

Medicare Audit and Record Retention

Medicare Audit and Record Retention Requirements

Providers, and their downstream contracted entities, who contract with FCHP to provide services to Fallon Senior Plan members must comply with Medicare laws, regulations, and CMS instructions. CMS requires that records be maintained for a minimum of 10 years, and contracted providers agree to audits and inspection by the Department of Health and Human Services (HHS), the Comptroller General, or their designees, should the request arise, as well as cooperating, assisting, and providing information as requested.

What types of records does this apply to?

In accordance with federal regulations, the audit and inspection requirements described above apply to any books, contracts, medical records, patient care documentation, and other records of health care providers contracted with Medicare Advantage Health Plans, that pertain to any aspect of services performed, reconciliation of benefit liabilities, and determination of amounts payable under the contract between CMS and FCHP, or as the Secretary may deem necessary to enforce the contract between CMS and FCHP. Specifically, HHS, the Comptroller General, or their designee may evaluate, through inspection or other means the quality, appropriateness, and timeliness of services furnished to Medicare enrollees. Therefore, it is crucial that providers retain the types of records listed above for a minimum of 10 years.