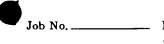
| Preservised by General Services Administration GSA Reg. 3-IV-106 IIG-102 REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS IFROM (ASERS 3-IV-106 IIG-102 TO DISPOSE OF RECORDS IOP NO. IFROM (ASERS 3-IV-106 IIG-102 (See Instructions on Reverse) IOP IOP NO. IFROM (ASENCY OR ESTABLISHMENT) Department of Health, Education, and Welfare In accordance with the provisions of 3003a the disposal request, including ments, is approved except for items be stamped "disposal rot approved" of "withdrawn" in column 10. Office of Program Operations 5. TEL EXT. George S. Yamamura Images are proposed for disposal for the reason indicated: ("X" only one) A The records bay construct the the records describe of the retention. B The records will cease to have sufficient value to the rest on the expiration on the expiration on the expiration of the retention. A CERTIFICATE OF AGENCY REPRESENTATIVE: I hereby certify that I am authorized to act for the head of this agency in matters pertaining to the disposal of records, and that the records describe to there approved or on the expiration on the expiration of the retention. A The record is bay construct the there expired (Date) B The records will cease to have sufficient value to there appecified. A The record is bay construct the there expired on on the expiration of the event specified. B The records will cease to have sufficient value to there expired. A The record is bay construct the there expired. (Bignature | Standard For Revised Novembe | n No. 115 | 0. 115 | | | · · · | | |
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| If is an automatic on Reverse) If a provide a pror | Prescribed by Ge Administration | neral Services | rvices REQUEST FOR AUTHORITY | | | | | |
| TO: GENERAL SERVICES ADMINISTRATION, NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON 25, D. C. NCI - 47-7 IFOM (ABKOY) OF EFRALEMENT) Department of Health, Education, and Welfare NOTIFICATION TO ACENT Social Security Administration Social Security Administration In accordance with the provisions of Social Security Administration A MME OF PERSON WITH WHOM TO COMFER George S. Yamamura 5. TEL EXT. (45770) Z. MAGOY PERSENTATIVE: A The records have methods of the security that Lam subbird to set for the head of this agency in matter perturbing to the disposed of records, and that the records describ schedule of the second for disposed for the create indicated: ("X" only one) Z. MAGOY PERSENTATIVE: Thereby certify that Lam subbird to set for the head of this agency in matter perturbing to the disposed of records, and that the records describ schedule of have setting. B. The records indicated: ("X" only one) A The records have (Data) B. The records indicated: ("X" only one) Sammer Second to the result of the treate of the records in the result of the treate of the records indicated: ("X" only one) 7. M. Cardow Agency Representative: B. The records and the records of the result | | | | RECORDS | | | JOB NO. | |
| NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON 25, D. C. I.FROM (AGENCY OR ESTABLISHMENT) Department of Health, Education, and Welfare 2.MAGR SUBDIVISION Social Security Administration Social Security Administration MINOR SUBDIVISION Office of Program Operations INME OF REPORT WITH WORK TO COMFER George S. Yamamura Image are proport for diposal for the reaso indicated: ("X" only one) A The records have B. THEREON WITH WORK TO COMFER Contribution Intercords and the second of diposal for the reaso indicated: ("X" only one) Contribution A The records have B. DESCRIPTION OF ITEM ITHE records the ave affice Intercords and case to have affice Mark of REPORT REPRESENTATIVE: The records have Mark of REPORT REPRESENTATIVE: The records aver affice Interview of the weath Mark of REPORT REPRESENTATIVE: The records aver affice Interview of the weath | Hitener (See Instructions on Reverse) | | 47 | | | 7 0 90 | | |
| Department of Health, Education, and Welfare In accordance with the provisions of 3004 the disposal request, included Social Security Administration Social Security Administration 3004 the disposal request, include Social Security Administration MMOR SUBDIVISION 0ffice of Program Operations A MME of FROSON WITH WHOM TO COMFER 5. TEL EXT. George S. Yamamura 45770 CERTIFICATE OF ACENCY REPRESENTATIVE The records wire the bed of this agency in matters pertaining to the disposal of records, and that the records describe The records wire whom to conver The records wire case to be added the same sufficient value of the retained of the retained of one bioceur Minon SubDivision The records wire case to be added the case of the center section. Marker of Perecords wire retaining to the disposal of records, and that the records describe secture to surveit the disposal of the center section. Marker of Perecords wire retained to a bio secure The records wire case to be added the same sufficient value of the center section. Marker of Perecords wire case to be added to the case of the center section. Marker of the center section.< | | | <i>i</i> | Vashington 25, D. C. | | 61 - 47 | -76 -28 | |
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| MINOR SUBDIVISION Office of Program Operations A MARC of PERSON WITH WHOM TO CONFER George S. Yamamura 6. TEL EXT. 45770 6. CENTIFLATE OF AGENCY REPRESENTATIVE: I hereby certify that I am authorized to act for the head of this agency in matters pertaining to the disposal of records, and that the records describ activation of the sensitivation of the expension of the expension of the expension centre of the sensitivation of the expension of the expension of the expension of the expension there there of the sensitivation of the expension of the | 2. MAJOR SUBDI | VISION | 3303a the disposal request, including amend- ments, is approved except for items that may | | | | | |
| 4 NAME OF FERSON WITH WHOW TO CONFER George S. Yamamura 5. TEL EX. 43770 214-76 bate | 3. MINOR SUBDIVISION | | | | | be stamped "disposal not approved" or "withdrawn" in column IO. | | |
| George S. Yamamura 45770 Date Centrificate of Achory REPRESENTATIVE: B. CERTIFICATE OF ACENCY REPRESENTATIVE: The records that I am autorized to act for the head of this agency in matters pertaining to the disposal of records, and that the records describe acted using a pages are proposed for disposal for the reason indicated: ("X" only one) A. Encrecords have B. The records will case to have sufficient value to the sufficient value to the display of the period to the sufficient value to thave suffi | | | | | | handt | la de | |
