



Record Retention and Data Destruction Policy

Policy:

We are committed to maintaining accurate, relevant, and useful records for the NH Accountable Care Partners ACO (“ACO”) and to maintain these records for reasonable, proper retention periods. This Records Retention and Data Destruction Policy (the “Policy”) is designed to accomplish these goals in accordance with 42 CFR 425.314(b).

This Policy applies to all records maintained by the ACO regardless of the media in which they are reflected or stored. All ACO participants and providers/suppliers shall maintain records in their possession relevant or relating to the ACO according to their internal policies; provided, however, such internal documentation retention policies shall also, at a minimum, comply with this Policy and procedures.

Purpose:

Good, effective records management practices present four core components: (i) identify relevant records; (ii) determine appropriate retention periods for these records, based on their organizational value and to any legally mandated retention periods; (iii) destroy records at the expiration of their retention period; and (iv) suspend this destruction process for records relevant to litigation or a governmental investigation, or immediately on notice.

Procedure:

The ACO agrees to maintain and give CMS, DHHS, the Comptroller General, the Federal Government or their designees access to all books, contracts, records, documents, and other evidence (including data related to Medicare utilization and costs, quality performance measures, shared savings distributions, and other financial arrangements related to ACO activities) sufficient to enable the audit, evaluation, investigation, and inspection of the ACO's compliance with program requirements, quality of services performed, right to any shared savings payment, or obligation to repay losses, ability to bear the risk of potential losses, and ability to repay any losses to CMS.

The ACO shall maintain such books, contracts, records, documents, and other evidence for a period of 10 years from the final date of the agreement period or from the date of completion of any audit, evaluation, or inspection, whichever is later, unless (i) CMS determines there is a special need to retain a particular record or group of records for a longer period and notifies the ACO in writing at least 30 days before the normal disposition date; (ii) there is a suspension of the destruction process due to a litigation hold; or (iii) there has been a termination, dispute, or allegation of fraud or similar fault against the ACO, its ACO participants, its ACO providers/suppliers, or other individuals or entities performing functions or services related to ACO activities, in which case ACOs must retain records for an additional 6 years from the date of any resulting final resolution of the termination, dispute, or allegation of fraud or similar fault.

Notwithstanding any arrangements between or among an ACO, ACO participants, ACO providers/suppliers, and other individuals or entities performing functions or services related to ACO activities, the ACO must have

ultimate responsibility for adhering to and otherwise fully complying with all terms and conditions of its agreement with CMS and the federal regulations, relating to records retention.

Per the contract with CMS, claims data would need to be destroyed by the Participant Organizations based on any requests made by CMS, or at the end of the contract term, which is 3 years. The ACO would notify each Participant Organization of any requests made by CMS and at the completion of the 3 year term. Documentation of the final disposition of data will be provided to the ACO by each participating member. Disposal documentation must clearly identify the asset/media disposed of and include the date and means of removal of data. This documentation must be maintained according to each participants Document Retention Policy.

The ACO agrees to complete and submit to CMS the certificate of destruction as required. This certificate certifies the destruction/discontinued use of all CMS Claim and Claims Line Feed data, at all locations and/or under the control of all individuals with access to the data. This includes any and all original files, copies made of the files, any derivatives or subsets of the files and any manipulated files. The requester may not retain any copies, derivatives or manipulated files – all files must be destroyed.

Concord/Elliott ACO (ACO) under the guidance of the ACO Compliance Committee and ACO Compliance Officer has created a role based security program to control access to protected health information (PHI) of the ACO attributed beneficiaries provided to the ACO by Centers for Medicare & Medicaid Services (CMS) through participation in the Medicare Shared Savings Program (MSSP). Certain employees will be authorized to request and receive ACO claims and beneficiary files that include PHI based on specific ACO activities as defined in the MSSP regulations. Concord/Elliott ACO Data Use Agreement Form is attached.

Approved by: Concord/Elliott ACO Management Committee
Reviewed by: Concord/Elliott ACO Finance and Compliance Committee
Revised: 5/15/2014, ACO Compliance Committee
Approved: 6/17/2014, ACO Management Committee