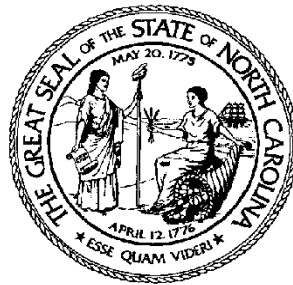


# RECORDS RETENTION AND DISPOSITION SCHEDULE

## DMH/DD/SAS PROVIDER AGENCY

APSM- 10-5



Issued By:



North Carolina Department of Cultural Resources  
Division of Historical Resources  
Archives and Records Section  
Government Records Branch

October 26, 2011

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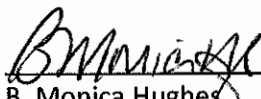
**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND  
SUBSTANCE ABUSE SERVICES PROVIDER AGENCY  
Records Retention and Disposition Schedule**

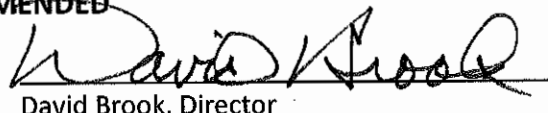
The records retention and disposition schedule and retention periods governing the records series listed herein are hereby approved. In accordance with the provision of Chapters 121 and 132 of the *General Statutes of North Carolina*, it is agreed that the records do not and will not have further use or value for official business, research, or reference purposes after the respective retention periods specified herein and are authorized to be destroyed or otherwise disposed of by the agency or official having custody of them without further reference to or approval of either party to this agreement. Such records shall be disposed of in accordance with the guidelines found in this schedule. However, records subject to audit or those legally required for ongoing official proceedings must be retained until released from such audits or official proceedings, notwithstanding the instructions of this schedule. **Public records including electronic records not listed in this schedule are not authorized to be destroyed.**

The Division of Mental Health, Development Disabilities and Substance Abuse Services (DMH/DD/SAS) and the Department of Cultural Resources agree that certain records series possess only brief administrative, fiscal, legal, research, and reference value. These records series have been designated by retention periods which allow these records to be destroyed when "administrative/reference value ends." The provider agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." If the agency does not establish internal policies and retention periods, the agency is not complying with the provisions of this retention schedule and is not authorized by Cultural Resources to destroy the records with the disposition instruction "destroy when administrative/reference value ends."

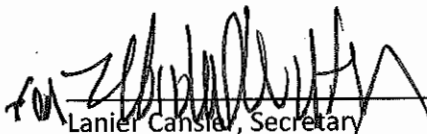
It is further agreed that these records may not be destroyed prior to the time periods stated; however, for sufficient reason they may be retained for longer periods. This schedule is to remain in effect from the date of approval until it is reviewed and updated.

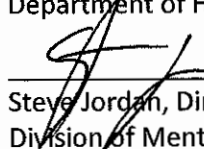
**APPROVAL RECOMMENDED**


  
\_\_\_\_\_  
B. Monica Hughes  
DHHS Chief Records Officer

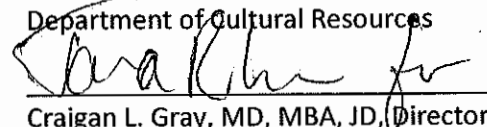
  
\_\_\_\_\_  
David Brook, Director  
Division of Historical Resources

**APPROVED**

  
\_\_\_\_\_  
Lanier Canister, Secretary  
Department of Health and Human Services

  
\_\_\_\_\_  
Steve Jordan, Director  
Division of Mental Health, Developmental  
Disabilities and Substance Abuse Services

  
\_\_\_\_\_  
Linda A. Carlisle, Secretary  
Department of Cultural Resources

  
\_\_\_\_\_  
Craigan L. Gray, MD, MBA, JD, Director  
Division of Medical Assistance

**ACKNOWLEDGED (AGREED TO COMPLY)**

\_\_\_\_\_  
Provider Agency, Director

\_\_\_\_\_  
Chairman, Provider Agency Board

## EXECUTIVE SUMMARY

- ✓ This records retention and disposition schedule is the foundation of the records management program for DMH/DD/SAS Provider agencies.
- ✓ According to G.S. §121-5 and G.S. §132-3, you may only destroy public records with the consent of the Department of Cultural Resources (DCR). This schedule is the primary way DCR gives its consent. Without approving this schedule, your agency is obligated to obtain the Department's permission to destroy *any* record, no matter how insignificant.
- ✓ Notwithstanding the confidentiality of DMH/DD/SAS records under 42 CFR Chapter 1 part 2 (Confidentiality of Alcohol and Drug Abuse Patient Records), 45 CFR Parts 160 and 164 (the Health Insurance Portability and Accountability Act, and applicable statutory requirements in G. S. 122C for the purpose of this schedule, public records are defined as records created during the course of providing publicly-funded DMH/DD/SAS services where such records directly relate to and support the provision of services (e.g. clinical records, personnel records, financial and reimbursement records).
- ✓ Each record series listed on this schedule has specific disposition instructions which will indicate how long that series must be kept in your offices. In some cases, the disposition instructions are simply "Retain in office permanently," which means that those records must be kept in your offices forever. In other cases, the retention period may be "destroy in office when administrative/reference value ends." Administrative value is defined as, "the usefulness of records to support ancillary operations and the routine management of an organization."
- ✓ E-mail is a record as defined by G.S. §121-5 and G.S. §132. It is the content of the e-mail that is critical when determining the retention period of a particular e-mail, including any attachments, and not the media in which the records were created. E-mail should be retained in the same manner as its paper counterpart. It is important for all agency employees and officials to determine the appropriate record series for specific e-mails and retain them according to the disposition instructions.
- ✓ The Department of Cultural Resources recommends that all agency employees and officials take our online tutorials in order to familiarize themselves with records management principles and practices. The online tutorials, which are developed by the Government Records Branch, include topics such as records management, utilizing the retention schedule, e-mail management, and scanning guidelines. This information is available on the Government Records Branch website <http://www.records.ncdcr.gov/>.
- ✓ Questions about DMH/DD/SAS records should be directed to the DMH/DD/SAS Accountability Team Policy Unit (919-881-2446). Questions can also be directed to the Government Records Branch, Division of Historical Resources. When contacting a representative of the Government Records Branch, if you are located west of approximately Statesville, call the Western Office in Asheville at (828) 274-6789. If you are located east of Statesville, all the way to the coast, call the Raleigh office at (919) 814-6900.

## MANAGING PUBLIC RECORDS IN NORTH CAROLINA

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### 1. ***What agencies does this schedule apply to?***

This records retention and disposition schedule is the foundation of the records management program for DMH/DD/SAS Provider agencies.

