Standard Form No. 115 Revised November 1951 Prescribed by General Services Administration GSA Reg. 3-IV-106

REQUEST FOR AUTHORITY OF RECORDS

	LEAVE D	LĄIII	1			
DATE RECEIVED		JOB	NO.			
DATE APPROVED	1 7	4		1	ี	5

1 · i (See Instruc	DISPOSE
Aifancs (See Instruc	tions on Rev

erse)

го:	GENERAL	SERVICES	ADMINIS'	TRATION,

NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, D.C.

1. FROM (AGENCY OR ESTABLISHMENT)

Department of Health, Education, and Welfare

2. MAJOR SUBDIVISION

Social Security Administration

3. MINOR SUBDIVISION

Bureau of Health Insurance

4. NAME OF PERSON WITH WHOM TO CONFER

Arthur J. Benner

5. TEL. EXT.

NOTIFICATION TO AGENCY

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 91-287 DISPOSAL OF ITEMS MARKED "DISPOSAL APPROVED" IS AUTHORIZED.

6. 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 described in this list or _ pages are proposed for disposal for the reason indicated: ("X" only one)

The records have ceased to have suffi-cient value to warrant further retention.

The records will cease to have sufficient value to warrant further retention on the expiration of the period of time indicated or on the occurrence of the event specified.

Russell O. Hess
(Signature of Agency Representative)

Dept. Records Mgt Officer

DISPOSAL APPROVED

(Date) 8. DESCRIPTION OF ITEM 10. SAMPLE OR JOB NO. ACTION TAKEN ITEM NO. (WITH INCLUSIVE DATES OR RETENTION PERIODS) Concurrence Cost Report Files These files consist of cost reports submitted by providers to intermediaries for the purpose of determining Medicare reimbursable costs. Each cost report contains a provider's statement of reimbursable cost. cost-finding schedules, auditor's comments, final settlement letters, and other data necessary to determine reimbursable costs, prepared in accordance with regulations and the principles of reimbursement. BHI Headquarters Audited Reports and Those Settled Without Audit Retain for 3 years after completion of audit and/or DISPOSAL APPROVED settlement process and transfer to FRC. Destroy 5 years after receipt in FRC. 20 Unaudited Reports Destroy 3 years after receipt or when they have DISPOSAL APPROVED served their purpose, whichever is earlier. Intermediaries Audited and Unaudited Reports

Four copies, including original, to be submitted to the National Archives and Records Service

Destroy 5 years after completion of audit and/or

settlement process.



Page $\frac{2}{100}$

7. ITEM NO.	8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS)	9. SAMPLE OR JOB NO.	10. ACTION TAKEN
	These reports are EDP printouts (or microfilms) showing summaries of payments to hospitals, skilled nursing facilities, home health agencies, and other providers of service. They are used to effect cost settlements between the intermediaries and the providers, for program validation purposes, and to determine accuracy of cost reports. These reports contain Part A and Part B inpatient and outpatient information, inpatient statistics, total bills, covered costs, and other related data.		
	Destroy printouts 3 years after the date issued or when they have served their purpose, whichever is earlier. Destroy microfilm upon receipt of subsequent film.		DISPOSAL APPROVE
	Destroy 5 years after completion of audit and/or settlement process of provider cost report for corresponding fiscal year.		DISPOSAL APPROVLU
	These reports are EDP printouts showing individual bill and payment information for hospitals, skilled nursing facilities, home health agencies, and other providers of service. These reports are used by intermediaries and providers to reconcile the Provider Statistical and Reimbursement Reports (see item 31) to their own records by itemizing which bills have been processed by SSA and are included in the PS&R report.		
	Destroy printouts 3 years after the date issued or when they have served their purpose, whichever is earlier.	i	DISPOSAL APPROVED

Joo No.	Page 3
	of 3 pages

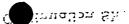
7. ITEM NO.	8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS)	9. SAMPLE OR JOB NO.	10. ACTION TAKEN
	Destroy 5 years after completion of audit and/or settlement process or provider cost report for corresponding fiscal year.		DISPOSAL APPROVED
	These files consist of listings of interim rates in use by intermediaries in making interim payments to hospitals, skilled nursing facilities, home health agencies, and other providers of services. These listings are used as a source of information and for studies.		
	BHI Headquarters Destroy after 5 years.		DISPOSAL APPROVED

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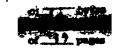
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7. EM NO.		8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS)	9. SAMPLE OR JOB NO.	ACTION TAKEN
	2.	Office Responsible for Maintaining Record Sets Close file on supersession or discontinuance of the publication hold two years. Transfer to Federal Records Center for indefinite retention.		DISPOSAL HOT APPROVED
	b ·	Office Maintaining Reference Copies Destroy when superseded or no longer needed for reference.		DISPOSAL APPROVE
	28.	Carrier Computer Printout Records These files consist of computer printouts used in processing, paying, and controlling "Part B" Medicare Claims.		
		a. Pending and process listing, payment listing, duplicate check control, master file update control, and profiles of physicians and other suppliers or services.		BISPGSAL APPROVED
		Destroy 4 years after the close of the calendaryear in which payment was made.	r	
		b. Check listing and bank reconciliation. Destroy 6 years after the close of the calendaryear in which paid or voided.	r	DISPOSAL APPROVI
		c. Query and query reply listing, transaction listing, activity listing, posting exceptions, analysis of posting errors, claims inventory control, edit input transactions, and aging of open claims.		BISPOSAL APPROV
•		Destroy 3 years: after payment or when no longer required for current operations, which-ever is longer.		
	29.	Cost Report Files These files consist of cost reports submitted by providers to intermediaries for the purpose of determining Medicare reimbursable costs. Each cost report contains a provider's statement of reimbursable cost, cost-finding schedules, auditor's comments, final		







