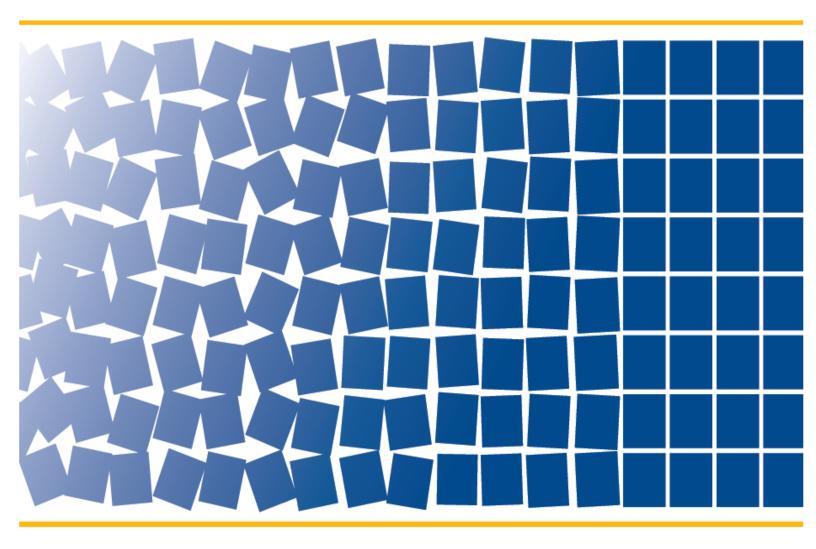
# PHARMACARE SERVICES OPERATIONAL RECORDS CLASSIFICATION SYSTEM





**GOVERNMENT RECORDS SERVICE** 

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# PHARMACARE SERVICES OPERATIONAL RECORDS CLASSIFICATION SYSTEM TABLE OF CONTENTS

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APPENDICES

Key to ARCS/ORCS Codes and Acronyms

# **ORCS REGISTER OF AMENDMENTS**

This register lists all approved changes made to the *PharmaCare Services ORCS*, in ascending order (i.e., the most recent changes appear first).

For more information about the changes listed here, see the relevant section, primary, and/or secondary; the *ORCS* may also have an appendix that provides a more detailed summary of changes.

# Original schedule approval date: 2001/03/19

Amendment Number	Amendment Type	Date Approved	Section/ Primary/ Secondary	Changes
195744	Administrative	2024-03-27	Section 1: 70315- 20; 70315-21	Modifications to secondaries to reflect new form.
195740	Administrative	2023-06-05	Entire ORCS	Entire ORCS updated to reflect change in HIBC service provider. ORCS formatted to align with ORCS 2020 standards.
ADAM 44	Administrative	2014-04-23	Section 2: 70560- 30; 70580-20; 70585-20; 70585- 30	Deleted the OPR statement referring to "Pharmaceutical Services" in 70560-30 to reflect the fact that PharmaCare Audit is the OPR; deleted three identical notes in other secondaries concerning the specifics of creating binders and wrapping records in elastic bands.
201213	Formal	2011-05-19	Section 1	This was a thorough amendment to almost all parts of the ORCS to reflect organizational changes and current standards; see Appendix C, the Summary of Changes, for a detailed list of amendments.
190052	Formal	2008-05-28	Section 2, Pharmacare Audit	New section added to cover records relating to the audit of Pharmacare-paid claims made by pharmacies. This includes records relating to the approval and planning of audit activities and priorities; confirmation of Pharmacare-paid claims by patients and doctors; the audit of

Amendment Number	Amendment Type	Date Approved	Section/ Primary/ Secondary	Changes
				pharmacies, selected randomly by geographic location or as a result of third-party tips, involving visits to the pharmacies to review documentation in support of Pharmacare-paid claims (on-site pharmacy audits); and the audit of specific issues and drugs focusing on overpayments resulting from incorrect submissions to Pharmacare by pharmacies (PharmaNet data analysis audits). Changes made to Executive Summary, Table of Contents, ISO Section, Appendices, and Index
164235	Formal	2006-03-31	Section 1, 70315 PHARMACARE BENEFICIARY REGISTRATION	New primary added to cover registration of individuals to receive Pharmacare benefits under the Fair Pharmacare Program.

# **USEFUL INFORMATION**

# Key to Information Schedule Codes and Acronyms:

Information Schedule titles:	<b>ARCS</b> = Administrative Records Classification System
	<b>ORCS</b> = Operational Records Classification System
Office information:	<b>OPR</b> = Office of Primary Responsibility
Records life cycle:	A = Active
	SA = Semi-active
	<b>FD</b> = Final Disposition
Active and semi-active period codes:	CY = Calendar Year
	FY = Fiscal Year
	<b>NA</b> = Not Applicable
	<b>SO</b> = Superseded or Obsolete
	w = week
	$\mathbf{m} = \text{month}$
	<b>y</b> = year
Final disposition categories:	DE = Destruction
	<b>FR</b> = Full Retention
	<b>SR</b> = Selective Retention
	<b>OD</b> = Other Disposition
	NA = Not Applicable
Special flags:	<b>FOI</b> = Freedom of Information/Protection of Privacy
	<b>PIB</b> = Personal Information Bank
	VR = Vital Records

The following links provide additional resources for managing your information:

- ARCS and ORCS User Guide.
- Special schedules for records that are not covered by ARCS and ORCS.
- Legislation, policies, and standards for managing records in the BC Government.
- Tips, guides, and FAQs on related topics.
- <u>Government Records Officer contact information</u>.

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# PharmaCare Services

# Operational Records Classification System (ORCS)

# Executive Summary for Amendment 6 - Administrative Amendment

# **Creating Agency**

Ministry of Health Health Sector Workforce and Beneficiary Services Division Beneficiary Services and Strategic Priorities

# Amendment Change Summary

Amendment to include a new, combined form.

# Scope

The purpose of this amendment is to reflect the amalgamation of the Medical Services Plan (MSP) Application for Enrolment, the MSP Application for Supplementary Benefits, and the Fair PharmaCare Plan Registration forms into one form, the B.C. Application for Health and Drug Coverage (AHDC).

# **Standard Appraisal Considerations**

The active and semi-active retention periods specified in the schedule meet all operational, administrative, legal, fiscal, and audit requirements. The final dispositions have been reviewed to ensure that records having enduring evidential and informational values are preserved.

# **Specific Appraisal Considerations**

For a detailed description of the changes, consult Appendix C: Summary of Changes to the *PharmaCare Services ORCS*.

# Endorsements

This schedule was developed in consultation with staff and managers who conduct the operational functions in the creating agency. It has also been reviewed by appropriate Government Records Service staff to ensure it meets scheduling and appraisal standards and reflects sound record keeping practices.

Schedule Number: 123389 Amendment Number: 195744

Schedule Developer: Elise Polkinghorne, Archivist, 2024-02-26

Approved by Director, Archives and Records Initiatives: Mario Miniaci, 2024-03-27

# END OF EXECUTIVE SUMMARY

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c.</u> <u>27</u>). For more information consult your <u>Government Records Officer</u>.

# PharmaCare Services

# Operational Records Classification System (ORCS)

# Executive Summary For Amendment 5 - Administrative Amendment

# **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

# Amendment Change Summary

Amendment to change name of service provider.

### Scope

The purpose of this amendment is to update the name of an Alternative Service Delivery (ASD) service provider and to align formatting with ORCS 2020 standards.

# Endorsements

Schedule Number: 123389 Amendment Number: 195740

Schedule Developer: Elise Polkinghorne, Archivist, 2023-06-05

Approved by Director, Archives and Records Initiatives: Mario Miniaci, 2023-06-05

END OF EXECUTIVE SUMMARY

- This is a request for approval of two amendments, described below.
  - 1. To delete a note that appears, with identical wording, in secondaries 70580-20, 70585-20, and 70585-30. The note contains paper-oriented filing instructions, and the full text is as follows:

**ADMINISTRATIVE AMENDMENT APPROVAL FORM (ARS 636)** 

DESCRIPTION

NOTE: When a [name of audit type] is started, a binder is opened and all records are filed in the binder. When the audit is complete, and any recoveries have been made, the file is removed from the binder stamped "completed" and wrapped with elastic bands.

2. To change the OPR in secondary 70560-30 from "Pharmaceutical Services" to "PharmaCare Audit" to reflect a shift in acknowledged operational responsibilities.

See attached amended pages from the approved schedule, and memos from the Records Officer authorizing these changes.

# **REVIEW AND APPROVAL SIGNATURES**

Records Management Operations (RMO) approves the schedule change as an administrative amendment.

1. Prepared by:	2013/09/17	3. Approved by	2014/19/23
Archivist, GRS	YYYY/MM/DD	Glen Isaac, Manager, GRS	YYYY/MM/DD
2. Approved by:	201 <b>9/09/23</b>	Effective date: 20 /	1
Lynne Tibbitt, Secretary Public Documents Committee	YYYY/MM/DD	(if different than approved date) YYYY/MM/ approver initials	

ARCH ORCS 12830-20 (right side)

Schedule number:

Registration number. ADAM 044

123389

Government	Records	Service



### Schedule No. 123389

# RECORDS RETENTION AND DISPOSITION AUTHORITY

Amendment No. 201213

This is a recommendation to amend the above-noted records schedule.			
Title: Pharmacare Services Operational Records Classification System – amendment 3			
Ministry of Health Services Strategic Innovation Pharmaceutical Services			
Description and Purpose:			
The purpose of this amendment is to update Section 1 of the ORCS to reflect the introduction of a new digitization initiative (MaxImage) and the addition of new functions in primaries 70313, 70317, 70322, 70480 and 70490. This amendment also includes additional secondaries, elimination of redundant secondaries, consolidation of similar secondaries and new Information System Overviews for the Drug Information System and the claims and Medical History data marts.			
For further descriptive information about these reco	ords, please refer to the	e attached schedule.	
Date range: 1972/01/01 ongoing	F	Physical format of records: see attached schedule	<u> </u>
Annual accumulation: 2.4 cubic meters			
Recommended retention and disposition:	scheduled in acco	rd with attached records schedule.	
	· · · · · · · · · · · · · · · · · · ·		
THE UNDERSIGNED ENDORSE THE RECOMMENDA	TIONS:	THE SELECT STANDING COMMITTEE ON PUBLIC ACCOUNTS APPROVES THE RECOMMENDATION OF	
14/2000	2010/08/11	THE PUBLIC DOCUMENTS COMMITTEE:	
Records officer	Date ′	2.T. Feb. 10, 2011	
Executive Director/ADM	<u>13 Oct 2010</u> Date 1	Date /	
	20042010		
Deputy Minister/Corporate Executive	Date	APPROVED BY RESOLUTION OF THE LEGISLATIVE ASSEMBLY:	
THE RUBLIC DOCUMENTS COMMITTEE CONCURS:	16 Dre 2010	$\frac{1}{1}$	
Chair, PDC	Date	Č	
OTHER STATUTORY APPROVALS:			
Signature	Date Sign	Date	
Title:	Title	κ.	

Amendment No. 201213

CONTACT: Darlene Therrien, Executive Director, Pharmacare Services. 250-952-1149

#### RECORDS MANAGEMENT APPRAISAL:

This appraisal documents the recommendation for active and semi-active retention periods.

These records are created and received under the authority of *Pharmacists, Pharmacy Operations and Drug Scheduling Act* (RSBC 1996, 2. 363) and *Continuing Care Programs Regulation* (BC Reg. 146/95) and subsequent legislation governing the operational responsibilities and functions of the creating agency.

Functional duplicates and microfilmed records are indicated in the attached schedule.

The retention and final disposition guidelines specified in the attached *Operational Records Classification System* amendment meet the creating agency's information requirements, ensure fiscal and audit control, protect government's legal rights and liabilities, and provide for effective management of the agency's operational functions. Upon expiry of the active and semi-active retention periods, the records covered by this recommendation will no longer be of any primary value to government.

Records Analyst - Bryan Bance Team Lead, ORCS Development - Sarah Shea

**ARCHIVAL APPRAISAL:** 

This appraisal documents the recommendation for final disposition.

The final disposition recommendations protect records considered to have significant evidential and historical values. The specific reasons for retaining certain records are stated within the ORCS, as well as in the Executive Summary.

Record series or groups of records which will be retained in their entirety are indicated by "Full Retention."

Record series or groups of records which will be retained in part are indicated by "Selective Retention." Selective retention means that portions of the record series will be retained by means of recognized archival selection criteria. For the meaning of selective retention with respect to a specific record series, see the attached schedule.

The definitions of both selective and full retention provide that records will be preserved in the government archives, and that unnecessary duplicates, transitory materials, and ephemera may be discarded.

L. I Nhe	2010/07/29
Archivist - Linda Nobrega	Date

The undersigned endorses the appraisal recommendations:	
The from	2010
Manager, Policy, Appraisal and Storage - Glen Isaac	Date

071

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

<u>A SA FD</u>

# PHARMACARE SERVICES

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

# EXECUTIVE SUMMARY FOR AMENDMENT 3

This Operational Records Classification System (ORCS) amendment updates the classification system and retention and disposition schedule for the operational records created by the Pharmaceutical Services Division of the Ministry of Health Services and by Health Insurance BC under the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77), and the *Continuing Care Programs Regulation* (BC Reg. 146/95), as described within Section 1 of this ORCS.

This amendment reflects the introduction of a new digitization initiative (MaxImage) involving PharmaCare registration and claims processing records and the subsequent creation of records in new media types. The amendment also reflects the Ministry's role as data steward for the Drug Information System, as well as changes to PharmaCare plans and programs' definitions and service delivery. Major changes were as follows: addition of primaries 70313 (PharmaCare Beneficiary Registration-General), 70317 (PharmaCare Beneficiary Registration-Palliative Care), 70322 (PharmaCare Benefits-Plan Definitions), 70480 (PharmaCare Strategic and Program Planning), and 70490 (PharmaNet Medication History); creation of several new secondaries to reflect new functions or media types; elimination of redundant secondaries; consolidation of similar secondaries; adjustments to final dispositions to reflect current *ORCS* standards; and the creation of new Information System Overviews for the Drug Information System and the Claims and Medical History data marts.

Other amendments to primaries and secondaries have been made throughout the ORCS to include wording changes in scope notes, primary and secondary titles and secondary notes.

The active and semi-active retention periods specified in the schedule meet all operational, administrative, legal, fiscal, and audit requirements. Records Management Operations has reviewed the final dispositions to ensure that records having enduring evidential and historical values are preserved.

(continued on next page)

SA = Semi-active FD = Final Disposition	FY = Fiscal Year NA = Not Applicable	DE = Destruction SR = Selective Retention
PIB = Personal Information Bank	w = week m = month	FR = Full Retention
PUR = Public Use Records	y = year	FOI = Freedom of Information/Privacy
OPR = Office of Primary Responsibility		VR = Vital Records

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

				<u>A</u>	<u>SA</u>	<u>FD</u>
this s dispo chan	The following summary describes the changes that affect retention periods and final dispositions. In this summary, record types are linked to the <i>ORCS</i> by primary and secondary numbers. Final disposition statements are provided only if they have changed. For a detailed description of all changes, please consult Appendix C: Summary of Changes to the <i>PharmaCare Services ORCS</i> (concordance table).					
1)	PharmaCare Program and Policy D (secondary 70480-20)	evelopment Fil	es	SO	7у	FR
	These records document all strateg activities performed by the division. of Pharmaceutical Services Division strategies.	They also doo	ument the evaluation			
	SO = when no longer required for development purposes	program plann	ing and policy			
	7y = The retention period ensures available for future planning					
	FR = The government archives w program and policy develop document the development, and evaluation of programs, address pharmaceutical issu	ment files beca planning, imple initiatives and	use they ementation			
2)	PharmaCare Annual Reports and N (secondary 70300-02)	lewsletters		SO	nil	FR
	These records document PharmaCare Services publications including <i>PharmaCare Trends</i> , PharmaCare Annual Reports, and the <i>BC PharmaCare Newsletter</i> .					
	SO = when no longer required for	reference purp	oses			
	FR = The government archives will fully retain PharmaCare annual reports and newsletters for its significant informational value. The publications document the history of the PharmaCare programs, the nature of eligibility of benefits, program initiatives and contain statistics on program and drug costs and patterns of drug usage. The <i>BC PharmaCare Newsletter</i> documents information provided to health care providers including the announcement of changes in PharmaCare policies, procedures, and benefits and the clarification of existing policies. (continued on next page)					
		Fiscal Year	DE = Destruction			
		Not Applicable eek m = month	SR = Selective Retentio FR = Full Retention			

y = year

PUR = Public Use Records

OPR = Office of Primary Responsibility

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			<u>A</u>	<u>SA</u>	<u>FD</u>
3)	<u>Pharn</u>	naCare Research and Evaluation Project Files (secondary 70450-30)	SO+1y	5y	FR
	demo the pr mana	e records document research into issues in pharmacology, graphics, economics, and related issues which may affect ovision of service. They also document the development, gement review and analysis of policies and programs to ate objectives and efficiency.			
	SO =	when project is completed or abandoned and when no longer required for operational or reference purposes			
	FR =	The government archives will fully retain PharmaCare research and evaluation project files because they document the evaluation and analysis of policy and programs on such factors as efficiency and meeting objectives. Also includes PharmaCare's participation in cross-government projects such as the National Pharmaceuticals Strategy.			
4)	<u>Pharn</u>	naCare Claims – microfilm (secondary 70350-08)	FY+6y	13y	DE
	20y =	The retention ensures records are maintained for program research and statistical purposes.			
5)	<u>Pharn</u>	naCare Claims – Palliative Care Drug Plan (Plan P) (secondary 70350-10)	FY+1y	6у	DE
		e records document microfilmed claims created primarily before troduction of data warehouses.			
	8y =	The retention ensures records are available for claims processing and payment purposes and is consistent with retention periods for financial records classified within <i>ARCS</i> section 4.			

(continued on next page)

SA = Semi-active FD = Final Disposition PIB = Personal Information Bank PUR = Public Use Records	w = week m = month	
PUR = Public Use Records	y = year	FOI = Freedom of Information/Privacy
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This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
6)	Drug Information System Data (secondary 70490-20)	CY+9y	nil	DE
	These records contain all data elements (PharmaNet tables) related to the Drug Information System (DIS), except for clinical data provided by <i>First Databank.</i> The DIS is a subsystem of PharmaNet used to maintain BC patients' drug clinical information.			
	10y = The retention period is based upon ministry practice to retain patien files for the ten-year period specified in the <i>Hospital Act Regulation</i> (B.C. Reg. 121/97, s. 14) regarding the retention of patient records by hospitals.	t		
7)	<u>PharmaCare Claims - General</u> (secondary 70350-01)	FY+1y	6у	DE
	8y = The retention period ensures the records are available for ongoing audit, operational, and reference purposes.			
8)	Monthly Deductible Payment Option (secondary 70315-28)	FY+1y	6у	DE
	These records document the registration of individuals to receive PharmaC benefits under the Fair PharmaCare program using a payment option that allows for partial payment of a deductible cost each month.	are		
	8y = The retention period ensures the records are available for ongoing a operational and reference purposes.	audit,		
9)	Narcotic "triplicate" Prescriptions (secondary 70350-04)	FY+1y	6у	DE
	These records document the BC Triplicate Prescription forms submitted by pharmacies.			
	8y = The retention ensures the records are available for claims processing and payment purposes and is consistent with retention periods for financial records classified within <i>ARCS</i> section 4.			
	(continued on next page)			

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This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

Impion	iontou u	coolding to government pelloy and procedures.				
				<u>A</u>	<u>SA</u>	<u>FD</u>
10)	<u>Pharm</u>	naCare Claims – electronic images (secondary 70350-09)		FY+1y	6у	DE
	desigr	e records document claims for reimbursement nated prescription drugs and medical supplies pnic images.				
	8y =	The retention ensures the records are availa processing and payment purposes and is co periods for financial records classified withir	onsistent with retention			
11)	<u>Pharm</u>	naCare Claims – Palliative Care Drug Plan (F (secondary 70350-10)	Plan P)	FY+1y	6у	DE
		e records document claims submitted under th Plan P).	ne Palliative Care Drug			
	8y =	The retention ensures records are available processing and payment purposes and is co periods for financial records classified within	onsistent with retention			
12)	<u>Verific</u>	ation of Income (secondary 70315-36)		FY+1y	6у	DE
	Agenc	e records document verification of income with by (CRA) as part of the registration of individu ts under the Fair PharmaCare program.		are		
	8y =	The retention period ensures the records ar ongoing audit, operational and reference put				
13)	<u>Palliat</u>	ive Care Applications (secondary 70317-20)		SO+7y	nil	DE
		records document the registration of individuna analysis individuna and the Palliative Care Dru				
	SO =	when scanned and entered into PharmaNet seven years	, plus an additional			
	7y =	The retention period ensures the records ar for ongoing operational and reference requi				
		(continued on next p	page)			
FD = F PIB = PUR =	Public l		DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform VR = Vital Records		асу	

Schedule 123389

OPR = Office of Primary Responsibility

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

					<u>A</u>	<u>SA</u>	<u>FD</u>
14)	<u>Restrie</u>	cted Beneficiary Case (secondary 70420-30			SO+7y	nil	DE
	under order t	the Restricted Claiman to apply or lift restriction	armaCare program uti nt Program. Individual ons to specified physici violation of residency e	s are monitored in ans and pharmacies			
	7y =	is received requesting to incarceration only no activity for two year	g a restriction lift, wher and the restriction is lif	ted, when there has been s deceased. The retent			
15)	<u>Formu</u>	Ilary Management Wo (secondary 70325-35			SO	7у	DE
	decisio reports	ons such as Common	e materials used to mal Drug Review and Ther king materials, corresp round materials.	apeutics Initiatives			
	SO =		Management Director o or when no longer requ	determines the informat lired for reference	ion		
	7y =	The retention period reference purposes.	ensures records will be	e available for research	and		
16)	<u>Health</u>	Net BC Client Update (secondary 70420-25			SO	7у	DE
		records document records.	quests by pharmacies f	or read-only access			
	SO =	terminated and Data	s agreement with the p Access Services notifion that this has occurred	es Health			
	7y =	The retention period research and referen	ensures the records wi ce purposes.	II be available for			
			(continued on next p	bage)			
FD = F PIB =	= Public L		FY = Fiscal Year NA = Not Applicable w = week m = month y = year	DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform		асу	

OPR = Office of Primary Responsibility

VR = Vital Records

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

impioi	nemed decording to government policy and procedures. The decision here, contact ye			
		<u>A</u>	<u>SA</u>	<u>FD</u>
17)	Drug Manufacturers Files (secondary 70325-20)	SO	7у	DE
	SO = when the drug is delisted and/or the product listing agreem is terminated	ent		
	7y = The retention period ensures records will be available for research and reference purposes.			
18)	PharmaCare Consultation Case Files (secondary 70400-20)	SO	2у	DE
	These records document the provision of expert advice on pharmacology or other aspects of the PharmaCare program to health practitioners, the public, and other government staff.			
	SO = when a response is provided, the issue is resolved or abandoned, and when no longer required for reference purposes			
	DE = The PharmaCare consultation case files may be destroyed because they document routine consultations that reflect PharmaCare policies and procedures. Any issues of a significant nature are sufficiently documented in records retained under the Executive Records Schedule (102906).			
19)	Electronic Records	SO	nil	DE
	The following new electronic databases are covered by this ORCS:	30	110	DE
	Drug Information System MaxImage System Medication History (Medhist) Data Mart PharmaCare Centralized Information System PharmaCare Claims Data Mart			
	The Information System Overview section provides information about inputs and outputs and routine back-ups. Notes under the ORCS secondaries provide information about classification and scheduling of the records. These records have no enduring value to government at the end of their scheduled retention periods.			
	(continued on next page)			

SA = Semi-active	FY = Fiscal Year	DE = Destruction
FD = Final Disposition	NA = Not Applicable	SR = Selective Retention
PIB = Personal Information Bank	w = week  m = month	FR = Full Retention
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This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
20)	All Other Records			DE
	All other records are destroyed at the end of their semi-active retention periods. The retention of these records varies depending on the nature of the records and the functions performed, but does not exceed seven years. These records have no enduring value to government at the end of			

their scheduled retention periods.

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Schedule No. 123389

Amendment No. 190052

# **RECORDS RETENTION AND DISPOSITION AUTHORITY**

This is a recommendation to amend the above-	noted records	schedule.			
Title: Pharmacare Services Operational Records Classification System, amendment 2 (addition of section 2 "Pharmacare Audit")					
Ministry of Health STRATEGIC INNOVATION Financial and Corporate Services FINANCIAL AND CARPORATE SERVICES PharmaCare Audit PHARMCLARE AUDIT					
Description and Purpose:	99 <del>9999 </del>				
The purpose of this amendment is to incorporate a new section into the <i>Pharmacare Services ORCS</i> for records relating to audit activities that ensure the proper expenditure of public funds for goods and services claimed by pharmacists under the PharmaCare program.					
For further descriptive information about these records, p	please refer to the	e attached schedule.			
Date range: 1972/01/01 ongoing	P	Physical format of records: see attached schedule			
Annual accumulation: 0.384 cubic meters					
Recommended retention and disposition: sche	duled in accor	d with attached records schedule.			
THE UNDERSIGNED ENDORSE THE RECOMMENDATIONS: $\rho = \frac{1}{2} \rho$		THE SELECT STANDING COMMITTEE ON PUBLIC ACCOUNTS APPROVES THE RECOMMENDATION OF			
Sarah Shear Oct	26,2007	THE PUBLIC DOCUMENTS COMMITTEE:			
Records Officer Date	7-12-01-7	May 27 2008			
Executive Director/ADM Date	101/2007	Date '			
Deputy Minister/Corporate Executive Date	<u>V 21, 2007</u>	APPROVED BY RESOLUTION OF THE LEGISLATIVE			
ASSISTANT DEPUTY MUNISER THE PUBLIC DOCUMENTS COMMITTEE CONCURS:		ASSEMBLY: 1724 28 2008			
Chair, PDC /6( Date	ep1 2068	Date/			
OTHER STATUTORY APPROVALS:					
Signature Date Title:	Signa Title:				

#### CONTACT: Ken Quan, A/Manager 356-2592

#### RECORDS MANAGEMENT APPRAISAL:

This appraisal documents the recommendation for active and semi-active retention periods.

There is no legislation governing the operational responsibilities of the creating agency.

Functional duplicates are indicated in the attached schedule.

The retention and final disposition guidelines specified in the *Operational Records Classification System* amendment meet the creating agency's information requirements, ensure fiscal and audit control, protect government's legal rights and liabilities, and provide for effective management of the agency's operational functions. Upon expiry of the active and semi-active retention periods, the records covered by this recommendation will no longer be of any primary value to government.

Min 2007-10-25 Records Analyst Date

#### **ARCHIVAL APPRAISAL:**

This appraisal documents the recommendation for final disposition.

The final disposition recommendations protect records considered to have significant evidential and historical values. The specific reasons for retaining certain records are stated within the *ORCS*, as well as in the Executive Summary.

Record series or groups of records which will be retained in their entirety are indicated by "Full Retention."

