RECORD KEEPING

Components of Record Keeping

All provider records must be maintained in an accessible, standardized order and format at the enrolled office site in the Department of Health and Hospital's (DHH) administrative region where the recipient resides. The provider must have sufficient space, facilities, and supplies to ensure effective record keeping. The provider must keep sufficient records to document compliance with DHH requirements for the recipient served and the provision of services.

A separate record must be maintained on each recipient that supports justification for prior authorization and fully documents services for which payments have been made. The provider must maintain sufficient documentation to enable DHH or its designee to verify that prior to payment each charge is due and proper. The provider must make available all records that DHH or its designee finds necessary to determine compliance with any federal or state law, rule, or regulation promulgated by DHH.

Recipient Records

Providers must have a separate written record for each recipient served by the agency. It is the responsibility of the service provider to accurately document services thereby conveying an on-going chronology of activities undertaken on behalf of the recipient. Services provided must clearly be related to the services documented in the recipient's Plan of Care.

The organization of individual recipient records and location of documents within the record must be consistent among all records. Records must be appropriately thinned so that current material can be easily located in the record.

All entries and forms completed by staff in recipient records must be legible, written in ink and include the following:

- The name of the person making the entry,
- The signature of the person making the entry,
- The functional title of the person making the entry,
- The full date of documentation, and
- Reviewed and signed by the supervisor, if required.

Any error made by the staff in a recipient's record must be corrected using the legal method which is to draw a line through the incorrect information, write "error" by it and initial the correction. Correction fluid must never be used in a recipient's record.

Service Logs

Service logs are the "paper trail" for services delivered and must clearly reflect the services provided and billed. Federal requirements for documenting claims require the following information be entered on the service log to provide a clear audit trail:

- Name of recipient,
- Name of provider and employee providing the service,
- Service agency contact telephone number,
- Date of service contact,
- Start and stop time of service contact, and
- Content of service contact.

Service logs must be reviewed by the supervisor (if applicable) to ensure that all activities are appropriate in terms of the nature and time, and that documentation is sufficient.

Availability of Records

Providers must make recipient and personnel records available to DHH, its designee and/or other state and federal agencies upon request. The provider shall be responsible for incurring the cost of copying records for DHH or its designee.

Confidentiality and Protection of Records

Records, including administrative and recipient, must be the property of the provider and secured against loss, tampering, destruction or unauthorized use. Providers and their employees must not directly or indirectly disclose or knowingly permit the disclosure of any information concerning the agency, the recipients or their families to any unauthorized person. The provider must safeguard the confidentiality of any information which may identify the recipient or his/her family. Confidential information shall only be released under the following conditions:

- Court order,
- Recipient's written informed consent for release of information,
- Written consent of the individual to whom the recipient's rights have been devolved when the recipient has been declared legally incompetent, or
- Compliance with the Federal Confidentiality law of Alcohol and Drug Abuse Patients Records (42 CFR, Part 2).

A provider must, upon request, make available information in the case records to the recipient or legally responsible representative. If it is felt in the professional judgment of the administration of the provider agency that the information contained in the record would be damaging to the recipient, that information may be withheld from the recipient except under court order.

The provider may charge a reasonable fee for providing the above records. This fee cannot exceed the community's competitive copying rate.

A provider may use material from case records for teaching or research purposes, development of the governing body's understanding and knowledge of the provider's services, or similar educational purposes, if names are deleted and other similar identifying information is disguised or deleted.

NOTE: Under no circumstances should providers allow staff to remove recipient records from the office.

Retention of Records

The agency must retain administrative, personnel, and recipient records for whichever of the following time frames is longer:

- Until records are audited and all audit questions are answered, **OR**
- Five years from the date of the last payment period.

NOTE: Upon provider closure, all provider records must be maintained according to applicable laws, regulations and the above record retention requirements and copies of the required documents transferred to the new agency.