



7.10.3 Clinical Research Service Provider Payments

Chapter 7 - Research and Sponsored Programs	Original Effective Date: November 2020
Section: 7.10 Research Administration	Date Last Reviewed:
Responsible Entity: Vice President for Research	Date Last Revised:

I. Purpose

The purpose of this policy is to outline the procedures and responsibilities when billing for the University of Texas Health Science Center at San Antonio (UT Health San Antonio) clinical services provided in support of research conducted by UT Health San Antonio researchers.

Researchers conducting clinical research routinely rely on support from other clinical departments, clinics, and providers to perform specific procedures outline in the study plan (e.g. imaging from radiology or consults with specialists).

Prior to starting a study an agreement is signed that codifies the support requested by the Principle Investigator (PI) and the fee schedule for the services that will be provided.

Proper billing for clinical services provided in research requires knowledge of the terms and conditions of the agreement and awareness of the current status of the support activities provide.

II. Scope

This policy applies to all employees of UT Health San Antonio involved in the conduct, reporting, or billing of clinical services provided to clinical researchers.

III. Policy

Agreements between the Principle Investigator (PI) and a UT Health San Antonio Clinical Service Provider (herein Service Provider) are managed by the Clinical Trials Office (CTO).

The fee schedule for each agreement is negotiated by the CTO in collaboration with the PI, Research Team, and Service Provider. UT Health Physicians clinical and research charge masters are used as the basis for determining the fee schedule.

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The Service Provider is responsible for tracking invoiceable activity, billing, and reconciling payments according to the terms of the agreement. Each Service Provider must maintain a system of records documenting invoices, payments, and other reconciliation activity.

A. Procedures

This process begins during the budget approval phase of study initiation. This process ends when the research study ends, and all payments have been received and reconciled.

1. Contract and Budget Approval

- a. With input from the PI, Research Team, and Service Provider, the CTO will develop a draft fee schedule based on the scope of the work requested.
- b. The CTO will negotiate with the Service Provider and obtain approval of the negotiated fee schedule from the PI and the Service Provider.
- c. The CTO will make executed agreements accessible to the Research Team, the PI's designated department administrator, and the Service Provider.

2. Study Startup

- a. Within 30 days of executing the Service Provider Agreement, the CTO will enter studies into the institution's Clinical Trial Management System (CTMS).
- b. The CTO will coordinate the creation of a study specific EPIC Research Account, as appropriate.

3. Study Performance

- a. The Research Team will register new participants to the study in the CTMS within one (1) calendar day of the date when the individual consents.
- b. All subsequent study visits that are built into the CTMS project will be updated withing three (3) business days of performing the visit and/or procedure.
- c. Any unscheduled visits will be documented in the CTMS withing three (3) business days of performing the visit and/or procedure.
- d. The CTO will review all research related charges within EPIC. Depending on the study's coverage analysis, CTO staff will route research related charges to either the patient's insurance or to the research account.
- e. Charges posted to the research account can be accessed by the Special Accounts Team through designated reports with the EPIC Workbench.

4. Service Provider Billing of Research Charges

- a. Research activity captured on EPIC Workbench Reports will be assessed at least once a month by the designated EPIC Special Accounts Team.

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- b. The Special Accounts Team is responsible for billing the research charges according to the terms of the study service agreement on file. Invoices will be sent once per month.
 - c. Generated bills should be sent to the designated research department's administrator.
 - d. The designated research department administrator will review service provider bills against study activity, the pricing agreed to during budget negotiation and will pay as applicable.
5. Service Provider Payment Posting
- a. The research department administrator will pay via Interdepartmental Transfer (IDT) within 30 days of receipt of invoice.
 - b. IDTs should be sent to UT Health Physicians Cash Management (UTMCashmanagement@uthscsa.edu).
 - c. The Special Accounts Team will review all payments against outstanding invoices, monthly.
 - d. Cash Management forwards the payments to UT Health Physicians Payment Posting who will post payment within EPIC inclusive of necessary adjustments or write offs.
6. Study Closure
- a. Upon study closure the CTO will notify EPIC to deactivate the EPIC research account.
 - b. Special Accounts Team will verify all charges have been billed and payments received.
 - c. CTO will coordinate with the Special Accounts Team to perform the final reconciliation of the EPIC Research account within thirty (30) days of notification of study closure.
 - d. Following the closure of the study PID and disbursement of any residual funds, Service Provider invoices will no longer be accepted for the study.
7. Compliance
- a. To assess compliance with registering new participants in the CTMS, the CTO will routinely monitor study records to identify late entries. Noncompliance will be reported to the PI for corrective action. Continuing noncompliance will be reported to the department Chair and Executive Committee (EC) member for corrective action.

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- b. To assess compliance with billing standards, department administrators, designated by the Chair, will monitor payments to Service Providers to ensure correct amount is paid.
- c. To assess status of payments for services rendered, administrators from departments/clinics providing a service to the research will routinely monitor billing records to ensure timely invoicing to the PI, reconciliation of payments, and collection of delinquent payments.

IV. Definitions

When used in this document with initial capital letter(s), the following words have the meaning set forth below unless a different meaning is required by context.

Clinical Research Service Provider (Service Provider) – a UT Health San Antonio clinical department, clinic, or provider who has agreed to perform specific procedures outlined in the study plan (e.g. imaging by radiology or consults with specialists).

Clinical Trial Office (CTO) – indicates either the Mays Cancer Center's CTO for all cancer- related research or the Vice President for Research's CTO for all other (non-cancer) research.

Research Team (RT) – the study staff responsible for the conduct of a specific research study (e.g., Principle Investigators, Associate Investigators, Research Coordinators, Data Manager, and anyone appointed by the PI).

V. Related References

Handbook of Operating Policies (HOP)

[7.10.2 Industry Sponsored Research Billing](#)

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority

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Effective Date	Action Taken	Approved By	Date Approved
11/2020	Policy Originated	Executive Committee	7/18/2020