

RECORDS RETENTION AND DISPOSAL SCHEDULE

DEPARTMENT OF HEALTH & MENTAL HYGIENE

SECRETARIAT HCPFR

OFFICE / ADMINISTRATION / BOARD
Office of Systems, Operations & Pharmacy-MD Pharmacy Program (MPP)

This schedules supersedes previous Schedule 2589

Item No.	Description of Records Series (from Inventory Form)	Authorized Retention Period & Instructions
1	<u>Pharmacy Services Division</u> A. Paid Pharmacy claims consists of copies of all pharmacy claims submitted manually and paid to Pharmacy providers. B. Pharmacy Preauthorization Records consists of copies of all documentation used to grant prior authorization to Pharmacies & Providers for various high cost medications. C. Drug Rebate Program – Quarterly State Utilization Discrepancy Reports consists of copies of all reports received from CMS for the period indicated. D. Drug Rebate Program – Vendor Contract Related Documents consists of copies of the transition test Documents for Deposits. E. Drug Rebate Program – Monthly Receipts & Reconciliation consists of copies of the Monthly cash receipt logs and FMIS reconciliations. F. Drug Rebate Program – Quarterly Invoice Cycle Reports consists of copies of the invoice cycle files For the period indicated.	Retain for six (6) years then destroy. Retain for six (6) years then destroy. Retain for six (6) years then destroy. Retain for six (6) years then destroy. Retain for six (6) years then destroy. Retain for six (6) years then destroy.
2	<u>Clinical Services Division</u> A. Drug Utilization Review(DUR)/Corrective Managed Care (CMC) consists of Meeting materials, Minutes, reports and Power Point. B. Pharmacy & Therapeutics Committee (P&T) consists of Meeting materials, Transcripts, Continuity, Monographs, Reports, TOPS Notes, Speakers communications, Minutes and Power Point... C. Managed Care Organizations (MCOs) consists of formulary updates and annual assessments	Retain for six (6) years then destroy. Retain for six (6) years then destroy. Retain for six (6) years then destroy.

APPROVED BY: (DHMH Official)

DATE: 7/23/15SIGNATURE: [Signature]NAME/TITLE: KATH SEWELL, EXECUTIVE DIRECTOR, OSO

AUTHORIZED BY: (MD STATE ARCHIVES)

DATE: 8-17-15SIGNATURE: [Signature]NAME/TITLE: TIMOTHY D. BAKER, STATE ARCHIVIST