EFFECTIVE DATE: *June 1, 2016*

POLICY TITLE:

Record Retention

REVIEW BY: *May 31, 2019*

POLICY

Trinity Health ACO and its Participants and Preferred Providers will maintain and store all records related to Trinity Health ACO activities for a minimum period of ten (10) years in accordance with the Centers for Medicare and Medicaid Services ("CMS") Next Generation ACO ("NGACO") Model requirements.

PROCEDURE

1. Trinity Health ACO and its Participants and Preferred Providers, as well as other individuals or entities performing functions or services related to Trinity Health ACO activities, are required to maintain all Records related to the activities of Trinity Health ACO for a minimum period of ten (10) years from the expiration or termination Trinity Health ACO's agreement with CMS or from the date of completion of any audit, evaluation, inspection, or investigation, whichever is later.

2. Records will be retained beyond ten (10) years for the following circumstances:

    a. Federal or state laws or regulations that require a longer period of retention;

    b. CMS notification to Trinity Health ACO of a special need to retain a particular record or group of records for a longer period of time;

    c. A termination, dispute, or allegation of fraud or similar fault is made against Trinity Health ACO, its Participants, Preferred Providers or other individuals or entities performing functions and services for Trinity Health ACO. In such cases, Records will be retained an additional six (6) years from the date of any final resolution of the termination, dispute, or allegation of fraud or similar fault.

3. Trinity Health ACO and its Participants and Preferred Providers, as well as other individuals or entities performing functions or services related to Trinity Health ACO activities, will grant access to and fully cooperate with applicable government agencies, including CMS, the

Department of Health and Human Services, and the Comptroller General, in any audits, inspections, investigations, and evaluations of any Records supporting Trinity Health ACO's:

    a.   Compliance with the Next Generation ACO Model Participation Agreement;

    b.   Quality of services furnished to Beneficiaries; and

    c.   Ability of Trinity Health ACO to repay any losses or other monies owed to CMS.

DEFINITIONS

Beneficiary means an individual enrolled in Medicare who is aligned to the ACO for a given performance year during the term of the NGACO Model Participation Agreement.

Participants means a Medicare enrolled provider or supplier that is identified on the required Participant List and, pursuant to a written agreement, has agreed to participate in Trinity Health ACO.

Participant List means the list that identifies each Participant that is approved by CMS for participation in Trinity Health ACO, as updated from time to time in accordance with the NGACO Model Participation Agreement.

Preferred Provider means an individual or entity that is a Medicare enrolled provider or a supplier that is identified on the Preferred Provider List and, pursuant to a written agreement, has agreed to participate in Trinity Health ACO.

Record means information, in any medium or form, created, received and/or maintained in connection with transacting Trinity Health ACO business and/or complying with the Next Generation ACO Model Participation Agreement and all applicable regulations including, but not limited to, books, contracts, documents and other evidence related to Medicare utilization and costs, quality performance measures, financial performance and arrangements, clinical services, employees and personnel, legal obligations, audits, investigations, corrective actions and disciplinary actions.

POLICY CONTACT

For questions regarding this policy, please contact the Legal or Integrity & Compliance Departments.

RELATED PROCEDURES AND OTHER MATERIALS

- NGACO Model Participation Agreement Section XVIII. Audits and Record Retention

APPROVALS

Initial Approval: Trinity Health ACO Leadership & Operations Team – May 26, 2016

Subsequent Review/Revision(s): *[insert dates of all subsequent reviews/revisions]*