



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Activity Director Training Program	CUTOFF: When Superseded or Outdated
DESCRIPTION: Documentation and correspondence related to activity director training programs. Training program information must be submitted to the section for review and approval.	RETENTION: Years: 0 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23296	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010
TITLE: Aging in Place Project	CUTOFF: End of Calendar Year in which Project Closes
DESCRIPTION: All documents, including letters of intent, evaluations and classifications submitted by a facility, to apply for the Aging in Place pilot project, created by RSMo 198.531.	RETENTION: Years: 10 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23299	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010
TITLE: Alzheimer's Demonstration Project	CUTOFF: End of Calendar Year in which Project Closes
DESCRIPTION: All documents, including letters of intent, evaluations and classifications submitted by a facility, to apply for the Alzheimer's Demonstration pilot project, created by RSMo 198.086.	RETENTION: Years: 10 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23298	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010
TITLE: Alzheimer's Disclosure	CUTOFF: When Superseded or Outdated
DESCRIPTION: Form to disclose how a facility's unit is suitable for person's with Alzheimer's or other dementia. Long term care facilities which offer to provide or provides care for persons with Alzheimer's disease by means of an Alzheimer's special care unit or Alzheimer's special care program are required to provide an informational document that is developed by or approved by the section. This document is submitted to SLCR in conjunction with the facility's application for relicensure as required by RSMo 198.515.	RETENTION: Years: 0 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23300	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Application Packet and Notice of Licensure to Operate a Long Term Care Facility or Adult Day Care Facility	CUTOFF: Date Facility Last Licensed
DESCRIPTION: Records Include, but are not limited to correspondence, application, financial reports, required supporting documents and central office authorization for license. The application is used to determine eligibility and financial capacity to operate the named facility. Record will also include the application results indicating the issuance of a license to operate a long term care facility or adult day care facility and a copy of the license that is issued, any consent agreements for probationary license, temporary operator information and license revocation and/or denial. Long term care and adult day care facilities are required to submit an application for either initial or ongoing licensure as a skilled, intermediate, residential, assisted living, or adult day care facility. The application and supporting documentation are required by 198.018 RSMo.	RETENTION: Years: 5 Months: Days:
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 8930	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010
TITLE: Certified Nurse Aide (CNA) Certification	CUTOFF: End of Calendar Year
DESCRIPTION: Certified Nursing Assistant (CNA) test requests and order forms, test documents, challenge documents to dispute a decision on certification decision, certifying agency listing, work verification to determine if person is ineligible for employment as a CNA. The section maintains additional information related to agencies authorized to certify nurse aides as certified nurse aides, certification decisions and eligibility of nursing assistants (CNAs). Testing agencies request CNA tests from the section. Persons working in long term care as nurse aides are required by both federal and state regulation to become certified as a CNA in order to continue employment in the long term care facility.	RETENTION: Years: 5 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23293	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010
TITLE: Certified Nurse Aide (CNA) Registry	CUTOFF: End of Calendar Year in which Certified Nursing Aide is Licensed
DESCRIPTION: Registry listing Certified Nursing Aides (CNA). This registry is maintained by the section. It is used to track all individuals who are certified as a CNA. Record series kept per 42CFR. 483.156(d).	RETENTION: Years: 100 Months: 0 Days: 0
NOTES:	DISPOSITION ACTION: Destroy
SERIES #: 23294	SERIES STATUS: Approved
	APPROVAL DATE: 09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Community-Based Assessment Form

CUTOFF: When Superseded or Outdated

DESCRIPTION: Sample form submitted by Assisted Living Facilities (ALF) requiring approval by the section, including correspondence related to the approval process. The community based assessment form is used by assisted living facilities to screen potential placements and to develop a plan of care to meet the needs of admitted residents. The section is required by statute to approve the form used by facilities so that the assessment is conducted using a uniform tool. Retained per RSMo 198.006(7) and 198.073 4(5).

RETENTION: Years: 0 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23297

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Complaint Investigation Supporting Documentation

CUTOFF: Close of Complaint

DESCRIPTION: Documents are created by section staff during the course of complaint investigations of long term care and adult daycare facilities. Records include, but are not limited to investigation notes and copies of facility records used to investigate the complaint and to determine compliance with federal and/or state requirements. These notes are used to determine whether or not a facility is in compliance with applicable rules and regulations and to create any statement of deficiencies that result from the investigation.

