



Agency Records Disposition Schedule

Department: Department of Mental Health

Section: Reimbursements

Division: Central Office

Sub-Section:

TITLE: Accounts Receivable - Indigent Billing

CUTOFF:

DESCRIPTION: A listing showing patient's name and case number, county name and number, billing date, movement date (if not in the facility at the beginning of the previous six months), care and treatment charge or credit, advance billing and current balance. This is a semi-annual billing sent to each county having patients hospitalized in the facility. This record also served as an accounts receivable for the county and is updated each billing period (every 6 months). Payments from the county are shown against the billing as a whole and not in each individual patient's account.

RETENTION: Years: 5 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5800

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Accounts Receivable - Private Patient

CUTOFF:

DESCRIPTION: A monthly listing form showing the date, patient's name and case number, type of account, prior balance, movement date, charge or credit for care and treatment, payment or refunds, and current balance including advance charge if patient was in the facility on the last day of the month. This receivable is updated each month. It reflects a summary of activity on each patient's account for the month.

RETENTION: Years: 5 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5799

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Cash Receipts Journal

CUTOFF:

DESCRIPTION: Form originates at the hospital and lists the payments made in behalf of patients for their care and treatment while hospitalized.

RETENTION: Years: 2 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5806

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983



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Division: Central Office

Sub-Section:

TITLE: Clothing and Miscellaneous Journal

CUTOFF:

DESCRIPTION: Previous to 1969 the facilities made periodic charges for clothing used by the patients. These charges are recorded in the clothing and miscellaneous journal. This record was discontinued in 1969.

RETENTION: Years: 3 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5802

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Daily Attendance Record

CUTOFF:

DESCRIPTION: This form is used only by the regional diagnostic clinics. It is a monthly record and used to report the number of days the patient was in the facility and the type of services rendered to the patient for the month. This charge per service is also shown and total amount of services performed.

RETENTION: Years: Months: Days:

NOTES:

DISPOSITION ACTION: Permanent

SERIES: 5798

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Form MD-R-19 Change of Patient Support

CUTOFF:

DESCRIPTION: Form originates at the hospital. On admission to the facility the pay status of patient is shown. It is also used to indicate as rate change on the patient's account. It may also indicate a change of patient support including the name and address of the person to be billed.

RETENTION: Years: 2 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5805

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983



Agency Records Disposition Schedule

Department: Department of Mental Health

Section: Reimbursements

Division: Central Office

Sub-Section:

TITLE: Out-Patient Charges

CUTOFF:

DESCRIPTION: A monthly listing sent to Central Reimbursements from the hospital showing out-patient charges for each month. The listing contains patient's name and case number, date of out-patient service, the amount of the charge, and the name and address of the person to be billed.

RETENTION: Years: 2 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5804

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Patients Movements

CUTOFF:

DESCRIPTION: A monthly listing for each facility showing all of the movements to and from the facility for each patient during the month. The listing is used as a reference for the current period and contains patient's name and case number, admission date, county of residence, pay status of patient, birthdate, age, sex, veterans status, diagnosis, type of movement, and movement date. This identical service is retained in the files of the statistics section in Central Office.

RETENTION: Years: 1 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5803

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983

TITLE: Refund Journal

CUTOFF:

DESCRIPTION: The refund journal is a form originating at the hospital and sent to Central Reimbursements indicating payment of a refund or an overpayment of a patient account. This refund journal contains date, payment requisition number, patient's name and case number, the amount of the refund and to whom it was paid.

RETENTION: Years: 3 Months: 0 Days: 0

NOTES:

DISPOSITION ACTION: Destroy

SERIES: 5801

SERIES STATUS: Approved

APPROVAL DATE:

5/18/1983