

# **MEDICAL SERVICES PLAN OPERATIONAL RECORDS CLASSIFICATION SYSTEM**

---



**GOVERNMENT RECORDS SERVICE**

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### *MEDICAL SERVICES PLAN*

### *OPERATIONAL RECORDS CLASSIFICATION SYSTEM*

### TABLE OF CONTENTS

REGISTER OF AMENDMENTS

USEFUL INFORMATION

EXECUTIVE SUMMARIES

SECTION 1 40000 - 40599 MEDICAL SERVICES PLAN

SECTION 2 40600 - 40799 ALTERNATIVE PAYMENTS

SECTION 3 40800 - 40999 BILLING INTEGRITY

SECTION 4 41000 - 41199 DIAGNOSTIC FACILITIES

SECTION 5 41200 - 42599 MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING

SECTION 6 42600 - 42999 ENROLMENT AND ELIGIBILITY

SECTION 7 43000 - 43040 SUPPLEMENTARY BENEFITS PROGRAM

SYSTEMS SECTION

APPENDICES

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## ORCS REGISTER OF AMENDMENTS

This register lists all approved changes made to the *Medical Services Plan 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: 2005/02/21**

Amendment Number	Amendment Type	Date Approved	Section/ Primary/ Secondary	Changes
195743	Administrative	2024-03-27	Section 6: 42850-50, 42850-52	Modifications to secondaries to reflect new form.
195739	Administrative	2023-07-25	Entire ORCS Appendix D	Entire ORCS updated to reflect change in HIBC service provider.  Form added to Appendix D.
ADAM 47	Administrative	2014-05-14	Section 3 / 40920-30	Active and semi active retention periods revised to make it Administratively easier for client to send files offsite; overall retention was unchanged.
158558	Formal	2014-04-10	Section 5  Section 1	Entire section updated to reflect organizational changes and current practices. See Appendix B for a detailed listing of changes.  Minor modifications to primary 40050, hearing files.
201214	Formal	2014-04-10	Section 6  Section 1	Entire section 6 is updated to reflect organizational changes and current practices. See Appendix B for a detailed listing of changes.  Minor modifications to primary 40050, hearing files
ADAM 41	Administrative	2013-08-05	40920-25 40980-20	Retentions updated to reflect current practice and facilitate easier offsiteing.
(pre-ADAM)	Administrative	2006-06-16	42850-40	Change to SO definition and amended the note.

## USEFUL INFORMATION

### Key to Information Schedule Codes and Acronyms:

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

### *Medical Services Plan*

### *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 B: Summary of Changes to the *Medical Services Plan 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: 142798

Amendment Number: 195743

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

### *Medical Services Plan*

### *Operational Records Classification System (ORCS)*

### Executive Summary For Amendment 5 - Administrative Amendment

#### **Creating Agency**

Ministry of Health

Medical Services Division

#### **Amendment Change Summary**

Amendment to update service provider and add new form to Appendix D.

#### **Scope**

The purpose of this amendment is to reflect a change in HIBC service provider, update Appendix D, and to align *ORCS* formatting with *ORCS* 2020 standards.

#### **Endorsements**

Schedule Number: 142798

Amendment Number: 195739

Schedule Developer: Elise Polkinghorne, Archivist, 2023-07-25

Approved by Director, Archives and Records Initiatives: Mario Miniaci, 2023-07-25

END OF EXECUTIVE SUMMARY

## RECORDS RETENTION AND DISPOSITION AUTHORITY

This is a recommendation to amend a records schedule.

Title: **Medical Services Plan Operational Records Classification System, amendment 2 (sections 1 & 5)**

Ministry of Health  
Medical Services Division

### Description and Purpose:

This is a general amendment of section 5 of the *Medical Services Plan ORCS*. This amendment also includes a minor amendment of section 1. The purpose of the amendment is to update the *ORCS* so that it reflects changes in the medical services claim and payment processing function.

The amendment includes changes to primary and secondary titles, scope notes, cross-references, secondary qualifiers and notes, and retention periods. It also includes new secondary classifications and the closure or deletion of existing primary/secondary classifications. The relevant Information System Overviews have been modified and, where necessary, new ISOs have been added. For a complete listing of the changes, see the Summary of Changes in Appendix B.



This amendment does not apply to MSP records that, as of the date of approval, have been authorized for disposition (ARS 130 signed off) by the central records services agency.

For a complete list of the changes, see the Summary of Changes to the *MSP ORCS* in Appendix B.

Start Date: 1948

Recommended retention and disposition: scheduled in accord with attached records schedule.

### THE UNDERSIGNED ENDORSE THE RECOMMENDATIONS:

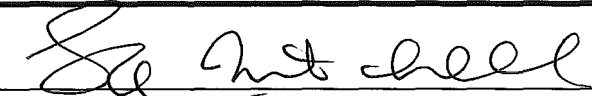
 Records Officer signature Print Name: Terrence McKenney	Oct. 7, 2013 Date
 ADM or Executive Director signature Print Name: Stephanie Power	Oct 18 / 13 Date
Deputy Minister or Corporate Executive signature Print Name:	Date

THE SELECT STANDING COMMITTEE  
ON PUBLIC ACCOUNTS APPROVES THE  
RECOMMENDATION OF THE PUBLIC  
DOCUMENTS COMMITTEE:

March 12, 2014  
Date

APPROVED BY RESOLUTION OF THE  
LEGISLATIVE ASSEMBLY:

### THE PUBLIC DOCUMENTS COMMITTEE CONCURS:

 Chair, PDC signature Print Name: Gary Mitchell	31 Jan 2014 Date
--	---------------------

April 10, 2014  
Date

**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 the *Medicare Protection Act* (RSBC 1996, c. 286) and subsequent legislation governing the operational responsibilities and functions of the creating agency.

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.


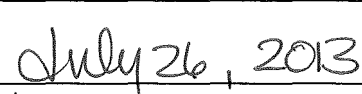
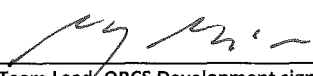
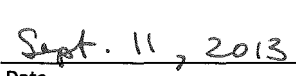
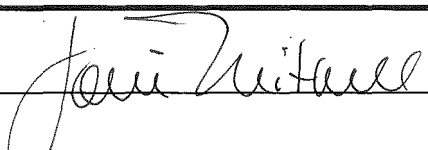
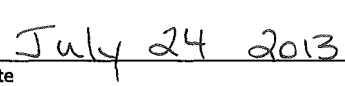
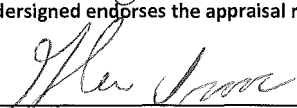
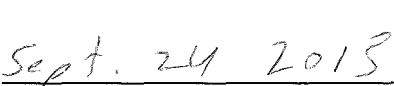
**ARCHIVAL APPRAISAL:**

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.

 Records Analyst signature Print Name: Mahia Frost	 Date
 Team Lead, ORCS Development signature (optional) Print Name: Mary McIntosh	 Date
 Archivist signature Print Name: Joni Mitchell	 Date
The undersigned endorses the appraisal recommendations:  Manager, Policy, Appraisal and Storage signature Records Management Operations, Information Access Operations Print Name: Glen Isaac	 Date



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

### MEDICAL SERVICES PLAN

#### OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

#### EXECUTIVE SUMMARY FOR AMENDMENT 2

This *Operational Records Classification System (ORCS)* amendment updates the classification system and retention and disposition schedule for the operational records created by the Medical Services Commission (MSC), Medical Services Operations and Policy (MSOP), and Health Insurance BC (HIBC), under the *Medicare Protection Act* (RSBC 1996, c. 286).

This amendment reflects revised operational requirements of the records, consolidation of secondaries to streamline records classifications that were media specific, and increases or decreases to retention periods as appropriate. Other amendments to primaries and secondaries have been made throughout the *ORCS* to include wording changes in scope notes, secondary titles, and secondary notes.

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

This *ORCS* covers records created and received since January 1, 1948. This amendment does not apply to records that, as of the date of approval, have been authorized for disposition (ARS 130 signed off) by the central records services agency.

The following summary describes the changes that affect retention periods and final disposition. Secondaries with a final disposition of destruction and a retention period of less than seven years are only described in detail if they were retained for greater than seven years in the previous version of the *ORCS*. In this summary, record types are linked to the *ORCS* 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 B: Summary of Changes to the *Medical Services Plan ORCS* (concordance table).

