

SWMBH Operating Policy 10.20

Subject: Compliance Document Retention		Accountability: Compliance	Effective Date: 07/24/2015	Pages: 2
REQUIRED BY: BBA Section _____ PIHP Contract Section _____ NCQA/URAC Standard _____ Other _____			Last Reviewed Date: 10/4/18	Past Reviewed Dates: 7/31/15 8/26/16 5/17/17
LINE OF BUSINESS: <input type="checkbox"/> Specialty Waiver (B/C) <input type="checkbox"/> 1115 Waiver <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Medicaid <input type="checkbox"/> SUD Block Grant <input type="checkbox"/> MI Health Link <input type="checkbox"/> OTHER: _____	APPLICATION: <input checked="" type="checkbox"/> SWMBH Staff and Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH / DD providers <input type="checkbox"/> Other: _____		Last Revised Date: 10/4/18	Past Revised Dates: 7/31/15 8/26/16
Approved : <u>Mila C. Todd</u> Date: <u>10-11-18</u>		Required Reviewer: Chief Compliance & Privacy Officer		

I. Purpose

To provide policy on retention, destruction, and privacy issues regarding compliance-related documents.

II. Policy

Documents generated pursuant to the Southwest Michigan Behavioral Health (SWMBH) Program Integrity/Compliance Program including, among other documents meeting minutes, investigatory documentation, authoritative documentation, corrective action plans, and educational materials, shall be maintained by the Chief Compliance Officer or his/her designee according to the guidelines set forth below.

III. Standards and Guidelines

- A. Retention: All records created in accordance with the operation of the Program Integrity/Compliance program shall be maintained for a minimum of ten (10) years. However, if after that time period there are any ongoing litigation or internal or external investigations including for example, cost report reviews, Office of the Inspector General ("OIG") investigations, lawsuits or similar actions, then records relevant to the action shall be retained until the action is concluded. Documents may be retained for longer periods upon the decision of the Chief Compliance Officer.
- B. Method of Retention: To the extent practicable, records shall be maintained for a minimum of ten (10) years in a form to be designated by Southwest Michigan Behavioral Health provided that such format allows for the accurate reproduction of such records. When possible, retention of Program Integrity/Compliance documents will be in electronic format on the corporate shared drive. Any documentation maintained in paper format will be secured in a locked location.
- C. Destruction Schedule: Program Integrity/Compliance records shall be uniformly destroyed, in a manner determined by the Chief Compliance Officer upon the expiration of the retention period. If at the expiration of the retention period, there is ongoing litigation or any internal or external

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investigation including, for example, cost report reviews, OIG investigations, lawsuits, or similar actions, then records relevant to the action shall be retained until the action is concluded, and the destruction schedule will not resume for these records until approved by the Chief Compliance Officer. Documents may be retained for longer periods upon the decision of the Chief Compliance Officer.

- D. Privilege, Privacy and Security: The Chief Compliance Officer shall take reasonable steps to assure that the records are retained in a secure environment including during the document destruction procedure, in accordance with all applicable laws and Southwest Michigan Behavioral Health policies including policies related to protected health information pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), When implementing a protocol to maintain security, the Chief Compliance Officer shall assure that the protocol ensures limited access to documents during the retention period to authorized individuals.

IV. Definitions

None

V. References

None

VI. Attachments

None