Schedule Number: NC1-090-85-02

All items in this schedule are inactive. Items are either obsolete or have been superseded by newer NARA approved records schedules.

Description:

   Item 1 is superseded by N1-090-90-012, item 1. This is a one item schedule and it is therefore superseded in full.

Date Reported: 8/10/2022
REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

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

1. FROM (Agency or establishment)
DHHS, PHS  Department of Health & Human Services

2. MAJOR SUBDIVISION
PHS, HRSA  Public Health Service

3. MINOR SUBDIVISION
HRSA, BHMORD  Health Resources & Services Administration

DATE RECEIVED TO:
GENERAL SERVICES ADMINISTRATION
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408
9-30-85

4. NAME OF PERSON WITH WHOM TO CONFER
Linda Quever, PHS Records Officer

5. TELEPHONE EXT.
(301) 443-2055

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 ___ 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
George Deal

D. TITLE
DHHS Records Management Officer

7. ITEM NO.

8. DESCRIPTION OF ITEM
(With Inclusive Dates or Retention Periods)
UNCOMPENSATED CARE FILES
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. Return for 5 years after case closure and destroy.

9. GRS OR SUPERSEDED ITEM CITATION

10. ACTION TAKEN (NARS USE ONLY)

These records were previously submitted with Job No. NCI-90-82-5 Items 48, 49, 50 but were withdrawn for reconsideration.

9/24/85

HHS Records Officer

NARA HHS PHS

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STANDARD FORM 116 (REV. 8-83)
Prescribed by GSA
FPMR (41 CFR) 101-11.4

115-108

NSN 7540-00-634-4064

29/86 PHS, NNF