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### 2. ***My agency is a private service provider. Does this schedule apply to all of our records?***

No. This schedule applies to service records and records supporting the expenditure of state appropriation and federal funds for Local Management Entities (LMEs). For the purposes of record retention, service records are viewed as having two distinct components: the clinical record and the financial record, the latter of which contains client financial, billing, and reimbursement information for the services provided. [For these purposes "reimbursement information" includes personnel records that document that the staff providing billed services held the proper credentials to do so.]

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### 3. ***What is this "records retention and disposition schedule"?***

This document is a tool for the employees of DMH/DD/SAS provider agencies across the state to use when managing the records in their offices. It lists records commonly found in provider agencies to support the provision of publicly-funded DMH/DD/SA services, and gives an assessment of their value by indicating when (and if) those records should be destroyed. This schedule is an agreement between your agency and the Department of Cultural Resources.

This schedule serves as the inventory and schedule that the Department of Cultural Resources is directed by G.S. §121-5 (c) and G.S. §132-8 to provide. It supersedes all previous editions, including all amendments.

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### 4. ***Why do I need this schedule?***

According to G.S. §121-5 and G.S. §132-3, you may only destroy public records with the consent of the Department of Cultural Resources. This schedule is the primary way DCR gives its consent. Without this schedule, your agency is obligated to obtain DCR's permission to destroy *any* public record, no matter how insignificant.

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### 5. ***What are public records?***

The *General Statutes of North Carolina*, Chapter §132, provides this definition of public records:

"Public record" or "public records" shall mean all documents, papers, letters, maps, books, photographs, films, sound recordings, magnetic or other tapes, electronic data- processing records, artifacts, or other documentary material, regardless of physical form or characteristics, made or received pursuant to law or ordinance in connection with the transaction of public business by any agency of North Carolina government or its subdivisions. Agency of North Carolina government or its subdivisions shall mean and include every public office, public officer or official (State or local, elected or appointed), institution, board, commission, bureau, council, department, authority or other unit of government of the State or of any county, unit, special district or other political subdivision of government.

Within the public DMH/DD/SAS system, private provider consumer service records and records supporting the expenditure of state and federal funds which are created by private providers are considered public records because they relate to the transaction of public business by LMEs, the Division of Medical Assistance, and DMH/DD/SAS.

---

**6. How should records be handled when LMEs merge?**

When a Local Management Entity dissolves, the successor organization is obligated to assume responsibility for the records of the dissolved LME for the duration of the retention schedule for those records per the *Records Retention Schedule for State and Area Facilities* [APSM 10-3]. This includes client records, administrative records, and other records covered by the retention schedule. The successor LME has the option of scanning the records and disposing of the paper copies or renting storage space and retaining the records in storage. These records can be disposed of when the retention schedule requirements for the records have been met. Records which have met the retention schedule requirements shall be destroyed if these records are not subject to audit, investigation, or litigation.

There is a straight line of custody for permanent records. 42 CFR 2.19 indicates that when a program dissolves or is taken over by another, and there is a legal requirement to hold records past the time of the discontinuation of the program, the new program takes over custody of the records.

The transfer of substance abuse records is protected by 42 CFR Part 2. In order to ensure the security and privacy of these records, any substance abuse records that are transferred need to be put in sealed envelopes labeled, "Records of [insert name of program] required to be maintained under GS 121 and DHHS Record Retention Schedule found in DMH APSM 10-3 until a date not later than [insert appropriate date.]"

While it is recommended that written permission be obtained from the consumers to transfer their records, when this is not possible, 45 CFR Section 164 provides for the transfer of the records without written permission or authorization by the consumer because of the LME's responsibility for the oversight of DMH/DD/SAS services in the community and to facilitate continuity of care.

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**7. Are the support services of the NC Department of Cultural Resources available to service providers?**

No, support services such as microfilming minutes, disaster assistance, and staff training are intended for the LMEs and state facilities. The LMEs support the records management efforts of the private providers they oversee by providing guidance and technical assistance around records management issues.

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**8. Are there other record retention schedules that I should be aware of?**

Yes, The DHHS Records Retention and Disposition Schedule for Grants incorporates records management requirements for state and federal funds disbursed by the Department of Health and Human Services [DHHS]. All financial and programmatic records supporting documents, statistical records, and all other records pertinent to a federal award must be retained in accordance with this schedule.

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**9. Does Medicaid have records retention requirements?**

Yes, the *Basic Medicaid Billing Guide* [see link: <http://www.ncdhhs.gov/dma/bulletin/BasicMed1006.pdf>] requires that records that "disclose the extent of service rendered to recipients and billed to the N. C. Medicaid Program" be kept for a period of six years [page 3-3]. While Medicaid requires that records be kept for a period of six years, providers of DMH/DD/SAS services are subject to the more stringent schedule for retaining clinical service records outlined in this document and the *DHHS Records Retention and Disposition Schedule for Grants*.

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**10. What do I do if records are subject to multiple requirements?**

When records are subject to two or more sets of standards, your agency must follow the strictest standard.

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**11. Is this schedule up to date?**

Yes. Updates have been made and an extensive revision is conducted in view of the age of the schedule and changes in the DMH/DD/SAS system.

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**12. Working with multiple requirements, an evolving system, and a schedule that is in the process of being revised will be difficult. What accommodations will be made for this situation?**

DMH/DD/SAS, the Government Records Branch of the Division of Historical Resources, and the DHHS Controller's Office recognize these challenges. Staff members from these offices are available for consultation regarding questions about records management requirements and their implementation. Initial questions about records should be directed to the DMH/DD/SAS Accountability Team Policy Unit (919-881-2446).

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**13. Do I have to have all of the records listed on this schedule?**

No. This schedule does not list all the records you must have in your office. This schedule only includes those records that support accountability for the provision of publicly-funded MH/DD/SA services.

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**14. What is the definition of "administrative value"?**

Administrative value is defined as, "the usefulness of records to support ancillary operations and the routine management of an organization." Records having administrative value are generally considered useful or relevant to the activities that caused the record to be created as well as during an audit of those activities. Traditionally, records managers have seen "administrative value" as transitory. (From Richard Pearce-Moses publication, *A Glossary of Archival and Records Terminology*)

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**15. I can't find some of my records on this schedule.**

Call the Records Management Analyst assigned to your provider. We will work with you to amend this records schedule so that you may destroy records appropriately.

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**16. Can anyone see my public records?**

Yes, except as restricted by specific provisions in state or federal law [G.S. §122C (MH/DD/SA Act), CFR Chapter 1, Part 2 (Confidentiality of Alcohol and Drug Abuse Patient Records), 45 CFR parts 160 and 164 (HIPPA)]. G.S. §132-6 instructs:

Every custodian of public records shall permit any record in the custodian's custody to be inspected and examined at reasonable times and under reasonable supervision by any person, and shall, as promptly as possible, furnish copies thereof upon payment of any fees as may be prescribed by law. ... No person requesting to inspect and examine public records, or to obtain copies thereof, shall be required to disclose the purpose or motive for the request.

