

DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE

Clinical Services Division – Medical Records Branch

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MEDICAL RECORDS BRANCH - PROGRAM INFORMATION

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MISSION STATEMENT

The mission of the Medical Records Branch is to function collaboratively with other branches within this Department and to ensure the protection of consumers' confidentiality while preserving and maintaining timely, accurate and complete health records.

PROGRAM DESCRIPTION

To provide **Medical Records** information management services to enhance the delivery of quality healthcare services through quality information that is secured, timely, accurate and complete throughout this department in a legal health record.

Hours of Operation: Monday – Friday 0800 – 1700 excluding weekends and holidays. Authorized DMHSA employees may access this unit 24-hours a day/7days a week in the event of an emergency or other urgent crises. These authorized employees enter their personal identification code onto the key-pad and the date and time of entry and exit is recorded.

Scope of Services

The Medical Records Branch is responsible for overseeing the timely processing, completeness and retrieval of consumer medical records. The services provided by the Medical Records Branch include the following:

- ❑ Record Analysis
- ❑ Record Diagnostic Codes
- ❑ Correspondence
- ❑ Record Retrieval, Filing and Storage
- ❑ Master Patient Index

Critical responsibilities are to effectively & efficiently collect, develop, monitor, maintain, record, research, and secure all health information of all consumers, who apply or receive departmental services in a structure consistent with applicable federal and local mandates; rules and regulations and behavioral healthcare policies. The Medical Records Unit provides essential health information services to support the development, delivery, implementation and monitoring of all protected health information (PHI).

As the Health Information Management Center's Record Custodian, Health Insurance Portability and Accountability Act (HIPAA) Compliance Officer, Forms Committee Chairperson and Policy and Procedure Committee Member to the strictest confidentiality laws of this nation, we are tasked to engage in providing support to all clinicians, consumers, operational and administrative professionals for the department by conducting employee trainings on Documentation and Confidentiality. In addition, collaborate with local and federal governmental entities such as the criminal justice system, healthcare providers, U.S. Personnel, Social Security Administration and others. As such, it must be maintained in a manner that follows applicable regulations, accreditation standards, professional practice standards and ethical legal standards of all 16,000 + consumers registered with DMHSA.

How Customers Needs are Identified

- ❑ Individual observations
- ❑ Leaders recommendations
- ❑ Regulatory requirements
- ❑ Employee satisfaction surveys
- ❑ Customer satisfaction survey and reports

How Success in Meeting Consumers Needs are Evaluated

- ❑ Monitor improvement
- ❑ Solicit feedback from individuals
- ❑ Conduct employee satisfaction surveys
- ❑ Conduct consumer satisfaction surveys

MANDATES

Primary mandates include the following however, this does not include healthcare rules and regulations (e.g. JCAHO IM.7) that have the effect of law nor does this listing contain a full scope of mandates that we must comply:

- 42 U.S.C. 300x-53(b), 45 CFR 96.132(e), 42 CFR Part 2 Disclosure of Patients Records SAPT Goal 16: Protect Records
- Drug and Alcohol Confidentiality Law, (Title 42 U.S.C.-290dd)
- Social Security Act, Conditions of Participations (Title XVIII)
- Uniform Healthcare Information Act (Confidential Information Disclosure)
- Health Insurance Portability Accountability Act (HIPAA) (45 U.S.C.-Parts 160 and 164)
- Guam Code Annotated 10GCA Chapter 82 §82602; 82605; 82305
- Retention of Records Guam P.L. 6-64, §6707

Penalties for violation of accidental or intentional disclosure to unauthorized persons is punishable by law to include civil and criminal penalties of up to \$250,000.00 as evidenced in HIPAA Sec. 1177 (45USC 1320d-6) and in addition, may include incarceration. Thus, information security, privacy and protection from alteration, destruction and loss are of primary concern in complying with the privacy and security rules (i.e., 42 CFR Part 2 and 45 CFR Parts 160 & 164). Compliance is not a choice but a mandate therefore; it is imperative that the medical records unit be staffed adequately, receive professional workforce development training in health information management and receive the necessary tools to reduce the liability for our consumers.

ORGANIZATIONAL CHART (Refer to Departmental Chart)

Current Staffing Level

- (1) Medical Health Records Supervisor
- (1) Medical Records Clerk
- (1) Community Program Aide

Responsibility

Supervision: Medical Health Records Supervisor reports to the Clinical Administrator.

Job Descriptions (Refer to Personnel Section)

WORKFORCE DEVELOPMENT & MAINTENANCE OF CERTIFICATIONS

The trainings listed below are required to eliminate disparities; improve disaster readiness and response to health information by learning the necessary basic tools needed to educate current staff, consumers and our community. Train the Trainers!

- ❑ Disaster management and recovery of protected health information in a legal health record;
- ❑ Maintain and retain a legal behavioral health record;
- ❑ HIPAA privacy and security of health information;
- ❑ Health information management;
- ❑ Release of confidential health information to authorized persons (i.e. minors and family members);
- ❑ Healthcare compliance;
- ❑ Bridging a paper-based and electronic behavioral health record;
- ❑ ICD-10 CM;
- ❑ Effective tools to manage the master patient index

POLICIES & PROCEDURES APPROVED

- ❑ Request for Medical Records
- ❑ Consent to Disclose Consumer Information
- ❑ Release of Consumer Records To Court
- ❑ Consent to Release Confidential Information
- ❑ Release of Information
- ❑ Storage and Retention of Consumer Records
- ❑ Medical Records Monthly Report
- ❑ Departmental Closure of Consumer Records
- ❑ Medical Records Unit Entry During Holidays, Weekends, and After Normal Business Hours
- ❑ Chart Deficiency Notice
- ❑ Contract of Confidentiality
- ❑ Integrated Progress Notes
- ❑ Medical Records Forms Management & Guidelines
- ❑ Membership & Guidelines of the Forms Committee

Policies and Procedures Pending Approval

- ❑ HIPAA Notice and Acknowledgment of Privacy Practices
- ❑ Accounting Of Disclosures
- ❑ Abbreviations & Symbols
- ❑ Consent to Release Confidential Information – Revised
- ❑ Delinquent Medical Records
- ❑ Discharge Log
- ❑ Filing Sequence of a Permanent Record
- ❑ Protection and Advocacy Access to Patient Records
- ❑ Medical Record(s) Custody Receipt
- ❑ Request for Consultation
- ❑ Authorization for Audiotape, Videotape, Film or Photograph
- ❑ Inpatient Admission Log

Policies and Procedures Pending Approval (continued)

- ❑ Inpatient & Residential Chart Organization & Thinning Guidelines
- ❑ Missing Health or Administrative Record
- ❑ Disaster Recovery Plan
- ❑ Request for Medical Record Form Approval
- ❑ Signature Sheet

Policies and Procedures Pending Submission to Committee

- ❑ Documentation Requirements in the Health Record
- ❑ Correction of Errors
- ❑ Medical Records Review Function
- ❑ Release of Information to Court
- ❑ Medical Record Services
- ❑ Purpose and Profile
- ❑ AKA's and Patient Name Changes
- ❑ Essentials of the Medical Record
- ❑ Medical Record Entries and Countersignatures
- ❑ Completion of Medical Records When Employees are No Longer Here
- ❑ Late Entries