7. ITEM NO.		8. DESCRIPTION OF ITEM - (WITH INCLUSIVE DATES OR RETENTION PERIODS)	SAMPLE OR JOB NO.	ACTION TAKEN
		See Strategies 1 Office a suite	•	
	1	settlement letters, and other data necessary to	••	
	1	determine reimbursable costs, prepared in accordance		
		with regulations and the principles of reimbursement.	• •	MICH CLASS CAPTURE TO
				DISPOSAL APPROVED
	a .	Destroy 3 years after HEW audit or 5 years after date		7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
		the report was filed, whichever is earlier.		CHEST BEEL BE.
		the report was rived, whichever is earlier.		A Proposition
	b.	SSA Official File Copies		Withheat same
'		Retain for 3 years after completion of audit and		DISPOSAL APPROVED
	1	settlement process and transfer to Federal Records		
	1	Center. Destroy 5 years after receipt in FRC.		
	l	Center. Destroy 5 years after receipt in FRC relatively		` •
	30.	Provider Certification Files and practical consistion		
	-	Documents relating to the survey and certification		·
	}	of supplers and providers of service. Included are		Eleneral annual
		official certification and transmittal forms, survey		Elengial Appanyen
		report forms, utilization review plans, provider		
		agreements, transfer agreements, plans of correction,		
		civil rights compliance forms, intermediary designa-		
		tion and tie-in notices, certification letters, and		
		various forms and correspondence used in the certi-		
		fication process with respect to individual facilities	•	
		Excluded from this definition are surveyor's notes,		
		rough copy survey report forms, and other workpapers		· strate
	ľ	which are merged into and superseded by a final		
		product. recention. (Nowey t, en one or a went reserve		के अरहेद इंडिंग
	ļ	a. State Agencies erial (deter mathems as to		~abs0:20
		a. State Agencies ity moors the out to detention		
	1			,
	}	Nonparticipating Facilities		DISPOSAL APPROVED
	1	Destroy 2 years after termination, closure, withdrawal, or denial, as applicable; except		
	1	documents pertaining to facilities for which	-	
	}	no certification was ever completed, destroy		
	ļ			Troposal Car
		leyear after last certification contact or so correspondence.		472.0754
	ļ	sic car corns. incommediaty designation,		
	1	Participating Facilities and rate designation.		2102000
		Retain a facility's current utilization review		DISPOSAL NOT APPROVED
	1	plan (hospitals and extended care facilities),		
		transfer agreements (ECF's), and floor plan		
		or physical plant layout Destroy all other		A CONTRACT OF A STREET
		material after 3 years for hospitals and home		DISPOSAL APPROVED
		A. health agencies and after 2 years for all		
	1	other facilities, but retain the material for		DISPOSAL NOT APPROVED
	j	the two most recent certification actions, in		

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7. ITEM NO.	8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS)	9. SAMPLE OR JOB NO.	ACTION TAKEN
31	Provider Statistical and Reimbursement Reports These files are EDP printouts showing summaries of payments made to hospitals, extended care facilities, home health agencies, and other providers of service. They are used to effect cost settlements between the intermediaries and the providers for program validation purposes, and to determine accuracy of cost reports and they contain Part A and Part B inpatient and outpatient information, inpatient statistics, total bills, covered costs, and other data.		
B	Intermediaries and Carriers Destroy 3 years after DHEW audit or 5 years after the date the report was filed, whichever is earlier.	,	DISPOSAL APPROVE
b.	SSA Official File Copies Destroy 5 years after the date in which issued.		DIEPUSAL APPECYED
32	Medical Facilities Directory Files These are listings of providers of service showing provider identification number and intermediary number, effective date, and city where located. Also included are alphabetical listings of facilities by State, cities within the State, and facility name within city. These lists contain mailing addresses, provider numbers, intermediary numbers, effective dates, termination codes, billing elections, radiological and laboratory services, total beds, nursing beds, and accreditation by Joint Commissioner of Accreditation of Hospital and the American Osteopathi Association.	c	
а	SSA Official File Copies Retain record set indefinitely.		DISPOSAL NOT APPROVED
t	All Other Copies Destroy when superseded, obsolete, or no longer needed for reference.		DISPOSAL APPROVE
. 33	State Agency Budget and Financial Report Files These files are used to estimate, justify, and approv State agency health insurance program costs, and to account for funds received and expended by the State agencies. Included are Forms SSA-1465, State Agency Budget; SSA-1465A, State Agency Budget List of Posi- tions; SSA-1465B, State Agency Budget Schedule for Administration; SSA-1466, State Agency Schedule for	e	