(continued on next page)

---

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
1) <u>Gender reassignment surgery human rights complaints</u> (secondary 41560-30)	SO+3y	10y	FR
These records document the resolution of complaints brought forth to the BC Human Rights Tribunal regarding gender reassignment issues.			
SO = when complaint is withdrawn or settled or report is submitted and decision has been made			
13y = The retention period ensures the records are available for reference in defense of future complaints.			
FR = The government archives will fully retain GRS human rights complaints because they document the response of the government to the complaint, the hearing, the decision, and the issues raised by the nature of the complaint. These records have significant evidential and informational value.			
2) <u>Annual claim and payment reports and statistics</u> (secondary 41200-03)	SO	nil	FR
These records summarize and document statistics and activities of the Medical Services Plan program.			
FR = The government archives will fully retain annual claim and payment reports and statistics because they provide an annual summary of facts and figures relating to payments for medical and health care services provided to MSP beneficiaries. The records have significant evidential and informational value.			
3) <u>Medical Services Commission Payment Schedule</u> (secondary 41910-02)	SO	nil	SR
The <i>Medical Services Commission Payment Schedule</i> is a foundational document to the Medical Services Plan. It outlines the details and amounts for payment of medical claims for services rendered.			
SR = The government archives will selectively retain the <i>Medical Services Commission Payment Schedule</i> because it documents			

(continued on next page)

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

the fees or amounts payable to medical practitioners for each type of listed benefit or medical service as defined in the *Medicare Protection Act* (RSBC 1996, c. 286, s. 26) and the Master Agreement between the Medical Services Commission and the BC Medical Association. The records have significant evidential and informational value.

The government archives will retain one copy of each annual bound paper version of the Medical Services Commission Payment Schedule. Ministry staff will retain a complete copy of the online (web-based) Medical Services Commission Payment Schedule at the end of each year for FR disposition (e.g., print and box with other FR records).

- 4) Payment disputes files  
(secondary 41910-25) SO+15y 15y DE  
(secondary 41910-20) SO+5y 15y DE

These records cover the resolution of disputes between physicians and the ministry over payments for claims, as facilitated by the BC Medical Association's (BCMA) Reference Committee. The files contain case details that are significant when researching precedent.

SO = when payment dispute is resolved

20y/30y = The retention period ensures that the records are available for MSOP to research precedent, and support the defense of their decisions.

- 5) Gender reassignment surgery case files  
(secondary 41560-20) SO+3y 10y DE

These case files contain records and decisions relating to individual patients and their applications for gender reassignment surgery.

SO = when approved surgery/ies and revisions are complete; or when the application is refused; or when the patient withdraws from or abandons surgical plans

(continued on next page)

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

13y =      The retention period allows for access to the case file in the event of subsequent surgeries, and provides an adequate research period.

6)      Cosmetic and dental service requests  
             (secondary 41450-20)

CY+2y      8y      DE

These are requests and approvals for medically required cosmetic surgery and dental surgery services, as outlined in the *Medical Services Commission Payment Schedule*. Authorization is required for procedures that are not standard MSP benefits.

11y =      The retention period ensures that the records are available for all phases of an approved procedure, and provides an adequate reference period for subsequent procedure requests.

7)      Records with retentions based on supporting fiscal and audit obligations  
             (secondaries 41340-04, 41520-02, 41520-03, 41520-04,  
             41520-05, 42040-31)  
             (secondary 41520-25)  
             (secondaries 41760-02, 42080-25)  
             (secondary 41520-45)  
             (secondary 41760-55)

CY+7y      nil      DE  
             SO+1y      6y      DE  
             FY+1y      6y      DE  
             SO+1y      6y      DE  
             SO+2y      5y      DE

These records relate to various aspects of claim payment processing, including claim cards and forms, out of province cheques, claims cleared and claims outstanding registers, remittance statements, patient history data for out of province processed claims, third party payee files, rural programs payment reports, direct deposit requests, Travel Assistance Program approvals, locum files and pre-authorized out of province claims.

SO =      when the physician/practitioner withdraws from the locum program (41760-55 Locum files)

SO =      upon expiry or termination of the contract and conclusion of all extensions to the contract (41520-45 Third party payee file)

SO =      the calendar year within which the claim has been paid or denied, and any appeals have been resolved. Because pre-authorization

(continued on next page)

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

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

for out-of-province medical treatment may cover more than one procedure, (such as a series of treatments) these files will be closed by the Out-of-Province Authorization Coordinator. (41520-25 Pre-authorized out-of-province claims)

7y = The retention period provides a reasonable period for the legal value of the records to be extinguished and ensures the records are available for fiscal accountability.

- This classification covers filtered data held on the MAXPaTH system, which is used in response to third party requests for medical history.

8y = The retention period provides an adequate period for reporting and trend analysis purposes.

- These are the records of the committee, which is the decision making body for gender reassignment applications.

8y = The retention period ensures that records are retained for ongoing statistical use, and to provide historical reference for the program.

(continued on next page)

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
10)	<u>Fee item implementation records</u> (secondary 41910-23) (secondary 41910-10)	SO+3y CY+7y	5y nil	DE DE
	<p>These records relate to the implementation of fee items, including fee item profiles, which provide details, descriptions and business requirements of the fee item, as well as the more general implementation records, which cover research, monitoring and evaluation material for new or amended fee items (individual items in the <i>Medical Services Commission Payment Schedule</i>).</p> <p>SO = when fee item and associated business rules have been implemented and claims processed successfully under it</p> <p>8y = The retention period ensure the records are available for resolution of claims payment issues.</p> <p>8y = The retention period ensure the records are available for researching fee item history.</p>			
11)	<u>Orthodontics service approvals</u> (secondary 41450-30)	SO+7y	nil	DE
	<p>These are records of requests for medically required orthodontia services, including the cleft palate program. Authorization is required for these procedures that are not standard MSP benefits.</p> <p>SO = upon beneficiary's 25th birthday, when services will no longer be covered by MSP or the BC Dental Association</p> <p>7y = The retention provides sufficient follow-up time, ensures records are available in the event of billing dispute and satisfies fiscal and audit obligations.</p>			
12)	<u>Electronic Records</u>			DE
	<p>The following simple systems and electronic databases are covered by this <i>ORCS</i> amendment: the Fee items database, Rural Health Programs</p>			

(continued on next page)

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

databases, the MaxImage System, the MAXPaTH system, the Travel Assistance Program, and the Claims Processing System. The Simple System Listing provides information about the purpose of the simple system, the classification of the data, and the OPR. The Information System Overview section provides information about the electronic system, inputs and outputs and routine back-ups. Notes under the relevant *ORCS* secondaries provide information about the classification and scheduling of the records. These records have no enduring value to government at the end of their scheduled retention periods.

### 13) All Other Records

DE

All other records added by this amendment 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 function performed, but does not exceed seven years. The information these records contain is summarized elsewhere, or reflects policies and procedures adequately documented in records covered by the -00 Policy and procedures secondaries. Significant issues are documented in records which will be retained under the provisions of this *ORCS*, as well as in briefing notes to the ministry executive (*ARCS* secondary 280-03) and annual reports (*ARCS* secondary 442-20). These records have no enduring value to government at the end of their scheduled retention periods.

A = Active  
SA = Semi-active  
FD = Final Disposition  
FOI = Freedom of Information/Privacy  
PIB = Personal Information Bank  
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  
OD = Other Disposition  
VR = Vital Records

# RECORDS RETENTION AND DISPOSITION AUTHORITY

This is a recommendation to amend a records schedule.

Title: Medical Services Plan Operational Records Classification System, amendment 1

Ministry of Health  
Medical Services Branch  
Medical Services Operations and Policy

## Description and Purpose:

This is an amendment to sections 1 and 6 of the *Medical Services Plan ORCS*.

Section 1 has two new secondaries: for Medical Services Commission (MSC) annual reports and hearing files.

Section 6 has eight new secondaries to cover new or changed functions and activities. 26 secondaries have been removed and merged with other secondaries. Retention periods have been modified. Classification titles, scope notes, cross-references, and descriptive notes have been changed to reflect current operational functions and activities.

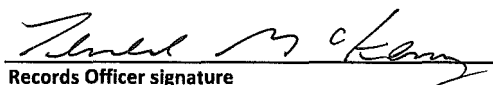


For further information about the extent and type of changes, refer to the attached Appendix B (Summary of 2011 Amendments to the *Medical Services Plan ORCS* [concordance table]).

For further descriptive information about the records, please refer to the attached executive summary.

Start Date: 1948 ongoing

Recommended retention and disposition: scheduled in accord with attached records schedule.

## THE UNDERSIGNED ENDORSE THE RECOMMENDATIONS:

 Records Officer signature Print Name: <u>TERRENCE MCKENNY</u>	<u>OCT 5, 2011</u> Date
 ADM or Executive Director signature Print Name: <u>Dianne Kirkpatrick</u>	<u>OCT 6, 2011</u> Date
 Deputy Minister or Corporate Executive signature Print Name: <u>Stephanie Power</u>	<u>OCT 6, 11</u> Date


THE SELECT STANDING COMMITTEE  
ON PUBLIC ACCOUNTS APPROVES THE  
RECOMMENDATION OF THE PUBLIC  
DOCUMENTS COMMITTEE:

March 12, 2014  
Date

APPROVED BY RESOLUTION OF THE  
LEGISLATIVE ASSEMBLY:

April 10, 2014  
Date

## THE PUBLIC DOCUMENTS COMMITTEE CONCURS:

 Chair, PDC signature Print Name: <u>GARY MITCHELL</u>	<u>29 AUG 2013</u> Date
---	----------------------------




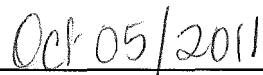


**RECORDS MANAGEMENT APPRAISAL:**

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

These records are created and received under the authority of the *Medicare Protection Act* (RSBC 1996, c. 286) and subsequent legislation governing the operational responsibilities and functions of the creating agency.

