BayCare Health Plans

Title: Health Plan Document and Data Retention Policy	**Policy Number:** CMP13 V.04
Issued For: ☒ BayCare Select Health Plans Inc.	**Original Issue Date:** 09/01/2018
	Select one below and input date, if applicable: ☒ **Date Last Reviewed / Revised** 04/27/2021 **OR** ☐ **Date Last Reviewed / No Revisions OR** ☐ **New Policy / N/A**
Issuing Department: Compliance	**Effective Date:** 05/13/2021
Approved and Owned by: Joanna Tofani, Chief Compliance Officer DocuSigned by: Joanna Tofani E33730A53E684B8... **Signature**	**Date Approved by Compliance Committee:** 05/13/2021 Compliance Committee

I. PURPOSE

To ensure that BayCare Select Health Plans, Inc. (BayCare Select) defines the standards for the maintenance, transportation, and destruction of records in a manner that both complies with applicable federal, state and local regulatory requirements and protects provider, and member confidentiality.

II. SCOPE

This policy applies to the BayCare Select Workforce, the governing body (Board) of BayCare Select, and to FDRs supporting BayCare Select.

III. DEFINITIONS

Records: Any identifiable and recorded documentation of BayCare Select, regardless of format as outlined in the following:

- Health Insurance Portability and Accountability Act (HIPAA) 45 CFR 164
- CMS Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines, Sections 50.3.2, 50.5.3, 50.7.7
- 42 C.F.R. 422.504(d),(e)
- 42 C.F.R. 423.505(d),(e)
- Fla. Reg. 69O-191.074

Records include both hard-copy paper form as well as any type of electronically stored information. Electronic 'records' (including, but not limited to, e-mail, e-mail attachments, voice mail, video, word processing, spreadsheets and other commonly-used applications, databases, files stored in personal digital assistants and other ancillary storage devices, files stored on

networks, desktop, and laptop computers, CDs, disks, cellular phones, etc.) produced using BayCare Select's and / or an FDR's equipment and/or stored on BayCare Select's and / or an FDR's property or devices, whether in-office or remotely, are Records. All such documents are the property and proprietary interest of BayCare Select and are subject to the guidelines defined in this Policy.

CMS: The Centers for Medicare & Medicaid Services. This is the agency within the Department of Health and Human Services (HHS) that is responsible for directing the national Medicare program.

First Tier, Downstream, or Related Entity (FDR): Has the meaning of the respective terms as defined in the Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines.

Workforce:

For purposes of this policy a workforce member includes all current employees including, permanent, temporary, full-time, and part-time employees, volunteers (e.g. unpaid interns), consultants, who have job duties related to BayCare Select's Medicare Advantage (Part C) and / or Prescription Drug (Part D) business, and members of the governing body (i.e., Board of Directors) responsible for oversight of the Medicare program under the director control of BayCare Select, whether or not they are paid by BayCare Select.

Protected Health Information (PHI): Has the meaning of PHI as defined by the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations (45 CFR § 160.103).

IV. OWNERSHIP

The Chief Compliance Officer (CCO) is responsible for the administration and oversight of this policy and procedure.

V. POLICY

A. Overview:

1. BayCare Select will comply at all times with applicable federal, state and local laws, including adherence to the rules and regulations established by CMS. BayCare Select will manage its business needs, comply with all regulatory requirements, ensure data integrity, and practice efficiency in the use of facility storage space.

2. All users of systems and data who create, receive, use, or disclose BayCare Select information for any purpose, including PHI, are required to adhere to the document storage and retention standards outlined in this Policy.

3. All BayCare Select Workforce members are responsible for ensuring that accurate and complete records are identified, retained, stored, protected, retrieved and disposed of within their area of assigned responsibility in accordance with this policy and the requirements set forth in the record retention schedule.

4. BayCare Select will maintain Records to:

    i. Accommodate periodic auditing of Records containing financial information (including data related to Medicare utilization, costs, and computation of the bid).
    ii. Enable CMS to inspect or otherwise evaluate the quality, appropriateness and timeliness of services performed under its contract with BayCare Select.
    iii. Enable CMS to audit and inspect any books and records that pertain to BayCare Select's ability to bear the risk of potential financial losses, or to services performed or determinations of amounts payable under its contract with BayCare Select.
    iv. Properly reflect all direct and indirect costs claimed to have been incurred and used in the preparation of the bid proposal and / or otherwise necessary for the calculation of gross covered prescription drug costs, allowable reinsurance costs, and allowable risk corridor costs.
    v. Establish component rates of the bid for determining additional and supplementary benefits.
    vi. Establish the basis for the components, assumptions, and analysis used by BayCare Select in determining the actuarial valuation of standard, basic alternative, or enhanced alternative coverage offered in accordance with the CMS guidelines.
    vii. Determine the rates utilized in setting premiums for State insurance agency purposes and for other government and private purchasers.

