Complying with Medical Record Documentation Requests

As outlined in the Medicare Advantage HMO & PPO Provider Guidebook the facility, treating physician, clinician or supplier must comply with all requests for documentation from the Plan. Providers are responsible for providing any and all related medical records, answer questions from health plan representatives or furnish any necessary information when requested. Information must be submitted in a timely manner, be complete and legible as well as identify the provider and date of service. Records can be requested by the Plan for reviews such as:

- Compliance with Medicare laws, audits and record retention requirements
- Provider medical record audits/reviews
- Precertification requests
- Medicare appeals

Additional information can also be located in your provider contract. Please remember that your performance in submitting records impact you as well as our members in some situations. Provider compliance with requests will also be monitored.