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.

	
Records Analyst signature	Date
Print Name: C. Mahia Frost	
	
Team Lead, ORCS Development signature (optional)	Date
Print Name: SUSAN M. HART	

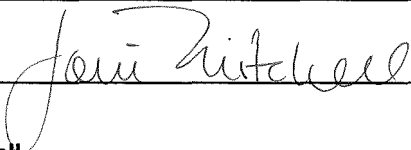
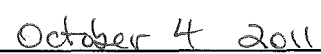

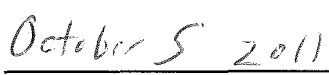
**ARCHIVAL APPRAISAL:**

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."

"Selective Retention" indicates record series or groups of records that will be retained in part. 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.

	
Archivist signature	Date
Print Name: Joni Mitchell	
The undersigned endorses the appraisal recommendations:	
	
Manager, Policy, Appraisal and Storage signature	Date
Records Management Operations, Information Access Operations	
Print Name:	

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

### MEDICAL SERVICES PLAN

#### OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

#### EXECUTIVE SUMMARY FOR AMENDMENT 1

This *Operational Records Classification System (ORCS)* amendment updates the classification system and retention and disposition schedule for the operational records created by the Medical Services Commission (MSC), Medical Services Operations and Policy (MSOP), and Health Insurance BC (HIBC), under the *Medicare Protection Act* (RSBC 1996, c. 286).

This amendment reflects revised operational requirements, and includes new secondaries for Medical Services Commission annual reports and hearing files and new or changed functions and activities, consolidation of secondaries to streamline records classification, and increases or decreases to retention periods as appropriate. Other amendments to primaries and secondaries have been made throughout the *ORCS* to include wording changes in scope notes, 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.

This *ORCS* covers records created and received since January 1, 1948.

The following summary describes the changes that affect retention periods and final disposition. Secondaries with a final disposition of destruction and a retention period of less than seven years are only described in detail if they were retained for greater than seven years in the previous version of the *ORCS*. In this summary, record types are linked to the *ORCS* 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 B: Summary of 2011 Amendments to the *Medical Services Plan ORCS* (concordance table).

(continued on next page)

---

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
1) <u>Medical Services Commission (MSC) annual reports</u> (secondary 40050-02)	SO	nil	FR
These records are the annual report of the MSC as well as the annual financial statement, commonly called the "blue book".			
FR = The government archives will fully retain MSC annual reports because they describe the organizational structure and responsibilities of the MSC; provide an overview of the accomplishments of its advisory committees, hearing panels, and delegated bodies; and outline the expenditures and contributions of the Medical Services Plan and its schedule of payments to practitioners, organizations, and other accounts. These records have significant evidential and informational value.			
2) <u>Medical Services Commission hearing files</u> (secondary 40050-25)	CY+2y	4y	DE
These records document the hearings related to the exercise of the MSC's statutory decision-making powers.			
DE = MSC hearing files may be destroyed because the records of decision and relevant background information are fully retained under secondary 40050-50.			
3) <u>Demographic and statistical coverage reports</u> (secondary 42600-02)	SO	10y	DE
These records are statistical reports from the Medical Services Plan enrolment system regarding specific criteria or demographics such as CareCards, persons over 65, immigrations, or total subscribers.			
SO = when no longer required for active operational and statistical reference purposes			
10y = The retention period allows for trend analysis and additional statistical reference			

(continued on next page)

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

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
4)	<u>Financial adjustment reports</u> (secondary 42600-04)	FY+2y	5y	DE
	These records are reports from the MSP enrolment system such as account recertification, income verification, financial obligation and premium rate adjustments.			
	8y = The retention period allows for trend analysis and fiscal accountability			
5)	<u>Enrolment and eligibility correspondence</u> (secondary 42600-07)	CY	7y	DE
	These records document complaints, informal appeals, policy interpretation, and other issues that are not subscriber specific and are not covered elsewhere in the ORCS.			
	8y = The retention period satisfies operational reference value for the issues documented in this secondary.			
6)	<u>Release of subscriber information</u> (secondary 42640-04)	CY+1y	5y	DE
	These records cover requests from relevant authorities, such as police or ministries, for MSP subscriber information.			
	7y = The retention period provides a reasonable period of time for the legal value of these records to be extinguished.			
7)	<u>Cursory review files</u> (secondary 42660-50)	CY+2y	nil	DE
	These records cover monthly, year-end and ad hoc reports, which may use information from the Master investigation log [see secondary 42660-02] as source material.			
8)	<u>MSP beneficiary records</u> (secondary 42850-42) (secondary 42850-63) (secondary 42850-64)	CY+7y SO+7y CY+7y	nil NA NA	DE NA NA

(continued on next page)

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

A      SA      FD

These records cover MSP enrolment applications, new residents, out of province and out of country student coverage, and coverage for unusual circumstances. They also cover the data on the MSP enrolment system, both the master data for a beneficiary, as well as the account adjustment data.

SO = when there are no more coverage periods for the account or person

7y = The retention period provides for operational reference and referral needs. The retention period meets operational requirements

8y = the retention period meets operational requirements

NA = When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.

- 9) Premium assistance records  
(secondary 42850-50)  
(secondary 42850-52)

CY      99y      DE  
SO+7y      nil      DE

These records cover all premium assistance applications, all supporting documentation including power of attorney, and recertification documents.

99y = The retention period ensures the records are retained for the ongoing audit requirements of the Canada Revenue Agency (CRA).

SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records.

7y = The retention period ensures the records are retained for the ongoing audit requirements of the Canada Revenue Agency (CRA), and also meet operational requirements.

(continued on next page)

A = Active  
SA = Semi-active  
FD = Final Disposition  
FOI = Freedom of Information/Privacy  
PIB = Personal Information Bank  
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  
OD = Other Disposition  
VR = Vital Records

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

This records schedule is approved in accordance with the *Document Disposal Act* (RSBC 1996, c. 99) and constitutes authority for retention and disposition of the records it covers. Consult your Records Officer.

---

A      SA      FD

11) Electronic Records DE

The following simple systems and electronic databases are covered by this *ORCS* amendment: Cursory review database, HIBC Complaints desk tracking system, and MaxImage System (Maximage). The Simple System Listing provides information about the purpose of the simple system, the classification of the data, and the OPR. The Information System Overview section provides information about the electronic system, inputs and outputs and routine back-ups. Notes under the relevant *ORCS* secondaries provide information about the classification and scheduling of the records. These records have no enduring value to government at the end of their scheduled retention periods.

12) All Other Records DE

All other records added by this amendment 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 function performed, but does not exceed seven years. The information these records contain is summarized elsewhere, or reflects policies and procedures adequately documented in records covered by the -00 Policy and procedures secondaries. Significant issues are documented in records which will be retained under the provisions of this *ORCS*, as well as in briefing notes to the ministry executive (*ARCS* secondary 280-03) and annual reports (*ARCS* secondary 442-20). 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
SA = Semi-active	FY = Fiscal Year	DE = Destruction
FD = Final Disposition	NA = Not Applicable	SR = Selective Retention
FOI = Freedom of Information/Privacy	w = week    m = month	FR = Full Retention
PIB = Personal Information Bank	y = year	OD = Other Disposition
OPR = Office of Primary Responsibility		VR = Vital Records

**RECORDS RETENTION AND DISPOSITION AUTHORITY**

**Accession No.** see ORCS "Introduction" part 2.6.1 (c)

**This is a recommendation to authorize an operational records classification and scheduling system.**

**Title:** *Medical Services Plan Operational Records Classification System*

Ministry of Health Services

**Description and Purpose:**

The *Medical Services Plan Operational Records Classification System (ORCS)* covers all operational records created, received, and maintained by the Ministry of Health Services, Medical and Pharmaceutical Services, and Health Benefits Operations pursuant to the *Medicare Protection Act* (RSBC 1996, c. 286) and the *Medical and Health Care Services Regulation* (BC Reg. 426/97).

These records document the payment of fee-for-service claims submitted by physicians and health care practitioners for medical services provided to MSP beneficiaries; the enrollment of individuals under MSP; the determination of eligibility for MSP coverage; the approval and monitoring of diagnostic facilities to claim payments for diagnostic services; the review of physician, health care practitioner, laboratory and hospital billing practices; the negotiation of agreements between the ministry and the British Columbia Medical Association or associations and colleges governing supplementary health care practitioners; and the development of strategic plans and initiatives to improve the provision of medical services to residents of the province.

