

# BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

<b>Chapter: 13</b>	<b>Corporate Compliance</b>		
<b>Section: 2</b>	<b>Administrative &amp; Operational Practices</b>		
<b>Topic: 3</b>	<b>Document Retention and Disposal</b>		
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## Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to establish and maintain a comprehensive record retention and disposal system consistent with state and federal statutes.

## Purpose

This policy and procedure establishes guidelines concerning the retention and/or disposal of all BABHA documents regardless of paper or electronic format. These guidelines ensure that as public records, documents are not rendered unusable and are retained for both the minimum amount of time and specified periods of time consistent with the identified retention and disposal schedules.

## Education Applies to:

- All BABHA Staff
- Selected BABHA Staff, as follows:
- All Contracted Providers:  Policy Only     Policy and Procedure
- Selected Contracted Providers, as follows:
  - Policy Only     Policy and Procedure
- Other:  Policy Only     Policy and Procedure

## Definitions

1. **Clinical Record:** Records containing demographic, treatment planning, billing and related service delivery records for individuals receiving behavioral health services through BABHA.
2. **Confidential Information:** Information not known to the general public and designed to be shared with designated parties only. Such information may be considered proprietary, i.e., of a business nature, such as certain financial data, test results, business plans and strategies, etc. or may be privileged communications, such as that shared between legal counsel and agency leadership, clinicians and persons served, etc. All protected health information (PHI) is considered to be confidential information, but all confidential information is not PHI.
3. **Documents/Records:** Recorded information that is prepared, owned, used, in the possession of, or retained by, an agency in the performance of an official function from the time the document/record is created or received. The information can be set in any physical format, including, but not limited to electronic records of any sort, paper, photographs, microfilm,

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etc. The terms documents and records are used interchangeably throughout this policy and procedure.

4. **Electronic Records:** Information recorded by a computer that is produced or received in the initiation, conduct, or completion of an agency or individual activity. Examples include email messages, word-processed documents, electronic spreadsheets, digital images, databases, and metadata (automatically generated information about electronically processed records that is not usually seen as it is embedded in the electronic file).
5. **General Retention and Disposal Schedule:** A timetable, required by Michigan law, that identifies how long records must be kept and when they may be destroyed. See the Attachments to this policy and procedure for the actual schedules: General Schedule #1 - Non-Record Materials, General Schedule #20 – Community Mental Health Services Program (CMHSP) and General Schedule for Substance Use Disorder.
6. **Non-Record Materials:** Documents that are broadly defined as drafts, duplicates, convenience copies, “for your information” documents, preliminary drafts, internal notes, publications and other similar materials. They possess no administrative, legal, fiscal or archival value.
7. **Office of Record:** The person or department responsible for the origination and/or custody of documents.
8. **Scanned Document:** A reproduction of an original document that is complete and fully readable. The electronic image of the document is captured using a proprietary product like Adobe that generates a pdf file, or captured using a locally developed imaging system like Gallery EMR.
9. **Usable Record:** A record that can be located, retrieved, presented, interpreted and accessible for the duration of the retention period.
10. **Retention Codes:** These codes appear on the Retention and Disposal Schedules. They are expressed in acronyms and/or a specified amount of time, for example, ACT + 6 means Active plus 6 years. The codes and their descriptions are listed as follows:
  - **ACT = Active:** The record is retained until it is determined to be inactive.
  - **CR = Creation:** The retention period begins from the date the correspondence is created (CR) or received.
  - **EXP = Expiration:** An expiration code is assigned to contracts, grants, or other types of agreements that must be retained until an expiration date or other legal condition has been met.

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- FY = Fiscal Year: The record must be retained for the duration of the Fiscal Year.
- SUP = Superseded: Records that are updated or revised at various times during the records' lifetime. The record remains in effect until replaced or superseded.
- EVT = Event: The retention period is based on a future action or condition.
- PERM = Permanent: These records are not authorized for destruction at any point in time and will be retained in the custody of the creating agency.

