DEPARTMENT OF GENERAL SERVICES-STATE RECORDS CENTER SCHEDULE						
REC	ORDS RETENTION AND	DISPOSAL	SC	HEDULE	NUMBER 2627	
	DEPARTMENT OF HEA				PAGE 1 OF 6	
		ELIGIBILITY SERV				
		upersedes schedule				
Item No.	Description of Records Series (from	Inventory Form)	A	uthorized Retentio	n Period & Instructions	
1	ELIGIBILITY SERVICES – EXECUTIV	E DIRECTOR'S	8			
	1.1 Medical Assistance Emergency (EMS) Records for Illegal and Inc					
	1.1A. Active Case Records: Elect Retroactive requests for approval of care and electronic copies of appro- sent to local Department of Social where individual's case record is n	of EMS for chronic oval/denial letters Services (LDSS)	1.1A.	becomes inactive services electron	ntil case is closed or e. Retain in emergency lic case management (6) years from date troy.	
	1.1B. Inactive Case Records: Ele Retroactive requests for EMS and of approval/denial letters sent to LI individual's case record is maintair	electronic copies DSS where	1.1B.		ency services electronic nt database for six (6) roy.	
2	DIVISION OF ELIGIBILITY WAIVER S (DEWS)	SERVICES				
	2.1 Home and Community Based W Client Records: include: applicati enrollment, form letters/correspon verifications, e.g., birth certificates cards, insurance policies, bank sta database and eligibility file/system	ions for program dence, requested s, social security atements,	2.1.	Archives standar one (1) year the	rds to Maryland State rds. Retain hardcopy for n destroy. Save electronic c-up copy for six (6) years a, then destroy.	
	2.2 Primary Adult Care (PAC) Program Client Records: include: applications for program enrollment, form letters/correspondence, requested verifications, e.g., birth certificates, social security cards, insurance policies, bank statements, database and eligibility file/system print-outs.			Archives standar one (1) year the	rds to Maryland State rds. Retain hardcopy for n destroy. Save electronic k-up copy for six (6) years e, then destroy.	
APPROVE	D BY: (DHMH Official)	AUTHORIZED BY	: (MD	STATE ARCHIV	ES)	
DATE:	1/11/13	DATE: _2/	14/20	13		
SIGNATU	RE: \	SIGNATURE:	Ler	unal qu	enfor	
t Len	A	NAME/TITLE: EDWARD C PAPENFUSE, JR., STATE ARCHIVIST				
	LE: Debbie Ruppert, Executive Office of Eligibility Services	ENTRE THEE. <u>EDV</u>				
	DGS 550-1 (DHMH 2002)					

DEPARTMENT OF GENERAL SERVICES-STATE RECORDS CENTER SCHEDULE NUMBER 2627 RECORDS RETENTION AND DISPOSAL SCHEDULE PAGE 2 OF 6 DEPARTMENT OF HEALTH & MENTAL HYGIENE OFFICE OF ELIGIBILITY SERVICES Item No. Description of Records Series (Program, forms, etc.) Authorized Retention Period & Instructions 2 DIVISION OF ELIGIBILITY WAIVER SERVICES (DEWS) 2.3 Family Planning (FP) Program Client Records: 2.3. Scan paper records to Maryland State include: applications for program enrollment, form Archives standards. Retain hardcopy for letters/correspondence, requested verifications, e.g., one (1) year then destroy. Save birth certificates, social security cards, insurance electronic version and back-up copy for policies, bank statements, database, and eligibility six (6) years from closed date, then file/system print-outs. destroy. 2.4 Women's Breast and Cervical Cancer Health 2.4. Scan paper records to Maryland State (WBCCHP) Program Client Records: include: Archives standards. Retain hardcopy for applications for program enrollment, form one (1) year then destroy. Save letters/correspondence, requested verifications, e.g., electronic version and back-up copy for birth certificates, social security cards, insurance six (6) years from closed date, then policies, bank statements, database and eligibility destrov. file/system print-outs. 2.5. 2.5 Employed Individuals with Disabilities (EID) Scan paper records to Marvland State Program Client Records: include: applications for Archives standards. Retain hardcopy for program enrollment, form letters/correspondence, one (1) year then destroy. Save requested verifications, e.g., birth certificates, social electronic version and back-up copy for security cards, insurance policies, bank statements, six (6) years from closed date, then database and eligibility file/system print-outs. destroy.

	DEPARTMENT OF GENERAL SERVICES-STATE RECORDS	CENTER	SCHEDULE NUMBER 2627
REC	ORDS RETENTION AND DISPOSAL	PAGE 3 OF 6	
	DEPARTMENT OF HEALTH & OFFICE OF ELIGIBILIT		
tem No.	Description of Records Series (Program, forms, etc.)	Authorized Retention	on Period & Instructions
3	DIVISION OF RECIPIENT ELIGIBILITY PROGRAMS (DREP)		
	3.1 CARES (Clients' Automated Resources and Eligibility System)/MMIS (Medicaid Management Information System) Unit		
	3.1A. CARES/MMIS Unit Files : include the following documents produced and/or maintained by DREP for the purpose of establishing, deleting, correcting or maintaining Medicaid eligibility. (Documents beginning with HMFR, HMMR, HMFM or HMFB are computer generated report identifiers only and do not refer to a department program).	VILLECONTRACTOR (CERT EDUCTOR)	e Records Center for four ntil all audit requirements
	 DHR (Department of Human Resources)/IMA (Income Maintenance Administration)-81 Administrative Error Report HMFR-1942-R001-Daily Certification/Turnaround Document (CTAD) HMMR 1184 – Daily process summary – MMIS II HMFR 3300-R001 – Possible duplicate recipient - birth/sex daily HMFR 9140-R001-Recipient On-Line Cross Reference Report Enrollment Reconciliation-HMFR 8900 HMFR 1112-R001-Counts by coverage group per local health department HMFR 1110-R001-Eligibility count of last twelve months of MA eligibility HMFR 1120-R002-Eligibility counts by race/sex 		
	 HMFR 1120-R001 – Eligibility counts by age HMFR 1967-R002-CARES/MMIS II Reconciliation report – Recipients active on CARES not active on MMIS-II HMFR 1968-R002-CARES/MMIS-II Reconciliation Report – Recipients active on MMIS-II – not active on CARES HMFR 9120-R001-Newborn report of cases not processed by CARES-DHR Eligibility Sys DHMH 4541-Conflicting Data Report 		
	 DHMH 1184- Hospital Report of Newborns HMMR 6761-S13 (Children under 19) ACE (Accelerated Certification of Eligibility) cases with eligibility ending a specific month HMMR 6760-P02 (Pregnant Women) ACE cases with eligibility ending on specific month HMFM 1111-R001-Eligibility Counts by coverage group and resident county HMMR 1510-R001 – Counts by coverage group 	-	
	 and age of recipient HMFR 4010-Terminated refugee status. a [continuation] (DHMH rev. 2002) 		

