

POLICY/PROCEDURE TITLE	Document Retention and Destruction of Protected Health Information		
POLICY/PROCEDURE NUMBER	CC-128		
DEPARTMENT	Compliance		
Original Issue Date	9/8/2023		
Next Scheduled Review Date	8/22/2024		
Last Review Date	9/8/2023		
Revision Date History			
APPLIES TO			
<input checked="" type="checkbox"/>	SAP: ReachOut Healthcare America Ltd. dba Smile America Partners	<input checked="" type="checkbox"/>	MI: Michigan Dental Outreach, P.C. dba Michigan Dental Outreach
<input checked="" type="checkbox"/>	AZ: Arizona Mobile Dental, PC dba Big Smiles	<input checked="" type="checkbox"/>	MO: Nevin K. Waters D.D.S., P.C. dba Big Smiles
<input checked="" type="checkbox"/>	CA: Elliot Paul Schlang, DDS, Professional Corporation dba Big Smiles	<input checked="" type="checkbox"/>	NC: Theodore F. Mayer, DDS P.A. dba Smile North Carolina
<input checked="" type="checkbox"/>	GA: Shurett Dental Group, P.C. dba Shurett Dental Group	<input checked="" type="checkbox"/>	NY: Big Smiles Dental New York, PLLC
<input checked="" type="checkbox"/>	GA: Mark Shurett, DDS, PC dba Help A Child Smile	<input checked="" type="checkbox"/>	NY: Smile New York Outreach, LLC
<input checked="" type="checkbox"/>	IL: Elliot P. Schlang, D.D.S. P.C. dba Smile Illinois	<input checked="" type="checkbox"/>	OH: Elliot P. Schlang DDS, Dental Outreach PLLC dba Ohio Dental Outreach
<input checked="" type="checkbox"/>	IN: Elliot P. Schlang DDS, Dental Outreach PLLC dba Indiana Dental Outreach	<input checked="" type="checkbox"/>	PA: Big Smiles Pennsylvania P.C. dba Smile Pennsylvania
<input checked="" type="checkbox"/>	KS: Nevin K. Waters D.D.S., PA dba Big Smiles	<input checked="" type="checkbox"/>	UT: Big Smiles Utah, P.C. dba Big Smiles
<input checked="" type="checkbox"/>	KY: Big Smiles Kentucky PSC dba Big Smiles	<input checked="" type="checkbox"/>	VA: Big Smiles Virginia PC dba Smile Virginia
<input checked="" type="checkbox"/>	MA: Elliot P. Schlang DDS Big Smiles Massachusetts P.C. dba Smile Massachusetts	<input checked="" type="checkbox"/>	WA: Michael LaCorte Dentistry, PC dba Big Smiles
<input checked="" type="checkbox"/>	MD: S.K. Pesis D.D.S., Big Smiles Maryland, PC dba Smile Maryland	<input checked="" type="checkbox"/>	WV: Elliot P. Schlang DDS, Inc. dba Smile West Virginia

I. PURPOSE:

This policy represents ReachOut Healthcare America, LTD d/b/a Smile America Partners (“SAP”) and its affiliated Dental Professional Practices (“DPPs”) (hereinafter collectively referred to as “The Smile Way Group”) policy regarding the retention and disposal of records and the retention and disposal of electronic documents containing Protected Health Information (PHI). The HIPAA Privacy Rule requires that covered entities, such as The Smile Way Group, to apply appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information (PHI), in any form. See 45 CFR 164.530(c). This means that covered entities must implement reasonable safeguards to limit incidental, and avoid prohibited, uses and disclosures of PHI, including in connection with the disposal of such information. The purpose of this policy is to ensure that necessary records and documents of are adequately protected and maintained and to ensure that records that are no longer needed by The Smile Way Group or are of no value are discarded at the proper time.

II. ADMINISTRATION:

The Corporate Compliance Committee is responsible for overseeing this policy. Any changes to this policy must be approved by the Corporate Compliance Committee.

Attached as Appendix A is a PHI Record Retention Schedule that is approved as the initial maintenance, retention and disposal schedule for records of The Smile Way Group.

Records approved for destruction will be shredded by an approved BAA vendor specializing in document destruction.

III. SUSPENSION OF RECORD DISPOSAL IN EVENT OF LITIGATION OR CLAIMS:

In the event The Smile Way Group is served with any subpoena or request for documents or any employee becomes aware of a governmental investigation or audit concerning The Smile Way Group or the commencement of any litigation against or concerning The Smile Way Group, such employee shall inform the Compliance Officer and any further disposal of documents shall be suspended until such time as the Compliance Officer, with the advice of counsel, determines otherwise. The Compliance Officer shall take such steps as is necessary to promptly inform all staff of any suspension in the further disposal of documents.

IV. APPLICABILITY:

This policy applies to all physical records containing PHI generated or received by the Company, including original documents and reproductions. Under the Company's current document retention policy, electronic data and records saved on the Corporate network are retained indefinitely.

Documents containing PHI:

Under this policy, imaging of documents containing PHI constitutes document retention therefore, when original documents containing PHI are imaged and retained on the Company network, the original "hard copy" documents may be destroyed immediately or stored in accordance with Section V. Storage Procedures.

Under this policy both physical and imaged patient medical records are retained in accordance to Appendix A.

V. STORAGE PROCEDURES:

All storage boxes must be logged before being placed in storage in accordance to company procedure. All requests for information from off-site storage must be coordinated in accordance to company procedure.

VI. DESTRUCTION PROCESS:

For PHI in paper record form, shredding, burning, pulping, or pulverizing the records so that PHI is rendered essentially unreadable, indecipherable, and otherwise cannot be reconstructed may be considered for disposal.

The Smile Way Group may utilize an approved vendor contracted as a Business Associate to destroy and dispose of PHI which is rendered unreadable, indecipherable, and otherwise cannot be reconstructed. A certificate of destruction must be obtained by the approved vendor containing the patients identification number, the date of destruction and the vendor. A certificate of destruction should be given to the Chief Compliance Officer to be retained permanently.

Approvals:

DocuSigned by:

Steve Higginbotham

10/6/2023

9F2E17E4D88A41A
Steve Higginbotham, CEO

DocuSigned by:

Craig Thomas

10/6/2023

068E7D1B7A624EC
Craig Thomas, CCO & SVP HR

APPENDIX A – PHI RETENTION SCHEDULE

Documents/records not mentioned below should be identified to the Corporate Compliance Committee before any action is taken.

A. PATIENT MEDICAL RECORDS CONTAINING PHI

Department Administrator: Chief Compliance Officer

<u>Record Type</u>	<u>Minimum Retention Period</u>
1. Complete Medical Records (Paper Based) (Consent, treatment notes, charts, radiographs, post-op instruction, prescriptions)	1/1/1994 to current
2. Complete Medical Records (Electronic based)	Permanent in data house

B. PATIENT FINANCIAL RECORDS CONTAINING PHI

Department Administrator: Corporate Controller

<u>Record Type</u>	<u>Minimum Retention Period</u>
1. Accounts receivable Explanation of Benefits	7 years
2. Accounts receivable (invoices to customers)	7 years