

When a letter, fax or e-mail is received from OIG, 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:

- Institutional Compliance at 713-500-3294
- Medical School Healthcare Billing Compliance at 713-500-7823; or

Centers for Medicare and Medicaid Services



HHS Office of Inspector General



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

