Introduction:

This policy is intended to assist EMS agencies in developing a record retention policy. It must be noted that records retention requirements differ depending upon the ownership of the EMS service. Agencies owned by local governments are required by law to maintain records as defined in the General Retention and Disposition Schedule (GRDS). At present there are no state laws or regulations that define how long private organizations must maintain their patient care records and other related EMS documents. However federal regulations do require providers being paid through Medicaid and Medicare to retain appropriate documentation in compliance with applicable regulations. Similarly, commercial and third party payers may have their own requirements for record retention.

It is the intention of this policy statement to provide a guideline for the retention of records by all types of EMS Services. This policy was prepared in conjunction with the GRDS for use by miscellaneous local governments in New York State (Section 185.14, 8NYCRR (Appendix K). The GRDS is prepared and issued by the State Archives, within the New York State Education Department and indicates the minimum length of time that officials must retain their records before they may be disposed of legally.

Unless otherwise required by regulation or policy: EMS Agencies, Course Sponsors and individual provider’s are not required to create and/or use all of the following forms of documentation. However, if the documents are created and/or used they must be retained according to the following schedule.

It is recommended that all EMS Agencies and Course Sponsors develop a policy that describes how they will comply with all record retention requirements. This policy should include, but not be limited to:

- 800.21(k) - personnel files;
- 800.21(l) - a record of each ambulance call;
- 800.21(p) - written policies; and
- 800.21(r) - all unexpected authorized EMS response vehicle and patient care equipment failures.

Retention Schedule:

***All documents should be appraised for historical value and considered for permanent retention.***

Agency:

- Administrative documents, such as meeting minutes and financial records must be retained for 7.5 years.
- Patient Care Reports (electronic or hardcopy), must be retained for 6 years or 3 years past the patients eighteenth birthday, whichever is longer.
- Patient care data files containing medical treatment and/or billing information must be retained for 6 years or 3 years past the patients eighteenth birthday, whichever is longer.
- Summary record of all patients treated and/or transported must be retained for 3 years.
- Ambulance run chronological log must be retained for 6 years after the last entry.
- Monthly or periodic reports or listings must be retained for 3 years.
• Reports containing information on subjects (not patient specific) such as types of medical emergencies, types and amounts of supplies used, call frequency etc. must be retained for:
  • Reports containing billing information – 7 years.
  • Reports not containing billing information – 1 year.
• All records pertaining to controlled substances must be retained for 5 years.
• Rescue and Disaster Response Reports and related records, covering specific incidents must be retained for 3 years.

Course Sponsor:
• Documents containing information on individuals and course files must be retained for 5 years.
• Documents containing information on instructors must be retained for 5 years after working association ends.

Provider Training Records:
• Application for training or certification must be retained for 6 months.
• Training and course materials must be retained for 7 years after the course completion.

HIPAA
• All written policies and procedures as required by the Health Insurance Portability and Accountability Act of 1996 are required to be maintained in writing for at least six years from the date of its creation, or the date when the document was last in effect, which ever is later.
• Section § 164.530(j), states that “written” includes electronic storage. Paper records are not required.

Conclusion:
EMS agencies should have a policy in place describing their procedures to comply with the retention of all required records. This policy must describe the length of time each document will be retained. Additionally, the policy should describe where the documents will be stored, how they will be protected, and procedures for obtaining a stored record if necessary.

Other regulatory agencies such as the IRS, OSHA / PESH etc., have regulations for document retention. It is beyond the scope of this document to address every regulation. Therefore, it is incumbent upon each responsible party to research and maintain compliance with all document regulations.

Resources:
• New York State Archives:
  • Website: http://www.archives.nysed.gov/aindex.shtml
• 10 NYCRR Part 800 State Emergency Medical Services Code
  • http://www.nyhealth.gov/nysdoh/ems/part800.htm
• Health Insurance Portability & Accountability Act of 1996 - HIPAA
  • Website: http://www.hhs.gov/ocr/hipaa/
  • Referenced website link: http://www.hhs.gov/ocr/part3.pdf
• New York State Department of Labor
  • Website: http://www.labor.state.ny.us/
  • Division of Safety and Health
    • http://www.labor.state.ny.us/workerprotection/safetyhealth/DOSH_PESH.shtm
• US Department of Labor - OSHA
  • Website for New York offices: http://www.osha.gov/oshdir/ny.html
• Internal Revenue Service
  • Website: http://www.irs.gov/