

# North Carolina Infant-Toddler Program Procedural Guidance

*Reference: Procedural Safeguards Policy and Infant-Toddler Program Records  
Procedural Guidance*

## *Record Retention and Disposition*

### **Introduction**

According to the Procedural Safeguards Policy, the NC Infant-Toddler Program must inform parents when personally identifiable information that is collected, maintained, or used is no longer needed to provide services to the child. The information must be destroyed at the request of the parents. However, a permanent record of a child's name, date of birth, parent contact information (including address and phone number), names of service coordinator(s) and EIS provider(s), and exit data (including year and age upon exit, and any programs entered into upon exiting) may be maintained without time limitation.

The Record Retention and Disposition Schedule outlines what information the Infant-Toddler Program (ITP) is to retain, dispose of, and archive and specifies timelines for each. Each CDSA has a "schedule" for the purpose of cataloging the records in the State Record Center. The schedule defines what is included in the clinical file, data forms and HIS, and how long the ITP must retain this information. The ITP has discretion over what is in its clinical file and how long to retain and destroy (e.g., the ITP can change the length of retention and the content of the file).

According to the Record Retention Policy: Changing the Schedule: The EI State Office should annually review the program's records and retention schedule to ensure the schedule is current at all times. If a schedule requires changes, such as adding, deleting or revising, the "Public Records Series Listing" form (GRB-99S) must be completed and sent to the Government Records Branch, Office of Archives and History. (Refer to the [Government Records Branch of North Carolina](#) for guidelines and forms.)

### **Definitions**

**Destruction of Information:** According to 34 CFR 300.573 (Title 34: Education, Part 300: Assistance to States for the Education of Children with Disabilities, 7/1/2002): *Destruction of information. (a) The public agency shall inform parents when personally identifiable information collected, maintained, or used under this part is no longer needed to provide educational services to the child. (b) The information must be destroyed at the request of the parents. However, a permanent record of a student's name, address, and phone number, his or her grades, attendance record, classes attended, grade level completed, and year completed may be maintained without time limitation.* (Authority: 20 U.S.C. 1412(a)(8), 1417(c))

**Permanent Record:** As stated above, certain information from the record is maintained without time limitation. The references to educational terminology are expressly adopted to apply to Part C early intervention language.

Therefore, information retained for Early Intervention records include: child's name, date of birth, parent contact information (including address and phone number), names of service coordinator(s) and EIS provider(s), and exit data (including year and age upon exit, and any programs entered into upon exiting).

**Infant-Toddler Program Record** means any personally identifiable information (see definition below) in electronic, typed, printed, or handwritten form about a child or the child's family which is generated by early intervention providers, and which pertains to referral and eligibility determination, evaluation, assessment, development of an Individualized Family Service Plan, and the delivery of early intervention services.

**Personally Identifiable Information:** As defined by federal regulations, personally identifiable means information that contains the name of the child, the child's parent, or other family member; the address of the child; a personal identifier, such as the child's social security number or student number; or a list of personal characteristics or other information that would make it possible to identify the child with reasonable certainty.

## Procedures

### 1. Clinical Record Retention

- a. Each CDSA is to retain the entire record in a secure, confidential location at the local CDSA for two years after the child ages out (i.e., child turns three years of age).
- b. The record is then prepared by CDSA staff for archiving, according to the archiving procedures.
- c. The record is then transferred to the State Record Center (SRC) and retained for an additional 10 years per Medicaid requirements (see reference below).

Per the DHHS Controller's Office, the DHHS standard for retention of records for any Medicaid records is 10 years. ALL Medicaid records must be retained for the minimum 10 year period specified in the "North Carolina Department of Health and Human Services Records Retention and Disposition Schedule for Grants". The N. C. Department of Health and Human Services (DHHS) Controller's Office updates and distributes to the Department's subrecipients and certain other entities semi-annually the items described in the Memorandum in the link to follow. This memorandum and the attachments named therein represent an update as of September 30, 2012. This document, as well as the accompanying Background and Schedule, may be accessed by going to this link:

<http://www.ncdhhs.gov/control/retention/retention.htm>. Although this guidance is addressed to local government entities, it is also applicable to our nongovernmental partners and other subrecipients who receive federal grants directly from or passed through the DHHS.

- d. At the end of these ten years, the State Record Center will destroy the record.
- e. The age of the child, at final destruction of the record, would be fifteen years of age (record active in CDSA up to child's third birthday, retained for an additional 2 years at the local CDSA and then retained at the State Record Center for an additional ten years = 15 years of age).

### 2. Financial Records

The following guidelines are recommended to ensure consistency in financial record retention across CDSAs. Due to financially sensitive information in the financial documents, CDSAs have separated certain financial documents from the clinical record.

- a. CDSAs are to maintain the following financial documents in a separate file from the clinical record in a locked file cabinet in the business office or designated confidential and secure location. This room should also be locked when not in use. It is recommended that the financial files be stored in the same room as where clinical records are being retained to maximize storage and security.
  1. Financial Consent Form, which includes Sliding Fee Scale % (for enrolled children prior to April 2013 as this form was retired April 2013)
  2. Insurance Information Worksheet
  3. Financial Data Collection Form
  4. Copy of Insurance Card
  5. Notes, emails, contacts with family
  6. 1040 Form
  7. Family Pay Invoices
  8. Collection Referral Packets
  9. Hardship Application
  10. Monthly Max Cap Refund
- b. CDSAs are to maintain copies of the following NC ITP forms in the separate financial file on each child. Originals are kept in the child's clinical record.
  1. Prior Written Notice and Consent for Evaluation and Assessment (effective 4/1/13)
  2. IFSP Agreement Page
  3. IFSP Review Page
- c. The financial documents listed above are to be retained at the CDSA for 2 years after the child ages out.
- d. The Financial Data Collection Form (for children enrolled prior to April 2013 due to the form retired at that time) cannot be in the clinical record while the record is located at the CDSA as it has Social Security identification information. This financial form, along with all other contents of the financial record, is combined with the clinical record when it is prepared to be sent to the State Record Center.
- e. Family income verification documents, which provide supporting documentation of how the Sliding Fee Scale (SFS) is determined, shall be kept for two years after the child ages out. These documents may be necessary to have on file in case of family questions, concerns, or appeals of their SFS. This clarifies the statement of destroying "the previous years' income verification documents supplied by the family in cases of yearly review" as stated in the "Intake Procedure Guidelines Related to Financial Policy", page 9.

