



Agency Records Disposition Schedule

Department: Department of Health & Senior Services

Section: Section for Health Standards & Licensure

Division: Regulation & Licensure

Sub-Section: Bureau of Home Care & Rehabilitative Standards

TITLE: Complaint Files

CUTOFF: End of Calendar Year Complaint is Resolved

DESCRIPTION: Documentation generated during the course of a complaint investigation into hospice, home health, Intermediate Care Facilities for Individuals with Intellectual Disabilities, outpatient physical therapy providers as well as comprehensive outpatient rehabilitation facilities. Records include, but are not limited to investigation notes, provider records and records referenced in the statement of deficiencies.

RETENTION: Years: 7 Months: 0 Days: 0

NOTES: For complaints that result in legal action please see series 21589 and 24546.

DISPOSITION ACTION: Destroy

SERIES: 22546

SERIES STATUS: Approved

APPROVAL DATE: 7/31/2024

TITLE: Health Provider Certification Records

CUTOFF: End of Operating Term of the Health Provider

DESCRIPTION: Documents created as part of the certification and subsequent recertification processes for health providers to ensure regulatory compliance. Records include, but are not limited to, certification survey notes, facility records, statements of deficiency, license files, and related correspondence.

RETENTION: Years: 6 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: HIPAA-Compliant Destruction

SERIES: 22539

SERIES STATUS: Approved

APPROVAL DATE: 7/31/2024



Agency Records Disposition Schedule

Department: Department of Health & Senior Services

Section: Section for Health Standards & Licensure

Division: Regulation & Licensure

Sub-Section: Bureau of Home Care & Rehabilitative Standards

TITLE: Medicare/Medicaid Certification Survey Records - Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)

CUTOFF: End of Calendar Year of Survey Exit Date

DESCRIPTION: Records created by staff during the course of federal certification surveys that are contracted out to the agency. The purpose of these surveys is for the review of ICF/IID facilities. Records include, but are not limited to: statements of deficiencies, plans of correction, related correspondence, sample selections, staff and resident rosters, resident condition and census information, facility descriptions, construction fact sheets, legal notices related to the certification process, and documentation of the medical review process. Records created pursuant to 42 CFR 483.1-480 and 198.045 RSMo.

RETENTION: Years: 7 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: HIPAA-Compliant Destruction

SERIES: 8945

SERIES STATUS: Approved

APPROVAL DATE: 7/31/2024
