require a refund to the payer for the difference between the initial claim and corrected claim allowed amount.

7) In the event a refund is required, departments complete and submit appropriate return of monies refund forms and explanation of benefits to the MPIP accounting unit for processing. All refund forms specify the refund amount and the reason for the refund. The reasons for the refund indicate service was not rendered as billed' and 'per quarterly progress note, audit level of service 992XX was billed in error and should have been level of service 992XX; refund is enclosed for $X'. MPIP processes the refund check and mails it to the appropriate plan with the documentation submitted by the department.

RESPONSIBILITIES

1) Compliance Department: perform audits.

2) Department Coders: submit charge corrections, resubmit corrected claims, and prepare refund documentation.

3) MPIP: process charge corrections, resubmit corrected claims, and issue refunds.

4) Compliance Department will monitor refund process to assure all refunds are made to payers within 60 days of discovery and credit balances are returned to patients within 30 days of discovery.