The definition of full retention provides that records will be preserved in the government archives, and that unnecessary duplicates, transitory materials, and ephemera may be discarded.

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Director, Corporate Information Management Branch

The undersigned endorses the appraisal recommendations

2007-10-25 Date

2007-10-25

Date

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

<u>A SA FD</u>

# PHARMACARE SERVICES

### Operational Records Classification System

### EXECUTIVE SUMMARY

This Operational Records Classification System (ORCS) establishes a classification system and retention and disposition schedule for the operational records created by the Pharmaceutical Services division of the Ministry of Health Services and by Health Insurance BC under the *Pharmacists, Pharmacy Operations and Drug Scheduling Act* (RSBC 1996, c. 363), and the *Continuing Care Programs Regulation* (BC Reg. 146/95) and the operational records created by the Pharmacare Audit section, Financial and Corporate Services, of the Ministry of Health Services. There is no governing legislation for Pharmacare Audit.

These records document the establishment of benefit and reimbursement policies; negotiation of pharmacy participation agreements; utilization monitoring; and verification and processing of claims covering most prescription drugs and designated medical supplies, essential ostomy supplies, designated prosthetic appliances, orthotic bracing for children, and oxygen for in-home use; approval and planning of audit activities and priorities; confirmation of Pharmacare-paid claims by patients and doctors; the audit of pharmacies, selected randomly by geographic location or as a result of third party tips, involving visits to the pharmacies to review documentation in support of Pharmacare-paid claims (on-site pharmacy audits); and the audit of specific issues and drugs focusing on overpayments resulting from incorrect submissions to Pharmacare by pharmacies (PharmaNet data analysis audits).

The active and semi-active retention periods specified in the schedule meet all operational, administrative, legal, fiscal, and audit requirements. Corporate Information Management Branch has reviewed the final dispositions to ensure that records having enduring evidential and historical values are preserved.

(Continued on next page)

<ul> <li>A = Active</li> <li>SA = Semi-active</li> <li>FD = Final Disposition</li> <li>PIB = Personal Information Bank</li> <li>PUR = Public Use Records</li> <li>OPR = Office of Primary Responsibility</li> </ul>		CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obs DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform VR = Vital Records	
2001/03/19	last revised: 2008/05/28	Schedule 123389	ORCS/PHARM	EXEC SUMMARY - 3

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

# <u>A</u><u>SA</u><u>FD</u>

This *ORCS* covers records created and received since 1972 when the Department of Health became a third-party payer for drugs and the prescription drug program was created for low-income British Columbians. Prior to 1972 there was no program in the government to assist with payment of prescription drugs. However, a Pharmaceutical Consultant, with the assistance of a committee of experts from the B.C. Medical Association, the Pharmaceutical Association, and the University of British Columbia Faculties of Medicine and Pharmaceutical Sciences, advised the Ministry on matters related to drug pricing, product selection, labelling, advertising, generic equivalents, and pharmacists' dispensing fees. Previous records relating to the functions documented in this *ORCS* have been appraised and scheduled under one-time records schedule(s) or under ongoing records schedule(s), and transferred to the government archives or destroyed as appropriate.

The summary which follows describes the basic types of records and identifies their retention periods and final dispositions. In this summary, record types are linked to the *ORCS* by primary and secondary numbers. Please consult the *ORCS* manual for further information.

1)	1) <u>Policy and Procedures</u> (secondary -00 throughout <i>ORCS</i> )				5у	FR	
	Throughout this ORCS, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value. Draft and duplicate materials which hold insufficient value to merit preservation may be purged and discarded.						
2)	Pharmacare Plans and Prog (secondaries 70320-0			SO	2у	FR	
	These records document the definition of Pharmacare plans, including eligibility rules and the extent of coverage provided by the plans, and cost-saving incentive programs.						
	These records document the history of Pharmacare programs, as well as current Pharmacare plans, programs and initiatives. They also document longitudinal changes in program spending and drug costs, current patterns of drug usage, and inter-provincial prescription drug program comparisons across Canada.						
	(Continued on next page)						
<ul> <li>A = Active</li> <li>SA = Semi-active</li> <li>FD = Final Disposition</li> <li>PIB = Personal Information Bank</li> <li>PUR = Public Use Records</li> <li>OPR = Office of Primary Responsibility</li> </ul>		CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obs DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform VR = Vital Records	l	асу		
2001/03	3/19 last revised: 2008/05/28	Schedule 123389	ORCS/PHARM	EXEC SL	JMMARY -	4	

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
3)	Annual Reports (Pharmacare Trends) (secondary 70300-02)	SO	nil	FR
	The government archives will fully retain one copy of each publication of Pharmacare Trends for its significant informational value.			
4)	Pharmacare Issues and Consultation Case Files (secondary 70400-20)	SO	6у	SR
	These records document the provision of expert advice on pharmacology or other aspects of the Pharmacare program to health practitioners, the public, and other government staff.			
	The government archives will selectively retain issues and consultation case files by retaining files that document significant issues and advice given on significant issues.			
5)	Pharmacare Research and Evaluation Project Files (secondary 70450-30)	SO+1y	5у	SR
	These records document research into issues in pharmacology, demographics, economics, and related issues which may affect the provision of service. They also document the development, management review and analysis of policies and programs to evaluate objectives and efficiency,			
	The government archives will selectively retain research and evaluation files by retaining files that document significant research and evaluation projects.			

(Continued on next page)

<ul> <li>A = Active</li> <li>SA = Semi-active</li> <li>FD = Final Disposition</li> <li>PIB = Personal Information Bank</li> <li>PUR = Public Use Records</li> <li>OPR = Office of Primary Responsibility</li> </ul>	CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obs DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform VR = Vital Records	ı
2001/03/19 last revised: 2008/05/28	Schedule 123389	ORCS/PHARM	EXEC SUMMARY - 5

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

				<u>A</u>	<u>SA</u>	<u>FD</u>
6)	<u>Pharmacare Claims</u> (secondaries 70350-0	02 and 70350-03)		FY+6y	13y	DE
	These records document Pha individuals under Plan E, or o and F by pharmacies and sup Pharmanet system.	claims submitted unde	r plans A, B, C			
	They will be retained for twer creation or receipt, and then period ensures that these mid program research and statist	destroyed. The twent crofilm records are ma	y year retention			
7)	<u>Annual audit plans</u> (secondary 70560-02)	)		CY+4y	5y	DE
	These records are submitted for review and approval. The Pharmacare Audit during the	ey document the plan f				
	The ten-year retention period long-term planning purposes		ords are available for			
8)	Audit recoveries ("ADM binde (secondary 70555-02) (secondary 70555-03)	)	<u>reports</u>	FY+2y FY	5y 7y	DE DE
	These records document rec year.	overies made by Phar	macare Audit in a fiscal			
	The eight year retention periods seven years retention periods					
9)	Confirmation letter statistical (secondaries 70570-0		<u>monthly</u>	CY+2y	5y	DE
	These records consist of de- Pharmacare-paid claims cont		•			
	The eight-year retention perior reference purposes.	od ensures that the red	cords are available for			
	(Continu	ied on next page)				
A = ActiveCY = Calendar YearSO = Superseded or ObsoleteSA = Semi-activeFY = Fiscal YearDE = DestructionFD = Final DispositionNA = Not ApplicableSR = Selective RetentionPIB = Personal Information Bankw = week m = monthFR = Full RetentionPUR = Public Use Recordsy = yearFOI = Freedom of Information/PrivacyOPR = Office of Primary ResponsibilityVR = Vital Records						

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

				<u>A</u>	<u>SA</u>	<u>FD</u>
10)	On-site pharmacy audit recon (secondary 70580-02) (secondary 70580-20) (secondary 70580-25)	)	<u>onic</u>	CY+7y SO SO+8y	8y	DE DE DE
	These records document the claims to Pharmacare. Thes pharmacies' records. The se either made randomly by geo ("tips") provided to Pharmaca	e audits involve an on election of pharmacies ographic location or as	-site examination of the for on-site audit is			
	The eight-year retention perion years <i>ARCS</i> retention period					
11)	PharmaNet data analysis aud (secondary 70585-02 (secondaries 70585-2 (secondaries 70585-2	) 20 and 70585-30)	d electronic	CY+7y SO SO+8y	nil 8y nil	DE DE DE
	These records document the the review and analysis of Pt drug. These audits focus on incorrect submissions to Pha completed, they are usually f audits which continue to aud drug or issue.	narmaNet data relating identifying overpayme rmacare by pharmacie ollowed by quarterly fo	to a specific issue or ents resulting from es. Once audits are blow-up data analysis			
	The eight-year retention perion period perion period period period period period perion period perio		ne ARCS retention			
12)	<u>Pharmacy files ("tips files")</u> (secondary 70555-20	)		SO+1y	6у	DE
	These records consist of tips pharmacies' billing practices, from patients identifying anor	correspondence with	pharmacies and letters			
	These files are retained for s agreement has been termina records are available for refe	ted. This retention pe				
	(Continu	ued on next page)				
SA = S FD = F PIB = PUR =	Active Semi-active Final Disposition Personal Information Bank Public Use Records Office of Primary Responsibility	CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obs DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Inform VR = Vital Records		асу	
2001/0	3/19 last revised: 2008/05/28	Schedule 123389	ORCS/PHARM	EXEC SU	JMMARY -	7

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by the Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
13)	Pharmacare Audit committee records (secondaries 70560-20 and 70560-30)	SO	7у	DE
	These records document the approval of audit activities and the planning and development of audit policies, priorities and activities by the Pharmacare Audit Review Committee (PARC) and the Pharmacare Audit Working Group (PAWG).			
	The records are retained for seven years after they are no longer required for operational or reference purposes. This retention period is consistent with the <i>ARCS</i> 202-20 retention for ministry committee files.			
14)	Electronic Records	SO	nil	DE
	The following electronic databases are covered by this ORCS:	30	1111	DE
	The Confirmation Letter System Home Oxygen Subsidy Program System Pharmacare Centralized Information System Pharmacare Registration Database			
	The Information System Overview section provides information about inputs and outputs and routine back-ups. Notes under the ORCS secondaries provide information about classification and scheduling of the records. These records have no enduring value to government at the end of their scheduled retention periods.			
15)	All Other Records			DE
	All other records are destroyed at the end of their semi-active retention periods. The retention of these records varies depending on the nature of the records and the functions performed, but does not exceed seven years. These records have no enduring value to government at the end of their scheduled retention periods.			

A = Active CY = Calendar Year SO = Superseded or Obsolete DE = Destruction SA = Semi-active FY = Fiscal Year FD = Final Disposition NA = Not Applicable SR = Selective Retention PIB = Personal Information Bank  $w = week \quad m = month$ FR = Full Retention PUR = Public Use Records FOI = Freedom of Information/Privacy y = year OPR = Office of Primary Responsibility VR = Vital Records 2001/03/19 last revised: 2008/05/28 Schedule 123389 **ORCS/PHARM EXEC SUMMARY - 8** 



13

Schedule No.

123389

# **RECORDS RETENTION AND DISPOSITION AUTHORITY**

Amendment No.

164235

This is a recommendation to amend the above-noted records schedule.					
Title: Pharmacare Services					
Ministry of Health Services Pharmacare					
Description and Purpose:					
PharmaCare program, which reimburses beneficiaries for Pharm Registratration includes application under the income based ben	The purpose of this amendment is to include records related to the registration of individuals to receive benefits under the Fair PharmaCare program, which reimburses beneficiaries for PharmaCare benefits based upon the beneficiary's income. Registratration includes application under the income based benefits program and consent for PharmaCare to receive personal income tax information from the federal government, verification of income with the Canada Customs and Revenue Agency, and the determination of eligibility and deductible level.				
For further descriptive information about these records, please re	efer to the attached schedule.				
	<i>,</i>				
Date range: 2003 ongoing	Physical format of records: see attached schedule				
Annual accumulation: n/a cubic meters					
Recommended retention and disposition: scheduled i	in accord with attached records schedule.				
THE UNDERSIGNED ENDORSE THE RECOMMENDATIONS:	THE SELECT STANDING COMMITTEE ON PUBLIC ACCOUNTS APPROVES THE RECOMMENDATION OF				
mm 2003/03/	THE PUBLIC DOCUMENTS COMMITTEE:				
Becords Officer Date	N.O. Feb & 2008				
Executive Director/ADM	Date Date				
JRM 2003/03/1	3				
Deputý Minister/Corporate Executive Date	APPROVED BY RESOLUTION OF THE LEGISLATIVE				
THE BUBLIC DOCUMENTS COMMITTEE CONCURS:	H-d. Marel 2000				
Chair, PDC Date					
OTHER STATUTORY APPROVALS:					
Signature Date	Signature Date				
Title:	Title:				

123389

Amendment No. 164235

**CONTACT:** Nerys Hughes, Senior Manager, Pharmacare Operations, 952-3125

#### **RECORDS MANAGEMENT APPRAISAL:**

This appraisal documents the recommendation for active and semi-active retention periods.

These records are created and received under the authority of Pharmacists, Pharmacy Operators and Drug Scheduling Act (RSBC 1996, c. 363), and the Continuing Care Programs Regulations (BC Reg. 146/95) and subsequent legislation governing the operational responsibilities and functions of the creating agency.

Functional duplicates and microfilmed records are indicated in the attached schedule.

The retention and final disposition guidelines specified in the attached Administrative Records Classification System OR Operational Records Classification System OR ongoing records schedule amendment meet the creating agency's information requirements, ensure fiscal and audit control, protect government's legal rights and liabilities, and provide for effective management of the agency's operational functions. Upon expiry of the active and semi-active retention periods, the records covered by this recommendation will no longer be of any primary value to government.

Stewar **Records Analyst** 

2003

#### **ARCHIVAL APPRAISAL:**

This appraisal documents the recommendation for final disposition.

The final disposition recommendations protect records considered to have significant evidential and historical values. The specific reasons for retaining certain records are stated within the ORCS, as well as in the Executive Summary.

Record series or groups of records which will be retained in their entirety are indicated by "Full Retention."

Record series or groups of records which will be retained in part are indicated by "Selective Retention." Selective retention means that portions of the record series will be retained by means of recognized archival selection criteria. For the meaning of selective retention with respect to a specific record series, see the attached schedule.

The definitions of both selective and full retention provide that records will be preserved in the government archives, and that unnecessary duplicates, transitory materials, and ephemera may be discarded.

In Stevar

The undersigned endorses the appraisal-recommendations: 5 2003 adad Director, Corporate Records Management Branch



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# Schedule No. $12^3389$

RECORDS RETENTION AND DISPO	SITION AUT	See ORCS "Introduction"           HORITY         Accession No.         part 2.6.1 (c)				
This is a recommendation to authorize an	operational rec	ords classification and scheduling system.				
Title: Pharmacare Services Operational Records	Classification Sy	stem				
Ministry of Health and Ministry Responsible for Se Pharmacare Division	niors					
Description and Purpose:						
and maintained by Pharmacare Division. These records document the establishment of ben agreements; utilization monitoring; and verification medical supplies, essential ostomy supplies, design house use.	The <i>Pharmacare Services Operational Records Classification System</i> (ORCS) covers all operational records created, received, and maintained by Pharmacare Division. These records document the establishment of benefit and reimbursement policies; negotiation of pharmacy participation agreements; utilization monitoring; and verification and processing of claims covering most prescription drugs and designated medical supplies, essential ostomy supplies, designated prosthetic appliances, orthotic bracing for children, and oxygen for in-					
Date range: 1972/01/01 ongoing		Physical format of records: see attached schedule				
Annual accumulation: 2.4 cubic meters		, , , , , , , , , , , , , , , , , , , ,				
Recommended retention and disposition:	scheduled in a	ccord with attached ORCS				
THE UNDERSIGNED ENDORSE THE RECOMMENDA	TIONS:	THE SELECT STANDING COMMITTEE ON PUBLIC				
My mik	Feb. 8, 200	ACCOUNTS APPROVES THE RECOMMENDATION OF THE PUBLIC DOCUMENTS COMMITTEE:				
Records Officer	Date	Date				
Executive Director/ADM	Date					
Deputy Minister/Corporate Executive	Date	APPROVED BY RESOLUTION OF THE LEGISLATIVE				
THE PUBLIC DOCUMENTS COMMITTEE CONCURS:		ASSEMBLY: 2001-03-19				
Chair PDC	Z000-03-23	Date				
	Date					
OTHER STATUTORY APPROVALS:						
Signature Title:	Date	Signature Date Title:				
		nue,				

#### CONTACT: Nerys Hughes, Senior Manager, Pharmacare Operations 952-3125

#### RECORDS MANAGEMENT APPRAISAL:

This appraisal documents the recommendation for active and semi-active retention periods.

These records are created and received under the authority of *Pharmacists, Pharmacy Operators and Drugs Scheduling Act* (RSBC 1996, c. 363), and *The Continuing Care Programs Regulation (B.C. Reg. 146/95)*, and subsequent legislation governing the operational responsibilities and functions of the creating agency.

Functional duplicates and microfilmed records are indicated under appropriate classification headings.

The retention and final disposition guidelines specified in the attached *Operational Records Classification System* meet the creating agency's information requirements, ensure fiscal and audit control, protect government's legal rights and liabilities, and provide for effective management of the agency's operational functions. Upon expiry of the active and semi-active retention periods, the records covered by this recommendation will no longer be of any primary value to government.

The retention and final disposition guidelines have been established in consultation with the Records Officer and staff and managers of all branches conducting operational functions in the creating agency.

PRIMARY 10350 SUPERCEDES ONBOING RECORDS SCHEDULE 880228 3/11521 2001-03-30 **Records Analyst** 

#### ARCHIVAL APPRAISAL:

This appraisal documents the recommendation for final disposition.

The final disposition recommendations protect records considered to have significant evidential and historical values. The specific reasons for retaining certain records are stated within the *ORCS*, as well as in the Executive Summary.

Record series or groups of records which will be retained in their entirety are indicated by "Full Retention."

Record series or groups of records which will be retained in part are indicated by "Selective Retention." Selective retention means that portions of the record series will be retained by means of recognized archival selection criteria. For the meaning of selective retention with respect to a specific record series, see the attached schedule.

The definitions of both selective and full retention provide that records will be preserved in the government archives, and that unnecessary duplicates, transitory materials, and ephemera may be discarded.

In Stewar 216. 7. 2000

The undersigned endorses the appraisal recommendations:

This Non

Director, Information and Data Management Branch

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

<u>SA</u><u>FD</u>

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### PHARMACARE SERVICES

**Operational Records Classification System** 

# EXECUTIVE SUMMARY

This Operational Records Classification System (ORCS) establishes a classification system and retention and disposition schedule for the operational records created by the Pharmacare Division of the Ministry of Health and Ministry Responsible for Seniors under the *Pharmacists, Pharmacy Operations and Drug Scheduling Act* (RSBC 1996, c. 363), and the *Continuing Care Programs Regulation* (BC Reg. 146/95).

These records document the establishment of benefit and reimbursement policies; registration of individuals to receive Pharmacare benefits under the Fair PharmaCare program; negotiation of pharmacy participation agreements; utilization monitoring; and verification and processing of claims covering most prescription drugs and designated medical supplies, essential ostomy supplies, designated prosthetic appliances, orthotic bracing for children, and oxygen for in-home use. Monitoring and auditing of drug usage, and prescription practices for individuals and pharmacies, under the Pharmacare program is not carried out by the Pharmacare Division. It is performed by the Pharmacare Audit Section of the Ministry of Health's Financial Policy and Monitoring Services Branch.

The active and semi-active retention periods specified in the schedule meet all operational, administrative, legal, fiscal, and audit requirements. The BC Archives has reviewed the final dispositions to ensure that records having enduring evidential and historical values are preserved.

(Continued on next page)

PUR = Public		CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obs DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Informa VR = Vital Records	
2001/03/19	last revised: 2006/06/28	Schedule 123389	ORCS/PHARM	EXEC SUMMARY - 3

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

<u>A</u> <u>SA</u> <u>FD</u> This ORCS covers records created and received since 1972 when the Department of Health became a third-party payer for drugs and the prescription drug program was created for low-income British Columbians. Prior to 1972 there was no program in the government to assist with payment of prescription drugs. However, a Pharmaceutical Consultant, with the assistance of a committee of experts from the B.C. Medical Association, the Pharmaceutical Association, and the University of British Columbia Faculties of Medicine and Pharmaceutical Sciences, advised the Ministry on matters related to drug pricing, product selection, labelling, advertising, generic equivalents, and pharmacists' dispensing fees. Previous records relating to the functions documented in this ORCS have been appraised and scheduled under one-time records schedule(s) or under ongoing records schedule(s), and transferred to the government archives or destroyed as appropriate.

The Office of Primary Responsibility (OPR) for most primaries is the Pharmacare Division. The OPR for Home Oxygen Subsidy is the Home Oxygen Program. The OPR for Pharmacare Claims - General is the Plan Operations section of the Pharmacare Division.

The summary which follows describes the basic types of records and identifies their retention periods and final dispositions. In this summary, record types are linked to the *ORCS* by primary and secondary numbers. Please consult the *ORCS* manual for further information.

1)	Policy and Procedures (secondary -00 throughout ORCS)	SO	5y	FR
	Throughout this <i>ORCS</i> , the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value. Draft and duplicate materials which hold insufficient value to merit preservation may be purged and discarded.			
2)	Pharmacare Plans and Programs (secondaries 70320-02 to 70320-06)	SO	2у	FR
	These records document the definition of Pharmacare plans, including eligibility rules and the extent of coverage provided by			

(Continued on next page)

SA = Semi-active $FY = Fiscal Year$ $DE = DeriveSR = Sel$ $FD = Final Disposition$ $NA = Not Applicable$ $SR = Sel$ $PIB = Personal Information Bank$ $w = week m = month$ $FR = FullerPUR = Public Use Recordsy = yearFOI = Free$	lective Retention
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ORCS/PHARM

EXEC SUMMARY - 4

the plans, and cost-saving incentive programs.

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
	These records document the history of Pharmacare programs, as well as current Pharmacare plans, programs and initiatives. They also document longitudinal changes in program spending and drug costs, current patterns of drug usage, and inter-provincial prescription drug program comparisons across Canada.			
3)	Annual Reports (Pharmacare Trends) (secondary 70300-02)	SO	nil	FR
	The government archives will fully retain one copy of each publication of Pharmacare Trends for its significant informational value.			
4)	Pharmacare Issues and Consultation Case Files (secondary 70400-20)	SO	6у	SR
	These records document the provision of expert advice on pharmacology or other aspects of the Pharmacare program to health practitioners, the public, and other government staff.			
	The government archives will selectively retain issues and consultation case files by retaining files that document significant issues and advice given on significant issues.			
5)	Pharmacare Research and Evaluation Project Files (secondary 70450-30)	SO+1y	5у	SR
	These records document research into issues in pharmacology, demographics, economics, and related issues which may affect the provision of service. They also document the development, management review and analysis of policies and programs to evaluate objectives and efficiency,			
	The government archives will selectively retain research and evaluation files by retaining files that document significant research and evaluation projects.			
	(Continued on next page)			

A = Active SA = Semi-active FD = Final Disposition PIB = Personal Information Bank PUR = Public Use Records OPR = Office of Primary Responsibility	CY = Calendar Year FY = Fiscal Year NA = Not Applicable w = week m = month y = year	SO = Superseded or Obsolete DE = Destruction SR = Selective Retention FR = Full Retention FOI = Freedom of Information/Privacy VR = Vital Records

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

				A	<u>SA</u>	FD
6)	Income Based Benefits Appl (secondary 70315-20		- microfilm	SO	85y	DE
	These records document app program and consent for Pha from the federal government	armacare to receive pe				
	Application and consent form to allow for CCRA audit.	ns are required for the	life of a beneficiar	У		
7)	<u>Pharmacare Claims</u> (secondaries 70350-0	02 and 70350-03)		FY+6y	13y	DE
	These records document Pha individuals under Plan E, or o and F by pharmacies and su Pharmanet system.	claims submitted unde	r plans A, B, C			
	They will be retained for twer creation or receipt, and then period ensures that these mi program research and statist	destroyed. The twent crofilm records are ma	y year retention			
8)	Electronic Records (secondaries 70310-3	30 and 70350-20)		SO	nil	DE
	The following electronic data	bases are covered by	this ORCS:			
	The Home Oxygen Subsidy staff in administering subsidi for at-home use, including th and the processing of invoice	es to BC residents req e registration of clients	uiring oxygen			
	The Pharmacy Centralized Ir staff with the administration of to determine the amount that for a prescription or service, to receive Pharmacare bener authorities and restrictions of claims for contract services, adjustment payments to pha- utilization monitoring of pharm	of the Pharmacare pro t Pharmacare will pay based on the eligibility fits, and taking into acc n eligibility. PCIS also enables issuance of cl rmacies and individual	gram by helping against a claim of the claimant count special processes aim or s, and allows for individuals.			
A = ActiveCY = Calendar YearSO = Superseded or ObsoleteSA = Semi-activeFY = Fiscal YearDE = Destruction						
FD = F	Final Disposition Personal Information Bank	NA = Not Applicable w = week m = month	SR = Selective Re			
PUR =	Public Use Records Office of Primary Responsibility	y = year	FOI = Freedom of VR = Vital Record	Information/Priva	эсу	
2001/03	3/19 last revised: 2006/06/28	Schedule 123389	ORCS/PHARM	EXEC SUMMARY	′ - 6	

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to standards approved by Corporate Information Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

<u>A SA FD</u>

DE

The Information System Overview section provides information about inputs and outputs and routine back-ups. Notes under the ORCS secondaries listed above provide information about classification and scheduling of the records. These records have no enduring values to government at the end of their scheduled retention periods as the information they contain is documented elsewhere.

### 9) All Other Records

All other records are destroyed at the end of their semi-active retention periods. The retention of these records varies depending on the nature of the records and the functions performed, but does not exceed seven years. These records have no enduring value to government at the end of their scheduled retention periods.

CY = Calendar Year A = ActiveSO = Superseded or Obsolete DE = DestructionSA = Semi-active FY = Fiscal Year FD = Final Disposition NA = Not Applicable SR = Selective Retention PIB = Personal Information Bank w = week m = month FR = Full Retention FOI = Freedom of Information/Privacy PUR = Public Use Records y = yearOPR = Office of Primary Responsibility VR = Vital Records

2001/03/19

ORCS/PHARM

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# SECTION 1

# PHARMACARE SERVICES

# PRIMARY NUMBERS

# 70300 - 70499

Section 1 covers records relating to the administration of reimbursement plans and subsidy programs established to assist British Columbia residents in the purchase of designated prescription drugs and medical supplies, pursuant to the *Continuing Care Programs Regulation* (BC Reg. 146/95), and in accordance with the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77). This includes records relating to the establishment of benefit and reimbursement policies; registration of individuals to receive PharmaCare benefits under the Fair PharmaCare program and the Palliative Care Drug program; negotiation of pharmacy participation agreements; utilization monitoring; and verification and processing of claims covering most prescription drugs and designated medical supplies (syringes, needles, infusion sets/kits, blood glucose monitoring strips for insulin-dependent diabetics), essential ostomy supplies, designated prosthetic appliances, and orthotic bracing for children; the initiation, planning and implementation of programs, policies, and strategies; research into pharmacology, demographics, and economic issues; the provision of subject matter expertise and consultative advice to health practitioners, the public, and other government staff; the medication history of PharmaCare beneficiaries; and the development of PharmaCare communication tools such as websites, newsletters, and annual reports.