REC	DEPARTMENT OF GENERAL SERVICES-STATE RECORDS			SCHEDULE NUMBER 2627
REO	DEPARTMENT OF HEALTH & OFFICE OF ELIGIBILIT	ME	NTAL HYG	PAGE 4 OF 6
Item No.	Description of Records Series (Program, forms, etc.)	A	uthorized Retentio	n Period & Instructions
3	DIVISION OF RECIPIENT ELIGIBILITY PROGRAMS (DREP)		-	
	3.1B. Audit Trails for CARES/MMIS Unit Files	3.1B.	creates audit trai	rms/reports in 3.1A. Is. All audit trails are even (7) years, then
	 3.1C. Electronic case records: any electronic records including those scanned and archived in an electronic document management system. 3.2 Long Term Care (LTC) Unit 	3.1C.	Archives standard one (1) year, the electronic records	tem for six (6) years after
	3.2A. The following documents are produced and/or maintained by DREP for the purpose of establishing, deleting or maintaining Medicaid eligibility. (Documents beginning with HMFR or HMMR are computer generated report identifiers only and do not refer to a department program).	3.2A.	years then transf Center for four (4	forms/reports for two (2) fer to State Records 4) years and until all audi met, then destroy.
	 Exception Report-206C Requests Penalty Form for Screen 4- Form 813 Less than 30 day Stay form DES (Division of Eligibility Services)-501 Certification for Inpatient Addictions Services in a Psych Facility (Under 21 Program) DHMH 2324 Recipient File Split Bill Amount/Screen 4 Update Request- Form DHMH 4571 Hospice/Hospice Adjustment Form Waiver and Waiver Adjustment Form CARES Reconciliation Report HMMR 1960 Certification/Turnaround Document HMFR 1942- R001 LTC Recipient Span Audit Trail 			
	3.2B. Audit Trails for CARES/MMIS Unit Files	3.2B.		rms/reports in lit trails. All audit trails ar even (7) years , then
	3.2C. Electronic case records : any electronic records including those scanned and archived in an electronic document management system.	3.2C.	Archives standar one (1) year, the electronic record	rds to Maryland State ds. Retain hardcopy for en destroy. Maintain all s in document stem for six (6) years ,

	DEPARTMENT OF GENERAL SERVICES-STATE RECORDS		SCHEDULE NUMBER 2627				
REC	ORDS RETENTION AND DISPOSAL	SC	HEDULE	PAGE 5 OF 6			
DEPARTMENT OF HEALTH & MENTAL HYGIENE OFFICE OF ELIGIBILITY SERVICES							
Item No.	Description of Records Series (Program, forms, etc.)	uthorized Retentio	n Period & Instructions				
3	DIVISION OF RECIPIENT ELIGIBILITY PROGRAMS (DREP)						
	3.3 Medicare Buy-in Unit						
	 3.3A The following documents are produced and/or maintained by DREP for the purpose of establishing, deleting or maintaining Medicaid eligibility. (Documents beginning with HMFM or HMFB are computer generated report identifiers only and do not refer to a department program). HMFB 8225-Acknowledgement Report – CMS (Centers for Medicare and Medicaid Services) Buy-in Premiums by Coverage Group HMFB 8265 Buy-in Codes HMFB 8260 Counts by Coverage Group/Local HMFM 1111 Medicare/Medicaid Recipients HMFB 8250 Preliminary Extract HMFB 2110 Qualifying Individuals I-S-14-HMFB 8380 Buy-in Tables/Update Transaction Audit Trail Buy-in History Agreements – Vital Statistics Medicare, SSA (Social Security Administration) and CMS information, bulletins regarding Medicare benefits QMB (Qualified Medicare Beneficiary)/SLMB (Specified Low-Income Medicare Beneficiary) Programs Social Security Enrollment Database Reports CMS monthly billing statements 	3.3A.	Retain in office for destroy.	or seven (7) years then			
	3.3B. Electronic case records : any electronic records including those scanned and archived in an electronic document management system.	3.3B.	Archives standar one (1) year, the electronic record	rds to Maryland State rds. Retain hardcopy for en destroy. Maintain all ls in document stem for six (6) years ,			
	3.3C. CMS Bulletins	3.3C.	Bulletins are on then destroy.	file for three (3) years			

DGS 550-1a [continuation] (DHMH rev. 2002)

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REC	ORDS RETENTION AND DISPOSAL	SC	HEDULE	PAGE 6 OF 6
	DEPARTMENT OF HEALTH & OFFICE OF ELIGIBILIT			IENE
tem No.	Description of Records Series (Program, forms, etc.)	A	uthorized Retention	n Period & Instructions
4	MONITORING AND SPECIAL PROJECTS DIVISION			
	4.1. Medicaid Eligibility Quality Control Files			
	4.1A . Quality Control files document Medical Assistance case file reviews, and may contain copies of items from individual case records.	4.1A.	State Records C	2) years then transfer to enter for four (4) years t requirements are met,
	4.1B. Quality Control maintains electronic records supporting annual reports to CMS, and may have scanned documents from individual case records.	4.1B.	Archives standar one (1) year, the electronic record	rds to Maryland State ds. Retain hardcopy for n destroy. Maintain all s in secure files for six (6 audit requirements are estroy.
	4.2. Quality Assurance Files			
	4.2A. Quality Assurance files document reviews and analysis of eligibility processes and may contain copies of items from individual case records.	4.2A.	State Records C	enter for four (4) years then transfer to enter for four (4) years requirements are met,
	4.2B. Quality Assurance maintains electronic records supporting reviews and analysis of eligibility processes, and may have scanned documents from individual case records.	4.2B.	Archives standar one (1) year, the electronic record	ds. Retain hardcopy for n destroy. Maintain all s in secure files for six (6 udit requirements are