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**17. What about my confidential records?**

Not all government records are open to public inspection. Exceptions to the access requirements in G.S. §132-6 and the definition of public records in G.S. §132-1 are found throughout the General Statutes. You must be able to cite a specific provision in the General Statutes or federal law when you restrict or deny access to a particular record. LME, state facility, and service provider records which contain client information are confidential under G.S. §122C-52. Records of individuals receiving substance abuse services are further protected by 42 CFR Chapter 1, Part 2.

All LMEs, state facilities, and service providers must comply with the applicable provisions of the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191, encoded as 45 CFR Parts 160, 162, and 164), and Title IV of the Health Information Technology for Economic and Clinical Health (HITECH) Act.

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**18. Do I have to make copies of draft public records that haven't been approved available to the public?**

Yes, even if a report, permit, or other record has not been finalized. Any record that is not confidential by law must be copied when a request is received, whether it is "finished" or not.

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**19. *What do I do with permanent records?***

Permanent records should be maintained in the office that created the records, forever. Permanent records must also have a preservation duplicate, which is either a paper or microfilm copy.

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**20. *What is historical value?***

Historical records document significant events, actions, decisions, conditions, relationships, and similar developments. These records have administrative, legal, fiscal, or evidential importance for the government or its citizens. Call the analyst assigned to your county for further assistance.

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**21. *I don't have any records.***

Nearly every position in LMEs, state facilities, and private providers generates, receives, or uses records. Computer files of any kind, including drafts and e-mail, are records. Even if your records are not the official or final version, your records are public records if generated by a government agency or if they support the expenditure of state or federal funds. Not all records have high historical, legal, or fiscal value, but they all must be retained or destroyed in accordance with the provisions of the appropriate records schedule.

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**22. *Can I store our unused records in the basement (attic, outdoor shed)?***

Public records are public property. While we encourage offices to find places to store records that do not take up too much valuable office space, the selected space should be dry, secured, and free from pests and mold. Your office must ensure that records stored away from your main office area are well protected from natural and man-made problems, while remaining readily available to your staff and the public.

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**23. *Our old records are stored in the attic, basement or off-site building, etc. Do we have to let anyone who asks see them?***

Yes, as long as the records are not confidential by law or if, in the case of private providers, they do not support the expenditure of state and federal funds.

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**24. *Aren't all of our old records at the State Archives?***

Probably not. Human-made and natural disasters, accidental damage, and similar event in the past have led to the disappearance of many records. The State Archives also collects only very specific types of records from local government offices. You are certainly welcome to contact the analyst assigned to your county for more information about appraisal and accessioning.

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**25. *I have found some really old records. What should I do with them?***

Call the analyst assigned to your county. We will help you examine the records and assess their historical value.

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**26. *Can I give my old records to the historical society or public library?***

Perhaps. Before you offer any record to a historical society, public library, or any other entity, you must contact the Records Management Analyst assigned to your county. Permanent records must be kept either in your offices or at the State Archives.

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**27. *What do I need to do if my agency closes?***

In the event that a provider agency ends services, or dissolves for any reason, the provider is required to make arrangements to continue safeguarding both the clinical and reimbursement records in accordance with the record retention guidelines.

Termination of enrollment, dissolution of a business, or merger with another agency does not relieve the provider of responsibility for the records generated during the time the provider was in business. The two schedules that address the retention and disposition requirements for publicly-funded DMH/DD/SAS services are the *DHHS Records Retention and Disposition Schedule for Grants* which is based



on the funding source, and the *Records Retention and Disposition Schedule for State and Area Facilities*, Division Publication, APSM 10-3 which is organized by record type. Providers are subject to the applicable standards outlined in both schedules.

Service provider agencies have the responsibility of fulfilling the record retention and disposition requirements for all the records generated within their agency. This includes responsibility for maintaining custody of the records for the duration of the retention period. Record retention is addressed in the provider MOA/contract with the LME as well as in the provider services agreement with the Division of Medical Assistance for direct enrollment to provide Medicaid-funded services.

Each provider must develop a retention and disposition plan outlining how the records are stored, who will be the designated records custodian and how the records custodian is going to inform the respective LMEs of what their process is and where the records will be located. The provider should send the responsible LME a copy of the storage logs identifying each individual served within their catchment area, the dates of service and into which box a record is stored.

The storage log can be used for all record types including service records, reimbursement records, personnel records, etc. The required identifying information consists of the:

- Agency name
- Department
- Date of storage
- Series number
- Box number
- Start date and the end date of the contents in the box
- Location of where the box is stored
- Record type or the name of the individual. Record type refers to the classification of the particular information contained the box. Generally one would store records of the same type in the same box; however, if a box contains more than one type of record, this needs to be so noted on the front of the box.
- Record number or any other identifying number, if there is one
- Date of birth is recorded for individual service records. In the case of personnel records, the employee's date of birth is to be recorded for quick reference.
- Timeframe of the information stored in a particular box. For example, you would record an admission of 9/2/07 –9/13/09, or an employment period of 2/12/03 – 2/13/09 or a specific timeframe (e.g., October 2002 Cost Reporting, etc).
- Storage media (i.e., paper/hard copy, microfilm, tape, disc)

Records that are placed in storage will require proper boxing procedures to ensure intellectual control of your records. We recommend you choose a letter size box (12" x 15" x 10.5") for storage of your files in order to facilitate ease of handling. When making the bottom of a box you will need to turn short flaps in first, then long flaps. Make sure to secure the bottom with 3-inch wide tape. (Do not use scotch tape or duct tape.) Place the records in the boxes in an upright position and in the same order as they were arranged in the office filing drawers. Leave the records in their original file folders. Pack firmly, but allow approximately three inches of free space in the back of the box. Stand letter size folders on the shortest width of the box (the 12-inch way) from the front to rear of the box. Legal size folders will need to stand the longest width of the box (the 15-inch way) from the front to rear of the box. Be sure to keep the records of each series in boxes separate from other records with different schedule references. Do not place multiple record series in the same box. Make sure you provide adequate documentation of the records you are boxing. You will need to make an inventory of each box's content. This can be as simple as making a list of what records series is included in each box along with a date range that the records span.