NOTE: Effective April 1, 2005, the operations of PharmaCare are being delivered by a service provider under the name Health Insurance BC (HIBC). The ministry continues to have ownership and control of all information, set all policy and be accountable for all services to protect British Columbians' personal privacy, while HIBC administers the program on behalf of the division.

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PHAR ORCS

# 70300 PHARMACARE SERVICES - GENERAL

Records not shown elsewhere in the PharmaCare services section which relate generally to the provision of assistance in the purchase of prescription drugs, medical supplies, assistive devices, and oxygen for in-home use. Includes correspondence, reports and memoranda.

NOTE: Only records that cannot be classified in a more specific primary or secondary may be classified under this primary.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70300	PHA	RMACARE SERVICES - GENERAL	Α	SA	FD
	All n	on-OPR offices will retain these records for:	SO	nil	DE
	-00	<b>Policy and Procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)	SO	5у	FR
		RETENTION STATEMENT Transfer to the government archives five years after policy is replaced or becomes irrelevant.			
		SO: when policy is replaced or becomes irrelevant			
		FR: Throughout this section, the government archives wil fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value			
	-01	General	CY+1y	2у	DE
		RETENTION STATEMENT			
		Destroy at the end of the fourth calendar year.			
		NOTE: Throughout this section, this secondary covers miscellaneous records that relate to the primary but do not document decisions and actions, and do not relate to topics that warrant specific classifications.			
	-02	<b>PharmaCare annual reports and newsletters</b> (includes <i>PharmaCare Trends</i> , PharmaCare Annual Performance Reports, and <i>BC PharmaCare Newsletter</i> )	SO	nil	FF

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70300	PHA	RMACA	RE SERVICES - GENERAL	Α	SA	FC
		Transfe	TION STATEMENT or to the government archives when no longer required rence purposes.			
		SO:	when no longer required for reference purposes			
		FR:	The government archives will fully retain PharmaCare annual reports and newsletters for its significant informational value. The publications document the history of the PharmaCare programs, the nature of eligibility of benefits, program initiatives and contain statistics on program and drug costs and patterns of drug usage. The <i>BC PharmaCare</i> <i>Newsletter</i> documents information provided to health care providers including the announcement of changes in PharmaCare policies, procedures, and benefits and the clarification of existing policies.			
	-03	Pharma	aCare web pages	SO	nil	D
			TION STATEMENT when the web pages are altered, updated, redesigned ed. when the web pages are altered, updated,			
			redesigned or closed			
		DE:	As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified elsewhere.			
		NOTE:	All documents presented on these web pages are classified under appropriate secondaries within this <i>ORCS</i> or in the Administrative Records Classification System ( <i>ARCS</i> ). Because this is a simple system, an information system overview has not been developed.			

(cont'd)

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70300	PHA	RMACAF	RE SERVICES - GENERAL	Α	SA	FD
		NOTE:	This public website was designed as a vehicle to provide information about PharmaCare and its associated plans and programs, benefits and registration, as well as publicly released reports and statistical information. It also includes links to various newsletters, bulletins and annual performance reports.			
		NOTE:	The PharmaCare website can be accessed at https://www2.gov.bc.ca/gov/content/health/health- drug-coverage/pharmacare-for-bc-residents as well as through the Ministry of Health internet website.			
	-20	(include collecte	aceutical reference materials as articles, papers, reports, and other materials d from external sources) e by subject)	SO	nil	DE
		Destroy	TION STATEMENT when the information is obsolete or no longer required rational or reference purposes.			
		SO:	when the information is obsolete or no longer required for operational or reference purposes			
		NOTE:	This secondary covers resource material used for reference and research purposes and does not cover records created by Pharmaceutical, Laboratory and Blood Services Division.			
		NOTE:	Reference material obtained for research purposes to support and validate corporate decisions should be filed under the pertinent secondary.			

END OF PRIMARY

# 70310 HOME OXYGEN SUBSIDY

Records relating to the administration of the home oxygen program, including registration of clients and suppliers, monitoring of usage, and payment of subsidies pursuant to the <u>Continuing Care Programs Regulation (BC Reg.</u> <u>146/95</u>). Includes correspondence with clients, physicians, suppliers, heath units and other public bodies; registration of oxygen suppliers; client application forms [HLTH 337]; physician followup reports [HLTH 339]; nursing assessments [HLTH 329]; supplier assessment reports; supplier invoices; and electronic database files.

NOTE: The Home Oxygen Subsidy Program was transferred to the Regional Health Authorities on May 1, 2002. This primary does not apply to records created after this date.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70310	HON	IE OXYG	EN SUBSIDY	Α	SA	FD
	All n	on-OPR (	offices will retain these records for:	SO	nil	DE
	-00	(covers	and procedures final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)	SO	5у	FR
		Transfe	TION STATEMENT er to the government archives five years after policy is ed or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value			
	-01	Genera	al	CY+1y	2у	DE
			TION STATEMENT y at the end of the fourth calendar year.			

For information on the Home Oxygen Subsidy Program System (HOSP), see the Information System Overview.

70310	HON	IE OXYGEN SUBSIDY	Α	SA	FD
	-02	HOSP System statistical output reports	SO	nil	DE
		RETENTION STATEMENT Destroy when the information is obsolete or no longer required for operational or reference purposes.	ť		
	-03	Home oxygen suppliers	CY+1y	2у	DE
		RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
	-04	Home oxygen supplier invoices (arrange chronologically by date)	FY	7у	DE
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
		8y: The retention period is consistent with retention periods for similar financial records classified within <i>ARCS</i> section 4.			
PIB	-20	Home oxygen client files (arrange by client name) (paper and electronic records) (supersedes and merges with former secondary -30 Home Oxygen Subsidy Program (HOSP) System)	SO	6у	DE
		RETENTION STATEMENT Destroy six years after the client ceases to receive subsidized treatment.			
		SO: when the client ceases to receive subsidized treatment			
		NOTE: This secondary covers physical files as well as electronic records stored in the Home Oxygen Subsidy Program System.			
PIB	-30	(superseded by Home oxygen client files)			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

END OF PRIMARY

# 70313 PHARMACARE BENEFICIARY REGISTRATION - GENERAL

Records relating generally to the registration of individuals to receive PharmaCare benefits not covered elsewhere in this section. This includes forms sent from other ministries to Health Insurance BC (HIBC) to register beneficiaries for PharmaCare benefits, including methadone transfer forms from the Ministry of Attorney General requesting coverage for methadone patients leaving correctional centres, and after hours forms from the Ministry of Social Development and Poverty Reduction requesting coverage for patients who need emergency Plan C coverage.

NOTE: These forms are the exception as most coverage updates are received electronically.

Record types include correspondence and application and consent forms.

For correspondence from individual beneficiaries concerning claims, see primary 70355.

For information on Plan C, see appendix B.

For registration under the Fair PharmaCare program, see primary 70315. For registration under the Palliative Care program, see primary 70317.

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

PHA	RMACA	RE BENEFICIARY REGISTRATION - GENERAL	Α	SA	FD
All n	on-OPR	SO	nil	DE	
-00	(covers guidelir	s final/approved policies, procedures, standards, and nes pertaining to the functions and activities	SO	5y	FR
	Transfe	er to the government archives five years after policy is			
	SO:	when the policy is replaced or becomes irrelevant			
	FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
-01	Genera	al	CY+1y	2у	DE
		TION STATEMENT y at the end of the fourth calendar year.			
	All n -00	All non-OPR -00 Policy (covers guidelin docum RETEN Transfe replace SO: FR: -01 Genera	All non-OPR offices will retain these records for:         -00       Policy and procedures (covers final/approved policies, procedures, standards, and guidelines pertaining to the functions and activities documented in this section)         RETENTION STATEMENT Transfer to the government archives five years after policy is replaced or becomes irrelevant.         SO:       when the policy is replaced or becomes irrelevant         FR:       Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.	All non-OPR offices will retain these records for:SO-00Policy and procedures (covers final/approved policies, procedures, standards, and guidelines pertaining to the functions and activities documented in this section)SORETENTION STATEMENT Transfer to the government archives five years after policy is replaced or becomes irrelevant.SOSO:when the policy is replaced or becomes irrelevantFR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value01GeneralCY+1y	All non-OPR offices will retain these records for:SOnil-00Policy and procedures (covers final/approved policies, procedures, standards, and guidelines pertaining to the functions and activities documented in this section)SO5yRETENTION STATEMENT Transfer to the government archives five years after policy is replaced or becomes irrelevant.SO:when the policy is replaced or becomes irrelevantFR:Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.CY+1y2y

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70313	PHA	RMACAF	RE BENEFICIARY REGISTRATION - GENERAL	Α	SA	FD
	-20	(include Centre f	<b>Ione transfer forms</b> es Methadone Patient Transfer Out of Correctional form [HS027]) e by beneficiary)	SO+2y	nil	DE
			TION STATEMENT two years after date received.			
		SO:	date received			
		2у:	The retention period ensures that records will be available for error correction purposes and for reference regarding eligibility and coverage.			
	-30	(include Reducti	assistance after hours forms as Ministry of Social Development and Poverty on after hours forms) e by beneficiary)	SO+1y	nil	DE
			TION STATEMENT one year after expiry of the 48 hour validity window.			
		SO:	upon expiry of the 48 hour validity window			
		1y:	The retention period ensures that records will be available for reference regarding eligibility and coverage. Forms are valid for 48 hours.			
		NOTE:	These forms are used over weekends or during non- business hours when access to social assistance services is unavailable.			

END OF PRIMARY

#### 70315 PHARMACARE BENEFICIARY REGISTRATION – FAIR PHARMACARE

Records relating to the registration of individuals to receive PharmaCare benefits under the Fair PharmaCare program (formerly known as Plan I). This program reimburses beneficiaries for PharmaCare benefits based upon the beneficiary's income. Registration includes applying under the income based benefits program and providing consent for PharmaCare to receive personal income tax information from the federal government, as well as verification of income with the Canada Revenue Agency (CRA), and the determination of eligibility and deductible level.

As of April 1, 2005, Fair PharmaCare registration services are managed by HIBC Operations.

Record types include correspondence, application and consent forms, income review forms, information correction forms, payment option forms, and notarized affidavits.

- For applications for health and drug coverage, see secondary 42850-50 in the Medical Services Plan *ORCS*, schedule 142798.
- For claims and reimbursements made for designated prescription drugs and medical supplies, see primary 70350.
- For correspondence to PharmaCare regarding claims/benefits, see primary 70355.
- For information on the PharmaCare Registration Database, see the Information System Overview.
- For letters of complaint, see primary 70400.
- For pharmacy registration and monitoring, see primary 70420.
- For restricted or ineligible beneficiaries, see primary 70420.

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

70315	PHA	RMACARE BENEFICIARY REGISTRATION – FAIR PHARMACARE	Α	SA	FD
	All n	on-OPR offices will retain these records for:	SO	nil	DE
	-00	Policy and procedures(covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)RETENTION STATEMENTTransfer to the government archives five years after the policy is replaced or becomes irrelevant.SO:when policy is replaced or becomes irrelevant	SO	5y	FR
			(cont'd)		

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PHAR ORCS
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This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70315	PHA	RMACARE BENEFICIARY REGISTRATION – FAIR PHARMACARE	Α	SA	FD
		FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value			
	-01	General	CY+1y	2у	DE
		RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
	-02	<ul> <li>Change or verification of personal information         <ul> <li>(covers unscanned paper forms, where applicable, and electronic images stored in the MaxImage system)</li> <li>(includes address changes (including PO card), Correction of Fair PharmaCare Information forms, and correspondence from HIBC requesting family information update)</li> </ul> </li> <li>RETENTION STATEMENT         <ul> <li>Destroy upon entry into the registration database.</li> <li>SO: upon entry into the registration database</li> <li>NOTE: For disposition of the paper forms that have been scanned, see secondary -60 Fair PharmaCare forms</li> </ul> </li> </ul>	SO	nil	DE
	-03	– scanned. Registration database control logs	SO	nil	DE
		RETENTION STATEMENT Destroy when electronic records from CRA are received and verified. SO: when electronic records from CRA are received and verified	-		
	-20	Income based benefits applications and consents (secondary closed - do not classify new records under this secondary) (includes [HLTH 5349 – Fair PharmaCare Registration] forms, Income tax filed forms (T-4, T-5 or other CRA approved income information slips), confirmation of earnings from employers, and correspondence) RETENTION STATEMENT Destroy 85 years after entry into the PharmaCare Registration Database.	SO (cont'd)	85y	DE

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

	PHA		RE BENEFICIARY REGISTRATION – FAIR MACARE	Α	SA	FD
		SO:	upon entry into the PharmaCare Registration Database			
		85y:	Application and consent forms are required for the life of a beneficiary to allow for CRA audit.			
		NOTE:	HIBC stored microfilmed income based consents under ongoing RCS accession number 91-4109.			
		NOTE:	This secondary includes microfilmed records to 2003. After this date, records are kept in paper.			
		NOTE:	This secondary is closed because the records previously covered by this secondary are now covered under secondary 42850-50 in the Medical Services Plan ORCS, schedule 142798.			
	-21		<b>based benefits applications and consents</b> lary closed - do not classify new records under this ary)	SO	nil	DE
			TION STATEMENT when microfilmed and when quality of microfilm has prified.			
		SO:	when microfilmed and when quality of microfilm has been verified			
		NOTE:	Microfilming ceased in 2003. After this date, records are classified under secondary -20.			
		NOTE:	This secondary is closed because the records previously covered by this secondary are now covered under secondary 42850-50 in the Medical Services Plan ORCS, schedule 142798.			
PIB	-25	(covers	based benefits applications and consents data data stored in the PharmaCare registration database) nic records)	SO	nil	DE
			ION STATEMENT			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

315 PHA		RE BENEFICIARY REGISTRATION – FAIR MACARE	Α	SA	FC
	SO:	when no longer required to support Fair PharmaCare registration and reporting			
-28	(covers electror (include	<b>by deductible payment option</b> a unscanned paper forms, where applicable, and nic images stored in the MaxImage System) es enrolment form and correspondence) and electronic images)	FY+1y	6у	D
		TION STATEMENT y at the end of the eighth fiscal year.			
	8y:	This retention ensures the records are available for ongoing audit, operational and reference purposes.			
	NOTE:	For disposition of the paper forms that have been scanned, see secondary -60 Fair PharmaCare forms - scanned.			
-30	(covers electror (include and Ph docume (arrang	e based benefits eligibility appeals a unscanned paper forms, where applicable, and nic images stored in the MaxImage system) es PharmaCare appeals for retroactive reimbursement armaCare retro-payment and supporting entation and correspondence) the by completion date) and electronic images)	SO	7у	D
		TION STATEMENT / seven years after eligibility has been established.			
	SO:	when eligibility has been established			
	7у:	This will ensure records are retained until the expiration of the right to initiate legal action specified under the <u>Limitation Act (RSBC 1996, c. 266)</u> . The additional year is allowing for the serving of notice on all parties			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70315	PHA	RMACARE BENEFICIARY REGISTRATION – FAIR PHARMACARE	Α	SA	FD
	-36	Verification of income (covers unscanned paper forms, where applicable, and electronic images stored in the MaxImage System) (includes PharmaCare Notarized Affidavits [HLTH 5357] and Application for Income Review [HLTH 5355] forms, as well as supporting income documentation) (paper and electronic images)	FY+1y	6у	DE
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
		8y: This retention ensures the records are available for ongoing audit, operational and reference purposes.			
		NOTE: Once the consent form has been processed and accepted, the system automatically generates a CRA Income Request that is sent to CRA. The CRA file is automatically loaded to the PharmaCare Registration Database.			
		NOTE: For disposition of the paper forms that have been scanned, see secondary -60 Fair PharmaCare forms – scanned.			
PIB	-40	<b>Personal income tax data (from CRA)</b> (covers income tax information received from CRA based on the specific requests submitted by HIBC) (electronic records)	CY+2y	nil	DE
		RETENTION STATEMENT Destroy at the end of the third calendar year.			
		NOTE: The CRA file is loaded to the PharmaCare Registration Database upon receipt.			
PIB	-50	(superseded by PharmaCare Registration Database Information System Overview)			
	-60	Fair PharmaCare forms – scanned (paper)	SO	nil	DE
		RETENTION STATEMENT Destroy when the imaged version has been verified for quality and backup has taken place.			
			(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70315		RE BENEFICIARY REGISTRATION – FAIR MACARE	Α	SA	FD
	SO:	when the imaged version has been verified for quality and backup has taken place			
	NOTE:	This secondary covers only paper forms that have been scanned and stored in the MaxImage System. Paper forms created prior to the scanning program and digitized images of the paper forms are classified under the following secondaries: -02 Change or verification of personal information, -28 Monthly deductible payment option, -30 Income based benefits eligibility appeals, and -36 Verification of income.			

END OF PRIMARY

# 70317 PHARMACARE BENEFICIARY REGISTRATION – PALLIATIVE CARE

Records relating to the registration of individuals to receive PharmaCare benefits under the Palliative Care Drug Plan (Plan P). The Palliative Care program supports individuals of any age who have reached the end stage of a life threatening disease or illness and who wish to receive palliative care at home. This program covers the costs of prescription drugs and selected overthe-counter drugs needed for palliative care and treatment. Registration in the program is requested by a physician who assesses a patient's medical eligibility for the program and then submits an application on his/her behalf.

Record types include application forms [HLTH 349 – BC Palliative Care Benefits Program Application] and correspondence.

For correspondence from individual beneficiaries concerning claims, see primary 70355.
For more information on Plan P, see Appendix B.
For pharmacy registration and monitoring, see primary 70420.
For the PharmaNet System, see the Information System Overview (ISO).

NOTE: The BC Palliative Care Benefits Program also allows eligible patients to receive medical supplies and equipment from the local health authority. Physicians submit the same application form to the local health authority to register patients for these benefits. PharmaCare is not involved with this part of the program.

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

All non-OPR offices will retain these records for:	SO SO	nil 5y	DE
	SO	5v	
<ul> <li>-00 Policy and procedures         <ul> <li>(covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)</li> </ul> </li> <li>RETENTION STATEMENT         <ul> <li>Transfer to the government archives five years after the policy is replaced or becomes irrelevant.</li> <li>SO: when policy is replaced or becomes irrelevant</li> </ul> </li> <li>FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.</li> </ul>			FR

This is an approved information schedule, as defined by the Information Management Act	<u>(SBC 2015, c. 27)</u> .
For more information consult your Government Records Officer.	

70317	7 PHARMACARE BENEFICIARY REGISTRATION – PALLIATIVE CARE		RE BENEFICIARY REGISTRATION – PALLIATIVE	Α	SA	FD
	-01	Genera	1	CY+1y	2у	DE
			TION STATEMENT at the end of the fourth calendar year.			
	-20	Palliativ (covers electron (include [HLTH 3 (paper a	<ul> <li>ve care applications <ul> <li>unscanned paper forms, where applicable, and</li> <li>inc images stored in the MaxImage System)</li> <li>us BC Palliative Care Benefits Program Application</li> <li>B49] and correspondence)</li> <li>and electronic images)</li> </ul> </li> <li>TION STATEMENT <ul> <li>seven years after scanned and entered into</li> <li>Net.</li> </ul> </li> <li>when scanned and entered into PharmaNet, plus an additional seven years</li> <li>The retention period ensures the records are retained for ongoing operational and reference requirements.</li> <li>Physicians complete Palliative Care Program application forms and then fax the forms to Health</li> </ul>	SO+7y	nil	DE
			Insurance BC (HIBC). Faxed forms are also scanned into MaxImage. Coverage for the individual is added to PharmaNet. An additional copy is filed on the LAN for access purposes and can be treated as a non- OPR copy.			
		NOTE:	Scanning began in April 2005.			

END OF PRIMARY

## 70320 PHARMACARE BENEFITS – GENERAL

Records not shown elsewhere in the PharmaCare benefits section relating generally to the definition of PharmaCare plans, including eligibility rules and the extent of coverage provided by the plans, and cost-saving incentive programs, pursuant to the <u>Continuing Care Programs Regulation (BC Reg.</u> 146/95).

Record types include correspondence, memoranda, reports and reference materials.

NOTE: Only records which cannot be classified in a more specific primary or secondary may be classified under this primary.

For inquiries regarding specific claims and benefits, see primary 70355. For plan definitions, see primary 70322. For program research and evaluation, see primary 70450. For the provision of expert advice, see primary 70400.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

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70320	PHARMACARE BENEFITS – GENERAL           All non-OPR offices will retain these records for:				SA	FD
					nil	DE
	-00	(covers	and procedures s final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)	SO	5y	FR
		Transfe	TION STATEMENT er to the government archives five years after the policy aced or becomes irrelevant. when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	Genera	al	CY+1y	2у	DE
			TION STATEMENT y at the end of the fourth calendar year.			
	-02		seded by primary 70322-20 PharmaCare plans and ims files)			

Key to ARCS/ORCS Codes and Acronyms

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This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70320	PHA	RMACARE BENEFITS – GENERAL	Α	SA	FD
	-03	(superseded by primary 70322-20 PharmaCare plans and programs files)			
	-04	(superseded by primary 70322-20 PharmaCare plans and programs files)			
	-05	(superseded by primary 70322-20 PharmaCare plans and programs files)			
	-06	(superseded by primary 70322–20 PharmaCare plans and programs files)			
	-20	(superseded by primary 70322–25 PharmaCare plans and programs correspondence files)			

END OF PRIMARY

# 70322 PHARMACARE BENEFITS – PLAN DEFINITIONS

Records relating to defining PharmaCare plans, including eligibility rules and the extent of coverage provided by the plans, and cost-saving incentive programs, pursuant to the <u>Continuing Care Programs Regulation (BC Reg.</u> 146/95).

Examples of programs include Low-Cost Alternative, Reference-Based Pricing, Rural Incentive, Trial Prescription program and equivalents.

Record types include correspondence, memoranda, reports and reference materials

For inquiries regarding specific claims and benefits, see primary 70355. For program research and evaluation, see primary 70450. For the provision of expert advice, see primary 70400.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70322	PHA	RMACA	Α	SA	FD	
	All non-OPR offices will retain these records for:				nil	DE
	-00	(covers	<b>and procedures</b> s final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)	SO	5y	FR
		Transfe	TION STATEMENT er to the government archives five years after the policy aced or becomes irrelevant.			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
		SO:	when policy is replaced or becomes irrelevant			
	-01	Genera	al	SO	2у	DE
		Destro	TION STATEMENT y two years after no longer needed for operational or nce requirements.			

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

322	PHA	RMACAR	RE BENEFITS – PLAN DEFINITIONS	Α	SA	FD
	-20	(arrange (superse cost alte program incentive RETENT Transfer informat	ACare plans and programs eligibility definition files by name of plan or program) edes and merges former secondaries 70320-02 Low- ernative program, 70320-03 PharmaCare Plans and as, 70320-04 Reference-based pricing, 70320-05 Rural e program, and 70320-06 Trial Prescription program) TION STATEMENT r to the government archives two years after tion regarding PharmaCare plans and programs is no urrent, or when no longer required for reference is.	SO	2у	FR
		SO:	when information regarding PharmaCare plans and programs is no longer current, or when no longer required for reference purposes			
		FR:	The government archives will fully retain PharmaCare plans and programs eligibility definition files because they document the nature, standards and rules for eligibility for all PharmaCare plans and programs.			
		NOTE:	For records relating to the planning and development of policies, programs and plans guiding the provision of services and benefits to beneficiaries under the PharmaCare program, refer to primary 70480.			
		NOTE:	For forms, receipts and other records relating to the administration of PharmaCare plans and programs refer to the appropriate registration or claims secondaries.			
		NOTE:	For correspondence regarding these plans and programs, refer to secondary -25.			
	-25	(arrange (superse	Care plans and programs correspondence files by plan or program) edes former secondary 70320-20 PharmaCare plans grams correspondence files)	SO	2у	DE
		Destroy	TON STATEMENT two years after the information regarding PharmaCare ad programs is no longer current.			
				(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70322	PHARMACAF	RE BENEFITS – PLAN DEFINITIONS	Α	SA	FD
	SO:	when information regarding PharmaCare plans and programs is no longer current			
	NOTE:	The intent of this secondary is to include general correspondence from the public regarding what is covered under PharmaCare plans. Correspondence relating to specific claims are classified under 70355-20.			

END OF PRIMARY

## 70325 PHARMACARE BENEFITS – FORMULARY MANAGEMENT

Records relating to the approval of specific products or services that qualify as PharmaCare benefits, as well as the discontinuation of products or services that no longer qualify under the <u>Continuing Care Programs Regulation (BC Reg.</u> <u>146/95</u>). This includes drug submissions and the drug review process.

This primary also includes Patient Input Mechanism (PIM) submissions. The PIM is a web-based initiative that gives patients, caregivers and patient advocacy groups an opportunity and a method for providing their perspective regarding drugs under review for possible coverage inclusion under PharmaCare.

Record types include price lists, formulary submissions, subject correspondence, reference materials, and memoranda.

For committees and commissions, including the Drug Benefit Council, see <u>ARCS primary 200</u>.

For information on the PharmaCare Centralized Information System (PCIS), see the Information System Overview.

For PharmaCare plans definition, see primary 70322.

For PharmaCare public inquiries and concerns, see secondary 70400-02.

For Pharmaceutical, Laboratory and Blood Services Division (PLBSD)

reference materials, see secondary 70300-20.

