MS 267 Volunteer Medical Records

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Responsible Office: Office of Health Services (OHS) **Supersedes**: 08/02/16; 03/25/94, 02/14/85, 10/30/84

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1.0 Purpose

This Manual Section prescribes the policy for accessing, maintaining and retiring the electronic medical records of Applicants, Trainees, Volunteers, and Response Volunteers (collectively the Volunteers).

2.0 Policy

2.1 Maintenance of Records

- (a) The Peace Corps maintains a chronological record of personal medical information for each Volunteer from the time of the pre-service physical/dental examination through termination of service. This record must be accurate and current; only in this way can a Volunteer be adequately cared for during service and a Volunteer's rights under the Federal Employees' Compensation Act (FECA) be protected. These records are to be maintained in accordance with the procedures in Technical Guideline 210, Medical Records.
- (b) The Peace Corps maintains Volunteer medical and mental health information electronically. These electronic records are medically confidential and are maintained in compliance with the Health Insurance Portability and Accountability Act (HIPAA) and the Federal Information Security Management Act (FISMA) regulations in a secure cloud environment.
- (c) Paper documentation may be used in the event that the Peace Corps electronic medical record system (PCMEDICS) is not functional.

2.2 Pre-Service (Applicant) Medical Records

For Applicants' medical records, the Office of Health Services (OHS) is responsible for the following:

- (a) Establishing an Applicant Medical Record using the Medical Application Exchange System (MAXx) electronic system. The Applicant's medical record is initiated using the electronic Health History Form (HHF) (Form PC-1789). Thereafter, all medical and dental forms and documents are uploaded into the Applicant Medical Record in MAXx, including the Report of Dental Evaluation (PC-0MS-1790 Dental S and x-rays), Report of Physical Examination (PC-1790S), individual medical evaluation forms (PC-262 1 to 12, TG-510 2 and 3, TG-355-2, and PC-0MS-116), progress notes, correspondence, and other supporting documents. Records maintenance and filing procedures for the Applicant Medical Record are presented in Technical Guideline 210 Medical Records.
- (b) Bundling together the Applicant's clinical documents that have been collected by the Pre-Service Unit or Peace Corps Response Unit in MAXx.
- (c) Transferring the Applicant Medical Record from MAXx to Peace Corps' Medical Electronic Documentation and Inventory Control System (PCMEDICS), where it becomes available for both the Peace Corps Health Unit staff in country and the Office of Health Services to access and to document the clinical care provided in country and on medevac.
- (d) Deactivating and retaining the Applicant Medical Record after the application has been designated as inactive by DOVE.

2.3 In-Service Medical Records for Trainees, Volunteers, and Response Volunteers

- (a) OHS and Post health unit staff are jointly responsible for maintaining the electronic medical record of the illnesses and injuries, hospitalizations, medevacs, examinations, immunizations, diagnostics, prescriptions, and correspondence concerning medical and mental health issues of each Trainee, Volunteer and Response Volunteer (collectively for 2.3 and 2.4, a Volunteer).
- (b) All forms should be e-signed within 72 hours of commencing documentation on that form. Exceptions to this policy include: intake interviews, labs & diagnostics, Close of Service (COS) forms, and extenuating circumstances that prevent the PCMO from accessing PCMEDICS (such as tending to a critically ill Volunteer, on medevac with a Volunteer, or technical malfunction of the PCMEDICS application, etc.).
- (c) Volunteers may access a subset of their electronic medical record, known as the Continuous Care Record (CCR), through the secure and private PCMEDICS portal. The CCR displays all problems, allergies, medications, diagnostics, and immunizations determined, collected, or provided during service. The CCR may be saved electronically as a Portable Document Format (PDF) file, or it may be printed from the PCMEDICS portal at the Volunteer's convenience for up to one year following the Volunteer's COS.

2.4 Medical Records and Close of Service

- (a) The Peace Corps Medical Officer (PCMO) will complete the electronic medical record within 30 days after a Volunteer separates from Peace Corps for any reason. This includes placing copies into PCMEDICS of termination physical/dental examination results, diagnostic test results, and authorizations given to the Volunteer for diagnosis or evaluation. If follow-up is anticipated after separation from service, the PCMO should issue a PC Authorization for Out/In Patient Care (PC-127c) directly to the Volunteer prior to separation, and place a copy within PCMEDICS.
- (b) Dental x-ray and other medical imaging reports (interpretations), must be scanned into the appropriate PCMEDICS document folder. Copies of electronic medical image files may be placed into the appropriate PCMEDICS folder, but note that some electronic medical image files may be too large to upload into PCMEDICS.
- (c) All hardcopy medical imaging films should be offered to the separating Volunteer. If the Volunteer does not want to take possession of the films, the PCMO will inform the Volunteer that the films will be destroyed in the health unit and then document in PCMEDICS that the Volunteer was so informed and declined possession.

2.5 Retirement of Medical Records

- (a) The PCMO shall relinquish the PCMEDICS electronic medical record within 30 days of a Volunteer's close of service or separation date. The Health Informatics Unit is responsible for deactivating the PCMEDICS electronic medical record and retaining it for 50 years, per the *Guide to Peace Corps' Records Schedules (Headquarters and Recruiting Offices)* or as otherwise determined by the Records Management Officer / Office of Management. The PCMEDICS record will remain available to the Post-Service Unit / OHS to help resolve service-related medical problems and to prepare claims filed under the FECA. Records maintenance procedures are included in Technical Guideline 205 Medical Records.
- (b) Diagnostic reports not available within 30 days of the Volunteer's separation date shall be sent to the Post-Service Unit / OHS via SFTP upon receipt.
- (c) The Medical Records Unit / OHS shall provide support to Returned Peace Corps Volunteers seeking information from their electronic medical record.

2.6 Access to PCMEDICS

Peace Corps staff may access PCMEDICS only if they have a specific need to know the information to do their job. Except for situations involving treatment or payment for services, disclosure of medically confidential information shall be the minimum amount necessary. See MS 294 *Confidentiality of Volunteer Information*.

(a) The scope of access to PCMEDICS by Peace Corps staff is determined by the staff member's role and is managed by the Health Informatics Unit (HIU) / Office of Health Services. PCMEDICS New Employee Orientation is required for all individuals seeking to access or utilize PCMEDICS (see TG-215 PCMEDICS Training for Staff). Access to PCMEDICS requires:

- (1) Approval from the HIU;
- (2) Current status as an employee or a cleared contractor;
- (3) An email account on the peacecorps.gov system; and
- (4) Successful completion of PCMEDICS orientation training.
- (b) The Office of the Inspector General (OIG) is allowed access to information within PCMEDICS.
- (c) Staff that are not allowed direct access to PCMEDICS include, but are not limited to:
 - (1) Non-health unit staff at post, including Country Directors, IT Specialists, and persons serving as SARLs.
 - (2) Backup healthcare providers at post, unless they meet all criteria listed above.
 - (3) All Offices in the Agency except the Office of Health Services.

2.7 Transition to PCMEDICS

- (a) All medical records in existence prior to the initiation of PCMEDICS should be converted to PCMEDICS in accordance with Transition Technical Guideline *Transitioning from Paper to Electronic Medical Records*.
- (b) Until conversion to PCMEDICS, paper records will continue to be governed by policies contained in the previous version of this Manual Section (see attached), unless inconsistent with the Transition Technical Guideline.

3.0 Effective Date

This Manual Section takes effect on the date of issuance.