Labels should include the name of the agency, the division or section, the records item title shown in the records schedule, the date range of the records, and the number or letter of beginning and ending folders. Also include how many boxes there are of this particular record. For example, if you are boxing up 3 boxes of client files, the first box would be Box No. 1 of 3. Stick the label in the center of the front 12-inch end of

all boxes. Ledger box (15"W x 19"L x 11"H) users must stick the label in the center long (19") side of the box. Number all boxes consecutively within each series to show correct box sequence. Write the number on the label. When you are finished boxing the records you will close the box by tucking the flaps in alternately over and under each other. Do not tape the top of the box.

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**28. *If the retention requirements have changed, which disposition instructions, do I follow?***

Follow the new retention schedule disposition instructions.

---

**29. *Who can I call with questions?***

Questions about DMH/DD/SAS records should be directed to the DMH/DD/SAS Accountability Team Policy Unit (919-881-2446). Questions can also be directed to the Government Records Branch, Division of Historical Resources. When contacting a representative of the Government Records Branch, if you are located west of approximately Statesville, call the Western Office in Asheville at (828) 274-6789. If you are located east of Statesville, all the way to the coast, call the Raleigh office at (919) 814-6900.

## FREQUENTLY ASKED QUESTIONS BY PROVIDER AGENCIES AND ANSWERS PROVIDED BY DHHS

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***Q. I know that we are required to maintain consumer records and provider/employee records, but are agency e-mails also required to be stored?***

**A.** Provider agency e-mails that have to do with the provision of consumer services must be stored. All documentation directly supporting the provision of services should be maintained whether that documentation is in paper or in electronic format. Also remember that all e-mail communication is governed by HIPAA security and privacy regulations.

---

***Q. How long do we need to keep visitor logs? We are a private provider contracted with the LME, and the log would be used to check in and check out visitors.***

**A.** Visitor logs to a facility are to be maintained in accordance with HIPAA regulations. The new record retention and disposition schedule addresses HIPAA security measures in STANDARD-9, ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS, Item #7 on page 59. While logs are not specifically addressed in HIPAA SECURITY IMPLEMENTATION RECORDS, they fall under this item because they are used to protect health information and access.

---

***Q. How long do the STR forms that come from the LME when the consumer does not show up for the intake appointment need to be retained? If we do need to keep these, can you tell me for how long?***

**A.** The STR forms that come from the LME when the consumer does not show up for the intake appointment is to be maintained in accordance with the APSM 45-2. Page 2-2 addresses pending records. STANDARD-8, PROGRAM OPERATION RECORDS: CLIENT SERVICES RECORDS in the records retention and disposition schedule addresses these records under item #7 RAW TEST/EVALUATION DATA, PENDING AND SCREENING RECORDS on page 56.

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***Q. Would the boxing of records under Implementation Update #62 apply to an agency that is no longer going to provide ANY services? What if they have only stopped providing a particular service, such as community support, and are now keeping the records together with other discharges? They would not be required to box and develop a storage log, correct? It is only when the agency decides to no longer provide services at all that the requirements of IU #62 apply, correct?***

**A.** The boxing of records under IU #62 applies to an agency that is no longer providing ANY services due to a closing or going out of business. An agency that no longer provides CS, but is still providing other services, will then keep their CS records with the rest of their discharged records. The agency will not be required to box and develop a storage log unless they are closing all services.

---

**Q. In APSM 10-3 and APSM 45-2 it states that adult client records may be destroyed 11 years after the date of the last encounter and that minor client records may be destroyed 12 years after the minor turns 18 if they are no longer receiving services. I am assuming that this addresses the client's service record to include all of the required forms and documents, etc. What about all of the datasheets that our habilitation technicians have completed documenting each day of services provided? How long do we keep those records?**

**A.** They are part of the client services record and shall be retained for the same amount of time as the client record. Some agencies use overflow files, but the sheets are still part of the active client record and must be retained under the same retention period as the client services record.

---

**Q. All supervisory visits and phone calls are documented between QPs and habilitation technicians and between QPs and parents/guardians. How long is the supervisory documentation kept?**

**A.** Supervisory visits and the contacts are also part of the client record, and should be maintained in accordance with the records retention and disposition schedule. You can find this record listed as Item #32, SUPERVISION PLANS/SUPERVISION NOTES, on page 44 of the records schedule under STANDARD-5 PERSONNEL RECORDS. The minimum retention period is provided.

---

**Q. How long must we keep medication administration sheets?**

**A.** Medication administration sheets are part of the client record and need to be retained in accordance with the records retention and disposition schedule. Please refer to STANDARD-8, PROGRAM OPERATION RECORDS: CLIENT SERVICES RECORDS, on page 53 for disposition instructions.

---

**Q. We have employee records on each individual who works with a client. How long do we need to keep employee records? Do we keep their records for the same amount of time that we have to keep the records of the clients that they have worked with?**

**A.** Personnel records retention and disposition guidelines are identified in STANDARD 5, PERSONNEL RECORDS, Item #27, PERSONNEL RECORDS (OFFICIAL COPY) on page 43 in the records schedule.

---

**Q. If we destroy client records are we supposed to document that on the Record Destruction Log form?**

**A.** Yes, you need to document the destruction of any and all covered record types on the destruction log. The record destruction form on the Records Management webpage on the DMH website identifies the required information and authorization.

---

**Q. Do we need permission to destroy employee records?**

**A.** Yes. You need to obtain permission from your board and the records can only be destroyed if they have met the retention timeframe. It is recommended that you report on your records retention activities to your governing board or Board of Commissioners on an annual basis. This report does not need to be detailed, but it is important that significant destructions be entered into the minutes of your governing board.

---

**Q. In years past we have always scanned our records to microfilm, and at one time the law prohibited us from having our records burned onto CDs for long term storage. Can you tell me if anything has changed? Are we still required to use the microfilming method, or can we move into the 21<sup>st</sup> century and use CDs? Where can I find this information?**

**A.** This is no longer the case. For more information concerning storage media for medical records refer to the records retention and disposition schedule, STANDARD-8, PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS page 51. '

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**Q. My staff investigates allegations of abuse/neglect/exploitation and writes comprehensive reports to summarize their findings. How long do investigative reports have to be retained in the facilities?**

**A.** Refer to the records retention and disposition schedule, STANDARD-7, RISK MANAGEMENT RECORDS, Item #1, ACCIDENTS/INCIDENT REPORTS, page 49. The investigative report is an extension of the incident report and should be retained in accordance with the retention period for incident reports.