For special authorities, see primary 70328.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70325	PHA	RMACA	<b>ARE BENEFITS – FORMULARY MANAGEMENT</b>	Α	SA	FD
	All n	on-OPR	offices will retain these records for:	SO	nil	DE
	-00	(cover	<b>and procedures</b> s final/approved versions of policies, procedures, ards, and guidelines pertaining to this section)	SO	5y	FR
		Transf	ITION STATEMENT fer to the government archives five years after the policy aced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70325	PHA	RMACARE BENEFITS – FORMULARY MANAGEMENT	Α	SA	FD
	-01	General	SO	2у	DE
		RETENTION STATEMENT			
		Destroy two years after no longer required for operational or			
		reference requirements.			
	-02	Delisted drugs	SO	2у	DE
		RETENTION STATEMENT			
		Destroy two years after no longer required for operational or reference requirements.			
	-03	Diabetic supplies	SO	2у	DE
		RETENTION STATEMENT			
		Destroy two years after no longer required for operational or reference requirements.			
	-04	Investigational drugs	SO	2у	DE
		RETENTION STATEMENT			
		Destroy two years after no longer required for operational or			
		reference requirements.			
	-05	Ostomy products and suppliers	SO	nil	DE
		RETENTION STATEMENT			
		Destroy when no longer required for operational or reference			
		requirements.			
	-06	Prosthetic devices and suppliers	SO	nil	DE
		RETENTION STATEMENT			
		Destroy when no longer required for operational or reference			
		requirements.			
	-07	Supplier codes	SO	2у	DE
		(includes subject correspondence, reference materials and memoranda)			
		RETENTION STATEMENT			
		Destroy two years after no longer required for operational			
		purposes as determined by the Formulary Management Director.			
		SO: when no longer required for operational purposes as			
		determined by the Formulary Management Director			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

(includes submissions and Conflict of Interest (COI) statements)         (arrange by chemical name)         RETENTION STATEMENT         Destroy one year after the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC).         OPR:       Stakeholder Relations, Ministry of Health         SO:       when the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)         NOTE:       Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified.	0325	PHA	RMACAF	RE BENEFITS – FORMULARY MANAGEMENT	Α	SA	FD
RETENTION STATEMENT         Destroy one year after the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC).         OPR:       Stakeholder Relations, Ministry of Health         SO:       when the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)         NOTE:       Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO       when scanned and quality of scanning has been verified.         SO:       when scanned and quality of scanning has been verified.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are updated		-08	(include stateme	es submissions and Conflict of Interest (COI) ents)	SO+1y	nil	D
Destroy one year after the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC).       OPR: Stakeholder Relations, Ministry of Health         SO:       when the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)       NOTE: Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified.         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed.         SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules.       When the web pages are closed, they can be destroyed in accordance with approved retention schedules.			(arrange	e by chemical name)			
statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC).       OPR: Stakeholder Relations, Ministry of Health         SO:       when the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)         NOTE:       Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified.         SO:       when scanned and quality of scanning has been verified.       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO       nil       D         Co:       when the web pages are altered, updated, redesigned or closed.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed.       SO:         SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed anther relevant schedules have elapsed and/or the docum			RETENT	TION STATEMENT			
SO:       when the report of all submissions and COI statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)         NOTE:       Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO       nil       D         Co:       when the web pages are altered, updated, redesigned or closed.       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed.       SO:         SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified       SO:			stateme	ents for a specific drug under review is forwarded to the			
statements for a specific drug under review is forwarded to the Drug Benefit Council (DBC)         NOTE:       Electronic submissions are stored in the Survey Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.         -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO       nil       D         Co:       when the web pages are altered, updated, redesigned or closed       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed       SO:       when the web pages are altered, updated, redesigned or closed       SO:         DE:       As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified       SO:			OPR:	Stakeholder Relations, Ministry of Health			
Select database until eligible for destruction. Mailed submissions are scanned and stored electronically.       -09       Patient Input Mechanism (PIM) submissions - paper       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified.       SO:       when scanned and quality of scanning has been verified       Verified         SO:       when scanned and quality of scanning has been verified       SO       nil       D         RETENTION STATEMENT       Destroy when scanned and quality of scanning has been verified       SO       nil       D         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed       E         DE:       As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed and/or the documents have been classified       So			SO:	statements for a specific drug under review is			
RETENTION STATEMENT         Destroy when scanned and quality of scanning has been verified.         SO:       when scanned and quality of scanning has been verified         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed       SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified			NOTE:	Select database until eligible for destruction. Mailed			
Destroy when scanned and quality of scanning has been verified.       SO: when scanned and quality of scanning has been verified         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO: when the web pages are altered, updated, redesigned       V       V         SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified       V       V		-09	Patient	Input Mechanism (PIM) submissions - paper	SO	nil	D
verified       SO       nil       D         -15       PharmaCare Drug Review Results web pages       SO       nil       D         RETENTION STATEMENT       Destroy when the web pages are altered, updated, redesigned or closed.       SO:       when the web pages are altered, updated, redesigned or closed       SO:       when the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified       SO:			Destroy	when scanned and quality of scanning has been			
RETENTION STATEMENT Destroy when the web pages are altered, updated, redesigned or closed. SO: when the web pages are altered, updated, redesigned or closed DE: As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified			SO:				
<ul> <li>Destroy when the web pages are altered, updated, redesigned or closed.</li> <li>SO: when the web pages are altered, updated, redesigned or closed</li> <li>DE: As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified</li> </ul>		-15	Pharma	aCare Drug Review Results web pages	SO	nil	D
DE: As the web pages are updated, superseded/obsolete versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified			Destroy	when the web pages are altered, updated, redesigned			
versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified			SO:				
			DE:	versions of documents on them may be destroyed in accordance with approved retention schedules. When the web pages are closed, they can be destroyed after relevant schedules have elapsed and/or the documents have been classified			
(cont'd)					(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

0325	PHA	RMACAF	RE BENEFITS – FORMULARY MANAGEMENT	Α	SA	FD
		NOTE:	This public website is designed as a vehicle to provide information about drug review submissions, including PharmaCare status, and includes links to the Common Drug Review Drug database maintained by the Canadian Agency for Drugs and Technologies in Health and the Limited Coverage Drug Program Criteria Information web page maintained by PharmaCare. Because this is a simple web site, an information system overview for a web site has not been developed.			
		NOTE:	All documents presented on these web pages are classified under appropriate secondaries within this <i>ORCS</i> or in the Administrative Records Classification System ( <i>ARCS</i> ).			
		NOTE:	The PharmaCare Drug Review Decisions website can be accessed at https://www2.gov.bc.ca/gov/content/health/health- drug-coverage/pharmacare-for-bc-residents/drug- review-process-results/drug-review-decisions			
	-20	(covers listing a	anufacturers files price lists and price changes, benefit status, product greements, and notes to add or drop from PharmaNet) e by manufacturer code)	SO	7y	D
		Destroy	TON STATEMENT seven years after drug is delisted and/or product greement is terminated.			
		SO:	when drug is delisted and/or product listing agreement is terminated			
		7y:	The retention period ensures the records will be available for research and reference purposes.			
	-30	(covers (include for Bene report, N Monogra informat patent in	ary submissions approved and not approved submissions) s letters of approval, Drug Base Update Request Form efits, manufacturer correspondence, manufacturer's Notice of Compliance, Drug Notification form, Product aph, Letter of Consent, Price Lists (drug pricing tion), manufacturer's assurance of ability to supply, nformation, copies of published trials, and equivalents) e by chemical name and formulary type: generic or	SO	7у	Dł
		trade na		(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70325	PHA	RMACAF	RE BENEFITS – FORMULARY MANAGEMENT	Α	SA	FD
		Destroy required	TION STATEMENT seven years after information is no longer current, or for reference purposes, as determined by the ary Management Director.			
		SO:	when information is no longer current, or required for reference purposes, as determined by the Formulary Management Director			
		7y:	The retention period ensures records will be available for research and reference purposes.			
	-35	(covers Commo non-sub related	ary management working materials materials used to make drug listing decisions such as on Drug Review and Therapeutics Initiatives reports, omission working materials, correspondence, and reference and background materials) e by chemical name)	SO	7у	DE
		Destroy	TION STATEMENT seven years after no longer required for operational as as determined by the Formulary Management			
		SO:	when no longer required for operational purposes as determined by the Formulary Management Director			
		7y:	The retention period ensures records will be available for research and reference purposes.			
	-38	(covers stored c	<b>ary management data</b> data relating to formulary management submissions on the Formulary Management database) nic records)	SO	nil	DE
		Destroy	TION STATEMENT when no longer required to support formulary ement decision making.			
		SO:	when no longer required to support formulary management decision making			
		NOTE:	This secondary is not to be used for filing. It classifies the data contained within the Formulary management database.			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

'0325 PHA		RE BENEFITS – FORMULARY MANAGEMENT	Α	SA	FC
-40	(include material	ary management database s subject background literature and other reference ) nic database)	SO	nil	DE
	Destroy	TON STATEMENT when the functions supported by the database are no performed by the government.			
	SO:	when the functions supported by the database are no longer performed by the government			
	DE:	This electronic system can only be destroyed when the approved retention schedules covering the information on it have elapsed, or when the information on it has been made accessible elsewhere.			
	NOTE:	The Formulary Management database is an internal back-end Oracle database used by Pharmaceutical, Laboratory and Blood Services Division (PLBSD) to capture information relating to drug submissions from drug manufacturers. PLBSD staff track and report on the process of the review. The drug submission information is posted to the PharmaCare Drug Review Results Website to advise the public of its status. Reports are generated on an ad hoc basis and are classified under appropriate secondaries within this <i>ORCS</i> or in the Administrative Records Classification System. Because this is a simple system, an Information System Overview (ISO) has not been developed.			

END OF PRIMARY

# 70328 PHARMACARE BENEFITS - SPECIAL AUTHORIZATIONS

Records relating to the adjudication of requests from health practitioners for their patients to receive drugs which are not normally covered under the PharmaCare program, including drugs which are not fully reimbursed under the low-cost alternative or reference drug program, and drugs for particular therapeutic uses requiring prior authorization. Coverage is based on the patient's eligibility and deductible criteria and approved requests are entered into a patient's PharmaNet record. Special authorities are valid from the effective date for various periods of time, depending on the medication and use.

Record types include correspondence, memoranda, special authority forms [HLTH 5328] and letters submitted by health practitioners.

For general correspondence regarding Special Authorizations (including Backdated Special Authorizations) not requiring adjudication, see 70355-20.

For Special Authorizations' Committees including Crohn's, Alzheimer's, Hepatitis, Alzheimer's Drug Therapy Initiative (ADTI) and equivalents, see <u>ARCS primary 200</u>.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70328	PHARMACARE BENEFITS - SPECIAL AUTHORIZATIONS           All non-OPR offices will retain these records for:				SA	FD
					nil	DE
	-00	Policy (covers standar	SO	5у	FR	
		Transfe	TION STATEMENT or to the government archives five years after the policy ced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	Genera	al	CY+1y	2у	DE
			TION STATEMENT / at the end of the fourth calendar year.			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70328	PHA	MACARE BENEFITS -	SPECIAL AUTHORIZATIONS	Α	SA	FD
	-02	(superseded by secon files)	ndary -20 Special authority client			
PIB	-20	Backdated Special Auth Special Authority Reque Drug Program Special A exemption files, and cor	ug Program special authorities, norization requests, PharmaCare est forms [HLTH 5328], Reference Authority forms [MR2734], physician	SO	5y	DE
			IT no longer required for operational or determined by the program manager.			
			er required for operational or reference etermined by the program manager			
			ludes rejected applications and the letter from the PharmaCare pharmacy			
	-35	(covers letters from doc	s program and drug correspondence stors regarding the special authorization eligible for special authorization, as well program area)	CY+1y	nil	DE
		RETENTION STATEMEN Destroy at the end of th	IT le second calendar year.			
		requests, only typically specif	y does not include special authority inquiries about the program and fic to a particular drug. For special ests, see secondary -20.			
		special authori program area respond, the fi	dence with clients who apply for a ization with insufficient information, the sends out a notice. If the client doesn't ile is classified under this secondary. If onds with the correct information, file ary 70328-20.			
		NOTE: For routine Ph 70400-02.	armaCare inquiries, see secondary			

END OF PRIMARY

# 70350 PHARMACARE CLAIMS - GENERAL

Records relating to applying and claiming for reimbursement of the cost of designated prescription drugs and medical supplies pursuant to the <u>Continuing</u> <u>Care Programs Regulation (BC Reg. 146/95)</u> and the <u>Pharmacy Operations</u> <u>and Drug Scheduling Act (SBC 2003, c. 77)</u>. These are comprised of claims submitted in electronic format and processed by the Pharmacy Network (PharmaNet), claims under Plan E submitted by individuals, and claims under plans A, B, C, and F submitted by those pharmacies and suppliers not connected to the PharmaNet system.

Plan I (Fair PharmaCare) came into effect May 1, 2003 and replaced both Plan A (Seniors) and Plan E (Universal PharmaCare). No claims are made under Plans D and G and only registration information, including patient eligibility, is collected under these plans. Effective April 1, 2005, PharmaCare is also responsible for funding and administering the drug portion of the BC Palliative Care Benefits Program as the BC Palliative Care Drug Plan (Plan P).

Data relating to claims is maintained in the PharmaCare claims history table (Claimshist) in the PharmaNet System.

Record types include claims history (Claimshist) data mart, claim files in electronic, paper, microfilm, and scanned image formats, and correspondence.

For correspondence from individual beneficiaries concerning claims, see primary 70355.

For Fair PharmaCare program, see primary 70315.

- For information on the MaxImage System, see the Information System Overview.
- For information on the PharmaCare Centralized Information System (PCIS), see the Information System Overview.
- For information on the PharmaCare Claims Data Mart, see the Information System Overview.
- For information on the PharmaNet System, see the Information System Overview.

For medical history information, see 70490-20.

For PharmaCare plan descriptions, see Appendix B.

For pharmacy participation agreements, see primary 70420.

For prosthetics claims, see primary 70355.

For psychiatric medication prescriptions given to clients of mental health

centres (Plan G), see primary 37500 in <u>ORCS schedule 122347</u>. For statistical reports on payments, see primary 70450.

NOTE: This primary supersedes ongoing schedule number 880228 (including amendments 115352 and 124018), PharmaCare payment claims (Plan A, B, C, F and E accounts).

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70350	PHA	RMACARE CLAIMS - GENERAL	Α	SA	FD
	All no	on-OPR offices will retain these records for:	SO	nil	DE
	-00	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)	SO	5у	FF
		RETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.			
		SO: when policy is replaced or becomes irrelevant			
		FR: Throughout this section, the government archives wil fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	General	FY+1y	6у	D
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
	-02	(superseded by secondary -06 PharmaCare claims)			
	-03	(superseded by secondary -07 Fair PharmaCare claims)			
	-04	<b>Narcotic "triplicate" prescriptions</b> (includes Triplicate Prescription Program Batch Control Header [HLTH 5315] indicating approval status, and BC Triplicate Prescription Form (data entry copy) submitted by pharmacies)	FY+1y	6у	DI
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
	-05	(superseded by secondary -45 Pharmacy processing correspondence)			
	-06	PharmaCare claims - paper	SO	nil	D
		RETENTION STATEMENT Destroy when the imaged version has been verified for quality and backup has taken place, if scanned; Destroy after the expiration of 27 months, if microfilmed.			
		SO: if scanned, when the imaged version has been verified for quality and backup has taken place; if			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70350	PHA	RMACARE CLAIMS - GENERAL	Α	SA	FD
		NOTE: Microfilming of claims ceased in January 2	2009.		
	-07	PharmaCare claims returned to client - paper	SO	NA	NA
		RETENTION STATEMENT Return to claimant when microfilmed or imaged ver been verified for quality and backup has taken plac			
		SO: when microfilmed or imaged version has be verified for quality and backup has taken p			
		NA: These records are returned to the claiman microfilming or scanning.	nt after		
		NOTE: Microfilmed and scanned claims are class secondaries -08 and -09 respectively.	ified under		
		NOTE: Microfilming of claims ceased in January 2	2009.		
PIB	-08	PharmaCare claims - microfilm	FY+6y	13y	D
		RETENTION STATEMENT Destroy at the end of the 20th fiscal year.			
		20y: This retention ensures records are mainta program research and statistical purposes			
		NOTE: This secondary covers microfilmed claims primarily before the introduction of data wa Therefore, it was determined that they nee retained longer than the electronic image under secondary -09.	arehouses. eded to be		
		NOTE: Microfilming of claims ceased in January 2	2009.		
PIB	-09	PharmaCare claims - electronic images (covers unscanned paper forms, where applicable, electronic images stored in the MaxImage System) (includes PharmaCare Manual Payment Informatio form [HLTH 5325] and receipts)		6у	DE
		RETENTION STATEMENT			
		Destroy at the end of the eighth fiscal year.			
			(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70350	PHA	RMACARE CLAIMS - GENERAL	Α	SA	FD
		8y: The retention period ensures the records are available for claims processing and payment purposes and is consistent with retention periods for financial records classified within <u>ARCS section 4</u> .			
		NOTE: Scanning began January 2009.			
	-10	PharmaCare claims - Palliative Care Drug Plan (Plan (covers requests for reimbursement, original receipts, correspondence and payment details)	<b>P)</b> FY+1y	6у	DI
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
		8y: This retention period is consistent with retention periods for similar financial records classified win <u>ARCS section 4</u> .			
	-20	(superseded by PharmaCare Centralized Information System (PCIS) Information System Overview for a subsystem (ISOS))			
	-30	PharmaCare claims history data (Claimshist) (covers beneficiary claims history data stored in the PharmaCare Centralized Information System (PCIS)) (electronic records)	FY+20y	nil	DI
		RETENTION STATEMENT Destroy at the end of the 21st fiscal year.			
		21y: This retention ensures records are maintained f program research and statistical purposes.	or		
		NOTE: Claims history data is loaded weekly into the PharmaCare Claims Data Mart (-70) and is use management level analysis and reporting.	d for		
		NOTE: Contains all data elements (Pharmanet tables) included in PCIS.			
	-40	PharmaCare expenditure adjustments (covers merge expenditure transfers, reverse merges, "unmerges", prescriptions filled under an incorrect Perso Health Number (PHN)) (arrange by client name)	CY+1y nal	5у	DI

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70350	PHA	RMACAF	RE CLAIMS - GENERAL	Α	SA	FD
			TION STATEMENT at the end of the seventh calendar year.			
		7y:	The retention period ensures the records are retained for ongoing audit, operational and reference requirements.			
		NOTE:	For ease of reference and retrieval, the office may wish to use tertiary numbers and/or file codes for this secondary.			
	-44	<b>Pharma</b> (paper)	acy processing correspondence – scanned	SO	nil	DE
		Destroy	TION STATEMENT when the imaged version has been verified for quality kup has taken place.			
		SO:	when the imaged version has been verified for quality and backup has taken place			
		NOTE:	This secondary only covers paper forms that have been scanned and stored in the MaxImage System. Paper forms created prior to the scanning program and digitized images of the paper forms are classified under secondary -45.			
	-45	(covers with req claims r under in of Exper forms) (covers electron	acy processing correspondence correspondence from the BC College of Pharmacists juests by Pharmacies to merge PHN's or reverse regarding uncollected prescriptions, and claims made accorrect PHNs, Expenditure Deduction, Basic Transfer nditure, and Prescriptions Never Picked Up By Client unscanned paper forms, where applicable, and ic images stored in the MaxImage System) and electronic images)	FY+1y	6у	DE
			TION STATEMENT at the end of the eighth fiscal year.			
		NOTE:	For disposition of the paper forms that have been scanned, see secondary -44.			

This is an approved information schedule, as defined by the Information Management	nt Act (SBC 2015, c. 27).
For more information consult your Government Records Officer.	

70350	PHA	RMACARE CLAIMS - GENERAL	Α	SA	FD
	-50	Pharmacy payment files (includes payments and adjustments, direct deposit applications, and related correspondence) (arrange by pharmacy code) RETENTION STATEMENT Destroy at the end of the eighth fiscal year.	FY+1y	6у	DE
	-60	Supplemental claim files - paper	SO	7y	DE
		RETENTION STATEMENT Destroy seven years after no longer required for operational or reference requirements.			
		NOTE: PharmaCare will store the hardcopy of Supplemental claim forms under ongoing RCS accession number 91-0523.			
		NOTE: Supplemental claims forms are no longer generated. This secondary is now closed.			
	-61	Supplemental claim files - microfilm	FY+6y	1y	DE
		RETENTION STATEMENT Destroy at the end of the eighth fiscal year. NOTE: Supplemental claim forms were microfilmed from			
		1976 to 1 August 1992.			
	-70	PharmaCare Claims Data Mart data (covers data extracted from PharmaNet and Client Registry source systems and retained in the PharmaCare Claims Data Mart) (covers PharmaCare processing details, claim facts, transaction response types, health product numbers, categorization of processed records by the different adjudication systems and equivalents) (electronic records)	SO	nil	DE
		RETENTION STATEMENT Destroy when data is no longer required for ongoing analysis purposes and to support management level reporting.			
		SO: when data is no longer required for ongoing analysis purposes and to support management level reporting			
			(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70350	PHARMA	CARE CLAIMS - GENERAL	Α	SA	FD
	NO	E: The PharmaCare Claims Data Mart is used when the medication data needed includes cost information.			
	NO	E: PharmaCare Claims Data Mart input source records are considered transitory records and can be destroyed according to the Transitory Information Schedule 102901.			
	(cov	rmaCare Claims Data Mart reports ers various prompted reports based primarily on data acted from the PharmaNet and Client Registry Systems)	SO	nil	DE
	Des	ENTION STATEMENT roy when reports are no longer required for analytical ort purposes.			
	SO:	when reports are no longer required for analytical support purposes			

END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

### 70355 PHARMACARE CLAIMS - BENEFICIARIES

Records relating to inquiries from PharmaCare beneficiaries regarding PharmaCare benefits, eligibility, claim status and related matters (such as Power of Attorney submissions, and certificates of incapability). This primary also relates to the adjudication and payment of claims to beneficiaries receiving prosthetic and orthotic devices.

Record types include correspondence, memoranda, claim forms [HLTH 5325], claim adjustments, prescription claim history, and invoices.

For cheque requisitions, see <u>ARCS secondary 1050-09</u>.

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

70355	PHARMACARE CLAIMS - BENEFICIARIES         All non-OPR offices will retain these records for:				SA	FD
					nil	DE
	-00	(covers	and procedures final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)	SO	5y	FR
		RETEN <sup>-</sup> Transfe is repla				
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	Genera	al	CY+1y	2у	DE
			TION STATEMENT y at the end of the fourth calendar year.			
PIB	-20	(covers electror (include benefic Pharma Paymer submis	aCare claims beneficiary correspondence s unscanned paper forms, where applicable, and nic images stored in the MaxImage System) es correspondence and supporting documentation from ciaries requesting a review of PharmaCare assistance, aCare help desk replies, PharmaCare Retroactive nt Summary (HIBC) forms, Power of Attorney sions, and certificates of incapability) le by name of beneficiary)	CY+1y (cont'd)	5у	DE

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70355	PHA	RMACAR	RE CLAIMS - BENEFICIARIES	Α	SA	FD
		(paper a	and electronic images)			
			TON STATEMENT at the end of the seventh calendar year.			
		NOTE:	For disposition of the paper forms that have been scanned, see secondary -21.			
PIB	-21	Pharma scanne	Care claims beneficiary correspondence - d	SO	nil	DE
		Destroy	TON STATEMENT when the imaged version has been verified for quality kup has taken place.			
		SO:	when the imaged version has been verified for quality and backup has taken place			
		NOTE:	This secondary only covers paper forms that have been scanned and stored in the MaxImage System. Paper forms created prior to the scanning program and the digitized images of the paper forms are classified under secondary -20.			
PIB	-30	(include Pre-auth Prosthet Assistar Informat correspo (arrange (paper a	etic/orthotic claims beneficiary case files s Patient Declaration form, Claims form [HLTH 5325], norizations (Application for Financial Assistance- tics HLTH 4682 and Assistance for Financial nce-Orthotics HLTH 4657], Manual Payment tion Summary form, prescription invoice, and ondence) e by name of beneficiary) and microfilm) TION STATEMENT seven years after the client is deceased, for	SO+1y	5у	DE
		prosthet	tics. Destroy seven years after the client turns n, for orthotics.			
		SO:	for prosthetics, when the client is deceased and for orthotics, when the client turns nineteen			
		NOTE:	Patients are eligible to apply for new prosthetics every three years and for orthotics yearly.			
				(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70355	PHA	RMACAR	RE CLAIMS - BENEFICIARIES	Α	SA	FD
		NOTE:	PharmaCare policy requires pre-authorization for all claims greater than a pre-established dollar amount. Applications are scanned and adjudicated weekly. Letters of approval are sent to health care providers and are included with prosthetic/orthotic applications. All documentation is kept together and filed by beneficiary.			
		NOTE:	For ease of reference and retrieval, the office may wish to physically arrange PharmaCare claims beneficiary correspondence files with prosthetics/orthotics claims beneficiary case files.			
PIB	-35	(covers	etic/orthotic application forms electronic images stored in the MaxImage System) nic image)	CY+1y	nil	DE
		RETENT Destroy				
		2у:	The electronic images are referenced when documentation is missing from the paper file. These absences are typically discovered within two years. The program area relies on the paper file filed under - 30, and therefore, electronic images can be destroyed after 2 years.			
		NOTE:	Only the application forms are currently being scanned. The paper forms and related records are retained under secondary -30.			
	-39	<b>Pharma</b> (paper)	Care claims profiles - scanned	SO	nil	DE
		Destroy	TON STATEMENT when the imaged version has been verified for quality kup has taken place.			
		SO:	when the imaged version has been verified for quality and backup has taken place			
		NOTE:	This secondary only covers paper forms that have been scanned and stored in the MaxImage System. Paper forms created prior to the scanning program and digitized images of the paper forms are classified under secondary -40.			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70355	PHA	RMACAF	RE CLAIMS - BENEFICIARIES	Α	SA	FD
PIB	<ul> <li>-40 PharmaCare claims profiles         <ul> <li>(covers unscanned paper forms and electronic images stored in the MaxImage System)</li> <li>(paper and electronic images)</li> </ul> </li> </ul>					DE
			TION STATEMENT at the end of the seventh calendar year.			
		7y:	The retention period ensures records will be available for research and reference purposes.			
		NOTE:	This secondary relates to requests from the public for prescription claims histories. The request is received in the form of a letter and is scanned into the MaxImage System. A printout of any prescriptions provided by PharmaCare to the beneficiary is forwarded to the requester. HIBC does not retain a physical copy of the printout.			

END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70400 PHARMACARE CONSULTATION AND ADVICE

Records relating to the provision of subject matter expertise and consultative advice on PharmaCare topics to health practitioners, the public, and other government staff. This involves researching and advising on topical issues and existing and new ministry policies and programs that may affect health authorities or the ministry. Topics may concern pharmacology and/or other aspects of the PharmaCare program.

Record types include correspondence and memoranda.

For correspondence from beneficiaries regarding specific claims and benefits, see secondary 70355-20.

For executive issues and minister's letters, see <u>ARCS primary 280</u>.

For general inquiries about PharmaCare plans and programs, see secondary 70322-25.

For reference materials used in the preparation of consultative advice, see secondary 70300-20.

For special authorities, see secondary 70328-20.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70400	PHARMACARE CONSULTATION AND ADVICE				SA	FD
	All n	on-OPR	offices will retain these records for:	SO	nil	DE
	-00	Policy (covers standa	SO	5y	FR	
	RETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.					
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
		SO:	when policy is replaced or becomes irrelevant			
	-01	Genera	al	CY+1y	2у	DE
			TION STATEMENT y at the end of the fourth calendar year.			

