

Reframing Retention Management in a Multimedia Environment

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Within the last decade, the domain of record retention management has exploded in response to the development of electronic records and their storage demands, the mandates emanating from regulations like HIPAA, and the emergence of e-discovery as the requisite method for compelling record production. Companies specializing in the ability to store and manage vast amounts of healthcare information are now some of the hottest in the IT industry. Retention management has shifted in the e-HIM environment, as has what HIM professionals must know to ensure their organization's records are properly stored and maintained.

Retention Management 101

Retention management is usually introduced in the first year of an HIM professional's formal education, often as part of the mandatory legal/compliance course. Taught as a core competency for decades, it has most often referenced those records managed within a traditional HIM department (e.g., hard-copy medical records; registers of births, deaths, surgical procedures; and master patient indices).¹

Because healthcare is such a highly regulated industry, its record retention requirements come from state licensure laws and regulations, professional association guidelines, federal programs, and accreditation organizations. Retention practices are most often driven by the requirements of a particular state; however, these practices must also defer to mandatory federal expectations.²

In the paper world, reconciling these varying demands was complex enough, but today's professionals face additional challenges. They must learn the source systems of the electronic health record as well as the source systems for the associated records that may be part of the designated record set under HIPAA (billing records). This is necessary in order to ensure proper record retention and retention of new types of mandated information (metadata) spelled out in regulations like the Federal Rules of Civil Procedure.

Until the last decade, judicial decisions have outlined liability primarily around the failure to maintain proper records. However, there has also been legal action associated with the inability to locate records, records kept beyond retention expiration dates, records destroyed before expiration dates were reached, or records displaying gaps or unexplained omissions.

Getting to Know IT Staff, Security Policy

HIPAA's privacy requirements prepared HIM professionals to protect patients' personal health information. A vocabulary laced with terms like *minimum necessary*, *accounting for disclosures*, and *protected health information* became normal HIM discourse. The six-year retention requirement of HIPAA-related records was common knowledge.

When the corresponding HIPAA security regulations compliance due date came and went, HIM professionals took notice of the scrambling that occurred in their organization's IT department, but they were unlikely to be involved. Not only was the technology associated with security reassessed (e.g., firewalls, access control technologies, etc.), but policies and procedures were created to protect patient identifiable information. These policies addressed issues including password management, access management to computer hardware centers, and appropriate response to and documentation of security incidents.

The terms *data integrity* and *data availability* routinely appear at the heart of a good IT security program. An IT professional seeks to ensure that data cannot be changed without appropriate access, that downtimes will be minimal in order

to ensure patient information is readily accessible, and that disaster recovery plans are documented, tested, and stored redundantly.

When it comes to retention management of electronic records, technically oriented IT staff, concerned with meeting security requirements and struggling with exorbitant demands for electronic storage, welcome more fully developed retention schedules that provide real guidance for how long records must be managed and maintained.

Leading Retention Management

IT takes its retention cues from HIM professionals, working in conjunction with legal and compliance services. Because of their experience juggling the demands of numerous legal and accreditation entities, HIM professionals are integral in leading their organizations' development of robust, expandable retention schedules that can meet standing state requirements and grow to meet new requirements like the Federal Rules of Civil Procedure.

HIM leaders must be knowledgeable of the requirements for electronic record archival, retention, production, and destruction implicit in e-discovery. Stepping out of the confines of the clinical record, health information managers need to help their organizations by becoming the experts on retention of other types of records within their systems.

Securing records involving the production of secondary clinical information can also be documented on the retention schedule, such as the length of retention for cancer registry records. Adding retention of UB-04s, audits, contracts, and other types of records could be a next step. A sample enterprise retention schedule appears on below.

The kind of research it takes to determine retention timeframes is second nature to HIM professionals, schooled in the need for accuracy and willing to obtain the legally correct answers. Developing designated record sets for HIPAA compliance gives HIM a primer for expanded retention management.

HIM must also be prepared to create the framework that allows for the active management of retention in their organizations. An enterprise retention schedule is a living record that must be updated and amended as new types of records are created and as new laws and regulations or new business practices dictate changes to the schedule. In the long term, all the business records of the healthcare entity must be considered for addition to the schedule, now an enterprise retention schedule.

In order to do this, a multidisciplinary group must determine and approve changes to the retention schedule. Data and record ownership and responsibility must be developed through policy. The basic definition of what constitutes a record must be determined before records can appear on a schedule.

The Future

In the blink of an eye, the ability to manage retention electronically is appearing in many computer systems. With guidance from HIM and legal and compliance services, computer systems will be able to "auto-delete" records when they arrive at their retention expiration times.

HIM can help IT manage its expensive storage challenges through policies governing when systems can be decommissioned, what records are originals and when "copies" can be deleted, and how to determine when e-mail becomes a record and when it is simply a transitory message. Systemic, enterprise record retention management is crying out for an owner in most healthcare entities. HIM is its logical home.

Sample Enterprise Retention Schedule

Thorough schedules help manage the retention of records for legal and business reasons. Records are sorted into categories and subgroups, timeframes are applied, and citations are documented, as applicable.

Record Category	Sub Category	Sub Type	Record Title	Organization's Retention Period in Years	Legal Citation/Reference	Notes

Administrative	Enterprise	Corporate	XYZ bylaws and articles of incorporation	Permanent		
Administrative	Enterprise	Corporate	Amendments to the XYZ bylaws and articles of incorporation	Permanent		
Clinical	HIM	Primary medical records	Acute patient records	10 or 21	State statute 14-6-2	Adults: 10 years following the last discharge; minors = age of majority + statute of limitations (18 + 3 = 21)
Clinical	HIM	Secondary medical records	Master patient index	Permanent		AHIMA recommendation
Clinical	HIM	Secondary medical records	Birth registers	Permanent		AHIMA recommendation
Clinical	Pharmacy	Compliance	Inspection logs	1		
Clinical	Pharmacy	Compliance	Adverse drug event documentation	4		
Clinical	Nursing services	Compliance	Release of body log	10		
Clinical	Surgical services	Compliance	Medical device tracking documentation	Life of the device	Title 21, Subpart D – Records and Inspections: CFR 821.60	“Persons required to maintain records under this part shall maintain such records for the useful life of each tracked device they manufacture or distribute for use. For example, a record may be retired if the person maintaining the record becomes aware of the fact that the device is no longer in use, has been explanted, returned to the manufacturer, or the patient has died.”
Clinical	Surgical services	Compliance	Operative room logs	10		
Facilities	Maintenance	Plans	Blueprints	8 years after the sale of any owned building		
Finance	Business office	Financial	Superbills	10		

Legal/Comp/ Regulatory	Legal	Management	Contracts	Life of the contract plus 10 years		
Legal/Comp/ Regulatory	Compliance oversight	HIPAA	Accounting for disclosures database	7		
Legal/Comp/ Regulatory	Risk	Litigation	Closed litigation records	Permanent		Their attorneys must maintain 7 years of their records or longer, if requested

Notes

1. Fletcher, Donna M. and Harry B. Rhodes. "Retention of Health Information." Updated June 2002. Available online in the FORE Library: HIM Body of Knowledge at www.ahima.org
2. Rinehart-Thompson, Laurie A. "Issues Surrounding Current Organizational Behavior." Presented at the Legal EHR Conference: Ensuring Health Record Integrity. June 18–19, 2007.

Reference

"Patient Record Requirements." McWay, Dana C. In Legal Aspects of Health Information Management, second edition. Chapter 4: Clifton Park, NY: Cengage Delmar Learning, 2003.

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