For further descriptive information about these records, please refer to the attached executive summary.


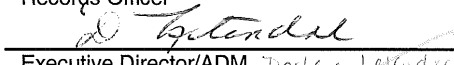
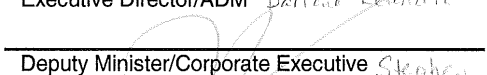
**Date range:** 1948 ongoing

**Physical format of records:** see attached schedule

**Annual accumulation:** 6.4 cubic meters

**Recommended retention and disposition:** scheduled in accord with attached *ORCS*.

**THE UNDERSIGNED ENDORSE THE RECOMMENDATIONS:**

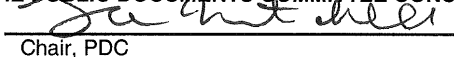
  
Records Officer  
  
Executive Director/ADM Darlene Letendre  
  
Deputy Minister/Corporate Executive Stephen Connors

2003/12/12  
Date

1/11/04  
Date

1/9/04  
Date

**THE PUBLIC DOCUMENTS COMMITTEE CONCURS:**

  
Chair, PDC  
2004-01-19  
Date

**THE SELECT STANDING COMMITTEE ON PUBLIC ACCOUNTS APPROVES THE RECOMMENDATION OF THE PUBLIC DOCUMENTS COMMITTEE:**

Jan 31, 2005  
Date

**APPROVED BY RESOLUTION OF THE LEGISLATIVE ASSEMBLY:**

Feb 21, 2005  
Date

**OTHER STATUTORY APPROVALS:**

Signature _____	Date _____	Signature _____	Date _____
Title: _____		Title: _____	

CONTACT: Mary McIntosh, Ministry Records Officer, (205) 952-2168

**RECORDS MANAGEMENT APPRAISAL:**

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

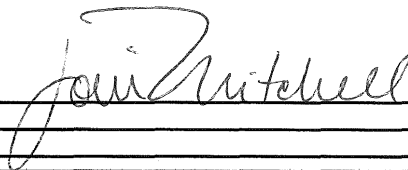
These records are created and received under the authority of *Medicare Protection Act* (RSBC 1996, c. 286), the *Medical and Health Care Services Regulation* (BC Reg. 426/97), and subsequent legislation governing the operational responsibilities and functions of the creating agency.

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.

\_\_\_\_\_  
Records Analyst



2003/12/03  
\_\_\_\_\_  
Date

**ARCHIVAL APPRAISAL:**

This appraisal documents the recommendation for final disposition.

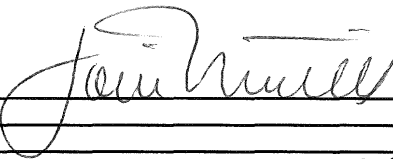
The final disposition recommendations protect records considered to have significant evidential and historical values. The specific reasons for retaining certain records are stated within the *ORCS*, as well as in the Executive Summary.

"Full Retention" indicates record series or groups of records that will be retained in their entirety.

"Selective Retention" indicates record series or groups of records that will be retained in part. 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.

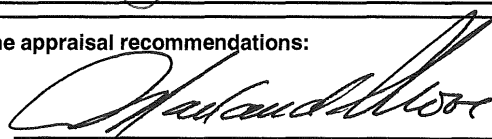
The definitions of both selective and full retention provide that records will be preserved in the government archives, and that unnecessary duplicates, transitory materials, and ephemera may be discarded.

\_\_\_\_\_  
Archivist



2003/12/03  
\_\_\_\_\_  
Date

The undersigned endorses the appraisal recommendations:



\_\_\_\_\_  
Director, Corporate Records Management Branch

2003/12/09  
\_\_\_\_\_  
Date



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

A      SA      FD

### MEDICAL SERVICES PLAN

### OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

#### EXECUTIVE SUMMARY

This *Operational Records Classification System (ORCS)* establishes a classification system and retention and disposition schedule for the operational records created by the Ministry of Health Services, Medical and Pharmaceutical Services, and Health Benefits Operations, pursuant to the *Medicare Protection Act* (RSBC 1996, c. 286) and the *Medical and Health Care Services Regulation* (BC Regulation 426/97).

These records document the development of policies, programs and agreements guiding the provision of medical services to patients in the province of British Columbia that are paid for by the Medical Services Plan (MSP) in accordance with the *Medicare Protection Act* (RSBC 1996, c. 286) including; the funding of physicians' and health care practitioners' services by MSP through alternative payment methods rather than through conventional fee-for-service claims; the monitoring and investigation of the billing patterns and practices of medical and health care practitioners; the approving and monitoring of facilities providing diagnostic services to MSP beneficiaries and the accreditation of physicians to perform diagnostic services; the receipt, processing and payment of fee-for-service claims billed by physicians and supplementary health care practitioners to MSP; management of the Payment Schedule; the enrollment of medical and health care practitioners with MSP; the enrollment of eligible British Columbia residents with MSP; the development of policies, programs and agreements guiding the provision of supplementary health care benefits to patients in the Province of British Columbia that are paid for by MSP; the development and approval of clinical practice guidelines and protocols; negotiation with the physician and practitioner governing bodies; and the development, implementation and ongoing management of initiatives, programs and strategies.

The active and semi-active retention periods specified in the schedule meet all operational, administrative, legal, fiscal, and audit requirements. Corporate Records Management Branch has reviewed the final dispositions to ensure that records having enduring evidential and historical values are preserved. Final dispositions in relation to the Medical Services Commission supersede the final dispositions in the Executive Records Schedule (102906).

(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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
3) <u>Guidelines and Protocol Committee Agenda and Meeting Records</u> (secondaries 40220-31, 40240-21) (secondaries 40220-02, 40240-02)	SO+2y SO	5y nil	FR FR

These records document the decisions and background material used by the GPAC to approve and implement clinical practice guidelines and protocols that will standardize health care service delivery throughout the province.

7y = This retention ensures the records are retained for ongoing reference and operational requirements.

FR = The government archives will fully retain the meeting agendas and committee critical document packages because they document recommendations and decisions of government for clinical practice in BC.

4) <u>MSP Strategy, Program and Initiatives Approved Plans, Guidelines and Policies</u> (secondaries 40520-30, 40540-25, 40540-50, 40540-60, 40540-70, 40560-20) (secondary 40540-02) (secondaries 40520-02, 40560-02)	SO+2y SO+1y SO	5y 2y nil	FR FR FR
--	----------------------	-----------------	----------------

These records document the records of decision defining the planning, implementation and maintenance of initiatives, strategies and programs through approved plans, policy and guidelines, fund management, and records of discussion and decision.

7y = This retention ensures the records are retained for ongoing reference and operational requirements.

FR = The government archives will fully retain MSP strategy, program and initiative approved plan, policies, reports, funding and committee critical records as they document the framework for developing, implementing and maintaining province wide strategies, projects and initiatives to improve the provision of health services to residents of BC

(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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
5) <u>Alternative Payment Funding Application and Monitoring</u> (secondary 40740-20) (secondary 40700-02)	SO+1y FY+1y	6y 2y	FR FR

These records document the approval and monitoring of alternative payment funding to health authority and special agencies.

7y = This retention ensures the records are retained for ongoing audit, operational and reference requirements.

FR = The government archives will retain blank alternative payment program funding application packages because they document what information the government requires to determine qualification for funding and alternative payments agreements accountability records case files because they document and the funding allocated for the payment of physician services through means other than fee-for service.

6) <u>Billing Integrity Records</u> (secondaries 40820-20, 40980-30) (secondary 40830-02)	SO+2y SO	5y nil	FR FR
---	-------------	-----------	----------

These records document decisions made to ensure that billing practices of health care practitioners not within acceptable norms are investigated and resolved. These records also document the processes that direct the monitoring and verification of billing.

7y = This retention ensures the records are retained for ongoing operational, legal and reference requirements of the program.

FR = The government archives will retain billing integrity program case files and committee records because they document decisions and activities about how the government monitors the billing practices of medical practitioners in British Columbia.

7) <u>Supplementary Benefit Committees Records of Decision</u> (secondary 43000-35)	SO+2y	5y	FR
--	-------	----	----

These records document the decision of committees who make determinations related to supplementary benefit services on behalf of the Medical Services Commission.

(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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
7y = This retention ensure the records are retained for ongoing reference requirements			
FR = The government archives will fully retain supplementary benefit committees records of decision because they document the decisions of committees who act on behalf of the Medical Service Commission. These records define the relationship between the Government of British Columbia and the representatives of health care practitioners.			
8) <u>Reciprocal Agreements Records</u> (secondary 41540-04)	SO	nil	FR
These records document the relationship between the province of BC and the other provinces to enable provision of medical services to all eligible residents of all provinces.			
FR = The government archives will fully retain out of province reciprocal agreements because they document the formal agreement between the Province of British Columbia and other Canadian provinces and territories (except Quebec) to the terms by which physicians and acute care facilities will be reimbursed by MSP provided the medical service meets certain criteria.			
9) <u>Agreement Negotiation Records</u> (secondaries 40420-40, 40420-50, 40430-40, 40430-50, 40440-40, 40440-50, 40450-40, 40450-50) (secondaries 40050-20, 43000-20)	SO SO	10y nil	FR FR
These records document the relationship between the Ministry of Health Services and the BCMA, and agreements defining the relationship between the Ministry of Health Services and the governing bodies of supplementary benefit practitioners.			
10y = This retention ensures the records are retained for future agreement development and ongoing operational and reference requirements.			