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70400	PHA	RMACAR	Α	SA	FD	
	-02	(covers petition	<b>Care public inquiries and concerns</b> routine inquiries, complaints and concerns, as well as letters and organized writing campaigns) e by subject)	CY+1y	2у	DE
			TON STATEMENT at the end of the fourth calendar year.			
		NOTE:	Executive correspondence (including letters addressed to the Minister with replies and associated reference materials from the Executive Director, or equivalent, as well as responses interpreting ministry policies that may be of potential legal value) is filed under <u>ARCS secondary 280-30</u> for consistency purposes.			
	-20	(include agencie advice is respons	Care consultation case files s correspondence between ministries, government s, health practitioners, and equivalents where expert s provided, or received, by PharmaCare staff in se to specific inquiries) e by issue)	SO	2у	DE
		Destroy resolved	TION STATEMENT two years after a response is provided, the issue is d or abandoned, and when no longer required for ce purposes.			
		SO:	when a response is provided, the issue is resolved or abandoned, and when no longer required for reference purposes			
		DE:	The PharmaCare consultation case files may be destroyed because they document routine consultations that reflect PharmaCare policies and procedures. Any issues of a significant nature are sufficiently documented in records retained under the <i>Executive Records Schedule</i> (102906).			

# END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70420 PHARMACARE REGISTRATION AND UTILIZATION MONITORING

Records relating to the eligibility of pharmacies and individuals to submit claims under PharmaCare programs pursuant to the <u>Continuing Care Programs</u> <u>Regulation (BC Reg. 146/95)</u>, and in accordance with the <u>Pharmacy Operations</u> <u>and Drug Scheduling Act (SBC 2003, c. 77)</u>.

This primary documents the registration of pharmacies that participate in the PharmaCare program and the auditing of their claims to ensure compliance with the terms of their participation agreement and with PharmaCare policy. Auditing of drug usage and prescription practices for individuals and pharmacies is performed by the PharmaCare Audit section of the Financial and Corporate Services Branch, and is documented in section 2 of this *ORCS*.

This primary also relates to PharmaCare program utilization monitoring under the Restricted Claimant Program. Individuals are monitored in order to apply or lift restrictions to specified physicians and pharmacies and if they are in suspected violation of residency eligibility criteria.

Record types include correspondence, applications, agreements, memoranda, and inspection, audit and statistical reports.

For accounts receivable, see <u>ARCS primary 935</u>. For audit records, see section 2 of this ORCS. For outstanding accounts, see <u>ARCS primary 935</u>. For plan benefit rules, see primary 70322.

The ministry OPR is HIBC Operations unless otherwise noted below. See specific secondaries for OPR retention schedules.

70420	PHA	PHARMACARE REGISTRATION AND UTILIZATION MONITORING		Α	SA	FD
	All n	on-OPR	offices will retain these records for:	SO	nil	DE
	-00	(covers standa	and procedures s final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)	SO	5y	FR
		Transf	TION STATEMENT er to the government archives five years after the policy aced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			

			ation schedule, as defined by the <u>Information Management</u> your <u>Government Records Officer</u> .		710, 0.	<u> </u>
70420	PHA		RE REGISTRATION AND UTILIZATION ORING	Α	SA	FD
	-01	Genera	l	CY+1y	2у	DE
			TION STATEMENT at the end of the fourth calendar year.			
PIB	-02	(covers the tele health c (PHN) r (arrange	e by PHN)	SO+2y	nil	DE
		Destroy	TION STATEMENT two years after review is complete and decision is ot to restrict the claimant.			
		SO:	when review is complete and decision is made not to restrict the claimant			
		NOTE:	These records document the monitoring of tips received from pharmacists, physicians or other health care provider requesting that a claimant be restricted. The Pharmaceutical, Laboratory and Blood Services Division pharmacist reviews the tip and monitors the beneficiary. The pharmacist then annotates the Restricted Claimant Request to Restrict form with their decision and sends it to HIBC.			
		NOTE:	If the decision is not to restrict the claimant, then records are filed under this secondary. If the decision is to restrict the claimant, then HIBC opens a 70420- 30 file.			
PIB	-03	Suspec	t claimant PHN reports	SO+2y	nil	DE
		RETENTION STATEMENT Destroy two years after no longer needed for decision support purposes.				
		OPR:	Pharmaceutical, Laboratory and Blood Services Division			
		SO:	when no longer needed for decision support purposes			
				(conťd)		

(cont'd)

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70420	PHA	RMACAR MONITO	E REGISTRATION AND UTILIZATION DRING	Α	SA	FD
			This secondary consists of suspect PHN report summary sheets listing claimants who are suspected by the PharmaCare Audit section of misusing selected known abuse medications paid by PharmaCare and a PHN history report for each PHN. The cover sheet lists claimants (by PHN and name), prescription drugs, number of doctors, numbers of pharmacies and number of claims. The Pharmaceutical, Laboratory and Blood Services Division pharmacist reviews the report and decides whether to restrict the claimant(s). If the decision is to restrict a claimant(s), the pharmacist annotates the cover sheet and sends the PHN history report for the restricted claimant(s) to HIBC and HIBC opens a 70420-30 restricted beneficiary case file.			
	-20		cy registration and monitoring files	SO	7у	DE
			unscanned paper forms, where applicable, and ic images stored in the MaxImage System)			
		(includes agreeme Emerger B agreer of audit r (arrange	s pharmacy participation agreements, previous ents, Methadone Maintenance Payment Program and ncy Contraceptive Pill Program Evaluation forms, Plan ments, Pharmacy Closure forms [HLTH 5343], copies reports, and correspondence) by pharmacy code)			
		(paper a	nd electronic images)			
		Destroy	ION STATEMENT seven years after the pharmacy's participation in Care programs is terminated.			
		SO:	when the pharmacy's participation in PharmaCare programs is terminated			
		NOTE:	Pharmaceutical, Laboratory and Blood Services Division copies of audit reports can be classified under section 2 of this <i>ORCS</i> as non-OPR audit reports. Financial Policy and Monitoring Services Branch performs audits on behalf of PharmaCare and has non-OPR copies of monitoring files for cases of fraud.			
		NOTE:	For disposition of the paper forms that have been scanned, see secondary -21.			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70420	PHARMACARE REGISTRATION AND UTILIZATION MONITORING			Α	SA	FD
	-21	Pharma	acy registration and monitoring files - scanned	SO	nil	DE
		Destroy	TON STATEMENT when the imaged version has been verified for quality kup has taken place.			
		SO:	when the imaged version has been verified for quality and backup has taken place			
		NOTE:	This secondary only covers paper forms that have been scanned and stored in the MaxImage System. Paper forms created prior to the scanning program and digitized images of the paper forms are classified under secondary -20.			
	-22	(covers Informat	<b>acy registration data</b> data stored in the PharmaCare Centralized tion System) nic records)	SO	nil	DE
			TON STATEMENT when participation agreement with pharmacy is ted.			
		SO:	when participation agreement with pharmacy is terminated			
	-25	(include: forms, a	<b>Net BC Client Update files</b> s HealthNet BC Client Update for Medical Practice and related correspondence) e by pharmacy code)	SO	7у	DE
		Destroy pharma	TON STATEMENT seven years after the data access agreement with the cy is terminated and Data Access Services notifies at this has occurred.			
		SO:	when the data access agreement with the pharmacy is terminated and Data Access Services notifies HIBC that this has occurred.			
		7y:	The retention period ensures the records will be available for research and reference purposes.			
				(cont'd)		

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70420	PHA	RMACAF MONIT	RE REGISTRATION AND UTILIZATION ORING	Α	SA	FD
		NOTE:	Pharmacies request read only access to PharmaNet from the ministry. Requests are received by HIBC and updates to PharmaNet are performed by HIBC via the forms sent by the ministry to HIBC.			
		NOTE:	These records are filed separately from participation agreements, which are classified in -20.			
PIB	-30	(include Restrict spreads	ted beneficiary case files es correspondence, Restricted Claimant Request to form, suspected claimant PHN report, Excel sheets, and restricted beneficiary letters) e LAN files by PHN and paper files by beneficiary	SO+7y	nil	DE
		Destroy requesti incarcer	TION STATEMENT seven years after a letter from the doctor is received ing a restriction lift, a restriction was due to ration only and the restriction is lifted, there has been ity for two years, or the beneficiary is deceased.			
		SO:	when a letter from the doctor is received requesting a restriction lift, when a restriction was due to incarceration only and the restriction is lifted, when there has been no activity for two years, or the beneficiary is deceased			
		7y:	The retention period ensures the records will be available for research and reference purposes.			
		NOTE:	Restricted beneficiaries are those claimants identified as misusing the PharmaCare program.			
		NOTE:	These files will be kept onsite due to low volumes.			
PIB	-40	(include the ben	le beneficiary case files ("Snowbirds") es correspondence with the Medical Services Plan and eficiary, and PharmaNet reports of prescriptions filled) e by PHN)	CY+1y	nil	DE
			TION STATEMENT at the end of the second calendar year.			
				(conťd)		

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70420 PHARMACARE REGISTRATION AND UTILIZATION MONITORING A SA FD NOTE: Ineligible beneficiaries include "Snowbirds" and equivalents who do not meet residency eligibility criteria. Image: Comparison of the provided structure of

NOTE: Both PharmaCare and Medical Services Plan (MSP) business services are administered by HIBC. When notice is received from MSP to verify any claims paid out by PharmaCare to a beneficiary for a specific time, and if evidence of an ineligible claim is confirmed, documents are all forwarded to Revenue Reconciliation. If no claims were paid, the original letter is retained by MSP and the copy to PharmaCare is destroyed. Payment is received by the Revenue Reconciliation department of the Ministry of Health and classified under <u>ARCS</u> secondary 935-20. Collections not received after six years are classified under <u>ARCS</u> secondary 935-30.

END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70450 PHARMACARE RESEARCH AND EVALUATION

Records relating to the development, management review and analysis of policy and programs to evaluate program objectives and efficiency through statistical and other methods. This primary also relates to research into issues concerning pharmacology, demographics, economics, and other issues which may affect the provision of service.

Record types include correspondence, memoranda, surveys, presentations, literature and reference materials, and statistics and reports.

For committees and working groups, see <u>ARCS primary 200</u>. For contract management and administration, see <u>ARCS primary 1070</u>. For cooperation and liaison, see <u>ARCS primary 230</u>.

For information on the PharmaCare Claims Data Mart, see the Information System Overview.

For PharmaCare strategic and program planning, see primary 70480. For reference materials, see primary 70300-20.

For training materials, including the development of educational tools and materials for healthcare professionals, patients, and the general public, see <u>ARCS primary 1735</u>.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70450	PHARMACARE RESEARCH AND EVALUATION           All non-OPR offices will retain these records for:			Α	SA	FD
				SO	nil	DE
	-00	Policy (covers standa	SO	5у	FR	
		Transfe	TION STATEMENT er to the government archives five years after the policy aced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	Genera	al	CY+1y	2у	DE
			ITION STATEMENT y at the end of the fourth calendar year.			
			Key to ARCS/ORCS Codes and Acronyms			

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70450	PHA	RMACARE RESEARCH AND EVALUATION	Α	SA	FD
	-02	(superseded by secondary -07 PharmaCare statistical reports)			
	-03	(superseded by secondary -07 PharmaCare statistical reports)			
	-04	(superseded by secondary -07 PharmaCare statistical reports)			
	-05	(superseded by secondary -07 PharmaCare statistical reports)			
	-06	(superseded by secondary -07 PharmaCare statistical reports)			
	-07	PharmaCare statistical reports	SO	nil	DE
		(covers records relating to the collection and analysis of data to produce statistical reports on a regular and ad-hoc basis)			
		(arrange by report type)			
		(supersedes and merges former secondaries 70450-02			
		PharmaCare statistical reports-daily and weekly payments, 70450-03 PharmaCare statistical reports-monthly payments,			
		70450-03 PharmaCare statistical reports-monthly payments,			
		totals and averages, 70450-05 PharmaCare statistical reports-			
		ad hoc, and 70450-06 PharmaCare statistical reports-job files)			
		RETENTION STATEMENT			
		Destroy when information is obsolete or no longer required for			
		reference purposes.			
		SO: when information is obsolete or no longer required for reference purposes			
	-20	(superseded by primary 70300-20 Pharmaceutical reference materials)			
	-30	PharmaCare research and evaluation project files	SO+1y	5y	FF
		(covers records relating to all aspects of research project			
		management, including participation in joint initiatives and			
		projects conducted in cooperation with external and internal agencies and participation in PLBSD-sponsored studies)			
		(includes project charters, briefing notes, presentations,			
		surveys, questionnaires, reports, reference material, working			
		papers, correspondence and memoranda)			
		(arrange by project or program, then by fiscal year)			
		RETENTION STATEMENT			
		Transfer to the government archives six years after project is			
		completed or abandoned and when no longer required for	(cont'd)		
		operational or reference purposes.			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70450 PHARMACARE RESEARCH AND EVALUATION A SA FD

- SO: when project is completed or abandoned and when no longer required for operational or reference purposes
- FR: The government archives will fully retain PharmaCare research and evaluation project files because they document the evaluation and analysis of policy and programs on such factors as efficiency and meeting objectives. Also includes PharmaCare's participation in cross-government projects such as the National Pharmaceuticals Strategy.
- NOTE: This secondary was originally intended to capture data management and query records related to statistical research (demographics) conducted by PharmaCare for program evaluation purposes, but has been expanded to reflect all program research and evaluation projects.

END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

# 70480 PHARMACARE STRATEGIC AND PROGRAM PLANNING

Records relating to the initiation, development, planning, implementation, monitoring and evaluation of Pharmaceutical, Laboratory and Blood Services Division (PLBSD) programs, priorities, policies and strategies, initiated by, or affecting, the PharmaCare program.

Also includes records relating to participation in strategic initiatives that address pharmaceutical issues of national importance. Other national initiatives include the Common Drug Review (CDR), the Canadian Optimal Medication Prescribing and Utilization Service (COMPUS) and the National Prescription Drug Utilization Information System (NPDUIS).

Various PLBSD committees assist in these initiatives, including the Advisory Committee on Pharmaceuticals, the Drug Benefit Adjudication Advisory Committee, and the Education for Quality Improvement in Patient Care Project Working Group (EQIP).

Record types include briefing material, correspondence, fact sheets, literature and reference material, presentation material, research papers, reports, statistics, strategic plans, correspondence and memoranda and other types of records as indicated under relevant secondaries below.

For budget planning and estimates, see <u>ARCS primary 1000</u>.

For committee and working group records that document strategic planning for the delivery of the PharmaCare program, see *ARCS* primary 200.

For contract management and administration, see <u>ARCS primary 1070</u>. For reference materials, see primary 70300-20.

The ministry OPR is Pharmaceutical, Laboratory and Blood Services Division unless otherwise noted below. See specific secondaries for OPR retention schedules.

70480	PHA	RMACARE STRATEGIC AND PROGRAM PLANNING	Α	SA	FD
	All n	on-OPR offices will retain these records for:	SO nil	DE	
	-00	Policy and procedures(covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)RETENTION STATEMENTTransfer to the government archives five years after the policy is replaced or becomes irrelevant.SO:when policy is replaced or becomes irrelevant	SO	5y	FR
			(conťd)		

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

0 P	PHAF	RMACAF	RE STRATEGIC AND PROGRAM PLANNING	Α	SA	FD
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
-(	01	Genera	I	CY+1y	2у	DE
			TION STATEMENT at the end of the fourth calendar year.			
-:	20	(covers division) (include reviews approve (arrange RETENT Transfe	s presentations, reports, discussion papers, program , briefing notes, policy discussions, meeting minutes, ed strategic plans, and program evaluations) e by program or plan) TION STATEMENT r to the government archives seven years after no equired for program planning and policy development	SO	7у	FR
		SO:	when no longer required for program planning and policy development purposes			
		7y:	The retention period ensures the records will be available for future planning and policy development.			
		FR:	The government archives will fully retain PharmaCare program and policy development files because they document the development, planning, implementation and evaluation of programs, initiatives and policies that address pharmaceutical issues.			

### END OF PRIMARY

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

### 70490 PHARMANET MEDICATION HISTORY

Records relating to the maintenance of medication history and associated adverse reactions, idiosyncratic conditions, and any related comments that are on the patient's medication profile as entered by the pharmacist into PharmaNet. A patient's medication profile includes patient demographics and almost all prescription drugs dispensed at a community pharmacy. It may contain information on patient allergies and clinical conditions. Rarely would it include information on office sample medications.

The Drug Information System (DIS) database is a subsystem of PharmaNet used to maintain BC patients' drug clinical information. The primary objective of the DIS is to provide pharmacists and dispensing physicians of British Columbia with the tools to monitor medications with respect to potential drug therapy hazards, and public safety. The database assists in the management of healthrelated issues by providing the pharmacist access to supporting information designed to aid in the dispensing decision.

The primary focus of DIS is to provide information through Drug Use Evaluation (DUE), which is performed on all applicable prescriptions. Supporting inquiry and update functions allow the College of Pharmacists of British Columbia (CPBC) a quick and efficient means to answer patient and drug-related inquiries, update patient-related information, and selected drug information.

The system also gives patients access to drug counseling information through pharmacies of BC, and their own complete medication profile information through the CPBC.

NOTE: Pursuant to the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77), effective April 1st, 2009, the Ministry of Health assumed responsibility as the data steward for the DIS database residing on PharmaNet from the College of Pharmacists of BC.

Record types include an electronic database and a Medical History (Medhist) Data Mart.

For claims history information, see secondary 70350-20.

For the Drug Information System (DIS), see the Information System Overview (ISOS) for a subsystem.

For the Medication History (Medhist) data mart, see the ISO.

For the PharmaCare Centralized Information System (PCIS), see the ISOS.

The ministry OPR is Health Insurance BC unless otherwise noted below. See specific secondaries for OPR retention schedules.

70490	PHARMANET MEDICATION HISTORY	Α	SA	FD
	All non-OPR offices will retain these records for:	SO	nil	DE

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved info	rmation schedule,	as defined by the	Information	Management A	Act (SBC 20	<u>)15, c. 27)</u> .
For more information cons	sult your <u>Governm</u>	ent Records Office	<u>r</u> .			

70490	PHA	RMANET	MEDICATION HISTORY	Α	SA	FD
	-00	-00 Policy and procedures (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)				FR
		Transfei	TON STATEMENT r to the government archives five years after the policy ced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.		2y nil	
	-01	Genera	l	CY+1y	2у	DE
			ION STATEMENT at the end of the fourth calendar year.			
PIB	-20	(covers	formation System data data stored in the Drug Information System) nic records)	CY+9y	nil	DE
			ION STATEMENT at the end of the tenth calendar year.			
		10y:	The retention period is based upon ministry practice to retain patient files for the ten-year period specified in the <u>Hospital Act Regulation (BC Reg. 121/97, s. 14)</u> regarding the retention of patient records by hospitals.			
		NOTE:	The <u>Limitation Act (RSBC 1996, c. 266)</u> allows up to six years for the instigation of legal action against a hospital, hospital employee, or medical practitioner in cases of alleged hospital negligence or medical malpractice.			
		NOTE:	This secondary contains all data elements (PharmaNet tables) related to the Drug Information System, except for clinical data provided by <i>First</i> <i>Databank</i> .			

(cont'd)

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

490 PHA	RMANET	MEDICATION HISTORY	Α	SA	FD
	NOTE:	All prescriptions processed for a PHN are stored In the Medication History Table (Medhist). The table contains all information related to an individual's clinical history, other than cost information.			
	NOTE:	Source data are extracted and loaded into the Medhist Data Mart at regular intervals.			
-30	(covers for the F markete	rocessing data clinical data provided by First DataBank that is used PharmaNet network and is specific to pharmaceuticals ed in Canada) nic records)	SO	nil	DE
	Destroy	TION STATEMENT when information is no longer required for operational earch purposes.			
	SO:	when information is no longer required for operational and research purposes			
	NOTE:	Drug monograph information is supplied to PharmaNet by <i>First DataBank</i> and may be augmented by the College of Pharmacists of British Columbia. Monographs include information in regard to drug ingredients, possible side effects, contraindicated drugs and equivalents.			
	NOTE:	Records created under this primary are uploaded to the Medhist Data Mart and currently retained indefinitely.			
-40	(covers Registry Mart)	<b>t Data Mart data</b> data extracted from the PharmaNet and the Client source systems and retained in the Medhist Data nic records)	SO	nil	DE
	RETENT Destroy	/ TION STATEMENT when data is no longer required for ongoing analysis as and to support management level reporting.			
	SO:	when data is no longer required for ongoing analysis purposes and to support management level reporting			

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

70490	PHA	RMANET	MEDICATION HISTORY	Α	SA	FD
		NOTE:	PharmaNet source data are extracted and loaded into the Medhist Data Mart at regular intervals and are currently retained indefinitely in anonymized form.			
	-41	(covers	<b>t Data Mart reports</b> various prompted data mart reports based primarily on tracted from the Drug Information System database)	SO	nil	DE
		Destroy	TON STATEMENT when reports are no longer required to support ement level reporting.			
		SO:	when reports are no longer required to support management level reporting			

END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

# SECTION 2

# PHARMACARE AUDIT

# PRIMARY NUMBERS

# 70555 - 70599

Section 2 covers records relating to the audit of PharmaCare-paid claims made by pharmacies. This includes records relating to the approval and planning of audit activities and priorities; confirmation of PharmaCare-paid claims by patients and doctors; the audit of pharmacies, selected randomly by geographic location or as a result of third party tips, involving visits to the pharmacies to review documentation in support of PharmaCare-paid claims (on-site pharmacy audits); and the audit of specific issues and drugs focusing on overpayments resulting from incorrect submissions to PharmaCare by pharmacies (PharmaNet data analysis audits).

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

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- 70575 SELECT
- 70580 ON-SITE PHARMACY AUDITS
- 70585 PHARMANET DATA ANALYSIS AUDITS

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

# 70555 PHARMACARE AUDIT - GENERAL

Records not shown elsewhere in the PharmaCare audit section relating to the auditing of pharmacies in order to detect and deter inappropriate billing of PharmaCare claims and recover any inappropriately paid monies. This includes audit recovery summaries, pharmacy files ("tips files") and PharmaCare audit issue files.

Record types include: correspondence, memoranda, and reports.

NOTE: Only records that cannot be classified in a more specific primary or secondary may be classified under this primary.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

70555	PHA	RMACAF	RE AUDIT - GENERAL	Α	SA	FD
	All n	on-OPR c	offices will retain these records for:	SO	nil	DE
	-00	(covers	and Procedures final/approved versions of policies, procedures, ds, and guidelines pertaining to this section)	SO	5у	FR
		Transfe	FION STATEMENT r to the government archives five years after the policy ced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
		NOTE:	This secondary includes the <i>PharmaCare Audit Procedures Manual</i> .			
	-01	Genera	1	CY+1y	nil	DE
			TION STATEMENT at the end of the second calendar year.			
		NOTE:	Throughout this section, this secondary covers miscellaneous records that relate to the primary but do not document decisions and actions, and do not related to topics that warrant specific classifications.			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

0555	PHA	RMACAF	RE AUDIT - GENERAL	Α	SA	FD
	-02	(include copies d	ecoveries ("ADM binder") es audit recovery spreadsheets, photocopied cheques, of correspondence relating to recoveries and general nformation)	FY+2y	5у	DE
			TION STATEMENT at the end of the eighth fiscal year.			
		8y:	The eight-year combined active and semi-active retention period is consistent with <i>ARCS</i> retention periods for other financial records.			
		NOTE:	The "ADM binder" provides details on all recoveries made by PharmaCare Audit in a fiscal year for the Assistant Deputy Minister.			
	-03		ecovery reports is of weekly audit recovery reports)	FY	7у	DE
			TION STATEMENT at the end of the eighth fiscal year.			
		8y:	The eight-year combined active and semi-active retention period is consistent with <i>ARCS</i> retention periods for other financial records.			
		NOTE:	PharmaCare Audit receives these system generated reports from HIBC. The reports list all HIBC recovery deductions. PharmaCare Audit checks these reports against the audit recovery spreadsheet (70555-02) to ensure that all audit recoveries requested by PharmaCare Audit are performed. Verified recoveries are highlighted and the reports are then filed in a binder for each fiscal year.			
	-20	(include confirma	acy files ("tips files") is tips, correspondence with pharmacy and ation letters with anomalies) is by pharmacy code)	SO+1y	6у	DE
		Destroy	TION STATEMENT seven years after pharmacy participation agreement on terminated.			
		SO:	when pharmacy participation agreement has been terminated	(cont'd)		

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70555	PHA	RMACAF	RE AUDIT - GENERAL	Α	SA	FD
		7y:	The combined active and semi-active seven-year retention ensures that the records are available for reference purposes.			
		NOTE:	Pharmacy participation agreements are classified under 70420-20 Pharmacy registration and monitoring files.			
	-30	(include analysis	aCare audit issue files is correspondence, emails, memoranda, data and s, preliminary reports and notes) nic records)	SO	nil	DE
		Destroy purpose	TION STATEMENT when no longer required for operational or reference es, or when issue becomes the subject of a PharmaNet alysis audit.			
		SO:	when no longer required for operational or reference purposes, or when issue becomes the subject of a PharmaNet data analysis audit			
		NOTE:	When an issue is first identified by PharmaCare Audit, an electronic issue file is opened, data is collected and a preliminary analysis is completed. PharmaCare Audit, with input from the PharmaCare Audit Working Group and/or the PharmaCare Audit Review Committee, decides whether to perform an audit on this issue or not. If an audit is performed, electronic and paper PharmaNet data analysis audit files (70585-20 and -25) are opened, and the issue file records are moved to these files. If an audit is not performed, the issue file is kept in case this issue arises again. Issue files can be referred to repeatedly and an audit can be performed years after the issue first arose.			

# END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

### 70560 AUDIT APPROVAL AND PLANNING

Records relating to the approval of audit activities and the planning and development of audit policies, priorities and activities. PharmaCare Audit Review Committee (PARC) establishes priorities and policies for PharmaCare Audit and approves pharmacy audits. PARC also helps to move recoveries forward, reviews and makes recommendations for the settlement of disputed audits and the termination of Pharmacy Participation Agreements. PharmaCare Audit Working Group (PAWG) discusses and reviews PharmaCare Audit issues, tips and audit reports and, where required, either takes action or makes recommendations to PARC.

Record types include: agendas, minutes, correspondence and reports.

For records relating to committees other than PARC and PAWG, see <u>ARCS</u> primary 200 and <u>ARCS primary 201</u>.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

70560	AUD		ROVAL AND PLANNING	Α	SA	FD
	All no	on-OPR	offices will retain these records for:	SO	nil	DE
	-00	Policy (covers standa	SO	5y	FR	
		Transfe	TION STATEMENT er to the government archives five years after the policy aced or becomes irrelevant.			
		SO:	when policy is replaced or becomes irrelevant			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
	-01	Genera	al	CY+1y	nil	DE
			TION STATEMENT y at the end of the second calendar year.			
	-02	Annua	l audit plans	CY+4y	5у	DE
			TION STATEMENT y at the end of the tenth calendar year.	(cont'd)		

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

0560	AUD	JDIT APPROVAL AND PLANNING			SA	FD
		10y:	The combined active and semi-active ten-year retention ensures that the records are available for long-term planning purposes.			
		NOTE:	The annual audit plan is submitted to PARC for review and approval. The PharmaCare Audit Manager keeps a copy of the approved annual audit plan.			
	-20	Pharma	acare Audit Review Committee (PARC) records	SO	7у	DE
			TION STATEMENT			
			v seven years after no longer required for operational or ce purposes.			
	-30	Pharma	acare Audit Working Group (PAWG) records	SO	7у	DE
		RETEN	TION STATEMENT			
			v seven years after no longer required for operational or ce purposes.			
		SO:	when no longer required for operational or reference purposes			
		7y:	The seven-year semi-active retention period for secondaries -20 and -30 is consistent with the <u>ARCS</u> <u>200-20</u> retention for ministry committee files.			