## **Procedure**

1. All documents must be maintained in English, in a legible manner, and retained in accordance with retention and disposal schedules as defined in this policy and procedure.
2. Office of Record
  - a. The assigned office of record will be responsible for retaining custody of any original documents they generate for a particular function or unit of the organization. If not otherwise assigned, individual employees are considered responsible and are recognized as the office of record. For email correspondence, the sender is generally considered the office of record.
  - b. When employees receive documents (correspondence emails, etc.) from any source outside of the BABHA network, they become the office of record for that information.
  - c. When documents arise or are compiled from multiple sources, such as committee work products, the office of record will be the staff member who retains custody of the main body of work, such as the chairs or facilitators of committees or teams or department directors or supervisors.
  - d. BABHA's assigned offices of record are as follows:
    - i. The Medical Records Associate for clinical records, under the supervision of the Director of Healthcare Accountability/ Corporate Compliance Officer.
    - ii. The Director of Human Resources for personnel records.
    - iii. The Chief Financial Officer for financial records.
    - iv. The Chief Executive Officer (CEO) for administrative records.
    - v. The Director of Healthcare Accountability/Corporate Compliance Officer for corporate compliance records.

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- vi. The Recipient Rights /Customer Service Manager for recipient rights and customer service records.
  - vii. The Quality Manager for quality management records.
3. Litigation, Subpoenas and Freedom of Information Act Requests
- a. Upon notice of pending litigation, the Chief Executive Officer (CEO), the Chief Financial Officer for financial and contract records, the Director of Human Resources for human resources records, and the Corporate Compliance Officer (CCO) for clinical (i.e., consumer) records, will take all necessary actions to ensure that any documents subject to litigation/discovery will be immediately preserved as directed, and retained in their current paper and/or electronic format by the office of record until the State guidelines for litigation files are met.
  - b. Upon receipt of a request for information covered under the Freedom of Information Act (FOIA), the CEO or Human Resource Director will take all necessary actions to ensure that any and all documents subject to the request will be immediately preserved and retained in their current paper and/or electronic format by the office of record until State guidelines for FOIA records are met.
  - c. BABHA employees shall neither destroy nor alter any document maintained by BABHA, or maintained by another party for BABHA, in anticipation of a request for those documents from any governmental agency or court. If any BABHA employee believes that such conduct has occurred or may be occurring, he or she shall contact the Corporate Compliance Officer, or designee, immediately.
4. Reproduction of Records
- a. Reproduced records shall have the same force and effect as a true paper copy and as an original for legal purposes in that it is admissible in court, administrative proceedings, and elsewhere as evidence, in the same manner as an original.
  - b. Records will be reproduced consistent with the directives of BABHA Policy and Procedure, C09-S01-T12 – Transformation of Media Data.
5. Destruction of Records
- a. The Michigan Penal Code (MCL 750.491) establishes misdemeanor penalties for disposing of records without the authorization of an approved retention and disposal schedule.

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- b. In regard to clinical records, scanned paper documents may be stored for three (3) months and then disposed of.
  - c. Scanned documents must undergo a validation process, whereby the scanned images are randomly checked during the scanning process to ensure full image capture and readable renderings, and to ensure the storage indexing system is adequate to support successful retrieval of the image as needed.
  - d. Confidential information and PHI documents will be disposed of by shredding, or by destroying or sanitizing electronic media.
    - i. For general paper shredding, documents will be placed in shredding bins located at each BABHA site and equipped with a key lock. Selected individuals at each site will maintain the keys to allow the bins to be opened for the shredding of bulk documents, such as boxes of original records left after document imaging, when necessary.
    - ii. For highly confidential paper documents, the Board Administration will maintain one crosscut shredder. Such documents are usually generated by the Corporate Compliance, Human Resource, or Recipient Rights Departments. Crosscut shredders must be capable of maintaining a shred size not exceeding 1/32 of an inch in width with a 1/64-inch tolerance by 1/2 inch in length. Any shredders requiring replacement of the unit or rebuilding of the shredder blades assembly must be replaced by a crosscut shredder on the latest National Service Agreement (NSA) Evaluated Products List of High Security Crosscut Shredders.
    - iii. Electronic documents will be destroyed consistent with the directives of BABHA Policy and Procedure, C09-S04-T07 Electronic Devices and Media Controls – Movement, Re-use, Data Back-up, and Disposal. The BABHA Information Systems (IS) Help Desk will assist with sanitization of electronic media in accordance with BABHA Policy and Procedure, C09-S04-T07 – Electronic Devices and Media Controls – Movement, Re-use, Data Back-up, and Disposal.
  - e. Non-record materials may be destroyed as soon as they have served their intended purpose.
6. Retention/Disposal Schedules