DGS 550-1a [continuation] (DHMH rev. 2002)

DHMH Instructions -Make a list of all files. Determine whether each is non-rec record material or both. Group into Record Series. Prepare a separate invent for each Record Series identified. All Record Series are to be listed on a Schu Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ory form ST edule 7 (DGS	MENT OF GENERAL SERVICES ATE RECORDS CENTER 275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794 (410) 799-1379		DHMH RECORDS INVENTORY	
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration OFFICE OF ELIG	/Board BILITY SERVICES	3. Division/Ur	nit or Section	
DEFINITION - RECORD SERIES - A group of related records normally filed a	nd used as a unit for reference as well	as retention and disposition purposes.			
4. Record Series Title 1.1A. Active Case Records			5. Earliest Ye	ar/Latest Year	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) ELIGIBILITY SERVICES – EXECUTIVE DIRECTOR'S OFFICE 1.1 Medical Assistance Emergency Medical Services (EMS) Records for Illegal and Ineligible Aliens 1.1A. Active Case Records: retroactive requests for approval of EMS for chronic care and electronic copies of					
approval/denial letters sent to local Department of Social Services (LDSS) where individual's case record is maintained.					
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape	8. Record Series Sequ Alphabetical Numerical	ence	9. Volume	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)	
Microfiche Rolls Audio Tape Floppy Disk	x Chronological		10. Annual A	16.	
Bound Book Video Tape CD,DVD,etc	Geographical Other (specify)		Number	Microfilm Reel(s) Computer Tape(s) Other (specify)	
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Month(s) Number Year(s)			
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format			
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent				
17. Is an Index System used? If yes, explain briefly and describe requirement Yes No	18. Recommended Retention: In Office And In Retain in office until case Retain in emergency serv database for six (6) years destroy.	is closed vices elec	d or becomes inactive. ctronic case management		
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zerrlaut@maryland.gov	20. Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012	

DHMH Instructions -Make a list of all files. Determine whether each is non-record material or both. Group into Record Series. Prepare a separate inventor for each Record Series identified. All Record Series are to be listed on a Sche Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ory form ST indule 7 (DGS	DEPARTMENT OF GENERAL SERVICES STATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794 (410) 799-1379		HMH RECORDS INVENTORY
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration OFFICE OF ELIGI		3. Division/Un	it or Section
DEFINITION - RECORD SERIES - A group of related records normally filed an	nd used as a unit for reference as well	as retention and disposition purposes.		
4. Record Series Title 1.1B. Inactive Case Records		5. Earliest Yea		
6. Record Series Description (Briefly describe the types of information/docume 1.1B. Inactive Case Records: retroac where individual's case record is maint	tive requests for EMS		pproval/d	enial letters sent to LDSS
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	Alphabetical Numerical x Chronological Geographical	Numerical x Chronological		File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) ccumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month(Year(s	
13. Current Location(s) (Bidg., Floor, Room) 201 Preston St, 5 th FI, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirement Yes No	 Recommended Retention: In Office And In Storage (Each Format) Retain in emergency services electronic case management database for six (6) years, and then destroy. 			
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: waiter.zemlaut@maryland.gov DGS 550-4 (DHMH Rev. 2002.)	20. Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-recorrecord material or both. Group into Record Series. Prepare a separate inventor for each Record Series identified. All Record Series are to be listed on a Scheor Form. Forward all Records Inventory forms with the proposed Schedule form (550-1) to the DHMH Records Officer thru your Records Coordinator.	ry form S' dule (DGS	DEPARTMENT OF GENERAL SERVICES STATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794 (410) 799-1379		DHMH RECORDS INVENTORY
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration	NBOARD	3. Division/L	init or Section
DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes. 4. Record Series Title 2.1. Home and Community Based Waiver Program Client Records				oar/Latest Year
 6. Record Series Description (Briefly describe the types of information/document DIVISION OF ELIGIBILITY WAIVER SERV 2.1 Home and Community Based Waive letters/correspondence, requested verification statements, database and eligibility file/ 	/ICES (DEWS) r Program Client R fications, e.g., birth c	ecords: include: application	is for pro ards, ins	ogram enrollment, form urance policies, bank
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	 8. Record Series Sequinary Alphabetical Numerical x Chronological Geographical Other (specify) 	ence	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Number	Month Year(
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirements Yes No	18. Recommended Retention: In Office And In Scan paper records. After verification. Retain hardco Save electronic version ar from closed date, then des	r scanni opy for c nd back-	ng, perform a 10% random one (1) year then destroy.	
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: waiter.zerrlaut@maryland.gov	20. Location: 201 WEST PRESTON STREET, BA Telephone Number# 410 767-359			21. Date SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-rec		MENT OF GENERAL SERVICES		DHMH RECORDS INVENTORY		
record material or both, Group into Record Series. Prepare a separate invento		TATE RECORDS CENTER				
for each Record Series identified. All Record Series are to be listed on a Sche Form. Forward all Records Inventory forms with the proposed Schedule form		P.O. BOX 275		1 20		
550-1) to the DHMH Records Officer thru your Records Coordinator.		SSUP, MARYLAND 20794	PA	ge 4 of _ 20		
		(410) 799-1379				
1. Department/Agency	2. Office/Administration	a/Peard	3. Division/Ur	sil as Contine		
MD DEPT OFHEALTH			3. Division/Ur	nit or Section		
	OFFICE OF ELIG	IDILITY SERVICES				
& MENTAL HYGIENE						
DEFINITION - RECORD SERIES - A group of related records normally filed a	nd used as a unit for reference as well	as retention and disposition purposes.				
4. Record Series Title			5. Earliest Ye	ar/Latest Year		
22. Primary Adult Care (PAC) Program (Client Records		to	·		
6. Record Series Description (Briefly describe the types of information/docum						
2.2 Primary Adult Care (PAC) Program Client Records: include: applications for program enrollment, form letters/correspondence, requested verifications, e.g., birth certificates, social security cards, insurance policies, bank statements, database and eligibility file/system print-outs.						
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche	8. Record Series Sequ Alphabetical Numerical			File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)		
Rolls Audio Tape Floppy Disk	x Chronological		10. Annual A	ccumulation File Drawer(s)		
Bound Book Video Tape CD, DVD, etc	Geographical			Microfilm Reel(s)		
				Computer Tape(s)		
Card Other (specify)	Other (specify)		Number	Other (specify)		
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Number	_ Month(s) er Year(s)			
13. Current Location(s) (Bldg., Floor, Room)		14. Is Record Series Duplicated Elsewhere?	(If yes, specify	agency or office.)		
201 Preston St, 5th FI, BALTIMORE AND OTHER LOCATIONS		Yes x No Agency/Format				
15. Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent					
17. Is an Index System used? If yes, explain briefly and describe requirement	ite	18. Recommended Retention: In Office And I	n Storano (E	h Eormat)		
Yes No	Scan paper records. After verification. Retain harde	er scannin copy for c and back-	ng, perform a 10% random one (1) year then destroy. up copy for six (6) years			
19. Name and Title of Preparer	20. Location:					
WALTER ZERRLAUT				21. Date		
DHMH RECORDS OFFICER	201 WEST PRESTON STREET, B			SEPTEMBER 14, 2012		
E-mail address: walter.zerrlaut@maryland.gov	Telephone Number# 410 767-35	NOOM # NOOM LE-S				
DGS 550.4 (DHMH Rev. 2002.)						

