
Subject: THA Medical Recordkeeping

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Objective:

To ensure accessibility, uniformity and accuracy of medical information fully documenting Tuality Health Alliance (THA) member's conditions and services received.

To ensure records are secured, safeguarded, and stored in accordance with applicable Oregon Revised Statutes (ORS) and Oregon Administrative Rules (OAR), the Health Insurance Portability and Accountability Act (HIPAA), and 42 USC § 1320-d et seq.,

Policy:

- I. THA requires medical records to be maintained in a manner that is current, detailed and organized and that permits effective and confidential patient care and quality review.
- II. The medical record, whether electronic or on paper, communicates the patient's past medical treatment, past and current health status and treatment plans for future health care. Well-documented medical records facilitate communication, coordination and continuity of care and they promote efficiency and effective treatment.
- III. Confidentiality and Privacy
 - A. Any records related to THA member's individual identifiable health information and service receipt must be kept confidential and protected from unauthorized use and disclosure consistent with the requirements of HIPAA and in accordance with ORS 179.505 through ORS 179.507, ORS 411.320, ORS 433.045(3), 42CFR Part 2, 42 CFR Part 431, Subpart F, 45 CFR 205.50.
 - B. Providers shall not release or disclose any information concerning a THA member for any purpose not directly connected with the administration of Title XIX or the Social Security Act except as directed by the THA member.
 - C. Except in an emergency, providers shall obtain a written consent from the member or legal guardian or Power of Attorney for Health Care Decisions before releasing information. The consent shall

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specify the type of information to be released, the recipient of the information, and shall be placed in the Member's record.

- D. In an emergency, release of service information shall be limited to the extent necessary to meet the emergency information needs and then only to those persons involved in providing emergency medical services to the member.
 - E. A THA member age 14 or older is competent to authorize or prevent disclosure of mental health and alcohol and drug treatment outpatient records until the custodial parent or legal guardian becomes involved in an outpatient treatment plan consistent with the THA member's medical treatment requirements.
 - F. Employees with access to medical record information shall have confidentiality statements on file. Medical records are to be stored in a location secure from public access.
- IV. Exchange of Protected Health Information for Treatment Purposes without Authorization
- A. THA is allowed with the required acknowledgement to share the following protected health information without member authorization for the purpose of treatment activities. The protected health information that may be disclosed, commonly found in claims or encounters includes the following"
 - 1. Oregon Health Plan member name
 - 2. Medicaid Recipient number
 - 3. Performing Provider number
 - 4. Hospital Provider name and attending physician name
 - 5. Diagnosis
 - 6. Dates of Service
 - 7. Procedure code
 - 8. Revenue code
 - 9. Quantity of units of service provided
 - 10. Medication Prescription and monitoring
- V. Access to Medical Records
- A. Provider Access to Clinical Records
 - 1. THA shall release health service information requested by a provider involved in the care of a THA member within 10 working days of receiving a signed release.

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2. Mental Health Organizations shall assure that directly operated and subcontracted service components, as well as other cooperating health service providers, have access to the applicable contents of a THA member's mental health record when necessary for use in the diagnosis or treatment of the THA Member. This access is permitted under ORS 179.505 (6).
- B. Member Access to Medical Records
1. Except as provided in ORS 179.505(9), THA Providers shall, upon request, provide the THA member access to his/her own medical record, allowing for the record to be amended or corrected and providing copies within ten (10) working days of the request. Providers may charge the member for reasonable duplication costs.
- C. Third Party Access to records:
1. On a periodic basis, THA staff will require access to member medical records for the purpose of quality assessment, investigating grievance and appeals, fraud and abuse monitoring, credentialing and peer review. On an annual basis, THA staff may require the assistance of Provider staff in collecting medical record information for DMAP reporting.
 2. Upon receipt of a member's written authorization for release of information, THA provider shall make such information available. When copies of records are requested, the provider may charge a reasonable duplication costs.
- D. THA and providers shall cooperate with DMAP, DHS Addictions and Mental Health (AMH), the Medicaid Fraud Unit, and/or the Oregon Audits Division, representatives for the purpose of audits, inspection and examination of THA member's medical and administrative records.
- VI. Retention of Records
- A. All Clinical Records shall be retained for seven (7) years after the date of service for which a claim is made. If an audit, litigation, research and evaluation, or other action involving the records is initiated before the end of the seven (7) year period, the medical record must be retained until all issues arising out of the action are resolved.

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VII. Medical Record Requirements

- A. A medical record shall be maintained for each THA member receiving services that documents all types of care needed or delivered in all settings, whether such services are delivered during or after normal clinic hours.
- B. The medical records are required to reflect all of the information as documented and required in Policy III-2.
- C. The medical record shall include sufficient detail and clarity to permit an internal and external clinical audit to validate encounter submissions (for THA DMAP members) and to ensure medically appropriate services are provided consistent with the documented needs of the member.

VIII. THA's Record Keeping

- A. THA maintains some records within the administrative offices. These records include:
 - 1. Names and phone numbers of the member
 - 2. Primary Care Physician
 - 3. MHO provider if available
 - 4. Referral documentation
 - 5. Intensive case management documentation
 - 6. Exceptional Needs Care Coordination documentation
 - 7. Complaint and appeals documentation
 - 8. Disenrollment requests for cause and the supporting documentation

Reference: ORS 179.507
ORS 192.518 to 192.526
ORS 411.320
ORS 433.045 (3)
OAR 410-141-0180
42 CFR Part 2
42 CFR Part 431 Subpart F
45 CFR 205.50
THA Policy III-2 THA Review of the Medical Record

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Formulated: February 1994
Reviewed: April 1994
Revised: May 1995
January 2000
March 2002
February 2006
November 2008
February 2011

THA Plan Director

THA Medical Director