REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

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

FROM (AGENCY OR ESTABLISHMENT)
Health and Human Services

MAJOR SUBDIVISION
Social Security Administration

MINOR SUBDIVISION
Office of Assessment

NAME OF PERSON WITH WHOM TO CONFER
Ernest P. Lardieri

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.

☐ A Request for immediate disposal.

☒ B Request for disposal after a specified period of time or request for permanent retention.

DATE RECEIVED
July 28, 1982

DATE
9-21-82

RECEIVED
☐ A

RECORDS RETENTION AND DISPOSAL SCHEDULE

OA Data Input Files

1. Supplemental Security Income (SSI)

Form SSA-8500, Quality (Review) Data Input, or its equivalent. The form is used to key data from SSI case reviews into an electronic data processing system updating the Quality Review Data Base. Also included are associated processing reports which consist of turnaround documents acknowledging receipt of the data, Transmission Validation Reports (TVRs) acknowledging acceptance of the data, and Edit Error Reports (EERs) indicating rejection of the data. The SSA-8500s are associated with pertinent EERs and/or TVRs and retained in the Quality Assurance (QA) case folders.

Disposition

1. Turnaround Documentation: Destroy after receipt of pertinent TVR or EER.

2. SSA-8500, TVRs and EERs: Destroy in accordance with QA case folder disposition instructions (Section II, Item A).

STANDARD FORM 115
Revised April, 1975
Prepared by General Services Administration
FPMR (41 CFR) 101-11 4

115-107
INSTRUCTIONS

Center headings should indicate what office's records are involved if all records described on the form are not those of the same office or if they are records created by another office or agency.

An identification should be provided of the types of records involved if they are other than textual records, for example, if they are photographic records, sound recordings, or cartographic records.

An identification of the type of records should be provided if the series of records that are proposed for disposal or retention contain more than one kind of record. Each series should contain the largest practical grouping of separately organized and individually retailed material that can be treated as a single unit for purposes of disposal. Component parts of a series may be listed separately if numbered consecutively with their individual number.

Entries should be provided by whom the disposal or retention is requested. A statement should be provided stating when the disposal or retention is requested.

If immediate disposal is requested of past accumulations of records, the inclusive dates during which the records were produced should be stated.

It is suggested that the disposal of a record be accompanied by a record of the disposal and that any record of disposal be placed in the appropriate office's records file or in the Permanent Records Center, or in the Federal Supply Service, General Services Administration, in the event it is determined that the record is not needed.

Entries should be checked if copies are submitted for an item. However, when a copy of the record is not required unless they are requested by the National Archives and Records Service (NARS) appraiser. If an item has been previously submitted, the relevant job and item number should be entered.

Entry 10 should be left blank.

\[Signature\]  
SSA Records Officer  
[Date]  
7/15/82

\[Signature\]  
OA Representative  
[Date]  
7/15/82
2. Disability Insurance (DI)

a. Form SSA-3094, Quality Assurance Review, or its equivalents. This form is used to gather and report data on both Title II and Title XVI DI cases selected for Pre-effectuation review, QA review and consistency review.

Disposition

(1) Original - Destroy after data entry and verification of data entry.

(2) Carbon copy

   a. Error Free Cases (Those claims where DAB agrees with Disability Determination Service's (DDS') decision): File in the DI case folder and retain in accordance with authorized retention instructions for DI case folders.

   b. Error Cases (Those claims where DAB disagrees with DDS' decision): Retain in the appropriate DAB. Destroy 6 months after final resolution of the case, i.e., 6 months after completion of all rebuttal activity and/or completion of results form SSA-4724 or SSA-4730.

b. Form SSA-4730, Pre-effectuation Results and its equivalents. This form is used to record and report results of disagreement between DAB and DDS as to the correct decision on a disability case. The original is used by central office (CO) for data entry; the copy is retained by DAB if needed by CO for verification.
Disposition

(1) **Original** - Retain for verification purposes for 6 months after data has been entered, then destroy.

(2) **Carbon copy** - Destroy when 6 months old.

c. Form SSA-4724, CDI(PER) Results, and its equivalents are used for recording and reporting data on Preeffectuation Review (PER) and Quality Assurance Review (QAR) continuing DI cases reviewed in ODO and the DAB's, respectively. The information is tabulated manually and, therefore, the original must be retained longer than the forms cited in a. and b. for verification. The original is retained in OA and the copy is retained in ODO, if a PER case, or in the DAB, if a QA case.

Disposition

(1) **Original** - Destroy 6 months after tabulation.

(2) **Copy** - Destroy when 6 months old.