DHMH Instructions -Make a list of all files. Determine whether each is non-re- record material or both. Group into Record Series. Prepare a separate inven for each Record Series identified. All Record Series are to be listed on a Sch Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	tory form S nedule n (DGS	DEPARTMENT OF GENERAL SERVICES STATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794 (410) 799-1379		DHMH RECORDS INVENTORY
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administratio OFFICE OF ELIG	n/Board SIBILITY SERVICES	3. Division/U	Init or Section
DEFINITION - RECORD SERIES - A group of related records normally filed a	as retention and disposition purposes.			
4. Record Series Title 2.3 Family Planning (FP) Program Clien		1	ear/Latest Year o	
6. Record Series Description (Briefly describe the types of information/docum 2.3 Family Planning (FP) Program C letters/correspondence, requested verifica statements, database, and eligibility file/sy	tions, e.g., birth certif	de: applications for program	n enrollm , insuran	ent, form ce policies, bank
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	 8. Record Series Sequ Alphabetical Numerical x Chronological Geographical Other (specify) 	Numerical × Chronological Geographical		File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) Accumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month Year(
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirement Yes No	18. Recommended Retention: In Office And Ir Scan paper records. After verification. Retain hards Save electronic version a from closed date, then de	er scanni copy for nd back-	ng, perform a 10% random one (1) year then destroy.	
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zerrlaut@maryland.gov DDDS 550.4 (DWMH Rev. 2002)	20. Location: 201 WEST PRESTON STREET, B/ Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-record material or both. Group into Record Series. Prepare a separate inventer for each Record Series identified. All Record Series are to be listed on a Scher Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ory form Sidule (DGS	MENT OF GENERAL SERVICES TATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794		GE _6_ OF _20	
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration OFFICE OF ELIG	(410) 799-1379 //Board IBILITY SERVICES	3. Division/U	nit or Section	
DEFINITION - RECORD SERIES - A group of related records normally filed ar	ind used as a unit for reference as well	as retention and disposition numbers			
4. Record Series Title 2.4 Women's Breast and Cervical Cancer			100.00000000000000000000000000000000000	aar/Latest Year	
6. Record Series Description (Briefly describe the types of information/docume	inte/forms found in the series Include	the purpose or function of the series)	,		
2.4 Women's Breast and Cervical Cancer Health (WBCCHP) Program Client Records: include: applications for progra enrollment, form letters/correspondence, requested verifications, e.g., birth certificates, social security cards, insurance policies, bank statements, database and eligibility file/system print-outs.					
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	Alphabetical Numerical × Chronological Geographical	Numerical x Chronological		File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) ccumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)	
11. File is Used Daily Weekly x Monthly Annually	I	12. File Becomes Inactive After Number	Month Year(s		
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format			
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent				
17. Is an Index System used? If yes, explain briefly and describe requirement	verification. Retain harde	er scanni copy for c and back-	^{th Format)} ng, perform a 10% random one (1) year then destroy. Sup copy for six (6) years		
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: <u>walter.zerrlaut@maryland.gov</u>	20. Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012	