(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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

		<u>A</u>	<u>SA</u>	<u>FD</u>
	FR = The government archives will retain all approved agreements negotiated between the Government of British Columbia, the Medical Services Commission (MSC), and the British Columbia Medical association (BCMA), and records documenting the negotiation and arbitration of these agreements.			
10)	<u>Diagnostic Facility and Physician Accreditation Records</u> (secondary 41000-04) (secondaries 41080-02, 41120-02, 41140-40)	SO+1y SO	6y nil	FR FR
	These records document physician accreditation guidelines, guidelines used by physician's when billing for specific diagnostic services they have provided, decisions to approve or deny a facility's application to provide a diagnostic service and the appeal of these decisions.			
	7y = This retention ensure the records are retained for ongoing operational and reference requirements.			
	FR = The government archives will fully retain accreditation guidelines, appeal decisions and Advisory Committee on Diagnostic Facilities records because they document the history of diagnostic service standards in British Columbia.			
11)	<u>Practitioner Enrollment Annual Statistics</u> (secondary 42060-07)	SO	nil	FR
	These records document the number of physicians who enroll with the medical services plan for each specialty.			
	FR = The government archives will fully retain practitioner enrollment annual statistics because they provide annual statistics on the number of billing numbers MSP issues for each medical specialty			
12)	<u>Suspension of Provincial Health Care Benefits Decisions and Definitions</u> (secondary 42660-02)	SO	nil	FR
	These records document precedent setting decisions of the Medical Services Commission on eligibility of beneficiary's who are seeking to enroll, re-enroll or who have not been deemed eligible for coverage under the Medical Services Plan.			
	(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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
FR = The government archives will fully retain suspension of provincial health care benefits decisions because they document precedent-setting interpretations of eligibility as defined under the <i>Medicare Protection Act</i> (RSBC 1996, c. 286)			
13) <u>Economic Analysis and Negotiation Support Records</u> (secondaries 40100-20, 40100-30) (secondary 40100-50)	FY+2y SO+2y	5y 5y	SR SR
These records document the economic analysis and reporting of health care costs paid and projected to be paid out to physicians and health care practitioners. Analysis and reporting ensures payment for services is within allowable amounts. They are used by government during negotiations with the BCMA to document issues and support financial positions.			
8y = Projections and reports are required for current fiscal year and then for reference purposes for seven years.			
7y = This retention ensure the records are retained for ongoing operational and reference requirements.			
SR = The government archives will selectively retain economic analysis and negotiation support projections, and reports, by retaining year end cumulative and annual reports and projections. The government archives will selective retain statistical research projects relating to negotiations with the BCMA.			
14) <u>Claim and Payment Reports and Statistics</u> (secondary 41200-03)	SO	nil	SR
These records document claims, payments and adhoc reports produced off the Claims Processing System which are used to support ongoing claim processing, and other functions including physician enrollment and status of claims.			
SR = The government archives will retain annual claims and payment reports and statistics because they provide facts and figures relating to health care services paid for medical and health care services provided to MSP beneficiaries. (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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
15) <u>Premium Assistance Applications</u>			
(secondary 42850-51)	CY+1y	98y	DE
(secondary 42850-53)	SO	99y	DE

These records document application and declaration of consent maintained on microfilm for the Ministry of Health to verify income with the Canada Customs and Revenue Agency (CCRA) for the lifetime of the beneficiary

100y = This retention ensures the records are retained for ongoing audit requirements of the Canadian Customs and Revenue Agency (CCRA).

99y = This retention ensures the records are retained for ongoing audit requirements of the Canadian Customs and Revenue Agency (CCRA).

16) <u>Physician/Practitioner Billing Practice Monitoring Records</u>			
(secondary 40920-20)	SO	57y	DE

These records document the monitoring of billing practices of health care practitioners through the practicing life of the physician.

57y = Case files relating to monitoring specific physicians and health care practitioners are required by the ministry for as long as the physician or practitioner maintains a practice in British Columbia.

17) <u>Practitioner Profiles</u>			
(secondaries 40940-03, 40940-20)	FY+9y	47	DE
(secondary 40940-25)	CY+1y	53y	DE

These records document the development of and guide to interpreting practitioner profiles which are created annually on each practitioner enrolled with and submitting claims to the Medical Services Plan.

57y = This retention ensures these records are retained for ongoing operational and reference requirements. The guide is needed to interpret the profile data for that year.

(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



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

	<u>A</u>	<u>SA</u>	<u>FD</u>
21) <u>Medical Services Claim Documentation</u> (secondaries 41580-02 41580-03, 41580-05, 41580-11, 41580-20, 41580-25, 41580-27, 41580-30, 41580-31, 41580-41, 41580-42, 41340-05) (secondaries 41340-22, 41340-23) (secondaries 41340-20, 41340-20)	CY+7y FY+7y CY+2y	nil nil 5y	DE DE DE

These records document the receipt, review, adjudication, and eventual payment of fee for services claims received from practitioners and beneficiaries, and other provinces through reciprocal agreements. They also document reporting of claims processing, and requests for claim information. These records exist in paper, microfiche, magnetic tape, optical disk, microfilm, and laser disk.

8y = This retention ensures the records are retained for ongoing operational and reference requirements.

22) <u>Alternative Payment Program Records</u> (secondaries 40740-04, 40740-40, 40740-60, 40780-02, 40780-04, 40780-05, 40780-30) (secondary 40740-30)	FY+1y FY+3y	6y 4y	DE DE
---	----------------	----------	----------

These records document the funding for the provision of health care services through methods other than fee for service including sessional, salaried, and service agreement. These records document applications and approval for funding, monitoring and review of the provision and use by the applicant of the funding, and financial management of the funding.

8y = This retention ensure the records are retained for ongoing audit, operational and reference requirements.

23) <u>Beneficiary Enrollment with the Medical Services Plan</u> (secondary 42850-41)	CY+7y	nil	DE
--	-------	-----	----

These records document the applications and correspondence with individuals and group administrators supporting beneficiary enrollment with the Medical Services Plan. These records are in microfilm format.

8y = This retention ensures the records are retained for ongoing operational and reference requirements.

(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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing ORCS, contact your Records Officer.

A      SA      FD

### 24) Electronic Records

DE

The following databases are covered by the ORCS:

Alternative Payments Program Claims System (APPCS)  
Claims Payment  
Claims Processing System (CPS)  
Client Registry System  
Master Claims Database  
Fee Schedule database  
Patient History file  
Practitioner Information File (PIF) database  
Practitioner Profile System  
Registration and Premium Billing System  
Teleplan database  
Travel Assistance Program database  
VEGAS system

The following program area's web pages are covered by this ORCS:

Medical Services Plan (40000-20)  
Minutes of the Commission (40050-41)  
Supplementary benefits (43000-40)

### 25) All Other Records

DE

All other records are destroyed at the end of their semi-active retention periods. The retention period of these records varies depending on the nature of the records and the function performed, but does not exceed seven years. The information these records contain is summarized elsewhere, or reflects policies and procedures adequately documented in the -00 Policy and procedures secondaries.

Significant issues are documented in records which will be retained under the provisions of this ORCS, as well as in briefing notes to the ministry executive (ARCS secondary 280-03) and Ministry of Health Planning and Ministry of Health Services annual reports (ARCS secondary 442-20). These records have no enduring value to government at the end of their scheduled retention periods.

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 1

#### MEDICAL SERVICES PLAN

#### PRIMARY NUMBERS

4 0 0 0 0 – 4 0 5 9 9

Section 1 covers records relating to the development of policies, programs and agreements guiding the provision of medical services to patients in the Province of British Columbia that are paid for by the Medical Services Plan (MSP) in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#). This includes records relating to: management of health care funding issues and programs; analysis and review of economic, demographic and health care utilization data; support of the Ministry of Health in its negotiations with physicians to determine funding priorities and payment levels for medical services; and support of the Medical Services Commission in fulfilling its responsibilities for health care policy development and strategic planning.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 1 TABLE OF CONTENTS

#### MEDICAL SERVICES PLANNING

40000 - 40599

40000	MEDICAL SERVICES PLANNING - GENERAL
40050	MEDICAL SERVICES COMMISSION
40100	ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT
40200	GUIDELINES AND PROTOCOLS - GENERAL
40220	- INITIATION AND APPROVAL
40240	- DEVELOPMENT
40400	NEGOTIATION SUPPORT - GENERAL
40420	- FRAMEWORK MEMORANDUM
40430	- PHYSICIAN MASTER AGREEMENT
40440	- WORKING AGREEMENT
40450	- SUBSIDIARY AGREEMENT
40460	- SUPPLEMENTARY HEALTH CARE
40500	STRATEGIC PROGRAM AND INITIATIVE - GENERAL
40520	- DEVELOPMENT AND PLANNING
40540	- IMPLEMENTATION
40560	- MANAGEMENT/ MAINTENANCE

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40000 MEDICAL SERVICES PLANNING - GENERAL

Records not shown elsewhere in the strategic analysis, development and planning section that relate generally to developing Medical Services Plan (MSP) policies, plans and initiatives; analyzing information, budgets and expenditures; and providing support to MSP, or the Medical Services Commission, in the areas of utilization management, negotiation, education and communications.

