



RECORDS RETENTION AND DISPOSITION SCHEDULE

Health, Department of. HIV and STD Division.

Agency: HIV and STD Division		Division:	
ITEM NO.	RECORD SERIES	TITLE/DESCRIPTION <i>(This Retention Schedule is approved on a space-available basis)</i>	RETENTION PERIOD
1	2002-49	<p>HEMOPHILIA CASE FILES</p> <p>This is an insurance program that pays for the annual Indiana Comprehensive Health Insurance Association (ICHIA) premium for Indiana residents who have hemophilia or von Willebrand disease. The family is to submit an application to the State Department of Health for eligibility assessment. While eligible, the insurer becomes the primary payer of medical expenses. The case file contains financial information, including claim vouchers, and confidential medical information, physicians' information, data on medical treatment and state insurance coverage. Files also include the Amish Outreach Program Grant and Amish Dental Intervention Grant. Pursuant to 410 IAC 3.2-1-4, July 23, 2008 Update, a child means an individual who is less than 21 years of age. In accordance with 410 IAC 3.2-2-1, July 23, 2008 Update, an emancipated child under 21 years of age is eligible to apply for services. Disclosure of these records may be subject to IC 5-14-3-4(a)(3) and (9), (Version b, 2008 Indiana General Assembly) Retention based on IC 34-11-6-1, (2004 Edition).</p>	TRANSFER to the RECORDS CENTER three (3) years after closure of the case and after receipt of STATE BOARD OF ACCOUNTS Audit Report and satisfaction of unsettled charges. TRANSFER to the INDIANA ARCHIVES for EVALUATION, SAMPLING or WEEDING pursuant to archival principles after an additional twenty (20) years in the RECORDS CENTER.
2	2005-12	<p>MEDICAL SERVICES RECORDS</p> <p>This record consists of three (3) programs identified by the Division's acronyms: (1) ADAP-AIDS Drugs Assistance Plan, (2) EIP-Early Intervention Plan, and (3) HIAP-Health Insurance Assistance Plan. There are 15 regional care sites statewide to assist clients. Some organizations are public agencies and some non-profit organizations. Extensive demographic reports are present on services provided and various activities but no personally identifiable client records are included. Files also include copies of Claim Vouchers with the original records maintained by the Division of Finance. Care sites and services provided are thru a grant from the State Department of Health. Retention based on IC 34-13-1-1, (2004 Edition)</p>	TRANSFER to the RECORDS CENTER five (5) years after the end of the fiscal reporting year and after receipt of STATE BOARD OF ACCOUNTS Audit Report and satisfaction of unsettled charges. TRANSFER to the INDIANA ARCHIVES for EVALUATION, SAMPLING or WEEDING pursuant to archival principles after an additional five (5) years in the RECORDS CENTER.
3	92-88	<p>NEG, PERSONALLY IDENTIFIABLE, HIV ANTIBODY LAB REP,</p> <p>This record and report displays the name of the individual tested. A negative test result at one (1) specific time does not guarantee that the person tested will not have a positive test result at a later date or that the person tested will not acquire the virus or the disease. Disclosure of these records may be subject to 42 USC 242m(d) and IC 16-41-8-1.</p>	TRANSFER to the RECORDS CENTER two (2) years after the end of the fiscal year in which report was received. DESTROY after an additional eight (8) years in the RECORDS CENTER.
4	2005-13	<p>TESTING HISTORY QUESTIONNAIRE AND HIV TESTING HISTORY QUESTIONNAIRE-POST TEST</p> <p>These confidential questionnaires are used for data entry and to report information to the federal Centers for Disease Control and Prevention. May include State Forms 51992, 52059, 52060, and associated substitutes. Disclosure of these records may be subject to 42 USC 242m(d) and IC 16-41-8-1.</p>	DESTROY after verification of data entry and successful data transfer to the CDC.