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<b>General Administration Records</b>	<b>Retention Schedule</b>
Administrative Subject Files (Planning documents (including Annual Submission), activity reports, organizational charts and descriptions)	ACT+6
Audio-Visual Materials	ACT
Board Member Records (photos, biographies)	PERM
CMHSP Bylaws	PERM
County Board of Commissioners Records (Correspondence and Enacting/Enabling Resolutions)	PERM
Correspondence - General	CR+2
Correspondence – Transitory (no documentary value)	CR+30 days
FOIA Records	CR+1
Litigation Files and Subpoenas (all types)	ACT+10
Legal Opinions Prepared on Behalf of BABHA	SUP
Meeting Records – Internal Agency Staff	CR+2
Meeting Records – Public Bodies - Closed Meeting Sessions	PERM
Meeting Records – Public Bodies - Open Meeting Sessions	PERM
Board Related Meeting Calendars	ACT+2
Other Administrative Calendars (via electronic Microsoft Outlook software)	CR+2
Policies, Procedures and Directives (Includes Protocols)	SUP
Strategic Plans	CR+5
Visitor Logs/Registers	CR+2

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Clinical Records	Retention Schedule
State retention schedules identify different retention periods for Identifying and Summary Data, Medical and Non-Medical Data. Due to the integrated nature of electronic health records, BABHA will retain all data contained in the clinical record of persons served for the maximum time period identified on the state retention schedule.	
Adult Clinical Records (including OBRA and PAS/ARR records)	ACT+20
Child Clinical Records	ACT+10 or until the child is seven years past the age of majority, whichever is longer
Notes Documenting Provision of Community Living Supports, Personal Care, Skill Building and Similar Services	ACT+7
Client Demographic and Billing Database System	ACT+7
Calendars of Staff and Consumer Appointments (via electronic health record keeping system)	See Adult and Child Clinical Records
(Treatment) Denial Letters	CR+7
Family Support Subsidy Records	CR+7

Recipient Rights, Customer Service, Compliance and Quality Records	Retention Schedule
Recipient Rights, Customer Service, Compliance and Quality Files (resulting from complaints/investigations)	CR+10
Investigation Acknowledgement Letters	CR+1
Consumer Grievance/ Mediation/ Hearing Records	ACT+7
Informal Inquiries	CR+3
Death Review Report	CR+7
Incident Reports – Used as evidence for a complaint or investigation	See RR, Compliance and Quality Files
Incident Reports – Used for aggregation	One year
Peer Reviews	CR+7

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<b>Recipient Rights, Customer Service, Compliance and Quality Records</b>	<b>Retention Schedule</b>
Event Verification and other compliance and performance monitoring reports	CR+7

<b>Information Systems Records</b>	<b>Retention</b>
System Documentation (i.e., development of data systems: requests, flowcharts, record layouts, job control language, program narratives, report detail & descriptions, printer spacing charts, sample printouts, etc.)	ACT+2
Programming Documentation (i.e., computer program descriptions, modification requests, report distribution sheets, report samples, workflows, source listings, test data, computer run sheets, documentation checklists, etc.)	ACT+2
Back-ups of Email System (i.e., Email, Calendar and Contacts)	ACT+1
Back-ups of Personal (i.e., individual) drives	ACT+1
Back-ups of Group (i.e., shared) network drives	ACT+7
Back-ups of financial management software	ACT+7
Back-ups of SQL databases and other data supporting state, regional and local reporting	ACT+7
Back-ups of clinical record keeping software	Maintained by EHR vendor

<b>Finance Records</b>	<b>Retention</b>
<b>General Documents/Records</b>	
Bank Reconciliations	CR+7
Bank Statements	CR+7
Budget Documentation	CR+7
Approved Budgets (in Board packets)	PERM



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<b>Finance Records</b>	<b>Retention</b>
Contracts: Corporate	EXP+6
Contracts: Vendor	EXP+6
Correspondence: Accounting	7 years
Correspondence: Credit & Collection	7 years
Cost Accounting Records	FY+5 years
Depreciation Schedules	7 years after disposal of fixed asset
Equipment Leases	EXP+7
Financial Reports: Annual	PERM
Financial Reports: Audited	PERM
Financial Reports: Interim	FY+3 years
Inventory Records	7 years after disposal
Leases	EXP+7
Year End Closing Records	FY+7
<b>Accounts Receivable</b>	
Approved Fee Schedule	FY+7
Accounts Receivable Invoices	FY+7
Accounts Receivable Aging Reports	FY+7
Uncollectible Accounts Records	7 years
Other Accounts Receivable Support Documentation	FY+7
<b>Disbursements</b>	
Bid Documentation	CR+5
Check Registers	FY+10