| Include Image: are proposed for disposal for the reason indicated: ("%" only one) A The reords have: B The reords have: M The reords and the reason indicated: ("%" only one) Figure 1 B The reords have: B The reords have: B The reords have: B The reords have: Comparison on the expiration of the response in the representation of the representation on the expiration of the response in the representation of the response in t | | | | | Date Archivist of the United States | | | |
| <pre>schedule of pages are proposed for disposal for the reason indicated: ("X" only one) A The records have a fiber of a large of the event relation of the expiration further retention. B The records will case to have sufficient value for the event specified. B The records will case to have sufficient value for the event specified. C Support of the event specified. C S</pre> | 6. CERTIFICATE | F AGENCY REPRESENTA | TIVE: | | | | | |
| A The records bare cited value to warrant further retention. B The records will case to have sufficient will of the period of time indicated or on the occur resce of the event specified. MINE (Data) (Aig Mine (Aignot Representative)) (THe) Image: Second S | I hereby certi | fy that I am authorized t | to act for the head of this agency | in matters pertaining to the | lisposal of records, and | I that the records d | escribed in this list or | |
| cient value to warrant X of the priod of time indicated or on the occur- reace of the event specified. iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii | A The rec | ords have B | The records will cease to have s | ufficient value | | | | |
| 7. ITEM NO. 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) 9. SAMPLE OR JOB NO. AC PREMIUM REFERENCE FILE (PREF) These records document the history of premium remittances or adjustments entered by the program service centers for beneficiaries under the Supplementary Medical Insurance (SMI) and premium payment hospital insurance programs. Included are Forms SSA-1545, Notice of Premium Payment Due - Second Request; Form SSA-1547, Notice of Past Due Premium Payment; Form SSA-1546, Notice of Premium Payment Due; Form SSA-1592, Premium Accounting Card; and Form SSA-1645, Notice of Past Due Premium Payment. These forms, which are microfilmed, include such information as name, beneficiary number, premium collection or adjustment and postmark date. This file dates from September 1967 to January 1971 and is no longer maintained. 1. Source Documents Destroy upon completion and verification of microfilm. 2. Microfilm | cient valu | e to warrant | of the period of time indicated of | | | | | |
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| TTEM NO.SAMPLE OR (WITH INCLUSIVE DATES OR RETENTION PERIODS)SAMPLE OR JOB NO.ACPREMIUM REFERENCE FILE (PREF)These records document the history of premium remittances or adjustments entered by the program service centers for beneficiaries under the Supplementary Medical Insurance (SM1) and premium payment hospital insurance programs. Included are Forms SSA-1545, Notice of Premium Payment Due - Quarterly Notice; Form SSA-1546, Notice of Premium Payment Due - Second Request; Form SSA-1547, Notice of Past Due Premium Payment; Form SSA-1548, Notice of Premium Payment Due; Form SSA-1592, Premium Accounting Card; and Form SSA-1645, Notice of Past Due Premium Payment. These forms, which are microfilmed, include such information as name, beneficiary number, premium collection or adjustment and postmark date. This file dates from September 1967 to January 1971 and is no longer maintained.1.Source Documents Destroy upon completion and verification of microfilm.2.Microfilm | (Date) | the face | (Signature of Agency Ro | presentative) | | (Title) | | |
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| COPY to Agency + All Teches Records Centers 7-19-76 00 | | or adjustment beneficiaries (SMI) and pre- Included are Due - Quarter Payment Due - Past Due Prem Payment Due; Form SSA-1645 forms, which name, benefic and postmark to January 19 1. <u>Source Doo</u> Destroy u 2. <u>Microfilm</u> Destroy a | s entered by the p under the Supplen mium payment hospi Forms SSA-1545, No ly Notice; Form SS Second Request; H ium Payment; Form Form SSA-1592, Pre , Notice of Past I are microfilmed, i iary number, premi date. This file of 71 and is no longe <u>cuments</u> pon completion and fter 5 years. | program service of mentary Medical I tal insurance protice of Premium SA-1546, Notice of SSA-1546, Notice of SSA-1548, Notice emium Accounting Due Premium Payme Include such info tum collection or lates from Septem er maintained. | enters for nsurance ograms. Payment f Premium tice of of Premium Card; and nt. These rmation as adjustment ber 1967 microfilm. | | | |

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REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS-Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | BILLING AND COLLECTION UPDATE MASTER (HJBACUM) FILE This microfilm/microfiche file documents the history of premium payments or adjustments entered by the program | | |
| | service centers for beneficiaries under the SMI and premium payment hospital insurance programs and is used for processing inquiries and resolving payment discrepancies. Included is such information as beneficiary name, date of birth, entitlement data, billing data (amount of last payment, type of notice, date of mailing, current amount due, etc.), and remittance-by- remittance history. Source documents include Form SSA-1545, Notice of Premium Payment Due - Quarterly Notice; Form SSA-1546, Notice of Premium Payment Due - Second Request; Form SSA-1547, Notice of Past Due Premium Payment; Form SSA-1548, Notice of Premium Payment Due; Form SSA-1592, Premium Accounting File; and Form SSA-1645, Notice of Past Due Premium Payment. | | |
| | 1. <u>Source Documents</u> | | |
| | Destroy after 120 days. | | |
| | 2. <u>Microfilm/Microfiche</u> | | |
| | Transfer to the Federal Records Center (FRC) after 3 years' retention in the program service center. Retain in the FRC 3 additional years. Destroy after a total 6 years' retention. | | |
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