# DESTRUCTION OF PUBLIC RECORDS

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## **1. *When can I destroy public records?***

Each record series listed on this schedule has specific disposition instructions that indicate how long that series must be kept in your offices. In some cases, the disposition instructions are “Retain in office permanently,” which means that those records must be kept in your offices forever. (See also the question above, “*What do I do with my permanent records?*”)

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## **2. *How do I destroy public records?***

After your agency has approved this records retention and disposition schedule, records should be destroyed in one of the following ways:

- a) burned, unless prohibited by local ordinance;
- b) shredded, or torn up so as to destroy the record content of the documents or material concerned;
- c) placed in acid vats so as to reduce the paper to pulp and to terminate the existence of the documents or materials concerned;
- d) buried under such conditions that the record nature of the documents or materials will be terminated;
- e) sold as waste paper, provided that the purchaser agrees in writing that the documents or materials concerned will not be resold as documents or records.

— N.C. Administrative Code, Title 7, Chapter 4, Subchapter M, Section .0510

Confidential records should be destroyed in a secure manner so that the information contained in them cannot be used.

The destruction of public records shall be recorded in a permanently preserved document such as a records destruction register. The record shall include the description and quantity of each record or records series disposed of, inclusive of dates of the records, and the date of destruction.

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## **3. *How can I destroy public records if they are not listed on this schedule?***

Contact the Records Management Analyst assigned to your county. Your analyst will discuss the nature of the records with you to determine if the records have historical value. If the records do have historical value, we will discuss the possibility of transferring the records to the State Archives to be preserved permanently.

If the records do not have historical value, we will ask you to complete a **Request and Approval of Unscheduled Records Disposal** (located at the end of this schedule) if the records are not currently created. If the records are an active records series, your analyst will help you develop an amendment to this schedule so that you can continue to destroy the records appropriately.

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## **4. *Do I have to tell anyone about the destruction?***

Yes, this is best practice. We recommend that you report on your records retention activities to your governing Board or Board of Commissioners on an annual basis. This report does not need to be detailed, but it is important that significant destructions be entered into the minutes of the Board.

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## **5. *Computer storage is cheap. I'll just keep my computer records.***

The best practice is to destroy all records that have met their retention requirements at the same time, regardless of format.

## ELECTRONIC RECORDS: E-MAIL, BORN DIGITAL RECORDS, AND DIGITAL IMAGING

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### 1. *When can I delete my e-mail?*

For service providers this answer applies only to e-mail that qualifies as a public record (please see question 5). E-mail is a public record as defined by G.S. §121-5 and G.S. §132. E-mail is just as much a record as any traditional paper record, and must be treated in the same ways. **It is the content of each message that is important.** If a particular message would have been filed as a paper memo, it should still be filed (either in your e-mail program or in your regular directory structure), and it should be retained the same length of time as its paper counterparts. ***It is inappropriate to destroy e-mail simply because storage limits have been reached.***

Our publications will be particularly helpful in managing your e-mail (available online at <http://www.records.ncdcr.gov/>):

- *E-Mail as a Public Record in North Carolina: A Policy for Its Retention and Disposition*
- *Online E-mail Tutorial: Managing Your Inbox: E-mail as a Public Record*
- *Online Tutorial: Managing Public Records for Local Government Agencies*
- *Guidelines for E-mail as a Public Record in North Carolina: Tips and Tricks for Using Microsoft Exchange Software to Manage E-mail*

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### 2. *We have an imaging system for storing public records. May we destroy the paper records?*

Yes, for all records except permanent records. You may scan any record, including permanent records. Your office should follow the instructions in the *North Carolina Guidelines for Managing Public Records Produced by Information Technology Systems* to conduct the Self Warranty process, develop an Electronic Records Policy, and complete a copy of the **Request to Destroy Records Duplicated by Electronic Means**, (located at the end of this schedule). Then submit all three to us.

**Permanent records** must have a preservation copy as defined by G.S. §132-8.2:

Preservation duplicates shall be durable, accurate, complete and clear, and such duplicates made by a photographic, photo static, microfilm, micro card, miniature photographic, or other process which accurately reproduces and forms a durable medium for so reproducing the original shall have the same force and effect for all purposes as the original record whether the original record is in existence or not. . . . Such preservation duplicates shall be preserved in the place and manner of safekeeping prescribed by the Department of Cultural Resources.

The preservation duplicate of permanent records must be either paper or microfilm.

**Non-permanent records** may be retained in any format and therefore you may be approved to destroy hard copy originals after proper imaging. You will have to take precautions with records that you must keep for more than 10 years. Computer systems do not have long life cycles. Each time you change computer systems, you will have to convert all records to the new system so that you can assure their preservation and provide access. Your office will still be required to conduct the Self-Warranty process, establish an Electronic Records Policy, and submit the **Request to Destroy Records Duplicated by Electronic Means** form for our approval.

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### 3. *Do I have to print my e-mail to file it?*

No. As long as the e-mail is not a permanent record, as defined by the schedule, you may elect to keep it in electronic format. Permanent records should be printed and kept in human readable form.

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**4. *I use my personal e-mail account for work. No one can see my personal e-mail.***

The best practice is to avoid using personal resources, including private e-mail accounts, for public business. G.S. §132-1 states that records “made or received pursuant to law or ordinance *in connection with the transaction of public business* by any agency of North Carolina government or its subdivisions” are public records (emphasis added). The fact that public records reside in a personal e-mail account is irrelevant.

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**5. *For Further Guidance regarding the creation and handling of electronic public records.***

The following documents are available on the Government Records Branch Website

<http://www.records.ncdcr.gov/>:

- Best Practices for File Naming
- Guidelines for Digital Imaging Systems
- Security Backup Files as Public Records in North Carolina: Guidelines for Recycling, Destruction, Erasure, and Re-Use of Security Backup Files
- Best Practices for Social Media Usage in North Carolina



## AUDITS, LITIGATION AND OTHER OFFICIAL ACTION

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***No record involved in a pending audit, legal or other official action may be destroyed before that audit or action is resolved.***

We have used an asterisk (\*) in the disposition instructions to mark records series that are commonly audited, litigated or may be subject to other official actions; however, any record has this potential. Records custodians are responsible for being aware of potential actions and for preventing the destruction of any record that is, or may be reasonably expected to become, involved in an audit, legal or other official action.

Records used during routine audits may be destroyed when the governing body accepts the audit, if the records have completed the retention period listed in this schedule. If time remains in the retention period, the records must be maintained for the remainder of the period. The auditor's working papers must be kept according to the schedule. (See **AUDITS: PERFORMANCE** item 3, page 1 and **AUDITS: FINANCIAL** item 5, page 11) Should a dispute arise over an audit, the records that were audited should be retained until that dispute is resolved.

The attorney representing the provider should inform records custodians when legal matters are concluded and records will no longer be needed. Following the conclusion of any legal action, the records may be destroyed if they have met the retention period in the schedule. Otherwise, they should be kept for the remaining time period.