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<b>Finance Records</b>	<b>Retention</b>
Petty Cash Records	FY+7
Purchase/AP Invoices and Requisitions	FY+7
Purchase Order Copies	FY+7
Packing Slips	FY+7
Travel Record/Expense Vouchers (employees)	FY+7
Vouchers (copies)	FY+7
Vouchers (registers)	FY+7
<b>Ledgers and Journals</b>	
Accounts Payable Ledger	FY+7
Accounts Receivable Ledger	FY+7
Cash Journal	FY+7
General Journal	FY+7
General Ledger	PERM
Journal Entries	FY+7
Payroll Journal	FY+10
Purchases Journal	FY+7
<b>Payroll Records</b>	
Earnings Records	CR+7
Garnishments	3 years
Pay Checks	CR+7
Payroll Check Register	CR+10
Record of Salary and Wage Rate Changes	CR+7

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<b>Finance Records</b>	<b>Retention</b>
Tax Records	CR+7
Timesheets	CR+5
W-2 Forms	CR+7
<b>Other</b>	
Grant Records	ACT+7
Hazardous Materials Safety Data Sheets	ACT+30
MIOSHA 200 Log/Summary-Occ Injury/Illness	CR+5
Mortgages	EXP+7
Appraisals	7 years after disposal
Property Plans & Specifications	7 years after disposal

<b>Human Resources/Staff Development Records</b>	<b>Retention</b>
Selection Files	CR+4
Accident Reports (Settled under General Liability)	CR+7
Applications (employees)	ACT+7
Employment Applications/Resumes (those not hired)	CR+1
Credentialing Records	CR+7
Direct Service Workers Training Record	CR+7
Disability Claims	CR+10
Discrimination Complaint Records	ACT+7
Employee Contracts	ACT+7
Employee Grievance Files	ACT+7
Employee Training Record	ACT+7

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<b>Human Resources/Staff Development Records</b>	<b>Retention</b>
Insurance Policies	EXP+6
Medical Records	ACT+7
Medical Records (Exposure to Hazardous Materials)	ACT+30
Personnel Files	ACT+7
Reasonable Accommodation Files	ACT+7
Recipient Rights Training Records	CR+6
Unemployment Compensation Files	CR+5
Union (Labor) Contracts	EXP+3
Withholding Exemption Certificates (W4s)	ACT+7
Worker's Compensation Reports	CR+10
I-9 Forms (Identity and Immigration Status)	EVT+3
COBRA Records	CR+7

**Attachments**

None

**Related Forms**

None

**Related Materials**

1. BABHA Policies and Procedures
  - C09-S01-T12 – Transformation of Media Data
  - C09-S04-T07 – Electronic Devices and Media Controls – Movement, Re-use, Data Back up and Disposal

**References/Legal Authority**

- CARF Accreditation Manual
- Michigan Medicaid Manual

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<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 2/13/2025. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.</b>			

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- MDHHS/CMHSP Managed Specialty Supports and Services Contract Agreement; Part 1: Contractual Services Terms and Conditions: Closeout; General Statement of Work: Beneficiary Service Records; and Compliance Examination Guidelines: Retention of Working Papers and Records
- Michigan Records Reproduction Act (Act 116 of 1992)
- Michigan Department of Management and Budget, General Schedule # 20 – Community Mental Health Services Program (Signed 02/27/07)
- Michigan Department of History, Arts, & Libraries General retention and Disposal Schedule #6 – County Clerks, approved May 3, 2005

<b>SUBMISSION FORM</b>				
<b>AUTHOR/ REVIEWER</b>	<b>APPROVING BODY/ COMMITTEE/ SUPERVISOR</b>	<b>APPROVAL/ REVIEW DATE</b>	<b>ACTION (Deletion, New, No Changes, Replacement or Revision)</b>	<b>REASON FOR ACTION - If replacement list policy to be replaced</b>
M. Bartlett	J. Pinter, CCO	08/20/09	No Changes	Review only
M. Wolber B. Smith M. Rozek	J. Pinter, CCO	12/16/13	Revision	Revised to reflect current practices and to replace: C13-S02-T12 – Records Retention-Clinical, C13-S02-T13 – Records Retention – Financial-Human Resources and C13-S02-T14 – Records Retention-Recipient Rights
J. Pinter C. Pinter B. Smith M. Rozek	Corporate Compliance Committee	3/1/17	Revision	Revised retention periods to reduce wherever possible to the minimum retention period required by the State of Michigan
J. Pinter	Corporate Compliance Committee	09/21/21	Revision	Update acronyms and titles.
K. Amon	Corporate Compliance Committee	1/30/25	No Changes	Reviewed.