HSF BILLING QUALITY POLICY 17 – COPY AND PASTE FUNCTIONALITY

A. <u>POLICY</u>:

It is the policy of the University of Virginia Health Services Foundation (HSF) to ensure appropriate use of copy/paste and copy/forward functionality in the electronic medical record, as it applies to medical documentation used in support of professional billing.

The purpose of this policy is to define the appropriate use of the copy/paste and copy/forward function in medical documentation in order to protect the integrity of the health information record and to provide quality patient care. For the purposes of this policy, the term "copy" includes cut/copy and paste, copy forward, cloning, and any other action to move documentation from one part of the record to a new destination.

Providers must not bill based on documentation copied into his/her note unless he/she performed the service(s) described in the documentation.

Inappropriate use of the copy functionality can present significant medico-legal risks.

B. <u>PROCEDURE</u>:

Providers are responsible for the total content of their documentation, whether the content is original, copied, pasted, imported, or reused. When information is imported or reused from a prior note, the provider reusing that content is responsible for its accuracy and medical necessity.

Requirements when using copy functionality:

- 1. Entries carried forward from a previous visit(s) must be reviewed for accuracy and edited appropriately. It is <u>not</u> appropriate to carry forward information if it is not pertinent to the date the service is rendered.
- 2. Providers should not copy documentation from another provider without proper notation and attribution to the original author. This should include the date, time and author of the original entry.
- 3. The history documented for each visit should correlate to the list of active problems.
- 4. Providers should cite and summarize their review of relevant lab data, pathology, and radiology reports rather than copy such reports in their entirety into the note.
- 5. Providers must not use copy functionality from a medical student's documentation (except for review of systems, and past, family, and social history for evaluation and management services).

C. <u>CROSS REFERENCED MATERIALS</u>:

Copy Functionality Toolkit, AHIMA, 2008 http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_042564.pdf

1995 CMS Documentation Guidelines for E&M Services

D. FORMS: N/A

E. <u>SCOPE</u>:

This policy gives direction to HSF providers on how to document using copy and paste.

F. <u>ADMINISTRATION</u>:

This policy will be administered by Audit and Billing Quality and be reviewed on a periodic basis.

G. <u>DISTRIBUTION</u>:

To all providers, coding, compliance, and administrative staff within the University of Virginia Health Services Foundation and Clinical Departments.