## **PUBLIC RECORDS WITH SHORT-TERM VALUE GUIDELINES FOR THEIR RETENTION AND DISPOSITION**

According to North Carolina General Statutes §121 and §132, every document, paper, letter, map, book, photograph, film, sound recording, magnetic or other tape, electronic data processing record, artifact, or other documentary material, regardless of physical form or characteristic, made or received in connection with the transaction of public business by any state, county, municipal agency, or other political subdivision of government is considered a public record and may not be disposed of, erased, or destroyed without specific guidance from the Department of Cultural Resources. The Department of Cultural Resources recognizes that many records exist that may have very short-term value to the creating agency. These guidelines, along with any approved program records retention and disposition schedule, are intended to authorize the expeditious disposal of records possessing only brief administrative, fiscal, legal, research, or reference value, in order to enhance the efficient management of public records. Examples of those records include:

- facsimile cover sheets containing only transmittal (“to” and “from”) information, or information that does not add significance to the transmitted material;
- routing slips or other records that transmit attachments;
- reservations and confirmations;
- personal messages (including e-mail) not related to official business;
- preliminary or rough drafts containing no significant information that is not also contained in the final drafts of the records;
- documents downloaded from the World Wide Web or by file transfer protocol not used in the transaction of business;
- records that do not contain information necessary to conduct official business, meet statutory obligations, carry out administrative functions, or meet organizational objectives.

The records described above may be destroyed or otherwise disposed of when their reference value ends.

These guidelines are not intended to serve as authorization to destroy or otherwise dispose of unscheduled records. They are intended to complement the use of an approved records retention and disposition schedule for the creating government or agency, not replace or supersede it. Should a creating government, governmental agency or provider lack an approved records retention and disposition schedule, it may not destroy or otherwise dispose of any records in its custody, whether in electronic, paper, or other format (including e-mail) until it receives approval of its **Request and Approval of Unscheduled Records Disposal** (located at the end of the this schedule). Such offices should contact the Government Records Branch of the Division of Historical Resources for assistance in creating a schedule. When a DMH/DD/SAS provider agency discovers that there is not a record series that addresses a specific record type generated by the agency, the provider should contact the DMH/DD/SAS Policy Unit or the Records Management Analyst for guidance.

While records of short-term value may be discarded as described above, all public employees should be familiar with specific records retention and disposition schedules and applicable guidelines for their office and the public records law (G.S. §132). When in doubt about whether a record has short-term value, or whether it has special significance or importance, retain the record in question.



As of March 1, 2019, all local government agencies in North Carolina will use the General Records Schedule for Local Government Agencies to find the appropriate disposition instructions for records that fall under these standards:

- Administration and Management Records
- Budget, Fiscal, and Payroll Records
- Geographic Information Systems Records
- Information Technology Records
- Legal Records
- Personnel Records
- Public Relations Records
- Risk Management Records
- Workforce Development Records

More information about this transition can be found on our blog at <https://ncrecords.wordpress.com/2019/01/14/new-retention-schedule-model-for-north-carolina-local-governments/>.

This new Local Government General Records Schedule can be found on our website at <https://archives.ncdcr.gov/government/retention-schedules/local-government-schedules> and supersedes the correlating standards that were a part of previously approved local government agency schedules, so we have deleted those standards from the published version of this schedule.

If you have any questions, please contact [a records management analyst](#) in the Government Records Section of the State Archives of North Carolina.

**STANDARD-8. PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS**

Records concerning client records created and maintained by the DMH/DD/SAS Provider agencies.

**Comply with applicable provisions of G.S. 130A-12 regarding the confidentiality of DMH/DD/SAS Provider agency records containing privileged clients' medical information, or information protected under 45 CFR Parts 160 and 164 (HIPAA).**

**RETENTION NOTE:**

**Storage Media**

Medical records may be stored in a microfilm media or an imaging system. If an imaging system is used, the following shall be implemented (See Division of Historical Resources publication, *North Carolina Guidelines for Managing Public Records Produced by Information Technology Systems*):

- 1) Documentation about the system. Documentation is necessary for providing audit trails for establishing legal admissibility of images and for use of the system by future system operators. Documentation should include a) policies and procedures for all aspects of system operation and maintenance, including procurement, file and document preparation for scanning, data entry, quality control, indexing, corrections, expungement, redaction, back-ups, security, migration, application of safeguards to prevent tampering and unauthorized access and printing; b) system equipment specification; c) description of all hardware and software upgrades to the system including date of maintenance and version of software; d) contact information for manufacturers and vendors; e) technical operation manuals; f) user operation manuals; policies and procedures related to access and to the security of the records; h) any changes made to the system or the process.
- 2) Training. There should also be documentation to demonstrate that staff responsible for imaging has been trained to operate the system.
- 3) Integrity which includes the actual condition of the media storage device-has the media deteriorated, been scratched, exposed to extreme temperatures, etc. and the reliability of the record after compression or migration, i.e. after such events, has the appearance of the document been altered.
- 4) The intellectual integrity of a record is based upon the authenticity or truthfulness of the information within the record. A system should be in place for electronic records that validates access procedures and documents modification to the records over time.
- 5) Auditing. Periodic and random audits of the imaging system and records storage media should be conducted to ensure that the system is operating within the established records management expectations and that the data remains viable.
- 6) Access. General Statute 132-6.1 (b) requires that all databases be indexed. The index shall contain the following information: 1) a list of the data fields; 2) a description of the format or record layout; 3) information as to the frequency with which the database is updated; 4) a list of any data fields to which public access is restricted; 5) a description of each form in which the database can be copied or reproduced using the agency's computer facilities; and 6) a schedule of fees for the production of copies in each available form. (See Division of Historical Resources publication, *Public Database Indexing*)

**Destruction of Records**

The following conditions shall be met before the destruction of original records can be approved:

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.

a) The applicable records series must be scheduled with the Archives and Records Section through current records retention and disposition scheduling procedures.