Record types include reports, correspondence 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 Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

40000	MEDICAL SERVICES PLANNING - GENERAL	A	SA	FD
	All non-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			
	5y: The default active and semi-active retention period ensures that the operational requirements of the creating agency are met.			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
				(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40000	MEDICAL SERVICES PLANNING - GENERAL	A	SA	FD
	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>Medical Services Plan Resource Manual</b> (covers the resource manual for physicians, for health care practitioners and any earlier resource manuals)  RETENTION STATEMENT Transfer to the government archives seven years after the manual has been updated and is no longer required for current operational and reference requirements.  OPR: the office responsible for updating the manual  SO: when the manual has been updated and is no longer required for current operational and reference requirements  7y: The retention period ensures that records are retained for ongoing operational and reference requirements.  FR: The government archives will retain a copy of each edition of the Medical Services Plan Resource Manual because it documents the information about MSP administration and operations that serves as a guide to medical practitioners and medical office assistants.  Ministry staff will transfer a paper copy of each new edition of the manual with other records designated for full retention (FR).	SO+2y	5y	FR
-20	<b>Medical Services Plan web pages</b>  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	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40000</b>	<b>MEDICAL SERVICES PLANNING - GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

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 ORCS or in ARCS.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40050 MEDICAL SERVICES COMMISSION

Records relating to the activities of the Medical Services Commission (MSC) pursuant to the [Medicare Protection Act \(RSBC 1996, c. 286\)](#). The MSC is a statutory body made up of representatives of government, the British Columbia Medical Association (BCMA), and the public. Its mandate is to facilitate reasonable access throughout BC to quality medical care, health care and diagnostic facility services for BC residents under Medical Services Plan (MSP).

The records in this primary document the activities of the MSC; this includes approved agreements negotiated between the Ministry of Health and the British Columbia Medical Association (BCMA), including master agreements, master agreement arbitration agreements, working agreements, and working agreement arbitration agreements. MSC activities also include appointing hearing panels, committees and subcommittees to support MSC discussions and actions.

Record types include reports, correspondence, and memoranda.

For Advisory Committee on Diagnostic Facilities, see primary 41140.

For agreements with practitioner bodies, see primary 43000.

For audit hearing panels, see primary 40920.

For Audit and Inspection Committee, see primary 43000.

For audit specific records of the Audit and Inspection Committee, see primary 40830.

For business expense approvals, see [ARCS primary 1050](#).

For Guidelines and Protocols Advisory Committee (GPAC), see primary 40220.

For legal opinions, see [ARCS primary 350](#).

For negotiation with the BCMA and practitioner governing bodies, see primaries 40400 to 40460.

For Physician Resource Planning Committee, see primaries 40500 to 40540.

For Tariff Committee, see primary 41910.

For travel expenses, see [ARCS primary 1240](#).

The ministry OPR is Medical Services Commission unless otherwise noted below. See specific secondaries for OPR retention schedules.

40050	MEDICAL SERVICES COMMISSION	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.

(cont'd)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40050	MEDICAL SERVICES COMMISSION	A	SA	FD
	SO: when the policy is replaced or becomes irrelevant			
	FR: The government archives will fully retain final versions of operational policy documentation because these provide significant evidence of the governance of the functions and programs covered by this ORCS.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Medical Services Commission annual reports</b> (includes the annual report as well as the annual financial statement, commonly called the "blue book")	SO	nil	FR
	RETENTION STATEMENT Transfer to the government archives when the report is replaced or becomes irrelevant.			
	SO: when report is replaced or becomes irrelevant			
	FR: The government archives will fully retain Medical Services Commission annual reports because they describe the organizational structure and responsibilities of the MSC; provide an overview of the accomplishments of its advisory committees, hearing panels, and delegated bodies; and outline the expenditures and contributions of the Medical Services Plan and its schedule of payments to practitioners, organizations, and other accounts. These records have significant evidential and informational value.			
-20	<b>Approved agreements</b> (covers approved agreements for which the Medical Service Commission is responsible under the <a href="#">Medicare Protection Act (RSBC 1996, c. 286)</a> ) (arrange by agreement)	SO	nil	FR
	RETENTION STATEMENT Transfer to the government archives when the agreement period has lapsed and the records are no longer required for ongoing operational or reference requirements.			
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40050	MEDICAL SERVICES COMMISSION	A	SA	FD
	<p>SO: when the agreement period has lapsed and the records are no longer required for ongoing operational or reference requirements</p> <p>FR: The government archives will retain all approved agreements negotiated between the Government of British Columbia, the Medical Services Commission (MSC), and the British Columbia Medical Association (BCMA). There are three levels of agreements: one that documents the framework for negotiation and consultation between the province, MSC, and the BCMA; another that establishes the economic agreements between the province and doctors; and the third that documents matters of unique interest and applicability to general practitioners, salaried physicians, physicians providing services on service contracts, physicians providing services on a sessional basis and physicians practicing in rural areas.</p>			
-25	<p><b>Medical Services Commission hearing files</b> (covers hearing binders for MSC hearings, such as residency, out-of-country and diagnostic hearings) (includes correspondence, file brief, background material and a copy of the record of decision)</p> <p>RETENTION STATEMENT Destroy at the end of the seventh calendar year.</p> <p>DE: MSC hearing files may be destroyed because the records of decision and relevant background information are fully retained under secondary -50.</p>	CY+2y	4y	DE
-30	<p><b>Medical Services Commission correspondence</b> (arrange chronologically by date received)</p> <p>RETENTION STATEMENT Destroy at the end of the seventh calendar year.</p> <p>7y: The retention period ensures that records are retained for ongoing operational and reference requirements.</p>	CY+2Y	4Y	DE

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40050	MEDICAL SERVICES COMMISSION	A	SA	FD
	DE: These records will be destroyed upon expiry of the semi-active retention period and approval of the records officer. MSC decisions are adequately documented in the secondaries 40050-40 and -50, which are fully retained by the government archives.			
<b>-40</b>	<b>Minutes of the commission - paper</b> (arrange by minute number)	SO+2y	5y	FR
	RETENTION STATEMENT Transfer to the government archives seven years after the minutes of the commission are no longer required to support current decision making.			
	SO: when the minutes of the commission are no longer required to support current decision making			
	7y: The retention period ensures that records are retained for ongoing reference requirements			
	FR: The government archives will retain the minutes of the Medical Services Commission because they document the decisions of the commission. These decisions provide the basis for Medical Services Plan policy.			
	NOTE: A minute number is comprised of the year the decision is made and then the next consecutive number.			
<b>-41</b>	<b>Minutes of the Commission – web site</b>	SO	nil	DE
	RETENTION STATEMENT Destroy when the web site is altered, updated or redesigned.			
	SO: when the web site is altered, updated or redesigned			
	DE: As the web site is updated, superseded/obsolete versions of documents on it may be destroyed in accordance with approved retention schedules. When the web site is closed, it can be destroyed after relevant schedules have elapsed and/or the documents have been classified elsewhere. Because this is a simple system, an information system overview has not been developed.			
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40050	MEDICAL SERVICES COMMISSION	A	SA	FD
	NOTE: This web site provides specific information about the decisions of the Medical Services Commission.			
	NOTE: All documents presented on the web site are classified under appropriate secondaries within this ORCS or in the <i>Administrative Records Classification System (ARCS)</i> .			
-50	<b>Medical Services Commission (MSC) Records of Decision</b> (includes the commission meeting agenda, records of decision, and background documentation for each agenda item) (arrange by meeting date) (supersedes secondary 42660-02 Suspension of provincial health care benefits decisions and definitions)	SO+2y	5y	FR
	RETENTION STATEMENT Transfer to the government archives seven years after the records of decision of the commission are no longer required to support current decision making.			
	SO: when the records of decision of the commission are no longer required to support current decision making			
	7y: The retention period ensures that records are retained for ongoing reference requirements.			
	FR: The government archives will retain MSC Records of Decision because they provide evidence of the issues addressed by the commission at its meetings.			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **40100 ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT**

Records relating to the monitoring of expenditures against budgeted funding to pay for medical services in the province. Regular reports on the status of expenditures to funds provide notice of possible overruns so that action may be taken. Reports may also relate to and provide background information for aspects of the Physician Master Agreement (formerly Master Agreement), or other agreements, between the Ministry of Health and the BC Medical Association (BCMA).