DHMH Instructions -Make a list of all files. Determine whether each is non-record record material or both. Group into Record Series. Prepare a separate inventor for each Record Series identified. All Record Series are to be listed on a Sche Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ry form ST dule 7 (DGS	MENT OF GENERAL SERVICES ATE RECORDS CENTER 1275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794 (410) 799-1379		DHMH RECORDS INVENTORY
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration	/Board IBILITY SERVICES	3. Division/U	nit or Section
DEFINITION - RECORD SERIES - A group of related records normally filed and 4. Record Series Title 2.5 Employed Individuals with Disabilities				aar/Latest Year
6. Record Series Description (Briefly describe the types of information/docume 2.5 Employed Individuals with Disabilities letters/correspondence, requested verificat statements, database and eligibility file/syst	(EID) Program Clier ions, e.g., birth certifi	nt Records: include: applica		
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	 8. Record Series Sequ Alphabetical Numerical x Chronological Geographical Other (specify) 	ence	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used. Daily. Weekly x Monthly Annually		12. File Becomes Inactive After Number	Month Year(s	
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requiremen Yes No	verification. Retain hardo	er scanni copy for c ind back-	^{th Format)} ng, perform a 10% random one (1) year then destroy. Oup copy for six (6) years	
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zertlaut@maryland.gov DGS 550.4 (DHMH Rev. 2002.)	20. Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-record record material or both. Group into Record Series. Prepare a separate inventory for each Record Series identified. All Record Series are to be listed on a Schedul Form, Forward all Records Inventory forms with the proposed Schedule form (De 550-1) to the DHMH Records Officer thru your Records Coordinator.	form ST le 7 GS	DEPARTMENT OF GENERAL SERVICES STATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794 (410) 799-1379		DHMH RECORDS INVENTORY
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration OFFICE OF ELIGI		3. Division/Ur	iit or Section
DEFINITION - RECORD SERIES - A group of related records normally filed and u	used as a unit for reference as well i	as retention and disposition purposes.		
4. Record Series Title 3.1A CARES/MMIS Unit Files 6. Record Series Description (Briefly describe the types of information/documents			5. Earliest Ye to	ar/Latest Year
 DIVISION OF RECIPIENT ELIGIBILITY PROGRAMS 3.1 CARES (Clients' Automated Resources and Eligibility 3.1A. CARES/MMIS Unit Files: include the following maintaining Medicaid eligibility. (Documents beginning department program). DHR (Department of Human Resources)/IMA (Ind HMFR-1942-R001-Daily Certification/Turnaround HMFR 3300-R001 – Possible duplicate recipient - HMFR 9140-R001-Recipient On-Line Cross Refet Enrollment Reconciliation-HMFR 8900 HMFR 1112-R001-Counts by coverage group per HMFR 11120-R002-Eligibility count of last twelve HMFR 1120-R002-Eligibility counts by race/sex HMFR 1120-R001 – Eligibility counts by age HMFR 1967-R002-CARES/MMIS II Reconciliation HMFR 9120-R001-Newborn report of cases not pr DHMH 4541-Conflicting Data Report DHMH 1184- Hospital Report of Newborns HMMR 6761-S13 (Children under 19) ACE (Acce HMMR 6760-P02 (Pregnant Women) ACE cases HMFR 1111-R001-Eligibility Counts by coverage HMFR 1111-R001-Eligibility Counts by coverage HMFR 1111-R001-Context by coverage HMFR 1111-R001-Eligibility Counts by coverage HMFR 4010-Terminated refugee status. 	S (DREP) y System)/MMIS (Medica documents produced and/or g with HMFR, HMMR, HM come Maintenance Adminis d Document (CTAD)HMM birth/sex daily rence Report local health department months of MA eligibility on report – Recipients activ on Report – Recipients activ rocessed by CARES-DHR I elerated Certification of Elig with eligibility ending on spe group and resident county	id Management Information System r maintained by DREP for the purpose //FM or HMFB are computer generate stration)-81 Administrative Error Rep R 1184 – Daily process summary – M e on CARES not active on MMIS-II ve on MMIS-II – not active on CARES Eligibility Sys gibility) cases with eligibility ending a	s of establish d report ider ort IMIS II	ntifiers only and do not refer to a
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape	8. Record Series Seque Alphabetical Numerical	auce	9. Volume	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
Microfiche	(Validital		, 10110-01	e non (opposit)
Rolls Audio Tape Floppy Disk	x Chronological		10. Annual A	
Bound Book Video Tape CD,DVD,etc	Geographical			File Drawer(s) Microfilm Reel(s)
				Computer Tape(s)
Card Other (specify)	Other (specify)		Number	Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Number	Monthe Year(s	
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? Yes x No Agency/ Format		agency or office.)
15. Privacy / Access Restrictions Yes x No 16. Audit Requirements x None Internal OIG Personal Medical Proprietary Classified Other Legislative Federal Independent (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS Examples Examples Examples				
17. Is an Index System used? If yes, explain briefly and describe requirements 18. Recommended Retention: In Office And In Yes No Retain in office for two (2) Records Center for four (requirements are met; the			e) years t (4) years	hen transfer to State and until all audit
19. Name and Title of Preparer 2	20. Location:			21. 2010
WALTER ZERRLAUT	201 WEST PRESTON STREET, BA	ALTIMORE MD 21201		21. Date
DHMH RECORDS OFFICER E-mail address: walter.zerrlaut@maryland.gov	Telephone Number# 410 767-35			SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-record record material or both. Group into Record Series. Prepare a separate inventory for each Record Series identified. All Record Series are to be listed on a Schedu Form. Forward all Records Inventory forms with the proposed Schedule form (D 550-1) to the DHMH Records Officer thru your Records Coordinator.	y form ST ule 7 DGS JE 2. Office/Administration	MENT OF GENERAL SERVICES ATE RECORDS CENTER '275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794 (410) 799-1379 /Board		DHMH RECORDS INVENTORY
& MENIAL HYGIENE DEFINITION - RECORD SERIES - A group of related records normally filed and	used as a unit for reference as well	as retention and disposition purposes		
4. Record Series Title 3.1B Audit Trails for CARES/MMIS Unit Fi		as reremiton and disposition purposes.	5. Earliest Ye	aar/Latest Year
6. Record Series Description (Briefly describe the types of information/document 3.1B. Audit Trails for CARES/MMIS Ur		the purpose of function of the series.)		
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	8. Record Series Sequi Alphabetical Numerical x Chronological Geographical Other (specify)	ance	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) Accumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Number	Month Year(
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirements Yes No		18. Recommended Retention: In Office And In Processing of forms/repo audit trails are maintained	orts in 3.1	A. creates audit trails. All
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zerrlaut@maryland.gov	20. Location: 201 WEST PRESTON STREET, B/ Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

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550-1) to the DHMH Records Officer thru your Records Coordinator.		SSUP, MARYLAND 20794 (410) 799-1379		
1. Department/Agency	2. Office/Administration		3. Division/U	nit or Section
MD DEPT OFHEALTH	OFFICE OF ELIG	IBILITY SERVICES		
& MENTAL HYGIENE				
DEFINITION - RECORD SERIES - A group of related records normally filed an	id used as a unit for reference as well	as retention and disposition purposes.		
4. Record Series Title 3.1C Electronic case records			5. Earliest Ye	ear/Latest Year
6. Record Series Description (Briefly describe the types of information/docume 3.1C. Electronic case records : any ele management system.			chived in	an electronic document
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	 8. Record Series Sequence Alphabetical Numerical x. Chronological Geographical Other (specify) 	ence	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) Accumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month Year(
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? Yes x No Agency/ Format		agency or office.)
15. Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirement			er scanni copy for cords in	ng, perform a 10% random one (1) year, then destroy. document management
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: <u>walter.zerrtaut@maryland.gov</u>	 Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35 			21. Date SEPTEMBER 14, 2012