B. **Maintenance and Storage:**

1. Active and inactive Records are maintained in a systematic manner that provides reasonable protection from loss, damage, and unauthorized access.

2. Records are retained in a manner that allows them to be readily retrievable in their original format.

3. Records are stored in a manner that accurately identifies the information, provides adequate confidentiality and protection from theft or damage, and allows for easy retrieval by authorized parties. All stored Records must be clearly and accurately labeled with a description of the contents and the date (or time period) of the materials.

4. Records containing regulated or protected information must be stored in a manner consistent with the governing regulatory requirements (i.e. secured files, limited access, etc.), as well as applicable BayCare Select HIPAA privacy / security policies and procedures.

5. Electronic Records:

    a. In cases where BayCare Select maintains an electronic Record in lieu of a paper or other physical record, the retention period for the electronic record is identical to the retention period for the equivalent type of paper or physical record.

    b. Electronic / master records must be stored on servers, not on individual desktop or laptop hard drives.

c. The master electronic records are maintained in shared folders on the appropriate servers, rather than in folders that are only accessible to the individual who created or received the record.

d. Department managers will designate where master copies of electronic records are stored on network drives.

C. **Retention Schedule:**

a. BayCare Select, and where applicable, its FDRs will retain Records in accordance with the retention schedule set forth below. Records are retained for at least the following periods, or longer if required by applicable federal or state law or contract. If a Record could arguably fit under more than one Record type below with varying retention periods, BayCare Select will retain the Record in accordance with the longer retention period.

b. BayCare Select shall destroy such Records after the specified time period has expired (unless otherwise directed as described herein).

c. The Records retention schedule is not inclusive of every record type. Records not expressly identified in the following retention schedule will be retained for the same length of time as a substantially similar document that is specified in this Policy.

d. Workforce members with questions regarding retention timeframes for a particular Record will contact the CCO for additional information *before destruction*.

#	Record Type	Retention Period
1	All Records and documentation required by federal or state law and the program requirements of federal health plans. Such Records include but are not limited to the following: • All records that demonstrate the decision-making process for claims payment; • Organization determinations; • Appeals; • Grievances; • Enrollment and disenrollment of beneficiaries for the current contract period and 10 prior periods; • Customer service inquiries; • Marketing Records (i.e., print ads, sales materials, and printed materials for general public); • All prescription drug claims for the current contract period and 10 prior periods; and • All price concessions (including concessions offered by manufacturers) for the current contract period and 10 prior periods accounted for separately from other administrative fees.	10 years
2	All Records necessary to protect the integrity of BayCare Select's Compliance Program and confirm the effectiveness of the Program, including (but not limited to): • Evidence of adequate training, including (at a minimum) the training topic, date, attendance, certificates of completion (if applicable), and test scores (if applicable);	10 years

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#	Record Type	Retention Period
	• Reports of compliance violations, including the date the violation was reported and a description of the violation; • Documentation regarding any investigation conducted as a consequence of a report of a compliance violation, including the date of investigation, summary of findings, disciplinary action taken, and the date action was taken; • Modifications to the Compliance Program; • Material written notifications to FDRs regarding compliance activities (e.g., corrective action plans); • Results of auditing and monitoring efforts.	
3	Ownership and operation of BayCare Select's financial, medical, and other record keeping systems.	10 years
4	Files regarding in-network and out-of-network providers that have been the subject of complaints, investigations, violations, and prosecutions.	10 years
5	All records as required by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA").	6 years from the date of the Record's creation, or the date when it last was in effect, whichever is later.
6	All records as required for accounting, financial reporting, and income tax purposes. This includes, but is not limited to: • Financial records including annual earned premiums and claims incurred, but not reported (IBNR); • Financial statements for the current contract period and 10 prior periods; • Federal income tax or informational returns for the current contract period and 10 prior periods; • Matters pertaining to costs of operations; • Amounts of income received by source and payment; • Cash flow statements; • Purchasing Records; and • Any financial reports filed with other Federal programs or State authorities.	Permanent
7	Team Resources / Human Resources / Personnel Records / Payroll	See BayCare System Policies & Procedures
8	Any other Record that relates to BayCare Select business transactions. This includes, but is not limited to: • Corporate Records (i.e., annual reports, articles of incorporation, external audit reports, certificates of incorporation, qualification to perform business in state); • Insurance and reinsurance documents; • Records regarding asset acquisition, lease, sale, or other action; • Facilities related Records; • Contracts and subcontracts; • Licenses; • Franchise, marketing, and management agreements;	Permanent

