


BHS Policies and Procedures		
	City and County of San Francisco Department of Public Health San Francisco Health Network BEHAVIORAL HEALTH SERVICES	1380 Howard Street, 5 th Floor San Francisco, CA 94103 (415) 255-3400 FAX (415) 255-3567
Policy or Procedure Title: Security and Retention of Behavioral Health Services Medical Records		
Issued By: Imo Momoh, MPA Director of Managed Care Date: February 17, 2023	DocuSigned by: imo momoh <small>360E6E598F1D468...</small>	Manual Number: 3.10-07 Reference: Mental Health Plan Agreement

Substantive Revision: Replaces 3.10-2 of December 19, 2013.

Equity Statement: The San Francisco Department of Public Health, Behavioral Health Services (BHS) is committed to leading with race and prioritizing Intersectionality, including sex, gender identity, sexual orientation, age, class, nationality, language, and ability. BHS strives to move forward on the continuum of becoming an anti-racist institution through dismantling racism, building solidarity among racial groups, and working towards becoming a Trauma-Informed/Trauma Healing Organization in partnership with staff, clients, communities, and our contractors. We are committed to ensuring that every policy or procedure, developed and implemented, leads with an equity and anti-racist lens. Our policies will provide the highest quality of care for our diverse clients. We are dedicated to ensuring that our providers are equipped to provide services that are responsive to our clients' needs and lived experiences.

Purpose:

The purpose of this policy is to provide guidelines for the security and retention of Behavioral Health Services (BHS) records.

Scope:

This policy applies to behavioral health providers. It does not apply to individual private practitioners.

Policy:

BHS shall ensure that all providers are compliant with security and retention of medical records in accordance with State and Federal requirements.

Procedures:

I. Mental Health and Substance Use Disorder Medical Records

Civil Service Organizational Providers' medical record are the property of the Department of Public Health, Behavioral Health Services. Medical records of organizational providers are the property of their own legal entities.

II. Security

All paper medical record storage must comply with the three-lock rule. The three-lock rule refers to the door of the building, the door of a room, and the locked file cabinet. All medical records are kept in a secure room, in a locked file cabinet, or in a locked drawer when not in use. Records maintained electronically are secured through role based access, security passwords and audits.

III. Sign-Out of Medical Records

It is recommended that access to the provider's medical record storage room be restricted to a maximum of 2 to 3 designated individuals.

Paper records are archived to a licensed contracted record storage organization and are retrieved by individuals authorized.

When provider staff checks out a medical record at the provider's site, an out-guide or any means must be used. An out-guide lists the name of the person who checks out the medical records, client's name, BIS#, and the date.

IV. Retention

1. Medical records of organizational providers shall be maintained safely for a minimum of 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later.

2. Minors

Medical records of unemancipated minors shall be kept for at least one year after such minor has attained the age of 18 years, but in no event less than 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later.

3. Inpatient

Inpatient medical records (including PES and IMDs) must be retained for the period established by the individual institution policy.

V. Disposition/Destruction of Medical Records

1. Civil Service organizational providers may send their closed medical records to Health Information Management (HIM), Behavioral Health Services, at 1001 Potrero BLDG 5 2nd floor Medical Records, where they are inventoried and then send to secured contracted storage. HIM is also responsible for documenting the client's name, date of birth, BIS#, and destruction date for each medical record kept at this location.

2. Contract organizational providers are responsible for storing, purging, and destroying their own medical records in compliance with Behavioral Health Services/Health Information Management retention requirements. The same responsibility applies to each contract organizational provider when documenting client's information for each medical record stored at their site.

VI. Off-Site Medical Record Storage

1. All providers that do not have the capacity to store inactive medical records before the required retention period can send the inactive medical records to a HIP AA-compliant Off-site storage company.

VII. Non-medical records

1. It is a BHS requirement that contractors make all of its premises, physical facilities, equipment, books, records, documents, contracts, computers, or other electronic systems pertaining to Medi-Cal enrollees,

Medi-Cal-related activities, services, and activities furnished under the terms of the MHP and DMC-ODS agreements, or determinations of amounts payable, available at any time for inspection, examination or copying by the Department of Health Care Services (DHCS), Centers for Medicare and Medicaid Services (CMS), Health and Human Services (HHS), Inspector General, the United States Comptroller General, their designees, and other authorized federal and state agencies. (42 C.F.R. §438.230(c)(3)(i)-(ii).)

This audit right will exist for 10 years from the final date of the contract period or from the date of completion of any audit, whichever is later. (42 C.F.R. § 438.230(c)(3)(iii).) DHCS, CMS, or the HHS Inspector General may inspect, evaluate, and audit BHS programs at any time if there is a reasonable possibility of fraud or similar risk. The Department's inspection shall occur at the program's place of business, premises, or physical facilities. (42 C.F.R. § 438.230(c)(3)(iv).)

Contact Person:

Directory of Health Information Services

Distribution:

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