5	92-83	<p>HIV COUNSELING & TESTING REPORTS</p> <p>These are federal forms from the federal Centers for Disease Control and Prevention. This record is used in this 100% federally funded section for computer data entry and various computer reports can be generated for the State Department of Health and the testing and/or counseling center staff. Extensive demographic data is available but not personally identifiable information is present. File may also include an HIV Anonymous Consent Form.</p>	<p>DESTROY the paper reporting form after verification of data entry. TRANSFER demographic computer reports to the INDIANA ARCHIVES for EVALUATION, SAMPLING or WEEDING pursuant to archival principles five (5) years after the year of the report.</p>
6	92-86	<p>CONFIDENTIAL POSITIVE CASE REPORTS</p> <p>These are predominantly paper files that may contain several State Forms and/or federal forms, including Notification of Release of HIV/AIDS Offenders (SF 44993), Confidential Report of Communicable Diseases (SF 43823), various laboratory reports, risk investigations, correspondence and miscellaneous notes. Data is also entered into e-HARS, the HIV reporting system of the Federal Centers for Disease Control (CDC). Disclosure of these records may be subject to 42 USC 242m(d) and IC 16-41-8-1.</p>	<p>IMAGE according to IARA imaging standards and MICROFILM according to 60 IAC 2 after data entry into the CDC's HIV reporting system. TRANSFER original negative roll and one (1) copy of electronic images to the INDIANA ARCHIVES for EVALUATION, SAMPLING and WEEDING pursuant to archival principles after verification for completeness and legibility. TRANSFER duplicate microfilm roll to agency. DESTROY hard copies after verification of INDIANA ARCHIVES transfer, and DESTROY agency microfilm upon receipt of written permission from the CDC.</p>
7	92-89	<p>NEG, NON-ID HIV ANTIBODY LAB REQUISITION,</p> <p>This requisition from a confidential testing site is submitted to the State Department of Health-s Bureau of Laboratories. The medical specimen is analyzed and the negative result reported. Non-identifiable requisitions and reports cannot be traced to any individual. Since the person tested is not identified, and the report is negative, the report is of no value to the HIV/STD Division</p>	<p>DESTROY after receipt of the report.</p>
8	92-90	<p>POSITIVE, NON-ID HIV ANTIBODY LAB REQUISITION, NO SF NUMBER SHOWN</p> <p>Although a positive test result occurs, the person tested is not identified. No connection to the person can be made, therefore, the records are not placed into any case file and none is created.</p>	<p>DESTROY after receipt of the report.</p>
9	92-91	<p>POSITIVE, NON-IDENT HIV LAB REPORT</p> <p>This computer-generated form is identical to the Record Series 92-90 with the exception of the test result. Since no personally identifiable data is listed, the test result cannot be placed into a case file and none is created.</p>	<p>DESTROY after receipt of the report.</p>
10	92-92	<p>CONFIDENTIAL NEGATIVE CASE REPORTS</p> <p>These are predominantly paper files that may contain several State or federal forms. These may include a negative HIV Serological Laboratory Report and/or an HIV Antibody Requisition. Typical files may contain correspondence, authorizations for release of information, and miscellaneous notes.</p>	<p>TRANSFER to the RECORDS CENTER two (2) years after the end of the fiscal year in which report was received. DESTROY after an additional eight (8) years in the RECORDS CENTER.</p>
11	92-93	<p>RECALCITRANT CONFIDENTIAL CASE FILES</p> <p>These are predominantly paper files that may contain several State Forms and/or federal forms, including Notification of Release of HIV/AIDS Offenders (SF 44993), various laboratory reports, legal documents, correspondence and miscellaneous notes. Disclosure of these records may be subject to 42 USC 242m(d) and IC 16-41-8-1. Retention consistent with IC 34-13-1-1.</p>	<p>TRANSFER to the RECORDS CENTER two (2) years after the end of the fiscal year in which report was received. TRANSFER to the INDIANA ARCHIVES for EVALUATION, SAMPLING or WEEDING pursuant to archival principles after an additional eight (8) years in the RECORDS CENTER.</p>