**If an imaging system is used, the agency must satisfy the conditions noted above in section “Storage Media.” If these conditions are met, the original records may be destroyed.**

ITEM #	STANDARD-8: PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
1.	<b>ADULT CLIENT SERVICES RECORDS</b> Including selective and indicative prevention service records. May include requests for copies of records.	Records of adult clients who are no longer receiving services may be destroyed 11 years after last date of service.	These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-8: PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
2.	<p><b>MINOR CLIENT SERVICES RECORDS</b> Including selective and indicative prevention service records.</p>	Records of minor clients who are no longer receiving services may be destroyed 12 years after the minor reaches age of majority (18 years of age).	These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)
3.	<p><b>CONSULTATION, EDUCATION, AND PREVENTION SERVICE RECORDS</b></p> <p>NOTE CHANGES: Records are still being created, records prior to 2003 were not considered active client records; follow destroy in office when superseded.</p>	<p>a) Records created prior to 2003, destroy in office when superseded.</p> <p>b) Records of adult clients who are no longer receiving services may be destroyed 11 years after last date of service.</p> <p>c) Records of minor clients who are no longer receiving services may be destroyed 12 years after the minor reaches age of majority (18 years of age).</p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-8: PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
4.	<p><b>DMH PROVIDER AGENCY ADMINISTRATIVE RECORDS</b> Individual records related to provider administrative functions such as screening, triage, referral, authorizations, registrations, care coordination, Person Centered Plan review, etc.</p>	<p>a) <u>Adults</u>. Administrative records of adult consumers may be destroyed 11 years after the date of last administrative action by the provider agency.</p> <p>b) <u>Minors</u>. Administrative records of minor clients for whom the LME is no longer performing provider agency administrative functions may be destroyed 12 years after the minor reaches the age of majority (18 years of age).</p> <p>c) <u>Post-2003</u>: Destroy in office after 5 years.</p>	<p>These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)</p>
5.	<p><b>DWI OR DRUG EDUCATION SCHOOL RECORDS</b></p>	<p>a) Minors: Transfer to Adult Client Records when minor reaches 18 years of age.</p> <p>b) Adult: Records of adult clients who are no longer receiving services may be destroyed 15 years after last date of service.</p>	<p>These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)</p>

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-8: PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
6.	MASTER CLIENT IDENTIFICATION FILE (MASTER CLIENT INDEX)	Retain in office permanently.	These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)
7.	RAW TEST/ EVALUATION DATA, PENDING AND SCREENING RECORDS	<p><u>Minors</u>: Destroy in office 5 years after date minor reaches 18 years of age.</p> <p><u>Adults</u>: Destroy in office 5 years after date of report.</p> <p><i>Retention Note: Records supporting the expenditure of federal funds passed through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.<sup>1</sup></i></p>	These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.)

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.



ITEM #	STANDARD-8: PROGRAM OPERATIONAL RECORDS: CLIENT SERVICES RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
8.	<b>WORKSHEETS.</b> Data tally sheets, summary forms, and other related records	Destroy in office when administrative value ends, but within 3 years.  Agency Policy: Destroy in office after _____. †	

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**STANDARD-9. ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS**

DMH/DD/SAS records created or received in DMH/DD/SAS Provider Agencies and used to manage and monitor federal, state, and local programs. See also STANDARD-1. ADMINISTRATION AND MANAGEMENT RECORDS.

*Comply with applicable provisions of G.S. §122C-17 regarding confidentiality of DMH/DD/SAS Provider Agency “records containing privileged patient medical information or information protected under 45 CFR Parts 160 and 164 (HIPPA).”*

ITEM #	STANDARD-9: ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
1.	<p><b>ACCREDITATION RECORDS</b> Records generated or accumulated to prove compliance with those standards outlined by accrediting agencies whether public or private. File includes public notices required by accrediting agencies and any additional supporting records necessary for surveys, inspections, and/or correction of deficiencies.</p>	<p>a) Retain records that directly relate to prove compliance with those standards outlined by accrediting agencies whether public or private in office permanently.</p> <p>b) Destroy in office remaining records 6 months after expiration date of applicable accreditation period to which the records apply.</p>	10A NCAC 48A.0101
2.	<p><b>CLIENT APPOINTMENT AND SCHEDULING RECORDS</b> Logs and similar records used to document patient appointments.</p>	<p><b>Destroy in office when administrative value ends.</b>  Agency Policy: Destroy in office after _____. †</p>	
3.	<p><b>CLIENT DEMOGRAPHIC DATA REPORTS</b> Reports summarizing demographic data for clients in programs.</p>	<p><b>Destroy in office when administrative value ends.</b>  Agency Policy: Destroy in office after _____. †</p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-9: ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
4.	<p><b>CLINICAL RECORD AUDITS</b> Records concerning internal and external audit summaries and/or finding and associated supporting records.</p> <p>See also <b>AUDITS: FINANCIAL</b> item 5, page 11.</p>	<p>a) Medicare/Medicaid audits: Destroy in office after 6 years, and when all findings have been resolved, whichever occurs last.*</p> <p>b) All other audits: Destroy in office after 3 years, and when all findings have been resolved, whichever occurs last.*</p>	
5.	<p><b>COMPLAINTS FILE</b> Files of complaints submitted to the agency by the public or other local departments or agencies regarding possible violations of local or state mental health laws or regulations. Includes nature of complaint, records of investigations, and results or findings.</p> <p>See also <b>CITIZEN COMPLAINTS AND SERVICE REQUESTS</b> item 6, page 2.</p>	<p>a) Destroy in office 3 years after date of last action.*</p> <p>b) Transfer to <b>LITIGATION CASE RECORDS</b> item 6, page 34 if legal action is taken.</p>	
6.	<p><b>FEE SCHEDULES</b> Billing guides and schedules of fees charged for services.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-9: ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
7.	<p><b>HIPPA SECURITY IMPLEMENTATION RECORDS</b> Includes policies, procedures, and records of actions, activities, or assessments relating to security measures taken to ensure protected health information (PHI) is secure from unauthorized access.</p>	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.316
8.	<p><b>MONITORING AND REVIEW DOCUMENTS</b> Official copies of documents concerning readiness assessments, risk assessments, provider endorsement, quality reviews, site visits, deficiencies, follow-up, and all other information used in the service provider monitoring and review process.</p>	Destroy in office after 6 years.*	These records are highly confidential, and access to them is regulated by federal and state law and regulation, including: the Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191); 42 CFR Part 2, 45 CFR Parts 160, 162, and 164; G.S. 122C-52 through 122C-56.
9.	<p><b>PROGRAM TIME AND ACTIVITY REPORTS</b> Reports and similar records documenting activities of personnel for all program areas.</p>	<p>Destroy in office after 6 years.*</p> <p><i>Retention Note: Records supporting the expenditure of federal funds passed through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS office of the Controller.</i></p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-9: ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
10.	<b>PROTECTED HEALTH INFORMATION (PHI) ACCESS RECORDS</b> Records listing the titles and offices of employees responsible for receiving and processing requests for access to protected health information (PHI).	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.542 45 CFR 164.530
11.	<b>PROTECTED HEALTH INFORMATION (PHI) AMENDMENT REQUEST RECORDS</b> Records listing the titles and offices of employees responsible for receiving and processing requests for amendment of protected health information (PHI).	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.526 45 CFR 164.530
12.	<b>PROTECTED HEALTH INFORMATION (PHI) DISCLOSURE RECORDS</b> Records documenting the disclosure of protected health information required under the Health Insurance Portability and Accountability Act (HIPPA).	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.528
13.	<b>PROTECTED HEALTH INFORMATION (PHI) PRIVACY PRACTICES RECORDS</b> Policies, procedures, and related records documenting actions taken to safeguard the privacy and security of protected health information (PHI) required under the Health Insurance Portability and Accountability Act (HIPPA).	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.528 45 CFR 164.530

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction “destroy when administrative/reference value ends.” Please use the space provided.

