



# Utilization Management Policy

## Reimbursement for Medical Records

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Policy Statement.....	1	<a href="#">Retrospective Clinical Review (Post-Service)</a>	Original Effective Date:	1/2000
Purpose.....	1	<a href="#">Patient Healthcare Records:</a>	Current Approval Date:	4/23/20
Scope.....	1	<a href="#">Documentation Requirements for</a>	Next Review:	4/2021
References.....	1	<a href="#">Utilization Review and File Audits</a>	Category:	Administrative
History.....	2	<a href="#">Utilization Management Overview</a>		

### Policy Statement

In accordance with the Optum\* by OptumHealth Care Solutions, LLC Provider Agreement, Optum does not reimburse providers for supplying copies of medical records. Copies of records shall be provided at the Health Care Provider's sole expense.

### Purpose

The purpose of this policy is to define reimbursement for medical record requests.

### Scope

All in network health care providers, involving all provider types, where the submission of clinical information is a requirement.

\*Optum is a brand used by OptumHealth Care Solutions, LLC and its affiliates



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## References

1. Optum Provider Agreement

## Policy History/Revision Information

Date	Action/Description
2/23/2000	Original effective date
3/07/2001	Annual review and approval completed
9/20/2002	Annual review and approval completed
11/11/2003	Annual review and approval completed
10/18/2004	Annual review and approval completed
2/14/2006	Annual review and approval completed
4/10/2008	Annual review and approval completed
1/15/2009	Policy reformatted
4/30/2009	Annual review and approval completed
4/08/2010	Annual review and approval completed
10/26/2010	Policy rebranded to "OptumHealth Care Solutions, Inc. (OptumHealth)"
4/07/2011	Annual review and approval completed
4/19/2012	Annual review completed
4/18/2013	Annual review completed
4/17/2014	Annual review completed; Policy rebranded "Optum* by OptumHealth Care Solutions, Inc."
4/16/2015	Annual review completed
4/21/2016	Annual review completed
4/20/2017	Annual review completed; Legal entity name changed from "OptumHealth Care Solutions, Inc." to "OptumHealth Care Solutions, LLC."
4/26/2018	Annual review completed
4/25/2019	Annual review completed
4/23/2020	Annual review completed

## Contact Information

Please forward any commentary or feedback on Optum utilization management policies to: [policy.inquiry@optumhealth.com](mailto:policy.inquiry@optumhealth.com) with the word "Policy" in the subject line.

The services described in Optum\* by OptumHealth Care Solutions, LLC policies are subject to the terms, conditions and limitations of the Member's contract or certificate. Optum reserves the right, in its sole discretion, to modify policies as necessary without prior written notice unless otherwise required by Optum's administrative procedures.

Certain internal policies may not be applicable to self-funded members and certain insured products. Refer to the member's Summary Plan Description (SPD) or Certificate of Coverage (COC) to determine whether coverage is provided or if there are any exclusions or benefit limitations applicable to any of these policies. If there is a difference between any policy and the member's SPD or COC, the member's SPD or COC will govern.

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