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DHMH Instructions -Make a list of all files. Determine whether each is non-rec record material or both. Group into Record Series. Prepare a separate invent for each Record Series identified. All Record Series are to be listed on a Sch Series Constraint all Records Investors form with the prepared Schedule form	ory form ST edule 7	MENT OF GENERAL SERVICES ATE RECORDS CENTER 275 WATERLOO ROAD P.O. BOX 275		
Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.		SSUP, MARYLAND 20794 (410) 799-1379	PA	ge_11_ of 20_
1. Department/Agency	2. Office/Administration		3. Division/Ur	it or Section
MD DEPT OFHEALTH	OFFICE OF ELIG	BILITY SERVICES		
& MENTAL HYGIENE		1 - 1 - 1 - 1 - 1 - 1		
DEFINITION - RECORD SERIES - A group of related records normally filed a	nd used as a unit for reference as well	as retention and disposition purposes.		
4. Record Series Title				ar/Latest Year
3.2A The following documents are produce		by DREP for the purpose	to	
of establishing, deleting or maintaining Me 6. Record Series Description (Briefly describe the types of information/docum		the number or function of the series)		
3.2 Long Term Care (LTC) Unit	entsnorms round in the series. Include	the purpose of function of the series.)		
 3.2A. The following documents are produced and/or maintained by DREP for the purpose of establishing, deleting or maintaining Medicaid eligibility. (Documents beginning with HMFR or HMMR are computer generated report identifiers only and do not refer to a department program). Exception Report-206C Requests Penalty Form for Screen 4- Form 813 Less than 30 day Stay form DES (Division of Eligibility Services)-501 Certification for Inpatient Addictions Services in a Psych Facility (Under 21 Program) DHMH 2324 Recipient File Split Bill Amount/Screen 4 Update Request- Form DHMH 4571 Hospice/Hospice Adjustment Form Waiver and Waiver Adjustment Form CARES Reconciliation Report HMMR 1960 Certification/Turnaround Document HMFR 1942-R001 LTC Recipient Span Audit Trail 				
7. Record Series Format(s) List all Paper: Film / tape: Electronic:	8. Record Series Sequ	ence	9. Volume	File Drawer(s)
X Letter Size Film/Slides Kept on Hard Drive	Alphabetical			Microfilm Reel(s)
(35mm, etc) Legal Size Microfilm/ Computer Tape	Numerical		Number	Computer Tape(s) Other (specify)
Microfiche			10. Annual A	
Rolls Audio Tape Floppy Disk	x Chronological		TO. Annual A	File Drawer(s)
Bound Book Video Tape CD,DVD,etc	Geographical		1	Microfilm Reel(s)
Card Other (specify)	Other (specify)		Number	Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month Year(s	
13. Current Location(s) (Bidg., Floor, Room) 201 Preston St, 5 th FI, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes X No 16. Audit Requirements x None Internal OIG Personal Medical Proprietary Classified Other Legislative Federal Independent (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS 16. Audit Requirements x None Independent				
17. Is an Index System used? If yes, explain briefly and describe requireme	nts	18. Recommended Retention: In Office And	In Storage (Eac	h Format)
Yes No Retain all paper forms/reports for two (2) years to transfer to State Records Center for four (4) years all audit requirements are met; then destroy.			two (2) years then for four (4) years and until	
19. Name and Title of Preparer	20. Location:			01 Dete
WALTER ZERRLAUT	201 WEST PRESTON STREET, B	ALTIMORE MD 21201		21. Date SEPTEMBER 14, 2012
DHMH RECORDS OFFICER	Telephone Number# 410 767-3			SET LINDER 14, 2012
E-mail address: waiter.zerrlaut@maryland.gov				

DGS 550-4 (D	нмн	Rev.	2002)	
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3.2B Audit Trails for CARES/MMIS Unit File 6. Record Series Description (Briefly describe the types of information/documents/ 3.2B Audit Trails for CARES/MMIS Unit File	forms found in the series. Include	the purpose or function of the series.)	to	
	-			
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	 8. Record Series Sequ Alphabetical Numerical x Chronological Geographical Other (specify) 	ence	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) ccumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month Year(s	
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5th Fl, BALTIMORE AND OTHER LOCATIONS		14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office.) Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS		16. Audit Requirements x None Legislative	Internal Federal	OIG Independent
17. Is an Index System used? If yes, explain briefly and describe requirements. Yes No		18. Recommended Retention: In Office And Processing of forms/repo audit trails are maintained	orts in 3.2	A.creates audit trails. All
WALTER ZERRLAUT	 Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35 			21. Date SEPTEMBER 14, 2012

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1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration	/Board IBILITY SERVICES	3. Division/Ur	nit or Section
DEFINITION - RECORD SERIES - A group of related records normally filed and	used as a unit for reference as well	as retention and disposition purposes.		
4. Record Series Title 3.2C Electronic case records			5. Earliest Ye	par/Latest Year
6. Record Series Description (Briefly describe the types of information/document 3.2C Electronic case records: any electroni management system.			d in an el	ectronic document
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Latter Size Film/Slides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	8. Record Series Sequ Alphabetical Numerical x Chronological Geographical Other (specify)	ence	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) Accumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After Number	Month Year(:	
13. Current Location(s) (Bldg., Floor, Room) 201 Preston St, 5 th Fl, BALTIMORE AND OTHER LOCATIONS		14, Is Record Series Duplicated Elsewhere? Yes x No Agency/ Format		
15. Privacy / Access Restrictions Yes X No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	. 16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirements Yes No			anning, p y for one (1 ocument	
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: waiter.zerrlaut@maryland.gov DGS 550.4 (DHMH Ray, 2002.)	20. Location: 201 WEST PRESTON STREET, B Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

