



SHIAWASSEE HEALTH AND WELLNESS POLICY AND PROCEDURE MANUAL

Title:	Record Retention
Section:	Corporate Compliance
Policy Number:	02
Issued By:	Dirk Love, Director of Strategic Services
Approved by: Leadership Team Approved on: 08/25/2025	Effective Date: 03/26/07 Last Revision: 04/02/2025 Last Review: 04/02/2025 Annual Policy Statement Review: 09/22/2025

POLICY STATEMENT:

It is the policy of Shiawassee Health and Wellness (SHW) to maintain a record retention policy that adheres to applicable legal statutes.

PURPOSE

To define the parameters for the agency's record retention policy.

APPLICATION

This policy applies to all SHW employees, contractual staff, and SHW's Provider Network.

DEFINITIONS

CMHSP – Community Mental Health Services Program

SHW - Shiawassee Health and Wellness

MDHHS – Michigan Department of Health and Human Services

MSHN – Mid-State Health Network

PROCEDURE

In furtherance of its document retention obligations required by law, third-party payors and necessary to its business operations, SHW employees and other staff members are required to use good faith efforts to adhere to the following policy on document retention. SHW will work in coordination with its subcontractors and MSHN to effectuate this policy.

Documents

Documents must be maintained in English and in a legible manner. Documents covered under this policy shall include all billing, compliance and related documents including, but not limited to, the following:

1. Cost reports

2. Claim forms submitted to Medicare, Medicaid and other third-party payors and claim forms submitted for internal cost reporting tracking purposes
3. Supporting documentation for the cost reports and claim forms
4. Pertinent correspondence related to cost reports, claim forms or other billing matters
5. Medical/Clinical records
6. Documentation of SHW compliance educational efforts
7. Compliance reports generated pursuant to the compliance program
8. Service activity logs
9. Remittance advices, as applicable
10. Prior authorization requests and approvals for services and supplies (including managed care authorizations)
11. Verifications of medical necessity and the provider's usual and customary charge for non-covered services
12. Records of third-party payment
13. Purchase invoices for items offered or supplied to consumers

Document Retention Period

SHW documents (electronic or hardcopy) covered under this policy shall be properly maintained by SHW, or another party designated by SHW, in accordance with SHW confidentiality procedures and State of Michigan Retention and Disposal Schedule 20 – Community Mental Health Services Programs (Attachment A).

Hard copy documents that are not converted to an electronic format must be maintained in a secure location, in accordance with Michigan Law and consistent with document type.

Access to the secure location will be given to the Director of Human Resources, Chief Financial Officer, Director of Strategic Services, Corporate Compliance Officer, and Facilities Manager.

Additional staff who require access to secure storage due to specific job duty requirements must obtain permission and gain access from one of the above listed representatives.

A record shall be kept of who accesses secure storage (Attachment B). This record will reflect the name of the individual, date/time of entry, date/time of departure and reason for access.

Document Destruction

It is the policy of SHW that confidential documents destroyed under this policy shall be disposed of in a manner that will not compromise their confidentiality.

If SHW contracts with any third-party entity for the purpose of record disposal, they will be required to enact a Business Associate Agreement that adheres to the requirements required under the HIPAA Rules.

Reporting Improper Destruction of Documents

No employee or other person shall destroy or alter any document maintained by SHW, or maintained by another party for SHW, in anticipation of a request for those documents from any governmental agency, or by subpoena or a court order. If any SHW staff member believes that such conduct has occurred or may occur, he/she shall contact the Corporate Compliance Officer immediately via the internal reporting mechanisms.

COMPLIANCE

Michigan Medicaid Community Health Service Program Manual, Chapter 1, pages 40-45
MDCH/CMHSP Managed Specialty Supports and Services Contract Agreement, Section 4.11.

State of Michigan Records Retention and Disposal Schedule, Department of History, Arts and Libraries - Records Management, *General Schedule 20, Community Mental Health Services Programs*.

45 CFR Part 160.103

Change Log:

Date of Change	Description of Change	Responsible Party
10/22/13	N/A	Dirk Love, Corporate Compliance Officer
12/16/18	Format Change	Jamie Burke, Executive Assistant
6/9/2020	Policy statement change, procedure revision	Dirk Love, Corporate Compliance Officer.
9-11-2020	Procedure Change-r/t secure storage and access	Dirk Love, Corporate Compliance Officer.
4/13/2022	Policy and Procedure review, no change made.	Dirk Love, Corporate Compliance Officer.
1/13/2023	Policy review, Procedure revisions made.	Dirk Love, CCO; Vickey Hoffman, Compliance Specialist
4/1/2024	Policy review, minor Procedure updates for clarity	Vickey Hoffman; Corporate Compliance Officer
04/02/2025	Minor procedure updates to align with current SHW Policy layout	Vickey Hoffman; Corporate Compliance Officer

