

REQUEST FOR RECORDS DISPOSITION AUTHORITY		JOB NUMBER <i>71-440-00-1</i>	
To: NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR) WASHINGTON, DC 20408		DATE RECEIVED <i>5-4-2000</i>	
1. FROM (Agency or establishment) Health Care Financing Administration		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request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.	
2. MAJOR SUBDIVISION Center for Beneficiary Services			
3. MINOR SUBDIVISION Division of Membership Operations, Beneficiary Membership Administration Group (Faye Broseker, 410-786-3342; Rick Mazur, 410-786-1418)			
4. NAME OF PERSON WITH WHOM TO CONFER Vickie Robey	5. TELEPHONE (410) 786-7883	DATE <i>2-5-01</i>	ARCHIVIST OF THE UNITED STATES <i>John W. Carl</i>
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 <u>2</u> 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, <input checked="" type="checkbox"/> is not required; <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested.			
DATE AUG 28 2000	SIGNATURE OF AGENCY REPRESENTATIVE <i>Arnette Barnes, Sr.</i> Arnette Barnes, Sr.	TITLE DHHS Records Management Officer	

7. Item No.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
1	INITIAL ENROLLMENT QUESTIONNAIRE (IEQ) Section 1862(b)(5)(D) of the Social Security Act requires the Health Care Financing Administration (HCFA) to mail a questionnaire to newly enrolled Medicare beneficiaries to obtain information on whether the individual is covered under a primary insurance plan and the nature of the coverage provided under the plan, including the name, address, and identifying number of the plan (this process is referred to as the IEQ). The IEQ is used to gather Medicare Secondary Payer information at or before the time of a beneficiary's Medicare entitlement. A contractor selected by HCFA will conduct this process. Initial Enrollment Questionnaires are scanned in a .tif file and maintained on magnetic media. All imaged documents are assigned a document control number which consists of a 5-digit Julian Date, 1-digit scanner number and a 4-digit sequential number. <i>Agency NWMW</i>		

7. Item No.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARS USE ONLY)
	<p>A. Recordkeeping Copy--Electronic Image - Retain for 5 years, then delete/destroy when no longer needed. NOTE: Due to a freeze imposed by the Department of Justice prohibiting the destruction of Medicare-related records, these records will be retained until the freeze is lifted.</p> <p>B. Paper Copy - Destroy four month(s) after electronic image of the beneficiary-completed questionnaire is created and verified.</p> <p>C. External Requests Report for IEQs (prepared by the contractor and submitted to HCFA) (1) Contractor - Retain for 5 years, then delete/destroy when no longer needed. (2) HCFA - Retain for 5 years, then delete/destroy when no longer needed.</p> <p>D. Electronic Mail and Word Processing System Copies- Copies that have no further administrative value after the recordkeeping copy is made. Includes copies maintained by individuals in personal files, personal electronic mail directories, or other personal directories on hard disk or network drives, and copies on shared network drives that are used only to produce the recordkeeping copy. DELETED within 180 days after the recordkeeping copy has been produced.</p> <p>② Copies used for dissemination, revision, or updating that are maintained in addition to the recordkeeping copy. DELETE when dissemination, revision, or updating is complete.</p> <p><i>Schedule modifications approved on Aug. 22, 2000 by HCFA Records Officer, Vickie Robey</i></p> <p>f:115/ieq</p>	<p>Superseded by: DAA-0440-2015-0006-0001 DATE (MM/DD/YYYY): 8/15/2017</p> <p>Superseded by: DAA-GRS-2017-0003-0001 DATE (MM/DD/YYYY): 5/31/2017</p> <p>Superseded by: DAA-GRS-2017-0003-0001 DATE (MM/DD/YYYY): 5/31/2017</p>	<p></p>