END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

### 70565 CLAIMS CONFIRMATION - GENERAL

Records relating generally to the confirmation of pharmacies' claims, using the Confirmation Letter System, not shown elsewhere in this primary block. This includes system-generated confirmation emails and BC Mail Plus Service Request forms.

For random claims confirmation, see primary 70570. For select claims confirmation, see primary 70575. For the Confirmation Letter System Information System Overview (ISO), see the ISO section.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

CLA	IMS CONFIRMATION - GENERAL	Α	SA	FD
All n	on-OPR offices will retain these records for:	SO	nil	DE
-00	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)	SO	5y	FR
	RETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
-01	General	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	BC Mail Plus Service Request forms	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-03	<b>Confirmation letter system confirmation emails</b> (covers emails generated by the Confirmation Letter System and automatically sent to the auditors to confirm the generation and printing of confirmation letters, scanning of letter barcodes and the deletion of confirmation letter data)	SO+1m (conťd)	nil	DE
	All no -00 -01 -02	<ul> <li>(covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)</li> <li>RETENTION STATEMENT         Transfer to the government archives five years after the policy is replaced or becomes irrelevant.         </li> <li>SO: when policy is replaced or becomes irrelevant</li> <li>FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.     </li> <li><b>01 General</b>         RETENTION STATEMENT         Destroy at the end of the second calendar year.     </li> <li><b>03 Confirmation letter system confirmation emails</b>         (covers emails generated by the Confirmation Letter System and automatically sent to the auditors to confirm the generation and printing of confirmation letters, scanning of     </li> </ul>	All non-OPR offices will retain these records for:       SO         -00       Policy and procedures (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)       SO         RETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.       SO:         SO:       when policy is replaced or becomes irrelevant       FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.       CY+1y         -01       General       CY+1y         RETENTION STATEMENT Destroy at the end of the second calendar year.       CY+1y         -02       BC Mail Plus Service Request forms (covers emails generated by the Confirmation Letter System and automatically sent to the auditors to confirm the generation and printing of confirmation letters, scanning of       SO+1m	All non-OPR offices will retain these records for:       SO       nil         -00       Policy and procedures (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)       SO       5y         RETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.       SO:       when policy is replaced or becomes irrelevant         FR:       Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.       CY+1y       nil         -01       General       CY+1y       nil         RETENTION STATEMENT Destroy at the end of the second calendar year.       CY+1y       nil         -02       BC Mail Plus Service Request forms (covers emails generated by the Confirmation Letter System and automatically sent to the auditors to confirm the generation and printing of confirmation letters, scanning of       SO+1m       nil

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

### 70565 CLAIMS CONFIRMATION - GENERAL

A SA FD

**RETENTION STATEMENT** 

Destroy one month after receipt of email stating that confirmation letter data and confirmation tracking data, or select confirmation letter data has been successfully deleted from the Confirmation Letter System.

SO: upon receipt of email stating that confirmation letter data and confirmation tracking data, or select confirmation letter data has been successfully deleted from the Confirmation Letter System

END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

# 70570 CLAIMS CONFIRMATION - RANDOM

Records relating to the confirmation of randomly selected pharmacies' PharmaCare-paid claims using the Confirmation Letter System. Patient confirmation survey letters are sent to approximately 1000 randomly selected patients of 12 randomly selected pharmacies each month (approximately 85 letters to patients of each pharmacy) to confirm that the patient received medications for which there is a PharmaCare paid claim.

Record types include: confirmation letters and statistical reports.

For select patient and doctor confirmation letters sent in support of on-site audits, see primary 70575.

For the Confirmation Letter System Information System Overview (ISO), see the ISO section.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

	CLAIMS CONFIRMATION - RANDOM				FD
All no	on-OPR of	fices will retain these records for:	SO	nil	DE
-00	(covers fi	inal/approved versions of policies, procedures,	SO	5y	FR
	Transfer	to the government archives five years after the policy			
	FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records			
	SO:	when policy is replaced or becomes irrelevant			
-01	General		CY+1y	nil	DE
		-			
-02	Annual o	confirmation letter plan	CY+1y	nil	DE
		-			
			(cont'd)		
	-00	<ul> <li>-00 Policy at (covers fistandard)</li> <li>RETENTI Transfer is replace</li> <li>FR:</li> <li>SO:</li> <li>-01 General</li> <li>RETENTI Destroy at Control Contro Control Control Control Control Control Contro Control Contr</li></ul>	<ul> <li>(covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)</li> <li>RETENTION STATEMENT         Transfer to the government archives five years after the policy is replaced or becomes irrelevant.     </li> <li>FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.     </li> <li>SO: when policy is replaced or becomes irrelevant</li> <li>General         RETENTION STATEMENT             Destroy at the end of the second calendar year.     </li> </ul>	-00Policy and procedures (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)SORETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.SO:•01GeneralCY+1y•01GeneralCY+1yRETENTION STATEMENT 	-00Policy and procedures (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)SO5yRETENTION STATEMENT Transfer to the government archives five years after the policy is replaced or becomes irrelevant.FR:Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.SO:when policy is replaced or becomes irrelevant-01GeneralCY+1ynilRETENTION STATEMENT Destroy at the end of the second calendar year.CY+1ynil

Schedule: 123389

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This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

570	CLAII	MS CON	FIRMATION - RANDOM	Α	SA	FD
		NOTE:	This includes a list of 144 randomly selected pharmacies whose paid claims will be checked by the confirmation letter program throughout the year (12 per month). This random list is generated in Excel.			
	-03	Confirm	nation letter pharmacy log	SO	nil	DE
			TON STATEMENT when no longer required to support the confirmation ogram.			
		SO:	when no longer required to support the confirmation letter program			
		NOTE:	This is a listing by month of all pharmacies for which confirmation letters were sent out. This list is used to make an "exclude list" to ensure that the same pharmacies are not selected multiple times.			
	-04	Late let	ters with anomalies	SO	NA	NA
		When th appropr	TON STATEMENT ne anomaly has been investigated, file in the iate pharmacy file if confirmed. If the anomaly is led, the letter can be destroyed.			
		SO:	when the anomaly has been investigated			
		NA:	if the anomaly is confirmed, the letter is filed on the appropriate pharmacy file ("tips file") 70555- 20. If the anomaly is unfounded, the letter can be destroyed under the Transitory Information Schedule 102901.			
	-05	Returne	ed letters with anomalies	SO	NA	NA
		If the an pharma Confirm	TION STATEMENT nomaly has been confirmed, file letter in the appropriate cy file. If the anomaly is unfounded, return letter to the ation Letter staff person to update the system, then under the Transitory Information Schedule.			
		SO:	when letter barcodes have been scanned into the system, marked as anomalies, any anomalies have been investigated by an auditor and, if applicable, the status of the letter has been changed to "data confirmed"			
				(cont'd)		

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70 CLA	IMS CONFIRMATION - RANDOM	Α	SA	FD
	NA: if the anomaly is confirmed, the letter is filed on the appropriate pharmacy file 70555-20. If the anomaly is unfounded, the letter is returned to the Confirmation Letter staff person who updates the status in the system to "data confirmed." Letters without anomalies are transitory records and can be destroyed under the Transitory Information Schedule (102901).			
-06	Statistical reports – annual	CY+2y	5у	DE
	RETENTION STATEMENT			
	Destroy at the end of the eighth calendar year.			
-07	Statistical reports – monthly	CY+2y	5у	DE
	RETENTION STATEMENT			
	Destroy at the end of the eighth calendar year.			
-20	Confirmation letter files	SO+3m	nil	DE
	(includes cover sheet recording number of letters sent and			
	blue copies of anomaly letters referred to auditor)			
	(arrange by pharmacy code and month of confirmation letter generation)			
	RETENTION STATEMENT			
	Destroy three months after letters are mailed.			
	SO: when letters are mailed			
-30	Confirmation letter data	SO+3m	nil	DE
	(electronic records)			
	RETENTION STATEMENT			
	Destroy three months after letters are mailed.			
	SO: when letters are mailed			
-40	Confirmation letter tracking data (electronic records)	SO+3m	nil	DE
	RETENTION STATEMENT			
	Destroy three months after letters are mailed.			
	SO: when letters are mailed			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70570	CLA	AIMS CONFIRMATION - RANDOM		Α	SA	FD
	-50	(consist	nation letter statistical data s of depersonalized statistical data) nic records)	SO	nil	DE
			TION STATEMENT when no longer required to support the confirmation ogram.			
		SO:	when no longer required to support the confirmation letter program			
		NOTE:	Letters are generated and managed in the Confirmation Letter System. Once returned letters have been scanned, their status can be viewed, updated and, if necessary, the letter can be generated and printed again. Ninety days after the letters were generated, the file is closed, the confirmation letter data and the confirmation letter tracking data are deleted and the letters can no longer be viewed, updated or generated. Only depersonalized statistical data remains in the system.			
		NOTE:	Undeliverable letters and returned letters without anomalies are transitory records which can be destroyed under the <u><i>Transitory Information Schedule</i></u> (102901).			

END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

# 70575 CLAIMS CONFIRMATION - SELECT

Records relating to the confirmation of specific PharmaCare-paid claims as part of an on-site pharmacy audit using the Confirmation Letter System. PharmaCare auditors use the system to generate letters to randomly selected patients of a selected pharmacy, to specifically selected patients of a selected pharmacy or to doctors who wrote prescriptions that were filled by a selected pharmacy. These letters are generated in the test/development area of the Confirmation Letter System so that the results are not included in the random confirmation letter statistical reports. PharmaCare auditors often do a second mailing of letters to patients from whom they have not yet received an answer. First and second mailing letters are handled in the same way.

Record types include: select confirmation letters and tracking sheets.

For random confirmation letters, see primary 70570. For the Confirmation Letter System Information System Overview (ISO), see the ISO section.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

70575	CLA	Α	SA	FD		
	All n	on-OPR o	offices will retain these records for:	SO SO	nil 5y	DE FR
	(c	(covers	and procedures final/approved versions of policies, procedures, rds, and guidelines pertaining to this section)			
		Transfe	TION STATEMENT or to the government archives five years after the policy ced or becomes irrelevant.			
		FR:	Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.			
		SO:	when policy is replaced or becomes irrelevant			
	-01	Genera	al	CY+1y	nil	DE
			TION STATEMENT / at the end of the second calendar year.			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

5 C	LAII	LAIMS CONFIRMATION - SELECT		Α	SA	FD
-0	)2	Confirm	nation letter tracking sheets	SO	NA	NA
		When al	ION STATEMENT Il confirmation letters have been returned or audit is ed, file in the relevant on-site pharmacy audit file.			
		SO:	when all confirmation letters have been returned or audit is completed			
		NA:	tracking sheet is filed in the relevant 70580-20 on-site pharmacy audit file.			
		NOTE:	The auditor records the number of letters sent (first and second mailings), date of mailings, number returned, number undeliverable, number with data confirmed and number with anomalies.			
-0	)3	Returne	ed select letters with anomalies	SO	NA	NA
		When th	TON STATEMENT ne letters have been investigated and recorded, file the n the relevant on-site pharmacy audit file.			
		SO:	when letters have been investigated and recorded as anomaly on the tracking sheet or, if the anomaly is resolved, the letter is recorded as data confirmed			
		NA:	letters are filed in the relevant 70580-20 on-site pharmacy audit file			
		NOTE:	When a beneficiary identifies an anomaly in the paid claims, the auditor investigates by telephoning the beneficiary, reviewing documentation during the pharmacy visit and/or contacting the prescribing doctor.			
-0	)4	Returne	ed select letters without anomalies	SO	NA	NA
		File in th	TON STATEMENT ne relevant on-site pharmacy audit file when letters en recorded on the tracking sheet as "data confirmed."			
		SO:	when letters have been recorded on the tracking sheet as "data confirmed"			
		NA:	letters are filed in the relevant 70580-20 on-site pharmacy audit file.			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70575	CLA		MATION - SELECT	Α	SA	FD
	-05	Undeliverab	ble select letters	SO	NA	NA
		RETENTION STATEMENT File in the relevant on-site pharmacy audit file when letters have been recorded on the tracking sheet as "undeliverable".				
			en letters have been recorded on the tracking et as "undeliverable"			
			ers are filed in the relevant 70580-20 on-site armacy audit file			
		the or n retu	s includes letters that cannot be delivered due to patient being deceased, having no fixed address to current address, or letters sent and then urned to PharmaCare Audit as undeliverable by Post Office.			
	-20	Select confi (electronic re	rmation letter data ecords)	SO	nil	DE
		RETENTION S	STATEMENT n letters have been printed for second mailing.			
		SO: whe	en letters have been printed for second mailing			

END OF PRIMARY

### 70580 ON-SITE PHARMACY AUDITS

Records relating to the auditing of individual pharmacies' paid claims to PharmaCare. These audits involve an on-site examination of the pharmacies' records. The selection of pharmacies for on-site audit is either made randomly, by geographic location or as a result of information ("tips") provided to PharmaCare.

Record types include: correspondence, memoranda, and reports.

For on-site audit approvals, see primary 70560. For PharmaNet data analysis audits, see 70585. For "tips," see Pharmacy files, 70555-20.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

	on-OPR offices will retain these records for:	0.0		
00		SO	nil	DE
-00	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)	SO	5у	FR
	RETENTION STATEMENT Transfer to the government archives five years after the polic is replaced or becomes irrelevant.	у		
	fully retain all policy and procedure files created by offices having primary responsibility for policy and			
	SO: when policy is replaced or becomes irrelevant			
-01	General	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>On-site pharmacy audit summaries</b> (electronic records)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
		(conťd)		
		<ul> <li>Transfer to the government archives five years after the polic is replaced or becomes irrelevant.</li> <li>FR: Throughout this section, the government archives w fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These record have evidential value.</li> <li>SO: when policy is replaced or becomes irrelevant</li> <li><b>-01 General</b></li> <li>RETENTION STATEMENT Destroy at the end of the second calendar year.</li> <li><b>-02 On-site pharmacy audit summaries</b> (electronic records)</li> <li>RETENTION STATEMENT</li> </ul>	Transfer to the government archives five years after the policy is replaced or becomes irrelevant.       FR: Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.         SO:       when policy is replaced or becomes irrelevant         -01       General       CY+1y         RETENTION STATEMENT Destroy at the end of the second calendar year.       CY+7y         -02       On-site pharmacy audit summaries (electronic records)       CY+7y         RETENTION STATEMENT Destroy at the end of the eighth calendar year.       CY+7y	Transfer to the government archives five years after the policy is replaced or becomes irrelevant.FR:Throughout this section, the government archives will fully retain all policy and procedure files created by offices having primary responsibility for policy and procedure development and approval. These records have evidential value.SO:when policy is replaced or becomes irrelevantOIGeneralCY+1ynilRETENTION STATEMENT Destroy at the end of the second calendar year.CY+7ynilRETENTION STATEMENT Destroy at the end of the eighth calendar year.CY+7ynil

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

0580	ON-S	SITE PHA	TE PHARMACY AUDITS		SA	FD
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
		NOTE:	These summaries are used by PharmaNet data analysis auditors to ensure that pharmacies are not audited again for the same issue or drug.			
	-20	(include prescrip respons	<b>pharmacy audit files - paper</b> s audit plan, pharmacy questionnaire, scanned tions and invoices, draft audit report, pharmacy e to report, final audit report and documentation on I recovery, if a recovery is recommended)	SO	8y	DI
		Destroy	TON STATEMENT eight years after the audit is complete, any recoveries en made and any criminal investigation is complete.			
		SO:	when the audit is complete, any recoveries have been made and any criminal investigation is complete			
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
	-25	On-site	pharmacy audit files - electronic	SO+8y	nil	D
		Destroy	TION STATEMENT eight years after the audit is complete, any recoveries en made and any criminal investigation is complete.			
		SO:	when the audit is complete, any recoveries have been made and any criminal investigation is complete			
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
		NOTE:	All electronic records relating to an on-site pharmacy audit are filed together on the LAN. When the audit is complete, and any recoveries have been made, the file is burned onto a CD-ROM and deleted from the LAN.			

END OF PRIMARY

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

### 70585 PHARMANET DATA ANALYSIS AUDITS

Records relating to the audit of PharmaCare-paid claims through the review and analysis of PharmaNet data relating to a specific issue or drug. PharmaNet data analysis audits focus on identifying overpayments resulting from incorrect submissions to PharmaCare by pharmacies. Once completed, audits are usually followed by quarterly follow-up data analysis audits which continue to audit and make any recoveries on a particular drug or issue. These follow-up audits are performed quarterly, by fiscal year, to facilitate recoveries and enable online claims error corrections within the 120 day window permitted by PharmaNet.

Record types include: audit plans, correspondence, memoranda, and reports.

For on-site pharmacy audit records, see primary 70580.

The ministry OPR is PharmaCare Audit unless otherwise noted below. See specific secondaries for OPR retention schedules.

70585	PHARMANET DATA ANALYSIS AUDITS           All non-OPR offices will retain these records for:				SA	FD
					nil	DE
	-00	(covers fina	<b>I procedures</b> al/approved versions of policies, procedures, and guidelines pertaining to this section)	SO	5y	FR
		Transfer to	N STATEMENT the government archives five years after the policy or becomes irrelevant.			
		SO: wh	hen policy is replaced or becomes irrelevant			
		ful of pr	nroughout this section, the government archives will lly retain all policy and procedure files created by fices having primary responsibility for policy and rocedure development and approval. These records ave evidential value.			
	-01		N STATEMENT the end of the second calendar year.	CY+1y	nil	DE
	-02	PharmaNe (electronic	t data analysis audit summaries records)	CY+7y	nil	DE
		-	N STATEMENT the end of the eighth calendar year.	(cont'd)		

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70585	PHA	RMANET	DATA ANALYSIS AUDITS	Α	SA	FD
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
		NOTE:	These summaries are used by on-site pharmacy auditors to ensure that pharmacies are not audited again for the same issue or drug.			
	-20	<b>paper</b> (include recover	aNet data analysis audit files ("desk audits") - es audit plan, data and analysis, correspondence, y tracking sheet, recovery payment confirmation and mmary)	SO	8y	DE
		Destroy	TION STATEMENT eight years after the audit is complete and any ies have been made.			
		SO:	when the audit is complete and any recoveries have been made			
		8y:	The eight-year retention period is consistent with ARCS retention periods for financial and audit records.			
	-25	Pharma electro	aNet data analysis audit files ("desk audits") - nic	SO+8y	nil	DE
		Destroy	TION STATEMENT r eight years after the audit is complete and any ies have been made.			
		SO:	when the audit is complete and any recoveries have been made			
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
		NOTE:	All electronic records relating to a PharmaNet data analysis audit are filed together on the LAN. When the audit is complete, and any recoveries have been made, the file is burned onto a CD-ROM and deleted from the LAN.			

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

70585	PHA	RMANET	DATA ANALYSIS AUDITS	Α	SA	FD
	-30		rly follow-up data analysis audit files - paper es correspondence and recovery summary sheets)	SO	8y	DE
		Destroy	RETENTION STATEMENT Destroy eight years after the audit is complete and any recoveries have been made.			
		SO:	when the audit is complete and any recoveries have been made			
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
	-35	Quarter	rly follow-up data analysis audit files - electronic	SO+8y	nil	DE
		Destroy	TION STATEMENT eight years after the audit is complete and any ies have been made.			
		SO:	when the audit is complete and any recoveries have been made			
		8y:	The eight-year retention period is consistent with <i>ARCS</i> retention periods for financial and audit records.			
		NOTE:	All electronic records relating to a quarterly followup data analysis audit are filed together on the LAN. When the audit is complete, and any recoveries have been made, the file is burned onto a CD-ROM and deleted from the LAN.			

END OF PRIMARY

## PHARMACARE SERVICES

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

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## SYSTEM SECTION

## CONFIRMATION LETTER SYSTEM

## SYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Finance and Corporate Services Audit and Investigations Branch PharmaCare Audit

**Date of System Description** 

2011-05-19

#### Purpose

The Confirmation Letter System assists PharmaCare Audit staff in confirming pharmacies' PharmaCare-paid claims. Staff use the system to generate random patient confirmation letters to confirm pharmacies' claims or to generate specific patient or doctor confirmation letters in support of on-site pharmacy audits.

#### **Information Content**

The Confirmation Letter System retrieves PharmaCare claims data and patient and physician information from the Ministry of Health data warehouse.

The Confirmation Letter System retrieves the following data:

- Patient information: PHN, name, address
- Physician information: name, address
- PharmaCare-paid claim information: date of claim, quantity and name of drug, name of pharmacy where prescription was filled

#### Inputs, Processes, and Outputs

An annual random list of 144 pharmacies (12 for each month) is created in Excel using a sampling equation. Each month, the Confirmation Letter System is used to generate up to 100 letters to send to random patients of each of the 12 pharmacies. These letters are printed from the system and mailed to the patients. Approximately 1000 letters are mailed each month.

Returned confirmation letters are sorted into three piles: undeliverable, data confirmed ("OK") and anomalies. The letters' barcodes are scanned into the system and the results are recorded and managed in the system.

Selected confirmation letters are sometimes generated and sent to patients of selected pharmacies and/or doctors who prescribed drugs which were dispensed at selected pharmacies in support of onsite pharmacy audits. These letters are generated in the test/development system so that the results are not included in random confirmation letter statistical reports. (Selected confirmation letters are not managed in the confirmation letter system.)

Outputs consist of system-generated confirmation emails (to confirm letter generation, scanning, etc.), confirmation letters, and monthly and annual statistical reports (for the random confirmation letter program only).

## **CONFIRMATION LETTER SYSTEM**

## DATA RETENTION PLAN

Data Description	Data Retention Period
Confirmation letter data Classification 70570-30	Destroy three months after letters are mailed.
Confirmation letter tracking data Classification 70570-40	Destroy three months after letters are mailed.
Confirmation letter statistical data Classification 70570-50	Destroy when no longer required to support the confirmation letter program.
Select confirmation letter data Classification 70575-20	Destroy when letters have been printed for second mailing.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

END OF OVERVIEW

## HOME OXYGEN SUBSIDY PROGRAM (HOSP) SYSTEM

## **SYSTEM OVERVIEW**

### **Creating Agency**

Ministry of Health and Ministry Responsible for Seniors PharmaCare Division Home Oxygen Program

### **Date of System Description**

2011-05-19

### Purpose

The purpose of the HOSP System is to assist staff in administering subsidies to BC residents requiring oxygen for at-home use, including the registration of clients and suppliers, and the processing of invoices for payment.

### Information Content

The HOSP System contains information necessary to administer the Home Oxygen Program. This includes maintaining tables of suppliers, physicians, health units, city codes and names, oxygen product codes and descriptions, and supplier/product rates. It also includes client information including name, address, personal health number, gender, date of birth, physician name and number, diagnosis and other medical information, application date, approval number, oxygen supply and delivery system, hours of use and flow rates, subsidy rate, supplier code, health unit, physician follow-ups, nursing assessments, close date, reason for file closure, and comments. The invoice processing function includes the supplier name and address, date processed, amounts claimed and amounts approved.

#### Inputs, Processes, and Outputs

Inputs consist of information taken from the application form [HLTH 337], physician follow-up reports [HLTH 339], nursing assessments [HLTH 329], supplier assessment reports and other correspondence maintained on the client's file. Inputs also consist of information taken from the invoices.

The HOSP System allows staff to enter and update client applications and approvals, make inquiries regarding application status, and generate reports including vouchers for payments of claims.

Applications for the home oxygen program are filled out by the client's physician and are vetted through the local health unit to the Home Oxygen Program medical consultant who approves or rejects the application. Information from the application is entered onto the system and if the claim is rejected, a rejection letter is generated and the file is closed. If approved, the system designates an approval number and an approval letter is generated. Information from physician follow-ups, nursing assessments and pertinent correspondence is entered onto the system. When a client dies or ceases to receive subsidized treatment, the file is closed and kept as a history file.

Supplier invoices are processed in date order. Data from the invoice is keyed, payment amounts are checked by the system, a batch report is generated and the vouchers are sent to Victoria for approval for payment.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

Outputs consist of subsidy approval letters, subsidy change letters, and subsidy rejection letters which are maintained on the client file. Batch reports and vouchers are sent to Victoria for payment. Regular or ad hoc statistical reports are listed in the classification section below.

### **Historical Note**

The Home Oxygen Subsidy Program was transferred to the Regional Health Authorities on May 1, 2002.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

## HOME OXYGEN SUBSIDY PROGRAM SYSTEM

## **DATA RETENTION PLAN**

Data Description	Data Retention Period
Home oxygen client files Classification 70310-20	Destroy six years after the client ceases to receive subsidized treatment.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

END OF OVERVIEW

## MAXIMAGE SYSTEM

## **SYSTEM OVERVIEW**

## **Creating Agency**

Ministry of Health Health Sector IM/IT Division Vendor Management Office HIBC Operations

## Date of System Description

2011-05-19

### Purpose

MaxImage System (MaxImage) is an electronic document management system that facilitates the Document Management and Beneficiary Services workflow of the PharmaCare program by providing online tracking of imaged paper documents, non-imaged paper documents, and facsimile transmissions. Documents are tracked from the time they are received, until the time they are completed. The documents are scanned into the system, registered and then marked as DONE or MI (missing information) after the work is completed in the PharmaNet System, the PharmaCare Registration Database, and the Registration and Premium Billing System (R&PB)

### **Information Content**

MaxImage encompasses the full range of correspondence between HIBC, clients, and third parties. Information is provided either directly from the client or by a service provider to the client for bill payment, etc.

These documents contain personal information, including names, addresses, Personal Health Numbers, birth certificates, immigration papers, financial information, and medical claims. HIBC has custody of the personal information while the Ministry of Health retains control at all times. Scanned documents stored in the system are described in the classification section.

#### Inputs, Processes, and Outputs

The documents are either mailed or faxed in to HIBC. Received documents are either scanned and stored in MaxImage, or information pertaining to the documents is extracted and data entered into the system.

An Oracle RDBMS (relational database management system) underlies the MaxImage System. Document images (the scanned copies of documents), classification data about the documents, notes regarding actions and questions surrounding the document contents and all data entered and accessible through the front-end Oracle Forms interface is stored in the RDBMS. Oracle also manages indexing, which allows for searching and retrieval of documents based on data that has been stored with each document.

When documents are received by HIBC, they are pre-sorted and a new document 'envelope' is created in the MaxImage System. Information is entered into a virtual envelope that is specific to each document. Once the virtual envelope information for an individual document is completed, a cover sheet is printed off and attached to the document. This cover sheet includes identification information that can be automatically detected by the scanning process to open the same virtual envelope that was

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

originally created. The coversheets and documents are subsequently fed into a high-speed scanner and Kofax is used to initiate the image upload into MaxImage. For documents that are not scanned and just worked from paper, the document is indexed and marked as registered, worked in the PharmaNet System, PharmaCare Registration Database, or Registration and Premium Billing System (R&PB), and then marked as done in MaxImage.