RETENTION: Years: 1 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23289

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Complaint Investigations

CUTOFF: Close of Complaint

DESCRIPTION: Documents created by section staff during the course of complaint investigations of long term care and adult daycare facilities. Records may include, but are not limited to investigative summaries, correspondence, any resulting statements of deficiencies and plans of correction, correspondence related to the informal dispute resolution (IDR) process, resident and staff rosters, and all documentation related specifically to the employee disqualification list (EDL) referral process. These are used to document the outcome of the investigation, and reflect the official results.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8938

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services
Division: Division of Regulation and Licensure

Section: Section for Long Term Care
Sub-Section:

TITLE: Construction/Remodeling Drawings & Correspondence

CUTOFF: Last Date Facility was Licensed

DESCRIPTION: Documents include architectural/engineering blueprints for long term care facilities that are reviewed for construction, physical plant and fire safety compliance by the section. Section correspondence communicates the result of the blueprint review and on-site inspections conducted throughout the construction process. These drawings and/or blueprints are required to assure compliance with the construction, fire safety, and physical plant requirements prior to the construction, remodeling and licensure of a long term care facility.

RETENTION: Years: 5 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23301

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Exception Documentation

CUTOFF: End of Calendar Year in which Exception was Approved or Denied

DESCRIPTION: Records contain exception requests submitted by long term care facilities, correspondence, supporting documentation and final written approval or denial of the request. Documentation is used to track denial and approval of exception requests.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8934

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Facilities Never Licensed

CUTOFF: Date of Withdrawal, or Denial of Licensure Request

DESCRIPTION: Records include, but are not limited to the application, correspondence, construction/remodeling plans, and supporting documentation for the application submitted by potential long term care or adult daycare providers to gain licensure but for which the applicant decides to withdraw from the licensure process or the applicant's request for initial licensure is denied. These facilities never achieved licensed status.

RETENTION: Years: 2 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8940

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Health Education Forms

CUTOFF: End of Calendar Year

DESCRIPTION: Certifying agency agreements used to determine if an individual is eligible to be certified as a Certified Nurse Aide (CNA) or Certified Medication Technician (CMT), training agency applications and related correspondence to determine if training curriculum is approved, waiver and related correspondence. CNA/CMT examiner agreements and ineligible facility documents. Agencies, facilities and examiners that test and/or certify CNAs and CMTs submit documentation for eligibility approval. The section determines eligibility, approves or denies the requests, issues waivers related to this process and notifies facilities when they become ineligible to conduct nurse aide training.

RETENTION: Years: 5 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23292

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Intermediate Care Facilities for the Mentally Retarded (ICF/MR) Surveys and Medical Reviews

CUTOFF: Date of Survey Exit

DESCRIPTION: Statements of deficiencies and plans of correction, correspondence, sample selection, staff and resident rosters, resident condition and census information, Life Safety Code book, Life Safety Code crucial data extract, facility description, construction fact sheets, and legal notices related to the certification process and documentation of the medical review process. These documents are created by section staff during the course of the Federal Certification surveys of ICF/MR facilities. These documents are used to document the outcome of the certification survey. The Federal Center for Medicare and Medicaid Services contracts with the section to conduct the certification surveys of ICF/MR facilities that participate in this program.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8945

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Intermediate Care Facilities for the Mentally Retarded (ICF/MR) Surveys and Medical Reviews - Supporting Documentation

CUTOFF: Date of Survey Exit

DESCRIPTION: Documents created by section staff during the course of the certification survey including, but not limited to supporting notes and copies of facility records used to determine compliance for these surveys. These notes are taken by the surveyor to record their observations, interviews, and record reviews. They may also include copies of facility records. The notes /records are then used to determine whether or not a facility is in compliance with applicable rules and regulations. They are used to then create any statement of deficiencies that results from the process. The statement of deficiencies, as noted in Series #8945, becomes the final official document of the results of the certification survey. The Federal Center for Medicare and Medicaid Services contracts with the section to conduct the certification surveys of ICF/MR facilities.

RETENTION: Years: 1 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23290

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Medical Review Forms

CUTOFF: End of Calendar Year

DESCRIPTION: Pre-admission DA-124 A, B, and C forms used to determine if someone is eligible for admission to a certified Medicaid bed, level of care forms used to determine if resident continues to require care of this level, applications and general medical correspondence. The DA-124 forms are prepared primarily by hospital staff and long term care facility staff who then submit these forms to the section for a determination about whether or not the individual is eligible for admission to a long term care facility Medicaid bed. This screening process is required by the Federal Centers for Medicare and Medicaid Services.

RETENTION: Years: 3 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23291

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Notice of Change

CUTOFF: Date Facility was Last Certified or Licensed

DESCRIPTION: Long term care and adult day care facilities requests for changes related to their facility. Records can include, but are not limited to changes regarding licensure status, addresses, ownership, administrators, directors of nursing, bed status, or certification status. Section staff use this information to approve some changes and in other cases record the change of information for the facility.

RETENTION: Years: 5 Months: Days:

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8935

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Notice of Fire

CUTOFF: End of Calendar Year

DESCRIPTION: Correspondence concerning fires in long term care and adult day care facilities. Facilities are required by regulation to report all fires to the section and this information is used by SLCR to assist in determining if any potential facility failure occurred that resulted in the fire. Records retained per 19CSR 30-85.022 (2)(F) and 19CSR 30-86.022 (2)(C).

