

POLICY TITLE: RETENTION OF RECORDS		POLICY # 3.6	REVIEW DATES	
Topic Area:	INFORMATION MANAGEMENT		11/3/21	2/1/24
Applies to:	LRE Staff, member CMHSPs, Network Providers	ISSUED BY: Chief Executive Officer		
Developed a Maintained b		APPROVED BY: Board of Directors		
Supersedes: N/A		Effective Date: July 21, 2016	Revised Date: 2/1/2024	

I. PURPOSE

This policy identifies the standards by which Lakeshore Regional Entity (LRE), its Member CMHSPs and network providers will maintain program and clinical records. The records described by the Department of Technology, Management & Budget (DTMB) will be managed by the LRE and its Member CMHSPs in compliance with that policy.

II. POLICY

Lakeshore Regional Entity, as the primary payor, is the owner of all data related to Covered Persons pursuant to this Agreement, including all data entered into CMHSP's Information Systems, such as eligibility and demographic data, utilization data, claims data, other service data, or administrative or financial information that has passed through LRE or Member CMHSPs operations and resides with CMHSP. Notwithstanding the foregoing, CMHSP is not precluded from maintaining and utilizing the data identified in this section in support of Covered Services provided to a Covered Person and internal CMHSP operations. CMHSP agrees to provide information to LRE related to encounters, services, and administrative costs as required by LRE.

LRE is obligated under its contract with the Michigan Department of Health and Human Services (MDHHS) to maintain and retain applicable records of agency and program activities.

All financial, administrative, and clinical records under the LRE's responsibility must be retained according to the retention schedules in place by the State of Michigan Record Retention Schedule (Department of Technology, Management & Budget (DTMB) <u>General Schedule #20</u>), MDHHS contract for Medicaid Specialty Supports and Services, and federal and state statutes including HIPAA.

A. <u>Records. Record Retention.</u> LRE, Member CMHSPs and network providers shall establish a comprehensive individual service record system consistent with applicable federal or

state statutes, MDHHS guidance, and LRE Policy and Procedure, and in compliance with 42 CFR §456.111 and §456.211.

- LRE is responsible for ensuring Member CMHSPs and Network Providers maintain
 in a legible manner, via hardcopy or electronic storage, beneficiary service records
 necessary to fully disclose and document the quantity, quality, appropriateness,
 and timeliness of Covered Services rendered by Member CMHSP or Network
 Provider to Beneficiary.
- 2. Member CMHSP and Network Providers must comply with 45 CFR §164 allowing access to Beneficiaries to inspect and obtain a copy of Protected Health Information (PHI) contained in the Beneficiary's individual health record.
- 3. LRE shall be given full and unimpeded access to Beneficiary service records.
 - a. Member CMHSPs shall serve as the holder of record, regardless of whether Covered Services are rendered directly or through contractual arrangements with Network Providers.
 - b. The provisions of this Section shall exist beyond the terms of this Agreement, regardless of cause of termination.

III. APPLICABILITY AND RESPONSIBILITY

This policy applies to the LRE, member CMHSPs, and all network providers.

IV. MONITORING AND REVIEW

V. LRE shall ensure compliance by reviewing Member CMHSP record retention policies and procedures and through annual site reviews as needed.

The CEO and designee will review this policy on an annual basis.

VI. DEFINITIONS

N/A

VII. RELATED POLICIES AND PROCEDURES

- A. LRE Information Management Policies and Procedures
- B. LRE Compliance Plan
- C. LRE Compliance Policies and Procedures

VIII. REFERENCES/LEGAL AUTHORITY

- A. Department of Technology, Management & Budget (DTMB) General Schedule #20
- B. Health Insurance Portability and Accountability Act (HIPAA) of 1996
- C. 45 CFR 164.316(b)(2)
- D. MDHHS Medicaid Provider Manual
- E. MDHHS Medicaid Specialty Supports and Services Contract
- F. Medicaid Managed Care provisions of the Balanced Budget Act (BBA) of 1997
- G. 42 CFR 425.314

IX. CHANGE LOG

Date of Change	Description of Change	Responsible Party
12/16/21	New- Previously in	CEO and Designee
	Compliance Section	
2/1/2024	Update language to align with language that was removed from the subcontract	CEO or Designee