ITEM #	STANDARD-9: ALL LOCAL MANAGEMENT ENTITY (LME) PROGRAMS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
14.	<b>PROTECTED HEALTH INFORMATION (PHI) PRIVACY PRACTICES VIOLATION RECORDS</b> Records documenting complaints received concerning privacy policies and procedures required under the Health Insurance Portability and Accountability Act (HIPPA).	Destroy in office 6 years from date of creation, or 6 years from the date when the record(s) was last in effect, whichever is later.	45 CFR 164.530
15.	<b>REFERRAL RECORDS</b> Records of screenings, consultations, and referrals from other agencies.	a) If individual receives clinical services transfer to <b>ADULT CLIENT SERVICES RECORDS</b> item 1, page 53 and <b>MINOR CLIENT SERVICES RECORDS</b> item 2, page 53.  b) Destroy in office all remaining records when administrative value ends.  Agency Policy: Destroy in office after _____. †	
16.	<b>STAFF WORK SCHEDULES AND ASSIGNMENT RECORDS</b> Work schedule and assignment record for departmental staff.	Destroy in office when administrative value ends.  Agency Policy: Destroy in office after _____. †	
17.	<b>STATISTICAL REPORTS</b> Agency statistical studies and reports.	a) Destroy remaining reports per <b>REPORTS AND STUDIES (INTERNAL ADMINISTRATION)</b> item 29, page 9.  b) Destroy reference copies of reports in office when administrative value ends.	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.

**STANDARD-10. BUSINESS OFFICE AND CLIENTS' FINANCIAL RECORDS**

DMH/DD/SAS Provider Agency records concerning insurance claims and payments, and other financial activities for client served by provider agency. See **STANDARD-2. BUDGET AND FISCAL RECORDS** for the disposition of records concerning non-client related financial activities.

*Comply with applicable provisions of G.S. §122C, Article 3 regarding confidentiality of DMH/DD/SAS Provider Agency "records containing privileged client medical information or information protected under 45 CFR Parts 160 and 164 (HIPAA)."*

ITEM #	STANDARD-10: BUSINESS OFFICE AND CLIENTS' FINANCIAL RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
1.	<b>ACCOUNTS RECEIVABLE - CLIENT SERVICES</b> Client payments, filings to private insurance and/or Medicare/Medicaid, and other related records.	<b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b>  <i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i>	
2.	<b>ADJUSTED CLIENT ACCOUNTS</b> Records of adjustments to clients' bills and insurance claims.	<b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b>  <i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.

ITEM #	STANDARD-10: BUSINESS OFFICE AND CLIENTS' FINANCIAL RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
3.	<p><b>BAD DEBT REPORTS</b> Reports, logs and supporting documentation summarizing accounts sent to collection agencies.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
4.	<p><b>COST REPORTS</b> Reports and supporting documentation summarizing costs incurred for the administration of programs.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
5.	<p><b>INSURANCE CLAIMS FILE</b> Includes Medicare, Medicaid or insurance carrier claim forms and records including schedule of payments, copy of claim, listing of invalid or rejected claims, payment list, and list of checks received.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.



ITEM #	STANDARD-10: BUSINESS OFFICE AND CLIENTS' FINANCIAL RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
6.	<p><b>INSURANCE PENDING REPORTS</b> Reports and supporting documentation summarizing unpaid insurance claims.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
7.	<p><b>MEDICARE DISBURSEMENT REPORTS</b> Reports and supporting documentation summarizing funds received from Medicare and the accounts to which they are posted.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
8.	<p><b>MEDICARE PART D PRESCRIPTION DRUG FINANCIAL RECORDS</b> Includes financial records related to Part D drug plans administered by the agency. Includes remittance advice records.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.

ITEM #	STANDARD-10: BUSINESS OFFICE AND CLIENTS' FINANCIAL RECORDS		
	RECORD SERIES TITLE	DISPOSITION INSTRUCTIONS	CITATION
9.	<p><b>CLIENT REFUND RECORDS</b> Reports, logs and supporting documentation summarizing refunds issued to client and insurance agencies.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
10.	<p><b>PAYMENT VOUCHERS</b> Vouchers for payment received from clients and insurance agencies.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	
11.	<p><b>REMITTANCE ADVICE RECORDS</b> Includes member name, client account number, amount billed, amount paid, claim provider, carrier, and service dates.</p>	<p><b>Destroy in office after 6 years. Records involved in a pending audit, legal or other official action may not be destroyed before that audit or action is resolved.*</b></p> <p><i>Retention Note: Records supporting the expenditure of federal funds passes through the Department of Health and Human Services may be destroyed on a fiscal year basis when written permission has been received from the DHHS Office of the Controller.</i></p>	

\*See **AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS**, page xv.

† See signature page. The agency hereby agrees that it will establish and enforce internal policies setting minimum retention periods for the records that Cultural Resources has scheduled with the disposition instruction "destroy when administrative/reference value ends." Please use the space provided.

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**REQUEST FOR CHANGE IN RECORDS SCHEDULE**

**TO** Assistant Records Administrator  
Division of Archives and Records  
Government Records Section  
4615 Mail Service Center  
Raleigh, NC 27699-4615

**FROM** Name \_\_\_\_\_  
County \_\_\_\_\_  
Agency or department \_\_\_\_\_  
Mailing address \_\_\_\_\_  
Phone or email \_\_\_\_\_

**INSTRUCTIONS**

Use this form to request a change in the records retention and disposition schedule governing the records of your agency. Submit the signed original, and keep a copy for your file. A proposed amendment will be prepared and submitted to the appropriate state and local officials for their approval and signature. Copies of the signed amendment will be sent to you for insertion in your copy of the schedule.

**CHANGE REQUESTED**

- Add a new item
- Delete an existing item      Standard Number \_\_\_\_\_ Page \_\_\_\_\_ Item Number \_\_\_\_\_
- Change an retention period      Standard Number \_\_\_\_\_ Page \_\_\_\_\_ Item Number \_\_\_\_\_

**TITLE OF RECORDS SERIES IN SCHEDULE OR PROPOSED TITLE**

**INCLUSIVE DATES OF RECORDS** \_\_\_\_\_ **APPROXIMATE VOLUME OF RECORDS** \_\_\_\_\_

**DESCRIPTION OF RECORDS**

**PROPOSED RETENTION PERIOD**

Requested by: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Signature Title Date





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