- f. Guidelines for electronic files such as Access databases, copies of interpreter invoices, insurance files (EOBs, 1500s), and collections shall be retained by the business office for six fiscal years and then deleted from network.
- g. The documents that should be included in the Financial Information section of the record should include:

Document	Comments	Retained & Archived?
Service Orders		Yes
Reply to Authorization Requests (prior to 7/1/13)	Filed on top of corresponding Auth Request	No
Authorization Request		No
Private Insurance Authorization		No
Financial Consent Form (prior to 7/1/13)		Yes
Insurance Information Worksheet		Yes
<del>Financial Data Collection Form</del>	This form should NOT be in the clinical record and should be deleted from the Section 2 Cover Sheet list (if used)	No
Transportation and Respite Forms		No

### 3. Electronic Records

- a. **HIS (programmatic, clinical and financial):** HIS will permanently retain all data entered. Certain documents are to be printed for program use, such as the evaluation, IFSP, and service notes (original signature required until electronic signatures are approved and available in HIS).
- b. **Clinical (local shared drive):** Clinical information that is on the local shared drive may be thought of as an “electronic record”, but, for most CDSAs, these files are not the entire record. That is, the files are typically created on the local drive, printed and then stored in the paper record, but the electronic file is not deleted. If the CDSA does not have an official electronic medical record, then files containing PII should not be stored on the local shared drive or network unless the file is encrypted or the drive is password protected. CDSAs should not use their local shared drive to store electronic copies of ITP documents containing PII.
- c. **Retention of information with PII stored electronically:** If possible, these electronic files are to be deleted as soon as a hard copy is printed. If the file is needed for quality assurance purposes, the electronic file shall be saved for one year after the child’s third birthday, then transferred to a “protected drive”, i.e. password protected, for 5 years and then destroyed. When the retention period is over, the files on the local shared drive should be completely removed from the server. Keeping them in an “archived” status on the drive is not sufficient.

#### 4. Notification to Parents

The IDEA requirements state that the parent, guardian, or surrogate parent must be notified prior to destruction of personally identifiable information so copies of records can be provided if desired.

- a. Parents are notified at referral, enrollment, annual review, and at exit, regarding the confidentiality, retention and disposition of their child's records.
- b. The EISC provides the parent a copy of the Notice of Rights at referral and/or enrollment, which outlines confidentiality and the handling of personally identifiable information.
- c. The destruction of the record should also be discussed at annual reviews.
- d. The EISC, during the final transition meeting, shall again inform the parents of their rights regarding confidentiality, retention and disposition of their child's record. The EISC encourages the parents to secure any copies of their child's record prior to its destruction date (twelve years after the child turns three).
- e. Information must also be destroyed at the request of the parents if no longer needed to provide early intervention services to the child. Permanent record information listed in the definition section is maintained without time limitation. (*For additional information, refer to the Confidentiality Procedural Guidance.*)

#### 5. EI Service Providers

EI Service Providers are considered participating agencies and must abide by the same confidentiality regulations as the CDSAs.

- a. Confidentiality

**§ 303.404 Notice to parents** requires that the CDSA must fully inform parents about confidentiality requirements, including a summary of the policies and procedures that participating agencies must follow regarding storage, disclosure to third parties, retention, and destruction of personally identifiable information (PII). EIS providers must ensure the protection of the confidentiality of personally identifiable data, information, and records collected or maintained.

To ensure EI service providers have the same information regarding how to handle retention and destruction of PII, the CDSA must provide them the following procedural guidance documents:

- Record Retention and Disposition
- Confidentiality

The confidentiality procedures outlined in the procedural guidance apply to the personally identifiable information of a child and the child's family that is contained in early intervention records collected, used, or maintained by an EIS provider; and applies from the point in time when the child is referred for early intervention services until the later of when the participating agency is

no longer required to maintain or no longer maintains that information under applicable Federal and State laws.

b. Retention and Destruction Guidelines for Providers

The retention and destruction guidelines below constitute the written consent of the Early Intervention Branch regarding disposition of record retention by contract EI service providers as required in the provider contract.

- i. Contract provider must retain records on ITP clients for twelve years at the provider's facility after the child ages out at three years of age. The EI service provider may transfer the child's record at any time to the CDSA for which the provider is providing services. The CDSA would then be responsible for retaining and archiving records of that child served by the EI service provider.
- ii. The EI service provider's decision to transfer the record to the CDSA shall be based on the provider's need to maintain the record for its own purposes of:
  - insurance and billing practices and compliance with Medicaid requirements, when applicable, and
  - resolving any litigation, claim, negotiation, audit, disallowance action, or other action involving the EI service provider, which had been started before expiration of the twelve-year retention period described above. The records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the twelve-year period described above, whichever is later.
- iii. The record must be free of any actions needing resolution.
- iv. Any information in the contract record that is not in the ITP record must be forwarded to the CDSA.
- v. The contract provider must notify the CDSA of the client's record (name, date of birth) that will be destroyed after the twelve year retention period.