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DHMH Instructions -Make a list of all files. Determine whether each is non-rec	ord, DEPARTI	MENT OF GENERAL SERVICES	C	HMH RECORDS INVENTORY	
record material or both. Group into Record Series. Prepare a separate inventor	ory form ST	ATE RECORDS CENTER			
for each Record Series identified, All Record Series are to be listed on a Sche Form. Forward all Records Inventory forms with the proposed Schedule form		275 WATERLOO ROAD P.O. BOX 275		ge 14 of 20	
550-1) to the DHMH Records Officer thru your Records Coordinator.	ALCO LEVEN	SSUP, MARYLAND 20794	PA	GE_14_OF_20_	
		(410) 799-1379			
1. Department/Agency	2. Office/Administration	/Board	3. Division/Un	it or Section	
MD DEPT OFHEALTH	OFFICE OF ELIGI	BILITY SERVICES			
& MENTAL HYGIENE					
DEFINITION - RECORD SERIES - A group of related records normally filed a	nd used as a unit for reference as well	as retention and disposition purposes.			
			5. Earliest Ye	aril stort Vaar	
4. Record Series Title 3.3A The following documents are produce	and/or maintained	by DREP for the purpose	5. Earliest re		
of establishing, deleting or maintaining Me		by Diver for the purpose			
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.)					
DIVISION OF RECIPIENT ELIGIBILITY PROGRAM					
3.3 Medicare Buy-in Unit					
3.3A The following documents are produced and/or	maintained by DREP for the n	ourpose of establishing, deleting or main	intaining Me	dicaid eligibility. (Documents	
beginning with HMFM or HMFB are computer gene					
HMFB 8225-Acknowledgement Report – CMS		edicaid Services)			
 Buy-in Premiums by Coverage Group HMFB 8 Buy-in Codes HMFB 8260 	265				
 Counts by Coverage Group/Local HMFM 1111 					
 Medicare/Medicaid Recipients HMFB 8250 					
 Preliminary Extract HMFB 2110 Qualifying Individuals I-S-14-HMFB 8380 					
Buy-in Tables/Update					
Transaction Audit Trail					
 Buy-in History Agreements – Vital Statistics 					
 Medicare, SSA (Social Security Administration 					
 QMB (Qualified Medicare Beneficiary)/SLMB Social Security Enrollment Database Reports 	(Specified Low-Income Medi	care Beneficiary) Programs			
CMS monthly billing statements					
7. Record Series Format(s) List all	8. Record Series Sequ	ence	9. Volume		
Paper: Film / tape: Electronic:				File Drawer(s)	
X Letter Size Film/Slides Kept on Hard Drive (35mm, etc)	Alphabetical			Microfilm Reel(s) Computer Tape(s)	
Legal Size Microfilm/ Computer Tape	Numerical		Number	Other (specify)	
Microfiche	u Obranalagical		10. Annual A	comulation	
Rolls Audio Tape Floppy Disk	x Chronological		TO: Annual A	File Drawer(s)	
Bound Book Video Tape CD,DVD,etc	Geographical			Microfilm Reel(s)	
Card Other (specify)	Other (specify)		Number	Computer Tape(s) Other (specify)	
	Outer (apoury)		(Turney)		
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month	(s)	
		Number	Year(š)	
13. Current Location(s) (Bldg., Floor, Room)		14. Is Record Series Duplicated Elsewhere?	(If yes, specify	agency or office.)	
201 Preston St, 5 th FI, BALTIMORE AND OTHER LOCATIONS		and a server way and the server (0101	, , ,, -poorly		
		Yes x No Agency/ Format			
15. Privacy / Access Restrictions Yes x No		16. Audit Requirements x None	Internal	OIG	
Personal Medical Proprietary Classified Other			Federal	Independent	
(If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS					
17. Is an Index System used? If yes, explain briefly and describe requirement	nts	18. Recommended Retention: In Office And I	n Storage (Ead	h Format)	
under die Weit der Beite Heiner der Beitersteilen Beiter Beiter Beiteren Beiter er eine Beiter B		5.2		s then destroy. All reports	
Yes No		are stored on compact di			
19. Name and Title of Preparer	20. Location:			21 Date	
WALTER ZERRLAUT	201 WEST PRESTON STREET, B	ALTIMORE MD 21201		21. Date SEPTEMBER 14, 2012	
DHMH RECORDS OFFICER	Telephone Number# 410 767-35			GEFTEMBER 14, 2012	
E-mail address: walter.zerrlaut@maryland.gov					

DHMH Instructions -Make a list of all files. Determine whether each is non-re	cord, DEPAR	TMENT OF GENERAL SERVICES		DHMH RECORDS INVENTORY
record material or both. Group into Record Series. Prepare a separate inven for each Record Series identified. All Record Series are to be listed on a Sct Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	nedule n (DGS	TATE RECORDS CENTER 7275 WATERLOO ROAD P.O. BOX 275 ESSUP, MARYLAND 20794 (410) 799-1379	P/	AGE _ 15_ OF _ 20
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administratio	n/Board SIBILITY SERVICES	3. Division/U	nit or Section
DEFINITION - RECORD SERIES - A group of related records normally filed a	and used as a unit for reference as well	as retention and disposition purposes.		
4. Record Series Title 3.3B Electronic case records			5. Earliest Ye	par/Latest Year
6. Record Series Description (Briefly describe the types of information/docur 3.3B Electronic case records : any e management system.			rchived in	n an electronic document
7. Record Series Format(s) List all Paper: Film / tape: Electronic: X Letter Size Film/Sides Kept on Hard Drive (35mm, etc) Legal Size Microfilm/ Computer Tape Microfiche Rolls Audio Tape Floppy Disk Bound Book Video Tape CD,DVD,etc Card Other (specify)	8. Record Series Sequ Alphabetical Numerical x Chronological Geographical Other (specify)	ience	9. Volume Number 10. Annual A Number	File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify) ccumulation File Drawer(s) Microfilm Reel(s) Computer Tape(s) Other (specify)
11. File is Used Daily Weekly x Monthly Annually		12. File Becomes Inactive After	Month Year(s	
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15, Privacy / Access Restrictions Yes x No Personal Medical Proprietary Classified Other (If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS	16. Audit Requirements x None Internal OIG Legislative Federal Independent			
17. Is an Index System used? If yes, explain briefly and describe requirement Yes No	^{18.} Recommended Retention: In Office And In Scan paper records. Afte verification. Retain hardo Maintain all electronic rec system for six (6) years.	r scanni copy for	ng, perform a 10% random one (1) year, then destroy.	
19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zerrlaut@maryland.gov	20. Location: 201 WEST PRESTON STREET, B. Telephone Number# 410 767-35			21. Date SEPTEMBER 14, 2012

