

Document Retention

Policy

USDA Federal Regulations:

- (a) *Recording requirements.* Each State and local agency shall maintain full and complete records concerning Program operations. Such records shall comply with 2 CFR part 200, subpart D and USDA implementing regulations 2 CFR part 400 and part 415 and the following requirements:
- (1) Records shall include, but not be limited to, information pertaining to financial operations, food delivery systems, food instrument issuance and redemption, equipment purchases and inventory, certification, nutrition education, including breastfeeding promotion and support, civil rights, and fair hearing procedures. Records for non-expendable property acquired in whole or in part with Program funds shall be retained for three years after its final disposition.
 - (4) All records shall be available during normal business hours for representatives of the Department and the Comptroller General of the United States to inspect, audit, and copy. Any reports or other documents resulting from examination of such records that are publicly released may not include confidential applicant or participant information.

Iowa Department of Public Health (IDPH) General Conditions:

- a. The Contractor shall maintain accurate, current, and complete records of the financial activity of this contract, including records which adequately identify the source and application of funds. Cash contributions made by the Contractor and third party in-kind (property or service) contributions shall be verifiable from the Contractor's records. These records must contain information pertaining to contract amount, obligations, unobligated balances, assets, liabilities, expenditures, income and third-part reimbursements.
- b. The Contractor shall maintain account records supported by source documentation including but not limited to cancelled checks, paid bills, payrolls, time and attendance records, and contract award documents.
- c. The Contractor, in maintaining project expenditure accounts, records and reports, shall make any necessary adjustments to reflect refunds, credits, underpayments or over payments, as well as any adjustments resulting from administrative or compliance review and audits.
- d. Contractor shall maintain a sufficient record keeping system to provide the necessary data for the purposes of planning, monitoring and evaluating their program.
- e. The Contractor shall retain all accounting and financial records, programmatic records, supporting documents, statistical records and other records reasonably considered as pertinent to the contract, for a period of five (5) years from the day the contractor submits its final expenditure report. If any litigation, claim, negotiation, audit or other action involving the records has been started before the expiration of the five (5) year period, 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 regular five (5) year period, whichever is later. Client records which are non-medical must be maintained for a period of five (5) years.
- f. The Contractor shall retain all medical records for a period of six (6) years from the day the Contractor submits its final expenditure report; or in the case of a minor patient or client, for a period of one (1) year after the patient or client attains the age of majority, whichever is later.
 - g. The Contractor shall maintain the confidentiality of all records of the project in accordance with state and federal laws, rules, and regulations, and the terms of section 9 of these general conditions.
 - h. The Contractor shall not charge the Department a fee to audit, inspect or examine Contractor's records.

USDA Policy Memo:

This memorandum is intended to provide clarification on the applicability of two Department of Health and Human Services' (DHHS) final regulations to the WIC Program. These regulations, which are the first in a series of DHHS regulations to implement HIPAA, include requirements for: (1) the establishment of standard formats for certain administrative and financial transactions, and (2) the privacy of individually identifiable health information.

"...DHHS's regulations do not apply to or require compliance by the WIC Program. In addition, the DHHS regulations on privacy do not supersede Federal WIC confidentiality requirements. The WIC Program is not a covered entity – health plan, health clearinghouse, or health care provider – as defined by DHHS in these regulations."

Authority

USDA Federal Regulations: 246.25 (a), excerpt

IDPH General Conditions: 3. Accounts and Records

WIC Final Policy Memorandum #2002-2: Department of Health and Human Services' (DHHS) Regulations to Implement the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Applicability to the WIC Program, December 5, 2001, excerpts.

Procedure

All records pertinent to a USDA grant must be available to representatives of the state or federal government for purposes of making an audit, examination, excerpts or transcripts.

Document Retention Period

All WIC documentation records must be retained for a minimum of five years following the date of submission of the final expenditure report for the period to which the report pertains. Therefore, for practical purposes, the retention period is six years from the beginning of the 12-month contract period.

WIC-only participant records are non-medical and must be retained for a period of five years from date of termination. Combined WIC/Maternal Health or WIC/Child Health records are considered medical records and must be retained for a period of six years from submission of the final expenditure report or in the case of a minor client, for a period of one year after the client attains the age of majority, whichever is later or until transfer or the Department authorizes disposal.

Example: A 12-month contract period is October 1 to September 30. The final expenditure report for that grant is submitted in December – when the five-year retention period begins. The retention period is approximately six years from the beginning of the contract period.

Note: If any litigation, claim, negotiation, audit or other action involving the records has been started before the expiration of the five-year period, 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 regular five-year period, whichever is later.

Documents may be retained beyond the five-year period when a contract agency's internal policies dictate.

Records to be Retained

Contract management, clinic services documents, and other supporting documents, breastfeeding peer counseling reporting documents, copies of subpoenas and search warrants, and statistical records pertinent to the WIC contract must be retained for the minimum period. In no case should these documents be disposed of prior to the five-year requirement.

Examples of contractual, accounting, and personnel records that must be retained for the minimum period include, but are not limited to the following:

- WIC proposals, applications, contracts, and related correspondence
- WIC Time Study Reports and actual daily time records
- Equipment purchases and inventory
- Civil rights and fair hearing procedure documents
- Action Plans
- Staff training and education records
- Contracts and agreements with other providers

Examples of clinic services record documents that must be retained for the minimum period include, but are not limited to the following listed below. Depending on the document, clinic services records must be maintained by electronically scanning the document into the MIS system, documenting via electronic signature, placing a comment/alert in the data system verifying that the participant received the document, or maintained in agency files.

- Rights and Responsibilities: Electronic signature from participant/scanned signed document
- Notice of Termination: Comment/alert in the data system
- Notice of Eligibility: Electronic signature from participant and comment/alert in the data system
- Proxy cards: Scanned document

- Signed Statement Forms (no proof documentation): Scanned document
- Missed prenatal appointment logs: Scanned document
- Special Food and Formula Documentation forms: Scanned document
- Food instrument issuance and redemption records: Electronic signature from participant/information stored within the data system
- Participation violation, disqualification and restitution forms: Local agency files/State WIC office files
- Participant complaints: Local agency files
- Custody documentation: Scanned document
- Verification of Certification forms received: Scanned document
- Referral Forms: Scanned document
- Release of Information Forms: Scanned document

Note: Clinic services documents that are scanned and saved into the WIC data system must be deleted from the computer and shredded immediately.

Confidentiality

All WIC participant information must remain confidential. Only WIC personnel (as funded by WIC grant funds) are allowed direct access to participant records and the electronic WIC data system, including the rights to “read” and “edit” records. For more information about sharing participant information, see the policy titled “Confidentiality of Participant Information”.

Note: The Health Insurance Portability and Accountability Act (HIPPA) does not apply to or require compliance by the WIC Program.

Best Practices

Maintain one year of clinic services records that are not electronically filed in the WIC data system in an accessible, centralized WIC office or a permanent WIC clinic site. Clinic services records older than one federal fiscal year may be placed in long term storage.