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23303

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Safety Certification Records

CUTOFF: End of Calendar Year

DESCRIPTION: Documentation of electrical wiring certification, sprinkler certification, fire alarm certification and fire department consultation. Qualified private individuals or companies inspect the electrical, sprinkler and fire alarm systems as required by regulation. Copies of these outside certifications are submitted to the section and are used to assure that the facility's electrical, sprinkler and/or fire alarm systems are certified as being in safe working order and meeting all applicable codes and regulations. Certifications are performed at least annually except electrical certifications which are required biannually.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION:

SERIES #: 23302

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Second Business Requests

CUTOFF: End of Calendar Year in which Request was Approved or Denied

DESCRIPTION: Correspondence and supporting documentation regarding the request for approval to operate a second business in a long term care facility, including recommendations and approval and/or denial letters. This request may include supporting documentation to show why the approval for a second business should be granted. Long term care facilities are required to request permission to operate any second business within their licensed premises that is unrelated to the long term care facility. Section for Long Term Care Regulation (SLCR) staff reviews the requests, obtains recommendations related to the request from the appropriate regional office, and finally provides a written approval or denial of the request. The documentation is necessary to track denial and approval of the second business request. Requests must be renewed every two years.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23295

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: State Inspection Packets

CUTOFF: Date of Inspection Exit

DESCRIPTION: Documents are created by section staff during the course of inspecting long term care and adult daycare facilities. Records can include, but are not limited to statements of deficiencies and plans of correction, correspondence, facility inspection report, sample selection, staff and resident rosters, resident condition and census information, resident funds bond worksheet, construction fact sheets, facility descriptions, legal notices, penalty information, official correspondence, and letters related to any informal dispute resolution (IDR) process. These documents reflect the final and official results of the inspection.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8933

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: State Inspection Packets Supporting Documentation

CUTOFF: Date of Inspection Exit

DESCRIPTION: Documents are created by section staff during the course of the inspection. Records include, but are not limited to supporting inspection notes, informal dispute resolution (IDR) notes, and copies of facility records used to determine compliance for state inspections. The notes are then used to determine whether or not a facility is in compliance with applicable rules and regulations and to create any statement of deficiencies that results from the process.

RETENTION: Years: 1 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23288

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Title XVII (Medicare) and Title XIX (Medicaid) Certification Survey Supporting Notes and Documentation

CUTOFF: Date of Survey Exit

DESCRIPTION: Records created by section staff during the course of the Federal Certification surveys of long term care facilities. Records include, but are not limited to supporting notes, informal dispute resolution (IDR) notes, and copies of facility records used to determine compliance for certification surveys. These records are used to create statements of deficiencies that result from the survey process and used to determine whether or not a facility is in compliance with applicable rules and regulations. The statement of deficiencies, as noted in Series #8929, becomes the final official document of the results of the certification survey. The Federal Center for Medicare and Medicaid Services contracts with the section to conduct the certification surveys of long term care facilities that participate in the Title XVII (Medicare) and Title XIX (Medicaid) program.

RETENTION: Years: 1 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 23287

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010

TITLE: Title XVIII (Medicare) and Title XIX (Medicaid)

CUTOFF: Date of Survey Exit

DESCRIPTION: Records created by section staff during the course of the Federal Certification surveys of long term care facilities. Records include, but are not limited to statements of deficiencies and plans of correction, correspondence, facility inspection report, Medicare/Medicaid application, sample selection, staff and resident rosters, resident condition and census information, quality indicator reports, Life Safety Code book, Life Safety Code crucial data extract, construction fact sheets, facility descriptions, resident funds bond worksheet, legal notices, any penalties, and letters related to any informal dispute resolution (IDR) process. The Federal Center for Medicare and Medicaid Services contracts with the section to conduct the certification surveys of long term care facilities that participate in the Title XVIII (Medicare) and Title XIX (Medicaid) program.

RETENTION: Years: 4 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8926

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010



Agency Records Disposition Schedule

Department: Department of Health and Senior Services

Section: Section for Long Term Care

Division: Division of Regulation and Licensure

Sub-Section:

TITLE: Title XVIII (Medicare)and/or Title XIX (Medicaid) Application for Initial Certification

CUTOFF: Date Facility was Last Certified

DESCRIPTION: Original application for initial certification for participation in the Title XVII (Medicare) and Title XIX (Medicaid) program. The application is submitted by the facility applying to participate in either the Medicare and/or Medicaid programs. The application is required by the Centers for Medicare and Medicaid Services and or the State of Missouri for consideration to be certified for participation in these programs. This information may be needed for reference during the period of time that a long term care facility continues to participate in either the Medicare and/or Medicaid program.

RETENTION: Years: 5 Months: Days:

NOTES:

DISPOSITION ACTION: Destroy

SERIES #: 8929

SERIES STATUS: Approved

APPROVAL DATE:

09/08/2010