DHMH Instructions -Make a list of all files. Determine whether each is non-reco record material or both. Group into Record Series. Prepare a separate inventor	ry form ST	MENT OF GENERAL SERVICES ATE RECORDS CENTER		DHMH RECORDS INVENTORY
for each Record Series identified. All Record Series are to be listed on a Sched Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	(DGS	275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794 (410) 799-1379	PAGE 16 OF 20	
1. Department/Agency	2. Office/Administration	/Board	3. Division/Ur	iit or Section
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& MENTAL HYGIENE				
DEFINITION - RECORD SERIES - A group of related records normally filed an	d used as a unit for reference as well	as retention and disposition purposes.		
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6. Record Series Description (Briefly describe the types of information/docume	nts/forms found in the series. Include	the purpose or function of the series.)		
3.3C CMS Bulletins				
7. Record Series Format(s) List all	8. Record Series Sequ	ence	9. Volume	File Drawer(s)
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(If Yes, cite Law(s) & Regulation(s) HIPAA, PERSONNEL REGS				
17. Is an Index System used? If yes, explain briefly and describe requirement	ts	18. Recommended Retention: In Office And		
Yes No		Bulletins are on file for th	ree (3) y	ears then destroyed.
19. Name and Title of Preparer	20. Location:			21. Date
WALTER ZERRLAUT	201 WEST PRESTON STREET, B	ALTIMORE MD 21201		SEPTEMBER 14, 2012
DHMH RECORDS OFFICER	Telephone Number# 410 767-35			
E-mail address: walter.zerrtaut@maryland.gov				

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550-1) to the DHMH Records Officer thru your Records Coordinator.	JE	SSUP, MARYLAND 20794		
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19. Name and Title of Preparer	20. Location:			21. Date
WALTER ZERRLAUT	201 WEST PRESTON STREET, B	ALTIMORE MD 21201		SEPTEMBER 14, 2012
DHMH RECORDS OFFICER	Telephone Number# 410 767-35			
E-mail address: walter.zerrlaut@maryland.gov				

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DHMH Instructions -Make a list of all files. Determine whether each is non-record record material or both. Group into Record Series. Prepare a separate inventor for each Record Series identified. All Record Series are to be listed on a Scher Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ry form ST dule 7 (DGS	MENT OF GENERAL SERVICES ATE RECORDS CENTER 275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794		DHMH RECORDS INVENTORY
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19. Name and Title of Preparer WALTER ZERRLAUT DHMH RECORDS OFFICER E-mail address: walter.zerrfaut@maryland.gov	 Location: 201 WEST PRESTON STREET, B. Telephone Number# 410 767-35 			21. Date SEPTEMBER 14, 2012

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Telephone Number# 410 767-3598 Room # ROOM LL-5		20. Location:			21. Date	
	WALTER ZERRLAUT		ALTIMORE MD 21201			
E-mail address: walter.zerflaut@maryland.gov	WALTER ZERRLAUT DHMH RECORDS OFFICER	201 WEST PRESTON STREET, B				

DHMH Instructions -Make a list of all files. Determine whether each is non-rec record material or both. Group into Record Series. Prepare a separate invent for each Record Series identified. All Record Series are to be listed on a Sch Form. Forward all Records Inventory forms with the proposed Schedule form 550-1) to the DHMH Records Officer thru your Records Coordinator.	ory form S1 edule 7 (DGS	MENT OF GENERAL SERVICES (ATE RECORDS CENTER (275 WATERLOO ROAD P.O. BOX 275 SSUP, MARYLAND 20794 (410) 799-1379	DHMH RECORDS INVENTORY	
1. Department/Agency MD DEPT OFHEALTH & MENTAL HYGIENE	2. Office/Administration OFFICE OF ELIG		3. Division/Ur	nit or Section
DEFINITION - RECORD SERIES - A group of related records normally filed a	ind used as a unit for reference as well	as retention and disposition purposes.		
 ^{4. Record Series Title} 4.2B Quality Assurance maintains electron eligibility processes 	reviews and analysis of	5. Earliest Ye	ar/Latest Year	
6. Record Series Description (Briefly describe the types of information/docum	ents/forms found in the series. Include	the purpose or function of the series.)		
4.2B. Quality Assurance maintains electro			ligibility n	rocesses, and may have
		g. shone and analysis of c	-gionity p	and may have
scanned documents from individual case r	ecords.			
7, Record Series Format(s) List all Paper: Film / tape: Electronic:	8. Record Series Sequ	ence	9. Volume	File Drawer(s)
X Letter Size Film/Slides Kept on Hard Drive	Alphabetical			Microfilm Reel(s)
(35mm, etc) Legal Size Microfilm/ Computer Tape	Numerical		Number	Computer Tape(s) Other (specify)
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11. File is Used Daily Weekly x Monthly Annually	12. File Becomes Inactive After Month(s) Number Year(s)			
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Yes No	verification. Retain hardcopy for one (1) year, then destroy.			
	Maintain all electronic records in secure files for six (6)			
		years and until audit requ		
19. Name and Title of Preparer	20. Location:	John and and addit rode		
WALTER ZERRLAUT				21. Date
DHMH RECORDS OFFICER	201 WEST PRESTON STREET, B Telephone Number# 410 767-35			SEPTEMBER 14, 2012
E-mail address: walter.zerrlaut@maryland.gov	1 Simplified Humberry 410 707-35	NO NUMERING AND LED		
DGS 550-4 (DHMH Rev. 2002)				