Each cover sheet is examined by a component of the MaxImage System that recognizes the unique envelope identification information on the coversheet, opens up the corresponding virtual envelope, and places the high resolution scanned images in the virtual envelope. Based on specific document type requirements, the physical documents and their identifying coversheets may be stored for a specific period of time, destroyed, or returned to the sender. The content of the documents, however, is stored in the MaxImage System, and can proceed to be further processed as appropriate.

Depending on the auditing and retention requirements for the particular document, the originals may be returned to the originator with copies kept on file, or the originals may be stored for a specific period of time. Specific directions regarding the appropriate handling of the physical copy of the current document are driven by the document classification and can be detailed either on the cover sheet or through the scanning interface to alert the scanning clerk of the appropriate post-scanning procedure.

Depending on the file type and several other factors, including priority and originator, that are noted on the virtual envelope, the envelopes and the documents they contain are directed to an appropriate staff member who works each document from an assigned queue. The high-resolution images of the document are viewable by the staff member, and their interface allows them to add a large amount of information to a virtual document within the virtual envelope.

Regarding claims, once a claim is processed, the document remains in the system and portions of the virtual document that the claims staff updated are extracted and compiled into a nightly batch that is sent off to the Ministry of Finance's (formerly the Ministry of Small Business and Revenue) processing system so that payments can be effected. The claim continues to live on within the MaxImage System for as long as specified by the auditing and electronic retention settings for that document type. The document type actually determines how the document is handled in the system. Once processed the content of the documents is now stored in the MaxImage System.

Outputs consist of various prompted reports generated on a daily, weekly, and monthly basis. MaxImage reports are run off the windows box which is the scanner server. Report and query requirements are documented in the work queue analysis section.

NOTE: The secondaries listed in the Data Retention Plan only reflect Pharmacare Services related records. However, MaxImage also encompasses records relating to the Medical Services Plan. For these records, see the MaxImage System Overview in the Medical Services Plan ORCS, schedule 142798.

## MAXIMAGE SYSTEM

## **DATA RETENTION PLAN**

Data Description	Data Retention Period
Change or verification of personal information	Destroy upon entry into the registration database.
Classification 70315-02	
Income based benefits applications and consents (closed secondary)	Destroy 85 years after entry into the PharmaCare Registration Database.
Classification 70315-20	
Monthly deductible payment option Classification 70315-28	Destroy at the end of the eighth fiscal year.
Income based benefits eligibility appeals Classification 70315-30	Destroy seven years after eligibility has been established.
Verification of income Classification 70315-36	Destroy at the end of the eighth fiscal year.
Palliative care applications Classification 70317-20	Destroy seven years after scanned and entered into PharmaNet.
PharmaCare claims - electronic images Classification 70350-09	Destroy at the end of the eighth fiscal year.
Pharmacy processing correspondence Classification 70350-45	Destroy at the end of the eighth fiscal year.
PharmaCare claims beneficiary correspondence Classification 70355-20	Destroy at the end of the seventh calendar year.
Prosthetic/orthotic application forms Classification 70355-35	Destroy at the end of the second calendar year.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

PharmaCare claims profiles Classification 70355-40	Destroy at the end of the seventh calendar year.
Pharmacy registration and monitoring files	Destroy seven years after the pharmacy's participation in PharmaCare programs is terminated.
Classification 70420-20	

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

## END OF OVERVIEW

## MEDICATION HISTORY (MEDHIST) DATA MART

## SYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

### **Date of System Description**

2011-05-19

### Purpose

The PharmaCare Claims Data Mart is a management level reporting tool containing extracted data from the PharmaNet System. PharmaCare clinical data from the PharmaNet System is stored in the Medhist Data Mart and is used for analysis when the data needed includes all medications dispensed, such as for population health analysis purposes. If cost information is required, the PharmaCare Claims Data Mart is used. Many data elements in both data marts are identical, such as pharmacy name.

### Information Content

The Medhist Data Mart is populated from and contains all elements from the Drug Information System (DIS). Medhist is that portion of the patient record containing medication history, clinical condition, adverse reactions and associated comments recorded for the patient. The patient medication profile allows the provider to review all dispensed medications and associated comments for a patient during the past fourteen months, including all adverse reactions, clinical conditions, and associated comments, from all PharmaNet connected BC pharmacies. Two profiles are available: full profile, which returns prescriptions dispensed or reversed during the last fourteen months or, most recent only, which returns the most recent fifteen prescriptions dispensed or reversed.

The Medhist Data Mart shares common tables with the PharmaCare Claims Data Mart for recipient data (such as Personal Health Number) and health service provider data (such as physician college number). The Medhist Data Mart, unlike the DIS, contains historical records from 1996 to current. The Medhist Data Mart, however, includes all prescriptions for medications dispensed in BC, with some notable exceptions. These include anti-retroviral medications dispensed by the Centre for Excellence in HIV/Aids at St. Paul's Hospital, interventions where the pharmacist contacted a physician to confirm unusual dosing or refused to dispense due to a significant drug-to-drug interaction, as well as directions text. In addition, the Medhist Data Mart does not include any cost information or data on BC residents who had prescriptions filled outside of BC.

DIS contains all prescriptions transmitted to the PharmaNet System from any community pharmacy in BC, as well as any hospital pharmacies dispensing outpatient prescriptions. It may also contain medications administered to patients in hospital emergency departments as well as samples provided to patients from physician offices, if those sites are connected to the PharmaNet System and if they choose to transmit the information. Prescriptions dispensed (claims) in BC are captured on the DIS regardless of who is paying for the medication. Also collected is data for adverse reactions, allergies, and clinical conditions transmitted from pharmacies. This provides a history of all the prescriptions for medication or treatment provided to a recipient in BC. The DIS maintains records online for fourteen months to perform drug utilization evaluation (DUE) such as drug-to-drug interactions, duplicate ingredient/therapy, compliance checking and when a new medication or repeat medication is

dispensed. No cost information is stored in the DIS and no information on residents of BC who have prescriptions filled outside of the province of BC.

A patient's medication profile includes: patient demographics, all drugs dispensed at a community pharmacy, office sample medications, patient allergies and clinical conditions. Information collected includes: patient information, medication history – such as clinical condition information, adverse reaction information, Medhist information, including quantity, prescription status, intervention codes, directions, comments – drug interaction (with clinical information provided by First DataBank), and drug information.

### Inputs, Processes, and Outputs

Once the source systems data is acquired, extract, transform and load processes are used to load it into the Data Mart tables. Personal information, as it is being brought into the integration space is anonymized by the system without programmer intervention, based on the alogrithims defined by the business. Sensitive columns include personal health numbers, hospital chart numbers, health care numbers, provider numbers and names. As new data is added, columns are reviewed for sensitivity and these too are anonymized. Since this data is stored anonymized in the database any exports, backups or extracts of this data will also remain anonymized. However, these fields may also be reidentified under certain circumstances and access granted to authorized users based on pre-defined roles.

Data feeds from PharmaNet are received weekly and are retained indefinitely in the Medhist Data Mart. Medhist contains all prescriptions regardless of payer and shares common tables in the PharmaCare Claims Data Mart for recipient data (such as PHN) and provider data (such as college number).

All medication history data are sent to the Medhist Data Mart except for the following fields:

- version control number: (the number of times a record has been updated)
- rec. user id: not typically accessed
- last updated userid: not typically accessed
- gcn sequence number: (this is the generic code number that relates to a drug, but is stored in some other table as well added for performance reasons)

Outputs consist of various prompted reports based primarily on data extracted from the Medhist Data Mart and used to support analysis performed by staff.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

## **MEDICATION HISTORY (MEDHIST) DATA MART**

## **DATA RETENTION PLAN**

Data Description	Data Retention Period
Medhist Data Mart data Classification 70490-40	Destroy when data is no longer required for ongoing analysis purposes and to support management level reporting.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

END OF OVERVIEW

## PHARMACARE CLAIMS DATA MART

## SYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

### Date of System Description

2011-05-19

### Purpose

The PharmaCare Claims Data Mart is a management level reporting tool containing extracted data from the PharmaNet System. The PharmaCare Claims Data Mart is stored in the HNData Data Mart, which is the Ministry's integrated data warehouse that provides access to administrative and clinical data currently collected by the Ministry, or available to users, for analysis. It is scheduled to be replaced by the ministry-wide Healthideas data warehouse.

The HNData Data Mart was developed under the auspices of the Aggregated Health Information Project (AHIP). AHIP was initiated in 2004-05 in order to develop a data warehouse and information delivery infrastructure that could provide integrated support for a wide range of data, users, and information needs across the BC health sector.

### Information Content

The PharmaCare Claims Data Mart is populated from and contains all the columns of data from the source system PharmaNet. It shares common tables with the Medhist Data Mart for recipient data and health service provider data. Demographic data is provided by the Client Registry System for recipient (patient, client), Medical Services Plan (MSP) for physician provider, and the PharmaNet System for other providers such as pharmacists. The PharmaCare Claims Data Mart, unlike the PharmaNet source system, contains historical records from 1985 to present. Data is updated with a weekly load from the source systems.

The PharmaCare Claims Data Mart includes prescription data and all cost information on BC residents who had prescriptions filled inside and possibly outside of BC, but does not include claims for federally funded recipients (such as RCMP, Veterans Affairs, and Indian Affairs) or hospital inpatients. The claims data pertains to the adjudication event and includes Personal Health Number, prescriber identifier, dispenser identifier, drug identifier, quantity dispensed, pharmacy identifier, days' supply as well as adjudicated costs for the prescription.

#### Inputs, Processes, and Outputs

All data are received from other systems. The main source of data is extracted from the PharmaNet and the Client Registry source systems. All claims history data from PharmaCare Centralized Information System (PCIS) are stored in the Claims Data Mart.

Historically, the following inputs have been used as sources of PharmaCare claims data:

MASPAR/Phoenix records – service dates before 1996; (The MASPAR/Phoenix systems predate HN data);

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

- PharmaNet Online claims never archived and not in any HNData feeds special extract run to obtain 61154 claims service dates up to 2002/12/24;
- Operational archives purged from online system and stored in MVS archives only service dates after 1995 processed – service date up to 2002/12/24; and
- Extracts from online for HNData earliest claim 2001/01/14 service date.

The data for the PharmaCare Claims Data Mart is sourced from a number of sources that include claim records from 1985 to present. From 1985 to September 1995, a "Datapoint®" system was used to reimburse PharmaCare claims. This was an off-line system where universal plan client mailed in receipts for reimbursement. From September 1995 to the present, the PharmaNet System has been used to process PharmaCare claims, the vast majority of which are on-line/real time claims.

Outputs consist of various prompted reports based primarily on data extracted from the PharmaCare Claims Data Mart and are used to support analysis performed by Pharmaceutical, Laboratory and Blood Services Division analysts.

## PHARMACARE CLAIMS DATA MART

## **DATA RETENTION PLAN**

Data Description	Data Retention Period
PharmaCare Claims Data Mart data Classification 70350-70	Destroy when data is no longer required for ongoing analysis purposes and to support management level reporting.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

END OF OVERVIEW

## PHARMACARE REGISTRATION DATABASE

## SYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

### **Date of System Description**

2011-05-19

### Purpose

The purpose of the registration database is to maintain information about an individual's application to receive PharmaCare's income-based benefits, verify their income with the Canada Revenue Agency (CRA), record deductible levels, and generate form letters.

#### **Information Content**

The system maintains information about BC residents' application to PharmaCare under Plan I (the Fair PharmaCare program), including their name, address, personal health number, date of birth, name of spouse and dependents, social insurance number, previous years' income information from the CRA, PharmaCare deductible information, and case number and information where eligibility, such as family relationship or income information, is appealed.

### Inputs, Processes, and Outputs

BC residents can apply to have PharmaCare cover all or part of the cost of their drugs or medical supplies based upon their income levels. Application can be done on-line or by letter or form, which is scanned or data entered into the system. Part of the application process includes consent to allow PharmaCare to receive income tax information from the CRA. CRA sends income tax information to PharmaCare on magnetic tape or using file transfer protocol (FTP) technology. In cases where beneficiaries wish to register without CRA verifiable information, or where they feel their income, family relationship, or other personal information required, and any changes to the information or eligibility is then scanned or data entered onto the system. The information is maintained on the system and used to generate form letters to beneficiaries to: indicate a mismatch of information from what the applicant has provided and what CRA has provided; indicate their deductible; or to approve or reject appeals around their eligibility. Eligibility and deductible information is also used to update PharmaNet.

This is an approved information schedule, as defined by the <u>Information Management Act (SBC 2015, c. 27)</u>. For more information consult your <u>Government Records Officer</u>.

## PHARMACARE REGISTRATION DATABASE

## DATA RETENTION PLAN

Data Description	Data Retention Period
Income based benefits applications and consents data Classification 70315-25	Destroy when no longer required to support Fair PharmaCare registration and reporting.
Verification of income Classification 70315-36	Destroy at the end of the eighth fiscal year.
Personal income tax data (from CRA) Classification 70315-40	Destroy at the end of the third calendar year.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

## END OF OVERVIEW

## **PHARMANET**

## SYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

## **Date of System Description**

2011-05-19

### Purpose

The purpose of PharmaNet is to provide an electronic network, consisting of computerized pharmacy networks and databases, that record information on all prescriptions dispensed in community pharmacies in BC. The PharmaNet System consists of two subsystems: the Drug Information System (DIS) and the PharmaCare Centralized Information System (PCIS). PCIS includes beneficiary registration and claims payment information (Claimshist), while DIS contains medication history data (Medhist).

PharmaNet is administered by the Ministry of Health and the College of Pharmacists of BC and was developed in consultation with health professionals and the public to improve prescription safety and support prescription claim processing. PharmaNet users include community pharmacies, hospital pharmacies, emergency departments, medical practices, the College of Pharmacists of BC, and the College of Physicians & Surgeons of BC.

#### **Information Content**

PharmaNet maintains information to identify patients, practitioners and pharmacies, to manage therapy, to adjudicate claims, and to manage payments. PharmaNet records dispenses of prescriptions transmitted from community pharmacies. The information is sent in two parts: medication information, which includes drug, quantity dispensed, days supply, prescriber, patient, instructions for use, and pharmacy information; and cost information, which includes ingredient cost and professional fee costs. When the information is transmitted to PharmaNet, it is separated and recorded on two separate tables – Medhist and Claimshist. Medhist contains all prescriptions transmitted to PharmaNet, regardless of who pays for the prescription. Claimshist contains all prescriptions except for patients who are known to be federally insured. When an individual is federally insured, Claimshist does not record any details of the prescription.

For each beneficiary, information on PharmaNet includes: all drugs dispensed, any reported drug allergies and clinical conditions, and demographic information such as Personal Health Number, name, address and date of birth. It also includes drug information and drug interaction evaluations as well as claims information such as eligibility, coverage and deductibles.

For more specific information relating to the information content of the PCIS and DIS, see the individual ISOs for details.

## END OF OVERVIEW

Key to ARCS/ORCS Codes and Acronyms

PHAR ORCS

## **DRUG INFORMATION SYSTEM (DIS)**

## SUBSYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

## Date of System Description

2011-05-19

### Purpose

The purpose of the Drug Information System (DIS) is to provide pharmacists and dispensing physicians of British Columbia with the tools to monitor medications with respect to potential drug therapy hazards, and public safety. It also assists in the management of health-related issues by providing the pharmacist access to supporting information designed to aid in the dispensing decision.

The primary focus of the DIS is to provide information through Drug Use Evaluation (DUE), which is performed on all applicable prescriptions. DUE results are used to advise the pharmacist of potential drug therapy and dispensing problems through automated drug screenings. Supporting inquiry and update functions allow the College of Pharmacists of British Columbia (CPBC) a quick and efficient means to answer patient and drug-related inquiries, update patient-related information, and selected drug information. The system also gives patients access to drug counselling information through pharmacies of BC, and their own complete medication profile information through CPBC.

#### **Information Content**

The DIS is one of the two components of a larger provincial Pharmacy Network (PharmaNet) which contains information to identify patients, practitioners and pharmacies, to manage therapy, to adjudicate claims, and to manage payments. The other component is the PharmaCare Centralized Information System (PCIS). The College of Pharmacists was responsible for the clinical information maintained in the DIS, however, as of April 1, 2009, under the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77), custodianship has been transferred to the Ministry of Health.

The key components of the DIS are:

- Pharmacists
- Patients
- The College of Pharmacists of British Columbia (CPBC), and
- Data Supplied by First DataBank.

Pharmacists: The DIS advises the pharmacist of potential drug therapy and dispensing problems through automated drug screenings. The pharmacist receives DUE results, regardless of the payment status of the claim. The DIS provides automated screening for DUE, for some of the following: Drug/Drug Interactions, Min/Max Dose, Duration of Therapy, Duplicate Therapy, and Compliance Checks. The results of these automated screenings will be promptly communicated to the pharmacist in response to all applicable prescriptions processed by PharmaNet.

DUE encounters are logged in the Dueencnt table, while the prescription information is logged in the Medhist table. The DIS will also provide inquiry and update access to additional information that the

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

pharmacist can use to identify a potential dispensing problem. This information includes: Patient Medication History, Patient Clinical History, Patient Adverse Reaction Information, Patient Demographic Information, and Drug Monograph Information.

Patients: The PharmaNet network issues new Personal Health Numbers (PHN's) to patients where required. Additional features of the system provide the patients with a Centralized Storage of Patient Profile that includes Patient: Demographic Information, Clinical Information, Reaction Information, Medication Information, and DUE Encounters Information.

The system also provides access to relevant drug therapy information that includes: how to take the medication, any possible side effects of the medication to watch for, other drugs which may inhibit the effectiveness of the drug, and any special notes such as the average time the drug will take to correct the symptoms it was prescribed for.

College of Pharmacists of British Columbia: The CPBC have the ability to perform the following tasks: access drug monograph information, access and update patient adverse reactions information, access and update patient clinical information, and access and update patient medication profile.

First Databank: The International Drug Data File (IDDF), a service of First DataBank (FDB), disseminates drug processing data through an electronic medium. The data used for the PharmaNet network is specific to pharmaceuticals marketed in Canada. FDB supplies the following clinical data: ADI codes (Adverse Drug Interaction), Patient education monographs, Drug monographs, MinMax table (min/max dose), and Dotmaster table (duration of therapy).

### Inputs, Processes, and Outputs

Inputs consist of updates to patient medication histories and drug information entered into PharmaNet by pharmacists. A patient's medication history includes, patient demographics, all drugs dispensed at a community pharmacy, and patient allergies and clinical conditions. Drug information updates are provided by First Databank. Inputs are listed in the classification section outlined below.

The DIS system processes both on-line transactions (prescriptions, medication inquiries) from the pharmacies and on-line screen access from the CPBC. The on-line transactions come into the PharmaNet system either as single transactions or bundled with other transactions. That is, when a pharmacist enters a claim for adjudication, there will always be a transaction for DUE bundled with it. The router will receive the transaction from the pharmacy and dissect it into its components. Once the DIS has received an on-line transaction, it will analyze the contents to determine the type of transaction to be processed. This will be one of the following: DUE transactions or Non-DUE Transactions.

Medication History Table: All prescriptions processed for a PHN are stored in the Medication History Table (Medhist). This will include: Filled, Reversed, Not Dispensed, and Discontinued prescriptions. Off-line claims bypass all DUE checking and no medication history is maintained in the Medhist. The Medhist table includes the following information: PHN, DIN, Pharmacy ID, Expiry DT, QTY, Prescriber ID, Original Prescription Number, Prescriber Restriction Number, Intervention Codes, reversal Intervention Codes, Authorized Number of Refills, Maximum Daily Dose, and Practitioner ID.

DUE Encounters Table (duencnt): In addition to the Medhist table, the Dueencnt table will store all prospective DUE encounters which resulted from the dispensing of a medication. Each prospective DUE encounter is linked to the current medication history record and certain historical prescriptions which caused the encounter (for Drug/Drug, Duplicate Ingredient and Compliance checking). The information contained in the Dueencnt table includes: DUE sequence number, Medhist sequence

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

number of the incoming prescription, Medhist sequence number of the historical prescription, DUE screening type, Response Code, Security Level, Duplicate Ingredient HIC (Hierarchical Ingredient Code), and Encounter Description.

Drug/Drug Interactions: The PharmaNet system incorporates First DataBank's classification system for rating Drug/Drug Interactions, based on severity. The system includes the following levels: Level 1 – Contraindicated drug combination, Level 2 – Severe interaction, and Level 3 – Moderate interaction.

The DIS provides consultation and monograph information that the pharmacist can use to identify a potential dispensing problem. This information includes: Patient Medication History, Patient Clinical History, Patient Adverse Reaction Information, Patient Demographic Information, and Drug Monograph Information.

The DIS feeds into the Medhist Data Mart. Outputs are listed in the Data Retention Plan below.

## DRUG INFORMATION SYSTEM (DIS)

## **DATA RETENTION PLAN**

Data Description	Data Retention Period
Drug Information System data Classification 70490-20	Destroy at the end of the tenth calendar year.
Drug processing data Classification 70490-30	Destroy when information is no longer required for operational and research purposes.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

## END OF OVERVIEW

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

## PHARMACARE CENTRALIZED INFORMATION SYSTEM (PCIS)

## SUBSYSTEM OVERVIEW

## **Creating Agency**

Ministry of Health Pharmaceutical, Laboratory and Blood Services Division

## Date of System Description

2011-05-19

### Purpose

The purpose of the PCIS is to assist staff with the administration of the PharmaCare program, that is, to specify the eligibility of individuals to receive PharmaCare benefits (including special authorities), as well as specifying restrictions on eligibility. It determines the amount that PharmaCare will pay against the claim for a prescription or service, processes claims for contract services, and it enables issuance of payment to pharmacies and individuals who have claims or adjustments to be paid. Information on the PCIS also allows for utilization monitoring of pharmacies and restricted clients.

### Information Content

The PharmaNet System maintains various types of information to identify patients, practitioners and pharmacies, to manage therapy, to adjudicate claims, and to manage payments. Pharmaceutical, Laboratory and Blood Services Division (PLBSD) is responsible for maintaining the PCIS, including the triplicate database and the statistics enquiry database, which contains information regarding the definition of PharmaCare plans, subscriber eligibility, products designated as benefits, prices and incentives, and claims for payment. The PCIS is linked to the Health Registry System, which is the basis of patient identification maintained by the Ministry.

The PCIS is one of the two components of a larger provincial Pharmacy Network (PharmaNet). The other component is the Drug Information System (DIS).

The Coordination of Benefits (CoB) Router coordinates the processing of claims for PharmaCare and other third party insurers and is maintained by the service provider. Individual pharmacies may maintain prescription information on their own inhouse prescription management systems.

#### Inputs, Processes, and Outputs

Inputs consist of updates to the PCIS data tables when new pharmacies, practitioners, or drugs are added to or dropped from the information base. They also consist of claims submitted electronically over the PharmaNet System or data entered where a pharmacy is not on-line. Other inputs include special authority letters that allow individuals to receive as benefits drugs not normally covered by PharmaCare, notices to restrict beneficiaries to one physician and one pharmacy, and blood glucose monitoring certificates. Blood glucose monitoring certificates are entered onto the system and then destroyed as transitory documents. Inputs include above, are listed in the classification section listed below.

Other inputs include psychiatric medication prescriptions given to clients of mental health centres (Plan G).

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

Registration and Eligibility: Fair PharmaCare provides British Columbia families with financial assistance by paying for eligible prescription drugs and designated medical supplies. For Fair PharmaCare registration purposes, a family includes the registrant, the registrant's spouse, if applicable, and any dependents with coverage on the same Medical Services Plan (MSP) account as the registrant or spouse.

To participate in the plan, eligible families are required to complete a one time registration. This can be done via the internet, over the phone or by filling in a paper registration form. As part of the registration process, registrants and their spouses, if applicable, must fill in, sign and submit a consent form to PharmaCare, allowing PharmaCare to verify their incomes with the Canada Revenue Agency (CRA). When the income information has been successfully retrieved from the CRA, permanent eligibility is established based on the income information retrieved, and a confirmation of benefits letter is mailed to the family. Application and consent forms are retained for 85 years to allow for only one application and consent form to be completed by each beneficiary during their lifespan. The plan is automatically renewed each year.

Date of death is added to PCIS via an update from the Client Registry System.

Approval of benefits/claims: When a prescription is filled by a pharmacy, a claim record is generated and submitted electronically to PharmaCare. The Coordination of Benefits (CoB) switch routes a claim to the PharmaCare adjudication processor where the beneficiary's information is evaluated against the plan information to identify the plans under which the individual is eligible, the status of the prescription as a benefit, and the amount of coverage, including consideration of any other insurer's contribution to the cost. Claims and adjustments are processed, summarized, and forwarded to the Ministry's Finance Division for payment authorization. Once authorized, the payment requests go to the Office of the Comptroller General (OCG), Ministry of Finance, and then to the Provincial Treasury for cheque/electronic funds transfer. Payment information from the OCG required by PharmaCare for reconciliation is submitted back through the network.

Utilization Monitoring - Pharmacies: PharmaCare auditors review claims submitted by pharmacies to ensure they comply with the terms of the participation agreement and PharmaCare policy. That is, that they adhere to the principle of billing for the actual acquisition cost of pharmaceuticals, and to ensure sufficient stock to support claims to the program. They use PharmaNet reports to do cost comparisons between payment data from a given pharmacy and regional or provincial averages. They send confirmation letters (which are logged on PharmaNet) to physicians and patients at random to check pharmacy prescriptions, and they consult the Client Registry to confirm patient identification. Where irregularities are discovered, the auditors visit the pharmacy to review their records and take any corrective action.

Utilization Monitoring - Restricted Clients: Auditors monitor beneficiary prescription records from PharmaNet to determine overuse of prescription drugs. Where abuse has been determined, the beneficiary is invalidated, and the restriction to one physician and one pharmacy is entered onto the system. Auditors continue to monitor the beneficiary until it is determined that the restriction may be lifted.

Benefit Authorizations: When special approval for patients to receive non-benefit drugs is requested by a practitioner, a special authority letter is submitted to PharmaCare and the approval date is entered into the system. Diabetic clients who receive certification in blood glucose self-monitoring are also entered into the system.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

Help/Inquiries: The Help Desk answers inquiries from pharmacies, practitioners and beneficiaries by accessing the practitioner registry, pharmacy registry, pharmacist registry, facility registry (IMS database of Continuing Care), plan rules and benefits, and claims records.

Statistical reporting: Data is uploaded to DB2 relational databases and flat files on the ITSD.

Outputs consist of reports to support PharmaCare day-to-day operations and system control, auditing processes, and PharmaCare policy and long-range planning. These are listed in the Data Retention Plan below. The PCIS feeds into the PharmaCare Claims Data Mart.

This is an approved information schedule, as defined by the *Information Management Act* (SBC 2015, c. 27). For more information consult your <u>Government Records Officer</u>.

