When a letter, fax or e-mail is received from CMS or a CMS Contractor (logos shown below), it may need to be forwarded to Institutional Compliance, depending on the type of communication. Here are four common types of communication and their routing instructions:

1. Requests for Medical Records: Does not need to be forwarded to Institutional Compliance; may be handled by the Medical School Department’s designated staff.
2. Notice of “Outlier” Coding or Provider Liable: Does not need to be forwarded to Institutional Compliance; may be handled by the Medical School Department’s designated staff.
3. Requests for Refunds or Notification of Pending Recoupment: Forward to Institutional Healthcare Billing Compliance (UCT 1510) for handling.
4. Audit Inquiries: Forward to Institutional Healthcare Billing Compliance (UCT 1510) for handling.

When a letter, fax or e-mail is received directly from a commercial insurance plan, Medicaid managed care organization or Medicare Advantage plan, or from another facility, such as an affiliated hospital, it does not need to be forwarded and may be handled by the Medical School Department.

If you have any questions, call:
- Medical School Healthcare Billing Compliance at 713-500-7823; or
- Institutional Compliance at 713-500-3294

Centers for Medicare and Medicaid Services

Medicare Administrative Contractor (MAC) for Texas
Program Safeguard Contractor (PSC)

Recovery Audit Contractor (RAC) for Texas Medicare improper payments

Zone Program Integrity Contractor (ZPIC) for Texas Medicare

Medicaid Integrity Contractor (MIC) for Texas Medicaid