

REQUEST FOR RECORDS DISPOSITION AUTHORITY

(See Instructions on reverse)

LEAVE BLANK

TO: **GENERAL SERVICES ADMINISTRATION
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408**

JOB NO.
NCL-90-85-2

DATE RECEIVED
9-30-85

1. FROM (Agency or establishment)

NOTIFICATION TO AGENCY

DHHS, PHS ~~Department of Health & Human Services~~
2. MAJOR SUBDIVISION **Public Health Service**
PHS, HRSA ~~Health Resources & Services Administration~~
3. MINOR SUBDIVISION **Bureau of Health Maintenance Organizations**
HRSA, BHMORD ~~& Resources Development~~

In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.

4. NAME OF PERSON WITH WHOM TO CONFER

5. TELEPHONE EXT.

DATE ARCHIVIST OF THE UNITED STATES

Linda Querec
Linda Querec, PHS Records Officer

(301)
443-2055

12/8/85 *James E. Johnson*

6. CERTIFICATE OF AGENCY REPRESENTATIVE

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records; that the records proposed for disposal in this Request of 1 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, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached.

A. GAO concurrence: is attached; or is unnecessary.

B. DATE 9/24/85	C. SIGNATURE OF AGENCY REPRESENTATIVE <i>George Deal</i> George Deal	D. TITLE DHHS Records Management Officer
--------------------	--	---

7. ITEM NO.	8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARS USE ONLY)
1	<p>UNCOMPENSATED CARE FILES</p> <p>All records pertaining to investigations of health facilities which have completed their 20 year period of assured free care delivery under terms of the Hill-Burton Program of construction. This set of records shall include all materials relating to DHHS investigations conducted to determine the actual extent of facility (grantee) compliance with such obligations. Retain for 5 years after case closure and destroy. <i>Destroy</i></p> <p><i>8/22/85</i> Date</p> <p><i>James E. Johnson</i> HRSA Records Officer</p> <p>These records were previously submitted with Job No. NCL-90-82-5 Items 48, 49, 50 but were withdrawn for reconsideration.</p>		