

In the News

Provider Medical Record Retention Requirements by Plan Type

Medicare Advantage Medical Record Retention Requirements

CMS requires providers who serve Medicare Advantage members to retain their medical records for a minimum of ten (10) years. These records must be made available within CMS-specified time constraints to health plans for submission to CMS in the event of a Risk Adjustment Data Validation (RADV) audit *at no cost to the plan*. Providers using a chart retrieval vendor are responsible for following these requirements and must remember that the relationship with the vendor is theirs, not that of the health plan. Note: state law does not supersede federal law. <https://www.cms.gov/files/document/contract-level-radv-faqs.pdf>; <https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.504>

ACA Medical Record Retention Requirements

Ohio law requires healthcare facilities to maintain medical records for at least six (6) years from the date of discharge. For pediatric patients, records must be kept until age eighteen (18) plus the state's statute of limitations. However, federal law requires that records be retained for ten (10) years from the date of service for those with ACA coverage, or by state law requirements, whichever is longer. This is due to provisions in the False Claims Act that enable the government to go back ten years to make a claim. Thus, while pediatric records may need to be kept longer, adult records need to be retained for ten years.

<https://www.govinfo.gov/content/pkg/FR-2013-10-30/pdf/2013-25326.pdf>

Medical Record Retention Plans

Things happen – providers retire, move away, etc. Are you prepared? Provisions must be made for handling and storage of medical records when a provider leaves a practice. Typically, a provider will name a custodian of the medical records. This could simply be the practice the physician is leaving, another physician who will be taking on the physician's patients, or a record management service. Health plans should be made aware of the arrangements prior to the provider's departure from the practice if the practice will not be managing the records.