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Approval By:	Date:	
Compliance Committee	02/17/2017	
Annual Review Date: 02/01/2018		

Authored by: Chief Compliance Officer

**Pursuant To:** The Health Insurance Portability and Accountability Act, 1996, California Welfare & Institutions Code, California Health & Safety Code, 28 California Code of Regulations, and other guidelines.

Departments Impacted: All

### Purpose

To document HPSM's document retention policy in accordance with federal and state statutory guidelines. It is important that HPSM and its providers keep medical and financial records to facilitate review of the services HPSM provides and when necessary provide information on a member's care to other health care professionals.

### Scope

This procedure has been developed in accordance with various federal and state laws. A number of variables affect how long HPSM should keep medical records, such as the type of record and whether state or federal law is being applied. This policy and procedure seeks to provide uniform guidance for all lines of business.

## **Responsibility and Authority**

• The Chief Compliance Officer is responsible for overseeing this policy and procedure.

## Definitions

*Medical Records* are the collection of information concerning a member and his or her health care that is created or received and maintained in the regular course of HPSM business. Records may be from any source and in any format, including but not limited to paper or electronic format, and contains:

- 1. The billing and clinical records about the member including all physician or provider notes in which medical decision-making is documented
- 2. The enrollment, payment, claims adjudication, and case management record systems maintained by HPSM
- 3. The information used, in whole or in part, to make decisions about a member including information to identify the member, support a diagnosis, justify a treatment, document the course and results, and promote continuity of care among providers.

#### Procedure

- 1.0 Record Retention under the HIPAA
  - 1.1 HIPAA created rules for the retention of documents created in compliance with HIPAA. As a Covered Entity, HPSM is required to maintain HIPAA documents for at least 6 years from the date of its creation or the date it was last put into effect. This means all HIPAA required policy

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and procedures, all HIPAA related communication required to be in writing, and all HIPAA related actions, activities or designations that are required to be documented should be retained.

### 2.0 Record Retention under Medicare

- 2.1 HPSM's contract with CMS for CareAdvantage specifies that all books, records, documents, and other evidence of accounting practices and procedures should be retained for 10 years. The records affected include all those that are sufficient to:
  - 2.1.1 Accommodate periodic financial auditing
  - 2.1.2 Enable CMS to inspect or otherwise evaluate the quality, appropriateness and timeliness of services performed under our Medicare contract and our facilities
  - 2.1.3 Enable CMS to audit and inspect any books and records that pertain to services performed, determinations of amounts paid under the contract, or the ability of HPSM to bear the risk of potential financial losses.
  - 2.1.4 Properly reflect all direct and indirect costs used in preparation of the bid proposal
  - 2.1.5 Establish component rates of the bid for determining additional and supplementary benefits
  - 2.1.6 Determine the rates utilized in setting premiums
- 2.2 The Medicare related records to retain include:
  - 2.2.1 Documents on ownership and operation of HPSM's financial, medical, and other record keeping systems
  - 2.2.2 Financial statements for the current contract period and the 10 prior periods
  - 2.2.3 Federal income tax or informational returns for the current contract period and 10 prior periods
  - 2.2.4 Asset acquisition, lease, or sale
  - 2.2.5 Agreements, contracts, and subcontracts
  - 2.2.6 Marketing and management agreements
  - 2.2.7 Matters pertaining to cost of operations
  - 2.2.8 Amounts of income received by source and payments
  - 2.2.9 Cash flow payments
  - 2.2.10 Any financial reports filed with other federal programs or State of California agencies.
- 2.3 HPSM shall keep all its records related to our Medicare Advantage line of business, whether medical or financial, for 10 years.
- 3.0 Record Retention Under Medi-Cal
  - 3.1 There is no general Medi-Cal document retention law. Several laws specify that records generated by providers have a three year retention period. The Knox Keene Act requires that all records, books, and papers of a plan and a provider must be open for inspection during normal business hours. Medical records must be retained for a minimum of two years to ensure that compliance with the Act can be validated by regulatory agencies.

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- 3.2 HPSM's Medi-Cal Contract requires that HPSM maintain all records for a minimum of five (5) years from the end of the current Fiscal Year in which the date of service occurred, unless a longer period is required by law, in which the record or data was created or applied; and for which the financial record was created or the Contract is terminated. If HPSM has been notified that a federal or state oversight agency, or their duly authorized representatives have commenced an audit or investigation, HPSM must maintain all records until the matter is resolved.
- 3.3 The contract also requires HPSM to maintain such books and records that are necessary to show how HPSM discharged its obligations under the Medi-Cal program and disclose the quantity of services provided, the quality of those services, the manner and amount of payment for those services, the members eligible to receive covered services, how HPSM administered its daily business, and the cost of administering the health plan.
- 3.4 Even though HPSM's Medi-Cal contract specifies a document retention period of 5 years, in order to have a uniform standard HPSM will retain all Medi-Cal documents for 10 years.
- 3.5 HPSM Provider contracts specify the appropriate handling, development, and maintenance of medical records.
- 4.0 Record Retention under Healthy Kids, HealthWorx, ACE.
  - 4.1 There are no document retention laws that apply specifically to these programs. HPSM will therefore apply the 10 year retention requirement to have a uniform standard for all our lines of business.
- 5.0 Exceptional Cases
  - 5.1 On a case by case basis the Chief Compliance Officer may allow the retention of a document for less than 10 years if the document is not related to CareAdvantage and staff requesting the shorter period has good cause. No requests to retain a non-CareAdvantage document for less than 6 years will be granted.
  - 5.2 To facilitate compliance with this policy and procedure all staff are encouraged to as much as possible retain documents in electronic files and not keep paper documents.
- 6.0 Destruction of Documents
  - 6.1 Notwithstanding how old medical or financial records in staff possession might be, no employee shall destroy any records without taking precaution to protect the confidentiality of the information. It is a violation of law to negligently dispose of, abandon, or destroy medical records in a manner which fails to preserve their confidentiality.
  - 6.2 Staff should refer to policy and procedure PS.04, Disposal of Protected Health Information, before destroying any records.

## **Distribution List**

All Staff

## Attachments

None

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Log of Revisions		
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0	08/05/2011	
1	09/07/2012	
2	09/30/2013	
3	01/06/2015	
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