## PHARMACARE CENTRALIZED INFORMATION SYSTEM (PCIS)

## DATA RETENTION PLAN

Data Description	Data Retention Period
PharmaCare claims history data (Claimshist) Classification 70350-30	Destroy at the end of the 21st fiscal year.
Pharmacy registration data Classification 70420-22	Destroy when participation agreement with pharmacy is terminated.

For additional classification details, including retention rationales, refer to the classification description in the applicable section of the *ORCS*.

For descriptions of system related records (e.g. back-up data, log files, and transitory electronic data processing (EDP) records), see the <u>System Section FAQ</u>.

## END OF OVERVIEW

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99). It constitutes authority for retention and disposition of the records described herein provided *ORCS* has been implemented according to government policy and procedures. For assistance, contact your Records Officer.

# LIST OF APPENDICES

- Appendix A PharmaCare Plan Descriptions (2001)
- Appendix B PharmaCare Plan Descriptions (2007)
- Appendix C PharmaCare Services ORCS Summary of Changes
- Appendix D Destruction of Scanned Paper Records
- Appendix E Scanned Images Cross-Reference

## **APPENDIX A**

## PHARMACARE PLAN DESCRIPTIONS (2001)

### Pharmacare provides reimbursement under the following plans:

### • Plan A

Provides coverage to permanent residents of British Columbia who are 65 years of age or older, and who possess a Gold CareCard issued by the Medical Services Plan of B.C. Under Plan A, the senior citizen pays the first \$200 of the dispensing fee each year, while PharmaCare covers 100 percent of the ingredient cost and dispensing fees in excess of \$200.

## • Plan B

PharmaCare pays the full cost for eligible prescription drugs and certain medical supplies, for residents of adult licensed long term care facilities. Each residential facility is served by a contracted pharmacy and paid on a per diem basis under the *British Columbia PharmaCare Participation Agreement* for the provision of pharmaceutical services to long term care facilities. Bylaw 38 of the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77) defines the standards required for services provided to continuing care facilities.

### • Plan C

This plan provides coverage to British Columbia residents eligible for medical benefits funded through the Ministry of Social Development. PharmaCare covers 100 percent of both the ingredient cost and the dispensing fee entitling recipients to full Pharmacare coverage.

## • Plan E

Provides coverage for all residents of the province who are not receiving any benefits under other Pharmacare plans (except Plan D, Plan G and the Home Oxygen Subsidy Program). Reimbursement of 70 percent in excess of an annual deductible of \$800 is provided. Once a family has paid a total of \$2000 per year in costs recognized by Pharmacare, PharmaCare pays 100 percent of further costs. Residents receiving premium assistance with MSP receive 100 percent reimbursement once a \$600 deductible is exceeded.

## • Plan F

Children eligible for benefits under either the At Home Program or the Associate Family Program receive eligible prescription drugs and designated medical supplies. PharmaCare provides 100 percent funding under these programs.

The At Home Program provides community-based, family-style care. The program is jointly funded by the Ministry of Health Services and the Ministry of Children and Family Development.

The Associate Family Program assists the families for children with multiple disabilities who reside in institutional settings with respite care and provides financial assistance.

#### • Plan G

Clients of mental health centers receive psychiatric medication at no charge. The objective is to prevent hospitalization or other very serious consequences that are likely to occur if a person cannot obtain psychiatric medication because of financial hardship.

#### • Home Oxygen Subsidy Program

This program provides 100 percent reimbursement for oxygen and related equipment delivered to the homes of individuals who meet the established criteria. Applications must be made by the physician through the local Health Unit. Payment is made for the most economical system consistent with individual need and lifestyles. The suppliers of the home oxygen systems are determined regionally through a scheduled bidding process. As of December 31, 1995, there were 4,715 patients registered with the program.

#### **APPENDIX B**

### PHARMACARE PLAN DESCRIPTIONS (2007)

#### Residents of British Columbia are eligible for PharmaCare benefits under the following plans:

#### • Permanent Residents of Licensed Long-Term Care Facilities (Plan B)

PharmaCare covers the full cost of eligible prescription drugs and designated medical supplies for permanent residents of licensed long-term care facilities in British Columbia. Each residential facility is served by a contracted pharmacy which is paid on a per diem basis to provide pharmaceutical services to the facility, under the *British Columbia PharmaCare Pharmacy Participation Agreement for the Provision of PharmaCare Services to Long Term Care Facilities.* Standards for services provided to continuing care facilities are defined in Bylaw 37 of the Council of the College of Pharmacists for British Columbia, as specified in the *Pharmacy Operations and Drug Scheduling Act* (SBC 2003, c. 77).

#### • Recipients of British Columbia Income Assistance (Plan C)

This plan provides 100 per cent coverage of eligible prescription costs for British Columbia residents receiving medical benefits and income assistance through the Ministry of Social Development.

#### • Patients Registered with a Provincial Cystic Fibrosis Clinic (Plan D)

Individuals with Cystic Fibrosis who are registered with a provincial cystic fibrosis clinic receive digestive enzymes free of charge through Plan D. The enzymes are dispensed through community pharmacies.

# • Children Eligible through the At Home Program of the Ministry of Children and Family Development (Plan F)

The At Home Program provides community-based, family-style care for severely handicapped children age 18 or under who would otherwise become reliant on institutional care. Children who are receiving full benefits or medical benefits through the program qualify for full coverage of eligible prescription drugs and designated medical supplies.

#### • No Charge Psychiatric Medication Plan (Plan G)

The No Charge Psychiatric Medication Plan is available to individuals of any age who are registered with a mental health service centre and who demonstrate clinical and financial need. The plan provides coverage of certain psychiatric medications. Individual patient eligibility is determined by the patient's physician and the local mental health service centre.

#### • Fair PharmaCare Plan (Plan I)

BC's Fair PharmaCare plan, which took effect 1 May 2003, provides financial assistance for eligible prescription drugs and designated medical supplies to British Columbia families, based

on their net income. Fair PharmaCare replaced both Plan A (Seniors) and Plan E (Universal PharmaCare).

### • BC Palliative Care Drug Plan (Plan P)

The BC Palliative Care Benefits Program supports British Columbia residents of any age who have reached the end stage of a life-threatening disease or illness and who wish to receive palliative care at home. Since 1 April 2001, PharmaCare has fully funded and administered the drug portion of the program, while local health authorities have full responsibility for the provision of medical supplies and equipment covered by the program. A patient's physician determines the patient's medical eligibility for palliative care benefits.

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### **APPENDIX C: Summary of Changes to the PHARMACARE SERVICES ORCS**

Primary/ Title Type of Change Secondary	e New retention Approval Date A/SA/FD
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This concordance table is intended as a general guide for transition between the old and new versions of this *ORCS*. The new classifications and retentions are to be applied to all relevant digital and physical operational records, both in the office and in storage. When converting old files to the new *ORCS*, you will need to check file contents to ensure that the recommended replacement secondary is appropriate for that particular file.

	ALL SECTIONS			
All primaries <b>-00</b>	POLICY AND PROCEDURES	No change	SO/5y/FR Same	2011/05/19
		SECTION 1		
70300-02	PHARMACARE ANNUAL REPORTS AND NEWSLETTERS	Title change and broadening of scope to include PharmaCare newsletter, Annual Performance Reports and equivalents. Increases scope of FR records.	N/A	2011/05/19
70300-03	PHARMACARE WEB PAGES	New	SO/nil/DE	2011/05/19
70300-20	PHARMACEUTICAL REFERENCE MATERIALS	New	SO/nil/DE	2011/05/19
70310-04	HOME OXYGEN SUPPLIER INVOICES	Added rationale for 8y semi-active retention period. This primary is now closed.	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70310-20	HOME OXYGEN CLIENT FILES	Supersedes and merges with former secondary -30 Home Oxygen Subsidy program (HOSP) System.	SO/6y/DE Slight change	2011/05/19
70310-30	HOME OXYGEN SUBSIDY PROGRAM (HOSP) SYSTEM	Superseded by secondary -20 Home Oxygen Client Files	N/A	2011/05/19
70313	PHARMACARE BENEFICIARY REGISTRATIONGENERAL	New primary.	N/A	2011/05/19
70313-20	METHADONE TRANSFER FORMS	New	SO+2y/nil/DE	2011/05/19
70313-30	SOCIAL ASSISTANCE AFTER HOURS FORMS	New	SO+1y/nil/DE	2011/05/19
70315-02	CHANGE OR VERIFICATION OF PERSONAL INFORMATION	Change in primary block title and addition of scope notes to secondary -02	N/A	2011/05/19
70315-20	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS - MICROFILM AND ELECTRONIC IMAGES	Added electronic images to media type	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70315-20	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS - MICROFILM AND ELECTRONIC IMAGES	Secondary closed. This secondary has been superseded by 42850-50 Applications for health and drug coverage in the <i>Medical</i> <i>Services Plan ORCS, schedule 142798.</i>	N/A	2024/03/27
70315-21	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS	Scope note expanded to reflect microfilming dates	N/A	2011/05/19
70315-21	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS	Secondary closed. This secondary has been superseded by 42850-50 Applications for health and drug coverage in the <i>Medical</i> <i>Services Plan ORCS, schedule 142798.</i>	N/A	2024/03/27
70315-25	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS - ELECTRONIC RECORDS	Expanded scope note.	N/A	2011/05/19
70315-28	MONTHLY DEDUCTIBLE PAYMENT OPTION - PAPER AND ELECTRONIC IMAGES	New	FY+1y/6y/DE	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70315-30	INCOME BASED BENEFITS APPLICATIONS AND CONSENTS - PAPER AND ELECTRONIC IMAGES	Added electronic images to media type.	N/A	2011/05/19
70315-36	VERIFICATION OF INCOME - PAPER AND ELECTRONIC IMAGES	<u>New</u>	FY+1y/6y/DE	2011/05/19
70315-40	PERSONAL INCOME TAX DATA (FROM CRA) - ELECTRONIC RECORDS	Scope note expanded.	N/A	2011/05/19
70315-50	PHARMACARE REGISTRATION DATABASE	Superseded by PharmaCare Registration Database Information System Overview	N/A	2011/05/19
70315-60	FAIR PHARMACARE FORMS-SCANNED	<b><u>New</u>:</b> Covers paper forms that have been scanned and stored on the MaxImage System.	SO/nil/DE	2011/05/19
70317	PHARMACARE BENEFICIARY REGISTRATION - PALLIATIVE CARE	New primary.	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70317-20	PALLIATIVE CARE APPLICATIONS - PAPER AND ELECTRONIC IMAGES	New	SO+7y/nil/DE	2011/05/19
70320-02	LOW - COST ALTERNATIVE PROGRAM	<b><u>Deleted</u>:</b> Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19
70320-03	PHARMACARE PLANS AND PROGRAMS	<b><u>Deleted</u>:</b> Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19
70320-04	REFERENCED - BASED PRICING	<b>Deleted</b> : Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19
70320-05	RURAL INCENTIVE PROGRAM	<b>Deleted</b> : Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19
70320-06	TRIAL PRESCRIPTION PROGRAM	<b><u>Deleted</u>:</b> Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70320-20	PHARMACARE PLANS AND PROGRAMS COORRESPONDENCE FILES	<b>Deleted</b> : Superseded by 70322-20 PharmaCare plans and programs eligibility definition files	N/A	2011/05/19
70322	PHARMACARE BENEFITS - PLAN DEFINITIONS	New primary.	N/A	2011/05/19
70322-20	PHARMACARE PLANS AND PROGRAMS ELIGIBILITY DEFINITION RULES	<b>New:</b> Replaces and merges former secondaries 70320-02 Low cost-alternative program, 70320-03 PharmaCare plans and programs, 70320-04 Referenced-based pricing, 70320-05 Rural incentive program, and 70320-06 Trial prescription program	SO/2y/FR Same	2011/05/19
70322-25	PHARMACARE PLANS AND PROGRAMS CORRESPONDENCE FILES	<b>New</b> : Replaces former secondary 70320-20 PharmaCare plans and programs Correspondence files	SO/2y/DE Same	2011/05/19
70325	PHARMACARE BENEFITS - FORMULARY MANAGEMENT	Title change from PharmaCare Benefits- Benefits.	N/A	2011/05/19
70325-08	PATIENT INPUT MECHANISM (PIM) SUBMISSIONS	<u>New</u>	SO+1y/nil/DE	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70325-09	PATIENT INPUT MECHANISM (PIM) SUBMISSIONS - PAPER	New	SO/nil/DE	2011/05/19
70325-15	PHARMACARE DRUG REVIEW RESULTS WEB PAGES	New	SO/nil/DE	2011/05/19
70325-20	DRUG MANUFACTURERS FILES	<b>New:</b> Expanded scope note and rationale for 7y retention period provided	<b>SO/7y/DE</b> Increase from SO/2y/DE	2011/05/19
70325-30	FORMULARY SUBMISSIONS	<b>New:</b> Expanded scope note and rationale for 7y retention provided	SO/7y/DE Same	2011/05/19
70325-35	FORMULARY MANAGEMENT WORKING MATERIALS	New	SO/7y/DE	2011/05/19
70325-38	FORMULARY MANAGEMENT DATA	New	SO/nil/DE	2011/05/19
70325-40	FORMULARY MANAGEMENT DATABASE	New	SO/nil/DE	2011/05/19
70328-02	REFERENCE DRUG PROGRAM SPECIAL AUTHORITIES	<b>Deleted:</b> Superseded by secondary -20 Special authority client files	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70328-20	SPECIAL AUTHORITY CLIENT FILES	New: Expanded scope note and changed SO statement from: SO=when inactive for two years	<b>SO/5y/DE</b> <i>Same</i> SO = when inactive as determined by the program manager	2011/05/19
70328-35	SPECIAL AUTHORIZATIONS PROGRAM AND DRUG CORRESPONDENCE	New	CY+1y/nil/DE	2011/05/19
70350-01	GENERAL	Increased retention period from: FY+1y/5y/DE to reflect financial aspect of records.	FY+1y/6y/DE Slight increase	2011/05/19
70350-02	PHARMACARE CLAIMS – PLANS A, B, C,AND F - PAPER FILES	<b><u>Deleted</u>:</b> Superseded by secondary -06 PharmaCare claims-paper	N/A	2011/05/19
70350-03	PHARMACARE CLAIMS – PLAN E - PAPER FILES	<b>Deleted:</b> Superseded by secondary -07 Fair PharmaCare claims returned to client.	N/A	2011/05/19
70350-04	NARCOTIC TRIPLICATE PRESCRIPTIONS	Expanded scope note and retention period changed to reflect new default standard	FY+1y/6y/DE Slight change	2011/05/19
70350-05	UNCOLLECTED PRESCRIPTIONS	<b><u>Deleted</u></b> : Superseded by secondary -45 Pharmacy processing correspondence	N/A	2011/05/19

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Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70350-06	PHARMACARE CLAIMS - PAPER	<b><u>New</u>:</b> Supersedes secondary -02 PharmaCare claims plans A, B, C, and F	SO/nil/DE	2011/05/19
70350-07	PHARMACARE CLAIMS RETURNED TO CLIENT - PAPER	<b><u>New</u>:</b> Supersedes secondary -03 PharmaCare claims-plan E	SO/NA/NA	2011/05/19
70350-08	PHARMACARE CLAIMS - MICROFILM	<b>New:</b> Replaces microfilmed claims returned to client	FY+6Y/13y/DE Same	2011/05/19
70350-09	PHARMACARE CLAIMS - ELECTRONIC IMAGES	New: N/A	FY+1y/6Y/DE	2011/05/19
70350-10	PHARMACARE CLAIMS - PLAN P	New: N/A	FY+1y/6y/DE	2011/05/19
70350-20	PHARMACARE CENTRALIZED INFORMATION SYSTEM (PCIS)	<b>Deleted:</b> Superseded by PharmaCare Centralized Information System (PCIS) Information System Overview (ISO)	N/A	2011/05/19
70350-30	PHARMACARE CLAIMS HISTORY DATA (CLAIMSHIST)	<b>New:</b> Changed title from PharmaCare client payment files and expanded scope note	N/A	2011/05/19
70350-40	PHARMACARE EXPENDITURE ADJUSTMENTS	Expanded scope note and provided rationale for 7y retention period	CY+1y/5y/DE Same	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70350-44	PHARMACY PROCESSING CORRESPONDENCE - SCANNED	<b><u>New</u>:</b> Covers paper forms that have been scanned and stored in MaxImage.	SO/nil/DE	2011/05/19
70350-45	PHARMACY PROCESSING CORRESPONDENCE	<b><u>New</u>:</b> Supersedes secondary -05 Uncollected prescriptions	FY+1y/6y/DE	2011/05/19
70350-50	PHARMACY PAYMENT FILES	Expanded scope note and retention period changed to reflect new default standard	FY+1y/6y/DE Slight change	2011/05/19
70350-61	SUPPLEMENTAL CLAIM FILES-MICROFILM	<b><u>New</u>:</b> Secondary created to address microfilm (previously in -60)	FY+6y/1y/DE	2011/05/19
70350-70	PHARMACARE CLAIMS DATA MART	New: N/A	SO/nil/DE	2011/05/19
70350-71	PHARMACARE CLAIMS DATA MART REPORTS	New: N/A	SO/nil/DE	2011/05/19
70355-20	PHARMACARE CLAIMS BENEFICIARY CORRESPONDENCE	Expanded scope note	CY+1y/5y/DE Same	2011/05/19
70355-21	PHARMACARE CLAIMS BENEFICIARY CORRESPONDENCE - SCANNED	<b><u>New</u>:</b> Covers paper forms that have been scanned and stored in MaxImage.	SO/nil/DE	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70355-30	PROSTHETIC/ORTHOTIC CLAIMS BENEFICIARY CASE FILES	Expanded scope note. SO note defined: SO=for prosthetics, when the client is deceased and for orthotics, when the client turns nineteen	SO+1y/5y/DE Same	2011/05/19
70355-35	PROSTHETIC/ORTHOTIC APPLICATION FORMS	New: N/A	2y/nil/DE	2011/05/19
70355-39	PHARMACARE CLAIMS PROFILES - SCANNED	New: N/A	SO/nil/DE	2011/05/19
70355-40	PHARMACARE CLAIMS PROFILES	New: Expanded scope note	CY+1y/5y/DE Same	2011/05/19
70400	PHARMACARE CONSULTATION AND ADVICE	Title changed from PharmaCare reference and consultation.	N/A	2011/05/19
70400-02	PHARMACARE PUBLIC INQUIRIES AND CONCERNS	Name changed from Letters of Complaint.	CY+1y/2y/DE Same	2011/05/19
70400-20	PHARMACARE CONSULTATION CASE FILES	Name changed from PharmaCare issues and consultation case files. Scope note expanded and retention period reduced from SO/6y/SR.	SO/2y/DE Reduced	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70420-02	SUSPECT CLAIMANT ENQUIRIES	<b><u>New</u>:</b> Document the monitoring of tips requesting a claimant be restricted.	SO+2y/nil/DE	2011/05/19
70420-03	SUSPECT CLAIMANT PHN REPORTS	New: N/A	SO+2y/nil/DE	2011/05/19
70420-20	PHARMACY REGISTRATION AND MONITORING FILES	Expanded scope note.	SO/7y/DE Same	2011/05/19
70420-21	PHARMACY REGISTRATION AND MONITORING FILES - SCANNED	<b>New:</b> Covers paper forms that have been scanned and stored in the MaxImage System.	SO/nil/DE	2011/05/19
70420-22	PHARMACY REGISTRATION DATA	<b><u>New</u>:</b> Covers registration data stored in the PharmaCare Centralized Information System.	SO/nil/DE	2011/05/19
70420-25	HEALTHNET BC CLIENT UPDATE FILES	New: N/A	SO/7y/DE	2011/05/19
70420-30	RESTRICTED BENEFICIARY CASE FILES	Expanded scope note and slight change in retention period from SO+1y/6y/DE	<b>SO+7y/nil/DE</b> <i>Slight change</i>	2011/05/19
70420-40	INELIGIBLE BENEFICIARY CASE FILES ("SNOWBIRDS")	Expanded scope note and slight change in retention period from SO + 1y/6y/DE	<b>CY+1y/nil/DE</b> <i>Slight Change</i>	2011/05/19

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Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70450-02	PHARMACARE STAISTICAL REPORTS - DAILY AND WEEKLY PAYMENTS	<b>Deleted</b> : Superseded by secondary -07 PharmaCare statistical reports	N/A	2011/05/19
70450-03	PHARMACARE STATISTICAL REPORTS - MONTHLY PAYMENTS	<b><u>Deleted</u>:</b> Superseded by secondary -07 PharmaCare statistical reports	N/A	2011/05/19
70450-04	PHARMACARE STATISTICAL REPORTS - YEARLY PAYMENTS TOTALS AND AVERAGES	<b><u>Deleted</u>:</b> Superseded by secondary -07 PharmaCare statistical reports	N/A	2011/05/19
70450-05	PHARMACARE STATISTICAL REPORTS - AD HOC	<b><u>Deleted</u>:</b> Superseded by secondary -07 PharmaCare statistical reports	N/A	2011/05/19
70450-06	PHARMACARE STATISTICAL REPORTS - JOB FILES	<b><u>Deleted</u>:</b> Superseded by secondary -07 PharmaCare statistical reports	N/A	2011/05/19

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# **APPENDIX C:** Summary of Changes to the *PHARMACARE SERVICES ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval Date
70450-07	PHARMACARE STATISTICAL REPORTS	<b>New</b> : Replaces former secondaries 70450-02 PharmaCare statistical reports - daily and weekly payments, 70450-03 PharmaCare statistical reports - monthly payments, 70450- 04 PharmaCare statistical reports - yearly payments totals and average,70450-05 PharmaCare statistical reports - ad hoc, and 70450-06 PharmaCare statistical reports job files	SO/nil/DE	2011/05/19
70450-20	PHARMACARE REFERENCE FILES	<b><u>Deleted</u>:</b> Superseded by primary 70300-20 Pharmaceutical reference materials	N/A	2011/05/19
70450-30	PHARMACARE RESEARCH AND EVALUATION PROJECT FILES	Expanded scope note.	<b>SO + 1y/5y/FR</b> Changed from SR to FR to reflect inclusion of records from all program research and evaluation projects	2011/05/19
70480	PHARMACARE STRATEGIC AND PROGRAM PLANNING	New primary.	N/A	2011/05/19
70480-20	PHARMACARE PROGRAM AND POLICY DEVELOPMENT FILES	<u>New</u> : N/A	SO/7y/FR	2011/05/19

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70490	PHARMANET MEDICATION HISTORY	New primary.	N/A	2011/05/19
70490-20	DRUG INFORMATION SYSTEM DATA	<b><u>New</u>:</b> Covers clinical data stored on the Drug Information System (DIS).	10y/nil/DE	2011/05/19
70490-30	DRUG PROCESSING DATA	<b>New:</b> Covers drug monograph information supplied to PharmaNet by <i>First DataBank</i> .	SO/nil/DE	2011/05/19
70490-40	MEDHIST DATA MART DATA	New: N/A	SO/nil/DE	2011/05/19
70490-41	MEDHIST DATA MART REPORTS	New: N/A	SO/nil/DE	2011/05/19

### APPENDIX D

#### DESTRUCTION OF PHARMACARE DOCUMENTS – SCANNED PAPER

#### Re: the records destruction process for secondaries encompassing scanned paper documents

By means of this appendix, and with the authority granted by the *Document Disposal Act*, the Ministry Records Officer approves the destruction of the *PharmaCare Services ORCS* secondaries identified below. These records have been determined to have no enduring value once they have been scanned and the data quality verified.

By granting approval in advance for destruction, these records can be confidentially destroyed once they have been scanned in MaxImage and the image quality verified according to Health Insurance BC (HIBC) internal procedures. Destruction will occur on a routine basis without the usual requirements of the ministry destruction process. Because of the frequency of destruction, it would be unreasonable to expect HIBC to adhere to the standard procedure of obtaining authorization prior to each destruction of these records.

With this approval, the following records may be destroyed as specified:

70315-60 Fair PharmaCare forms - scanned 70325-09 Patient Input Mechanism submissions (PIM) - paper 70350-06 PharmaCare claims - paper 70350-44 Pharmacy processing correspondence - scanned 70355-21 PharmaCare claims beneficiary correspondence - scanned 70355-39 PharmaCare claims profiles - scanned

70429-21 Pharmacy registration and monitoring files - scanned

Mary McIntosh, Ministry Records Officer

APPENDIX D - 1

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### **APPENDIX E**

### *PharmaCare Services ORCS* Scanned Images Cross-Reference

Program Area	Envelope Category/Document Type	Description	ORCS Classification Number & Retention Period
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Admin Review	PCARE INC DOC	Affidavits and Income Documents	70315-36	FY+1y/6y/DE
	PCARE INC REV	Applications for Income Reviews	70315-36	FY+1y/6y/DE
	PCARE APPEALS/ COMPLAINT	Appeals and Complaints Regarding PharmaCare Policy	70315-30	SO/7y/ DE
	PCARE ADMIN CORR	Correspondence to PharmaCare Admin Review	70355-20	CY+1y/5y/DE
	PCARE RETRO PAY	Retro Payment of PharmaCare	70355-20	CY+1y/5y/DE
Fair	FP ADDRESS CHGS	Address Changes including PO Card	70315-02	SO/nil/DE
PharmaCare	FP INFO CORRECT	Correction of Info Forms	70315-02	SO/nil/DE
	FP PAPER REG	PharmaCare Paper Registration Forms (closed secondary)	70315-20	SO/85y/DE
	FP TAX FORMS	Income Tax Filed Forms (closed secondary)	70315-20	SO/85y/DE
	FP MDPO	Monthly Deductible Payment Option	70315-28	FY+1y/6y/DE
PharmaCare Help Desk	PCARE CORR	Correspondence to PharmaCare Help Desk	70355-20	CY+1y/5y/DE
	FP DRUG RCPT	Drug Receipt Documentation	70350-09	FY+1y/6y/DE
	PCARE ORTH PROS	Orthotics and Prosthetics	70355-35	2y/nil/DE
	PCARE PALLCARE	Palliative Care Forms	70317-20	SO+7y/nil/DE
	PCARE CONSENT	PharmaCare Consent Forms (closed secondary)	70315-20	SO/85y/DE
	PCARE PREAUTH	PharmaCare Pre-Authorizations	70355-35	2y/nil/DE

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### **APPENDIX E**

### *PharmaCare Services ORCS* Scanned Images Cross-Reference

Program Area	Envelope Category/Document Type	Description	ORCS Classification Number & Retention Period
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	PCARE WCB CHQS	PharmaCare WCB Cheques	Not Scanned type obsolete	-Recommend making document
	PHARMACY CORR	Pharmacy Processing Correspondence	70350-45	FY+1y/6y/DE
PharmaCare	PCARE FOI	PharmaCare FOI request	70355-40	CY+1y/5y/DE
Information	PHARM PRG/MAINT	Pharmacy and Program Maintenance	70420-20	SO/7Y/DE
Support	PHARM PLAN B	Plan B Correspondence and Payment Adjudication	70420-20	SO/7y/DE