Regular monitoring reports record utilization of services by medical and paramedical specialty (including physicians, chiropractors, physiotherapists and naturopaths), month, geographic area, patient profiles, and other criteria. Reports are regularly prepared and distributed to client groups, including other areas in the Ministry of Health, ministry executive, the Medical Services Commission, and the BCMA.

Ad hoc reports are created upon request by client groups, or as required for research projects. Reports may include scenarios that can be analyzed to determine the effects of policy decisions, or to aspects of the Physician Master Agreement with the BCMA. Projections are prepared every two weeks as per the Medical Services Plan (MSP) claims processing cycle.

This primary also includes records relating to economic analysis and research of medical and health care issues, trends, statistics and other information. Research and analysis projects are used to support Medical Services Plan (MSP) and Medical Services Commission policy development and strategic planning functions, budget development, utilization management and negotiation initiatives.

Research and analysis includes comparing and exchanging information with other jurisdictions, reviewing ministry or Medical Services Commission programs and initiatives to determine if cost-savings goals are met, developing analysis methodologies, and analyzing demographic, social and economic trends that may affect the utilization and costs of medical and health care services in the province. Research projects may also provide background information required to support Medical Services Commission and ministry executive budget, management, negotiation and policy decisions.

Record types include correspondence, projections, supporting analyses and reports, briefing material, publications, and statistics.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>40100</b>	<b>ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
	All non-OPR offices will retain these records for:	SO	nil	DE
<b>-00</b>	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)  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:      The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
<b>-01</b>	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
<b>-02</b>	<b>Economic analysis reports and projections – report distribution</b>  RETENTION STATEMENT Destroy at the end of the fourth fiscal year.	FY+1y	2y	DE
<b>-03</b>	<b>Information sharing</b>  RETENTION STATEMENT Destroy at the end of the seventh fiscal year.  7y:      The retention period ensures that records are retained for ongoing operational and reference requirements.	FY+1y	5y	DE
<b>-20</b>	<b>Economic analysis and negotiation support – projections</b> (arrange by name of projection, then by fiscal year)  RETENTION STATEMENT Transfer one copy of each year-end economic analysis and negotiation support cumulative projection to the government archives at the end of the eighth fiscal year. Destroy all other projections covered by this secondary.	FY+2y	5y	SR
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40100	ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT	A	SA	FD
	<p>8y: Projections are required for current fiscal year and then for an additional seven years for reference purposes.</p> <p>SR: The government archives will selectively retain economic analysis and negotiation support projections by retaining a copy of each year-end cumulative projection. These records document the year-end estimates of fee-for-service billing expenditures, which are submitted to the Medical Services Commission (MSC).</p> <p>Ministry staff will box a copy of the year-end cumulative projection with other records designated for full retention. All other projections covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer.</p>			
-30	<p><b>Economic analysis and negotiation support – reports</b> (covers the year-end reports including the reconciliation report signed by the MSC and the BCMA) (includes monthly, quarterly, and year-end reports) (arrange by name of report, then by fiscal year)</p> <p>RETENTION STATEMENT Transfer one copy of each year-end cumulative report, annual report, and the final reconciliation report to the government archives at the end of the eighth fiscal year. Destroy all other reports covered by the secondary.</p> <p>8y: Reports are required for current fiscal year and then for an additional seven years for reference purposes.</p> <p>SR: The government archives will selectively retain economic analysis and negotiation support reports by retaining one copy each of the year-end cumulative reports and the annual reports. The government archives will also retain the final reconciliation report. Year-end cumulative and annual reports provide statistical evidence of medical services utilization and expenditures. Reconciliation reports document the year-end adjusting of the difference between available amounts in the MSP budget and the actual medical fee-for-services expenditures.</p>	FY+2y	5y	SR
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40100	ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT	A	SA	FD
	Ministry staff will box a copy of each year-end cumulative report, annual report and final reconciliation report with other records designated for full retention. All other reports covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer.			
<b>-40</b>	<b>Economic analysis and negotiation support committees</b> (covers management of issues relating to requests for economic analysis or negotiation support including Kilshaw Diagnostic Services Review Committee and Health Region Statistical Profiles Steering Committee) (includes agenda, minutes, correspondence) (arrange by committee)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after the issue or topic of discussion has been resolved and is not required for current operational requirements.			
	SO: when the issue or topic of discussion has been resolved and is not required for current operational requirements			
	7y: The retention period ensures that records are retained for ongoing operational and reference requirements.			
	DE: Analysis and negotiation support committee files can be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records documenting economic analysis and negotiations support are adequately documented in the records selected from secondaries 40100-20, -30, and -50.			
<b>-50</b>	<b>Research and analysis project files</b> (covers research and analysis supporting the funding of medical services, management of specific diseases such as cancer and arthritis, and physician issues such as utilization, MSP management issues, and requests from other jurisdictions, agencies, or program areas for statistical analysis of medical service costs or utilization) (includes meeting or committee agendas and minutes) (arrange by topic, then by fiscal year)	SO+2Y	5y	SR
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40100</b>	<b>ECONOMIC ANALYSIS AND NEGOTIATION SUPPORT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

### RETENTION STATEMENT

Transfer selected project files to the government archives seven years after the research and analysis project file is no longer required for current reference purposes or to support current analyses of trend data. Destroy all other project files covered by this secondary.

SO: when the research and analysis project file is no longer required for current reference purposes or to support current analyses of trend data

7y: The retention period ensures the records are retained for ongoing operational and reference requirements.

SR: The government archives will selectively retain research and analysis negotiation and arbitration support project files by retaining those that document statistical research projects related to aspects of master, working or subsidiary agreements with the BCMA. These records document the purpose, methodology, and the results of statistical research used by government in its management and negotiation of agreements with the BCMA. They are also a unique source of statistical information about the economic and demographic aspects of health care services in the province of British Columbia.

Ministry staff will box the files of agreement statistical research project with other records designated for full retention. All other project files covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40200 GUIDELINES AND PROTOCOLS – GENERAL

Records not shown elsewhere in this primary block relating to the administrative support for the initiation, development and approval of clinical practice guidelines and protocols.

Record types include reports, correspondence, and memoranda.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

40200	GUIDELINES AND PROTOCOLS – GENERAL	A	SA	FD
	All non-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: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Reference materials</b> (covers records used to research guidelines and protocols) (includes journal articles, scientific literature, reference copies)	SO	nil	DE
	RETENTION STATEMENT Destroy when the material is no longer required for current reference purposes.			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40220 GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL

Records relating to Medical Services Plan (MSP) support for the initiation and approval of clinical practice guidelines and protocols. Guidelines and protocols are developed by physician working committees under the umbrella of the Guidelines and Protocols Advisory Committee (GPAC). GPAC is co-chaired by the Medical Services Plan and the BC Medical Association (BCMA) and meets approximately six times within a calendar year.

Once the guideline or protocol has been developed by the working committee, responsibility for obtaining Medical Services Commission approval, implementing the guideline or protocol and ensuring post-approval review reverts from the working committee to GPAC.

Record types include briefing materials, correspondence, literature and reference materials, reports, and studies.

**NOTE:** MSP's mandated responsibilities for providing support for the development of clinical practices guidelines and protocols by working committees are carried out within the structure of the Guidelines and Protocols Advisory Committee (GPAC), or its successor committee or committees. Because GPAC performs mandated operational functions, rather than functioning only as a forum for discussion, these records are classified within the *ORCS* rather than under *ARCS* primaries 200 to 206.

For approved guidelines and protocols, see primary 40050.

For development of specific guidelines and protocols by working committees, see primary 40240.

For publication, printing, web publishing and distribution of protocols and guidelines, see [ARCS primary 312](#).

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

40220	GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant		(cont'd)	

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40220	GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>GPAC meeting agendas</b> (includes meeting agenda and cover letter)	SO	nil	FR
	RETENTION STATEMENT Transfer to the government archives when the agendas are no longer required to retrieve guideline or protocol information.			
	SO: when the agendas are no longer required to retrieve guideline or protocol information			
	FR: The government archives will fully retain the GPAC meeting agendas because they serve as a finding aid to the committee's decisions and recommendations that are classified in secondary 40220-31.			
-20	<b>Guideline and protocol topic under discussion case files</b> (arrange by topic area)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after responsibility for developing a guideline or protocol relating to the topic is assigned to a working committee.			
	SO: when responsibility for developing a guideline or protocol relating to topic is assigned to a working committee			
	7y: The retention period ensures that records are retained for ongoing reference and operational requirements.			

