

Request for Records Disposition Authority

(See Instructions on reverse)

Leave Blank (NARA Use Only)

To **National Archives and Records Administration (NIR)**
Washington, DC 20408

Job Number

N1-AU-10-98

1 From (Agency or establishment)

Department of the Army

Date Received

6/28/10

2 Major Subdivision

Office of the Administrative Assistant to the Secretary of the Army

3 Minor Subdivision

Records Management and Declassification Agency

Notification to Agency

In accordance with the provisions of 44 U.S.C. 3303a, the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10

4 Name of Person with whom to confer

Shirley Kinson-Jones

5 Telephone (include area code)

703-428-6411

Date

21 Apr 2013

Archivist of the United States

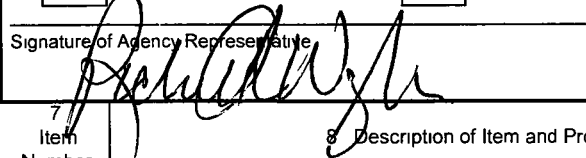


6 Agency Certification

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified, and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies

is not required is attached has been requested

Signature of Agency Representative



Title

Richard A. Wojewoda, Chief, Records Management Division

Date (mm/dd/yyyy)

05/26/2010

7 Item Number	8 Description of Item and Proposed Disposition	9 GRS or Superseded Job Citation	10 Action taken (NARA Use Only)
1	<p>PATIENT ADMINISTRATION AR 40-400</p> <p>RN 40-400aaa Title Medical Services Account Authority NN-166-204 PA A0040DASG Description Medical Services Account bills, claims, supporting and financial documents relating to reimbursements received from individuals, agencies or other health insurance Information relating to the process of billing, collecting, and accounting for medical services provided to patients in or through Army Military Treatment Facilities Included but not limited to originals or copies of Invoice and Receipts, cash records, schedules of collection, certificates of indebtedness, vouchers, registers, voucher control logs, check logs, records of deposits of negotiable instruments, Deposit Tickets (SF 215), transfer documents and Medical Claim Files, which may include Medical billing forms (UB-92/UB-04/CMS 1500/UCF), DD Form 2569, insurance/benefit verification worksheets, pre-certification/concurrent review documentation, payer remittance checks and explanation of benefits, correspondence to and from payer, follow-up tracking logs or notes, medical records provided to payer to support claims, etc Disposition TE6 25 Event is fiscal year of date medical care provided Keep in the CFA until event occurs and then until no longer needed for conducting business, then retire to the RHA/AEA The RHA/AEA will destroy the record 6 years and 3 months after the event Justification Statue of limitations to pursue collections is 6 years and 3 months Please see attachment</p>		

Item 2

RN. 40-400ii

Title: Third Party Collection Program

Authority: TBD

PA: TBD

Description: Third Party Collection Program claims, supporting and financial documents relating to reimbursements received from third party payers. Information relating to the process of billing and collecting for medical services provided to Military Health System non-active duty beneficiaries treated in or through Army Military Treatment Facilities. Included are copies of Medical Claim Files, which may include. Medical billing forms (UB-92/UB-04/CMS 1500/UCF); DD Form 2569; insurance/benefit verification worksheets, pre-certification/concurrent review documentation, payer remittance checks and explanation of benefits; correspondence to and from payer, follow-up tracking logs or notes, medical records provided to payer to support claims, etc.

Disposition: TE6.25. Event is fiscal year of date medical care provided. Keep in the CFA until event occurs and then until no longer needed for conducting business, then retire to the RHA/AEA. The RHA/AEA will destroy the record 6 years and 3 months after the event.

Item 3

RN. 40-400jj

Title Medical Affirmative Claims

Authority TBD

PA. TBD

Description: Medical Affirmative Claims and supporting documents relating to reimbursements received from liable **tortfeasor or** third party payers. Information relating to recovery of the reasonable value of health care services furnished at government expense as the result of an injury or illness incurred under circumstances creating a tort liability upon a third person or from automobile liability, medical, personal injury protection or no-fault insurance. Included are copies of Medical Affirmative Claim files retained by the Uniform Business Office, the originals of which are provided to the Recovery Judge Advocate for assertion, which may include. Medical billing forms (UB-92/UB-04/CMS 1500/UCF/ DA Form 2631/DA Form 3154), DD Form 2569, insurance/benefit verification worksheets, pre-certification/concurrent review documentation; payer remittance checks and explanation of benefits; correspondence to and from payer, follow-up tracking logs or notes; medical records provided to payer to support claims, etc., which

Disposition: TE6.25. Event is fiscal year of date medical care provided. Keep in the CFA until event occurs and then until no longer needed for conducting business, then retire to the RHA/AEA. The RHA/AEA will destroy the record 6 years and 3 months after the event