#	Record Type	Retention Period
	• Corporate Complaints; and • Schedules of charges for BayCare Select's fee-for-service patients, if any.	
9	Reports from State Agencies, CMS or Accrediting Bodies	Permanent
10	Board or Committee Meeting Minutes with Attachments (i.e., quality improvement files, records, evaluations)	Permanent
11	Contracting and credentialing providers	Permanent
12	Legal and Insurance (i.e., releases, settlements, insurance schedules, and insurance policies covering services)	Permanent
13	Policies and Procedures	Permanent

D. **Record Removal, Storage & Transport**

1. **Record Removal:**

   a. Records may be removed from BayCare Select facilities as necessary to facilitate service delivery, payment, or in response to a subpoena or court order.

   b. With prior Department Management approval, Records may be removed from BayCare Select facilities to an alternative workplace if the manager determines the records are needed for the Workforce member at the alternative site to fulfill their job obligations. If the Records are protected under HIPAA and in accordance with BayCare Select HIPAA privacy / security policies and procedures, the same HIPAA protection standards apply to such Records at the alternative workplace as apply when the Records are onsite.

   c. Workforce members working at an alternative workplace must also maintain and destroy BayCare Select information in a manner consistent with the standards set forth in applicable BayCare Select HIPAA privacy / security policies and procedures.

2. **Off-site Storage and Transport:** If any Records must be stored off-site or transported, please refer to applicable BayCare Select HIPAA privacy and security policies and procedures for requirements.

E. **Record Destruction:**

1. Department managers are responsible for the Records within their area of oversight and must authorize the destruction of any Records or data identified in this Policy.

2. *Prior to* destroying any Records, the Department Manager (or designee) should notify the Compliance Department of the document(s)/data that are due for destruction and await Compliance approval before disposing of the Records.

3. If in doubt as to the retention guideline for a document or type of data, contact the CCO.

F. **Destruction Hold on Documentation Subject to Lawsuits, Government Investigations / Audits:**

a. The retention periods set forth in this Policy do not apply to materials that are otherwise eligible for destruction, but which may be relevant to a government investigation, audit, or pending litigation against BayCare Select.

b. In the event of a potential or actual lawsuit or government investigation / audits, BayCare Select will preserve and retain all original documents and data relevant to that lawsuit or investigation, regardless of the timeframe outlined in this Policy.

c. As soon as BayCare Select becomes aware of the reasonable probability of a lawsuit or investigation, the Legal Department will distribute any necessary communications regarding the placement of a legal hold on specific types of documents or data, including electronically stored information and back-up systems.

d. In the event of a legal hold, all Workforce members will adhere to the requirements and directives of the legal hold until official notification is received that the legal hold is no longer required.

G. **Discipline:** BayCare Select has a duty and obligation to retain certain Records as defined above. Workforce members who knowingly and/or willfully destroy or alter Records, or violate a legal hold directive, will be subject to disciplinary action in accordance with applicable policies and procedures.

VI. PROCEDURES

None

VII. REGULATORY REFERENCES / CITATIONS

CMS Records Schedule
Health Insurance Portability and Accountability Act (HIPAA) 5 CFR 164
CMS Medicare Managed Care Manual, Chapter 21 – Compliance Program Guidelines and Prescription Drug Benefit Manual, Chapter 9 – Compliance Program Guidelines, Sections 50.3.2, 50.5.3, 50.7.7
42 C.F.R. 422.504(d),(e)
42 C.F.R. 423.505(d),(e)
Fla. Reg. 69O-191.074 https://www.flrules.org/gateway/ruleNo.asp?id=69O-191.074
FLA. STAT. 501.171 https://www.flsenate.gov/Laws/Statutes/2014/501.171

VIII. RELATED POLICIES & PROCEDURES

BayCare HIPAA privacy and security policies and procedures

IX. ATTACHMENTS

None

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VERSION & REVIEW HISTORY:

Version #	Action (Original Issue, Reviewed, Revised)	Date Action Taken	Brief Summary of Revision, if applicable	Individual Taking Action	Effective Date	Date Approved and By Whom
01	Original Issue	09/01/2018	N/A	Unknown	09/01/2018	N/A
02	Reviewed	07/25/2019	Annual review; no substantive changes.	Paul Christy, CCO	08/01/2019	N/A – Larry Costello, President
03	Revised	04/15/2020	Significant re-write; changes made to template and content of policy and procedure.	Joanna Tofani, CCO	05/13/2020	Compliance Committee 05/13/2020
04	Reviewed	04/27/2021	Annual review; updated definition of Workforce Member.	Joanna Tofani, CCO	05/13/2021	Compliance Committee 05/13/2021