

Records Fees, Copying Fees

Last Updated: 4/9/2025 Last Reviewed: 4/9/2025 Originally Effective: 3/30/2005

Last update includes payment policy changes, subject to 28 TAC §3.3703(a)(20)(D)? No

If yes, Texas Last Update Effective Date: n/a Policy #: RPM005

Scope

Companies: Moda Partners, Inc. and its subsidiaries & affiliates (All)

Provider Contract Status: Any
Claim Forms: CMS1500 & CMS1450 (paper and electronic versions)

Claim Dates: All

Reimbursement Guidelines

1. General

- 1. For member plans originating in the state of Texas, reimbursement will be made for providing copies of medical records, not to exceed the amount required by current Texas state law.
- 2. For all other plans no separate payment will be made for the routine completion and mailing of claim forms, insurance billings or related medical records.

2. Documentation and Providing Records Included in Practice Expense Portion of RVU

- 1. Any costs associated with copying and providing needed records are considered a normal part of doing business for the provider or facility submitting the claim.
 - a. Copy service or records service vendors must seek payment for their services from the facility or provider for whom they are copying and submitting records.
 - b. Reimbursement for copying and providing records is included in the practice expense portion of the resource-based relative value units (RBRVUs) for the services listed on the claim and included in the reimbursement for those services if allowed.⁴
- 2. All information required to support the codes and services submitted on the claim is expected to be in the member's medical record and be available for review. The provider submitting the claim is responsible for providing upon request all pertinent information and records needed to support the services billed.
- 3. In addition, any costs associated with copying and providing needed records for purposes of quality reporting reviews are also considered a normal part of providing the services being reviewed for quality, and records copying fees are not eligible for separate reimbursement.
- 4. Copying fees may be separately reimbursed on an exception basis only when:
 - a. During an on-site audit, individual consideration may be given in certain instances.
 - b. Individual consideration may be given if a large volume of records is requested from a source <u>other</u> than the billing or rendering provider (e.g., for the purpose of reviewing subrogation cases).
- 5. Most member contracts also exclude "separate charges for the completion of records or claim forms and the cost of records."
- 6. Procedure code S9981 will be denied to provider responsibility as a bundled service, regardless of any other services billed. If no other services are billed for that date of service, S9981 is considered included in the services documented on the dates of service in the records.
- 7. Invoices received for records copying fees or similar charges will not be paid.

3. When Requested Records Are Not Received

If records are not received in a timely manner due to nonpayment of records copying fees, the records will be deemed not to exist, and the services being reviewed or audited will be denied as not documented.

1. Audit/review determinations of this nature are final and late records are not accepted.

2. Any deviation or exception to this policy is solely at our discretion.

Definitions

Acronyms/Abbreviations

Acronym	Definition
CMS	Centers for Medicare and Medicaid Services
CPT	Current Procedural Terminology
HCPCS	Healthcare Common Procedure Coding System (acronym often pronounced as "hick picks")
MPFS	Medicare Physician Fee Schedule
PE	Practice Expense
RBRVU	Resource-Based Relative Value Unit
RPM	Reimbursement Policy Manual (e.g., in context of "RPM052" policy number, etc.)
RVU	Relative Value Units (also known as/see also RBRVU)

Definition of Terms

Term	Definition
Practice Expense	Practice expense is one of three components of the total RVU assigned to each procedure code on the Medicare Physician Fee Schedule. Practice expense RVUs represent resources beyond the direct work of the physician or practitioner which are typically required to provide the service described by a procedure code. ^{1, 8}
	Practice expense RVUs are broken into direct practice expense and indirect practice expense components. ⁴
	Practice expense (direct plus indirect components) accounts for about 41% of total/overall Medicare Physician Fee Schedule payments. ⁵
Practice Expense, Direct	Direct practice expense includes non-physician clinical labor, disposable medical supplies, and medical equipment that are typically used to provide a service. ⁴
Practice Expense, Indirect	Indirect PE relates to expenses such as administration, rent, and other forms of overhead that cannot be attributed to any specific service. Indirect practice expenses constitute a substantial portion of the RVUs allocated across the MPFS, averaging about 33% of the full RVU for a service. 4

Procedure codes (CPT & HCPCS)

Code	Code Description
S9981	Medical records copying fee, administrative

Related Policies

- A. "Moda Health Reimbursement Policy Overview." Moda Health Reimbursement Policy Manual, RPM001.
- B. This policy is also mentioned in the Moda Health Participating Provider Administrative Manual.
- C. "Medical Records Documentation Standards." Moda Health Reimbursement Policy Manual, RPM039.

Resources

- 1. CMS. "Method for Computing Fee Schedule Amount." *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 12 Physician Practitioner Billing, § 20.1.
- 2. CMS. "Supplies." *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 12 Physician Practitioner Billing, § 20.4.4.

- 3. CMS. "Payment Due to Unusual Circumstances (Modifiers "-22" and "-52")." *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 12 Physician Practitioner Billing, § 20.4.6.
- 4. RAND Corporation. "Overview of the MPFS." Improving Practice Expense Data & Methods Town Hall June 16, 2021 Read Ahead Materials, pp. 2-3. Last updated June 16, 2021; Last accessed January 26, 2022. <a href="Improving Data and Methods Related to Indirect Practice Expense in the Medicare Physician Fee Schedule: Read-ahead materials for the virtual Town Hall (cms.gov)."
- 5. Gregory C. Pope, M.S., and Russel T. Burge, Ph.D. "Allocating Practice Expense Under the Medicare Fee Schedule." Health Care Financing Review. Spring 1993, Volume 14, Number 3, Page 139. Allocating Practice Expense Under the Medicare Fee Schedule (cms.gov).
- 6. Texas Department of Insurance (TDI). "Charge for Records Requested to Process Claims." Last updated September 2, 2020; last accessed January 26, 2022. Prompt Pay FAQ (texas.gov).
- 7. Texas Medical Board (TMB). "Medical Records FAQs." Last updated September 2, 2020; last accessed January 26, 2022. https://www.tmb.state.tx.us/page/consumer.
- 8. Burgette, Lane F., et al. "Practice Expense Data Collection and Methodology: Phase II Final Report." Santa Monica, CA: RAND Corporation, 2021. Last accessed October 4, 2022. https://www.rand.org/pubs/research_reports/RRA1181-1.html.

Policy History

Reminder: The most current version of our reimbursement policies can be found on our provider website. If you are using a printed or saved electronic version of this policy, please verify the current information by going to: https://www.modahealth.com/medical/policies reimburse.shtml

Date	Summary of Update
4/9/2025	Acronyms & Related Policies updated. Formatting updates. No policy changes.
4/10/2024	Formatting updates. No policy changes.
7/12/2023	Formatting updates. No policy changes.
10/12/2022	Idaho added to Scope. Acronym table & Resources updated. Policy History section added.
	Definition of Terms added. Definitions adapted/paraphrased from Resources listed.
7/6/2011	Policy document initially approved by the Reimbursement Administrative Policy Review
	Committee & initial publication.
3/30/2005	Original Effective Date (with or without formal documentation). Policy based on CMS RVU
	component information & documentation requirements for validation of services rendered.