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40220	GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL	A	SA	FD
	NOTE: GPAC is responsible for documenting the discussion of topics that may become the subject of a guideline or protocol at some future point. If GPAC determines that a guideline or protocol is required, responsibility for developing the guideline or protocol relating to the topic is assigned to a working committee.			
-30	<b>GPAC meeting initiation and approval reference package</b> (covers packages prepared for each GPAC meeting consisting of items for discussion, literature, articles, copies of correspondence, drafts for discussion, reference material, research material, reports and notifications) (arrange chronologically by meeting date)  RETENTION STATEMENT Destroy seven years after the issues discussed are resolved.  SO: when the issues discussed are resolved  7y: The retention period ensures that records are retained for future reference as issues resurface every five to seven years.	SO+2y	5y	DE
-31	<b>GPAC critical documents package</b> (includes agendas, minutes, records of decision, recommendations supported by scientific literature) (arrange chronologically by meeting date)  RETENTION STATEMENT Transfer to the government archives seven years after the issues discussed are resolved.  SO: when the issues discussed have been resolved  7y: The retention period ensures that records are retained for future reference as issues resurface every five to seven years.  FR: The government archives will fully retain GPAC critical document packages because they document the review and approval of guidelines and protocols that serve as recommendations for clinical practice in BC.  Ministry staff will box these records with other records designated for full retention.	SO+2y	5y	FR

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40220	<b>GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
<b>-40</b>	<b>Guideline and protocol correspondence case files</b> (covers correspondence with stakeholders including practitioners, BCMA, health authorities, and interest groups) (arrange alphabetically by guideline or protocol)  RETENTION STATEMENT Destroy seven years after the guideline or protocol has been reviewed and all issues resulting from that review have been resolved.  SO: when the guideline or protocol has been reviewed and all issues resulting from that review have been resolved  7y: The retention period ensures that records are retained for ongoing operational and reference requirements.	SO+2y	5y	DE
<b>-50</b>	<b>Guideline and protocol implementation case files</b> (arrange by guideline or protocol)  RETENTION STATEMENT Destroy seven years after the guideline or protocol has been implemented and all issues resulting from the implementation have been resolved.  SO: when the guideline or protocol has been implemented and all issues resulting from the implementation have been resolved  7y: The retention period ensures that records are retained for ongoing operational and reference requirements.	SO+2y	5y	DE
<b>-60</b>	<b>Guideline and protocol post implementation evaluation case files</b> (arrange by guideline or protocol)  RETENTION STATEMENT Destroy seven years after the guideline or protocol has been reviewed and all resulting issues have been resolved.  SO: when guideline or protocol has been reviewed and all resulting issues have been resolved	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40220	GUIDELINES AND PROTOCOLS – INITIATION AND APPROVAL	A	SA	FD
	7y: The retention period ensures that records are retained for ongoing operational and reference requirements			
-70	<b>Guideline and protocol – other agencies</b> (includes guidelines and protocols developed by other agencies or jurisdictions) (arrange by topic)  RETENTION STATEMENT Destroy when the information is no longer required for operational or reference purposes.  SO: when information is no longer required for operational or reference purposes	SO	nil	DE
-80	<b>Guideline and protocol external reviews</b> (covers the pre-implementation review) (includes correspondence, questionnaires, summary reports) (arrange by name of guideline or protocol)  RETENTION STATEMENT Destroy seven years after the guideline or protocol is obsolete, rescinded and/or no longer applicable.  SO: when guideline or protocol is obsolete, rescinded and/or no longer applicable  7y: The retention period ensures that records are retained for ongoing reference and operational requirements.  DE: Guideline and protocol external reviews will be destroyed upon the expiry of the active and semiactive retention periods and upon approval of the records officer. Guidelines and Protocols Advisory Committee decisions are documented in critical document packages (secondary 40220-31), which are fully retained, and there is insufficient informational value in guideline and protocol external reviews to warrant retention by the government archives.	SO+2y	5y	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40240 GUIDELINES AND PROTOCOLS – DEVELOPMENT

Records relating to Medical Services Plan (MSP) support for the development of clinical practice guidelines and protocols developed by physician working committees under the umbrella of the Guidelines and Protocols Advisory Committee (GPAC).

GPAC is responsible for documenting the discussion of topics that may become the subject of a guideline or protocol at some future point. If GPAC determines that a guideline or protocol is required, responsibility for developing the guideline or protocol relating to the topic is assigned to a working committee.

MSP supports the development of protocols and guidelines by providing information, analysis and review services to physician working committees. MSP retains documentation relating to the development of protocols and guidelines and provides secretariat services to working committees.

Record types include background information, correspondence, drafts, reference materials, literature searches, reviews, evaluations, minutes and agendas.

NOTE: MSP's mandated responsibilities for supporting the development of clinical practices guidelines and protocols are carried out within the structure of physician working committees. Because working committees perform mandated operational functions, rather than functioning only as a forum for review and/or discussion, these records are classified within the ORCS rather than under ARCS primary 200.

For approved guidelines and protocols, see primary 40050.  
For Guidelines and Protocols Advisory Committee (GPAC), see primary 40220.  
For publication, printing, web publishing and distribution of protocols and guidelines, see [ARCS primary 312](#).

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

40240	GUIDELINES AND PROTOCOLS – DEVELOPMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			

(cont'd)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40240	GUIDELINES AND PROTOCOLS – DEVELOPMENT	A	SA	FD
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Guideline and protocol development meeting agendas</b> (includes meeting agenda and cover letter)	SO	nil	FR
	RETENTION STATEMENT Transfer to the government archives when the agenda is no longer required to retrieve guideline or protocol information.			
	SO: when the agenda is no longer required to retrieve guideline or protocol information			
	FR: The government archives will fully retain the guideline and protocol development meeting agendas because they serve as a finding aid to the committee's record of decisions that are classified in secondary 40240-21.			
-20	<b>Guideline and protocol development meeting reference packages</b> (includes packages prepared for each meeting consisting of items for discussion, literature, articles, copies of correspondence, drafts for discussion, reference material, research material) (arrange by working committee, then chronologically by date of meeting)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after the guideline or protocol is obsolete, rescinded and/or no longer applicable.			
	SO: when guideline or protocol is obsolete, rescinded and/or no longer applicable			
	7y: The retention period ensures that records are retained for ongoing reference and operational requirements.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40240	GUIDELINES AND PROTOCOLS – DEVELOPMENT	A	SA	FD
-21	<b>Guideline and protocol development meeting critical document packages</b> (includes packages prepared for each meeting consisting of agendas, minutes, records of decision, recommendations supported by scientific literature, reports and notifications) (arrange by working committee, then by guideline or protocol)  RETENTION STATEMENT Transfer to the government archives seven years after the guideline or protocol is obsolete, rescinded and/or no longer applicable.  SO:      when guideline or protocol is obsolete, rescinded and/or no longer applicable  7y:      The retention period ensures that records are retained for ongoing reference and operational requirements.  FR:      The government archives will fully retain the guideline and protocol development critical document packages because they document the decisions made during the development of guidelines and protocols for clinical practice in BC.  Ministry staff will box these records with others designated for full retention.	SO+2y	5y	FR
-30	<b>Guideline and protocol development</b> (covers background and research material, literature reviews, educational and public information initiatives, and post implementation feedback and reviews) (arrange by guideline or protocol)  RETENTION STATEMENT Destroy seven years after guideline or protocol is obsolete, rescinded and/or no longer applicable.  SO:      when guideline or protocol is obsolete, rescinded and/or no longer applicable  7y:      The retention period ensures that records are retained for ongoing operational, audit, and compliance with the <a href="#">Limitation Act (RSBC 1996, c. 266)</a> requirements for initiating legal action.	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40240</b>	<b>GUIDELINES AND PROTOCOLS – DEVELOPMENT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

DE: Guideline and protocol development records can be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Guidelines and protocol development decisions and recommendations are adequately documented in guideline and protocol development meeting critical document packages (secondary 40240-21), which are fully retained by the government archives.

---

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40400 NEGOTIATION SUPPORT- GENERAL

Records not shown elsewhere in this primary block relating to negotiations and arbitrations between the Ministry of Health, the Medical Services Commission (MSC) and the BC Medical Association (BCMA) for master and working agreements, and the Ministry of Health and representatives of the supplementary practitioner governing bodies.

This primary also includes records relating to the management of issues that affect, or arise, from the negotiation process between the MSC, the Ministry of Health and the BCMA.

Record types include briefing materials, presentation materials, studies, reference materials, reports, statistics, correspondence, and memoranda.

For approved framework and agreements, see primary 40050.

For economic analysis supporting negotiations, see primary 40100.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40400	NEGOTIATION SUPPORT- GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40400	NEGOTIATION SUPPORT- GENERAL	A	SA	FD
-20	<b>Negotiation process issue files</b> (arrange by item being negotiated, then by issue)  RETENTION STATEMENT Destroy 10 years after information is no longer required for current operational and reference requirements.  SO:     when information is no longer required for current operational and reference requirements  10y:     The retention period ensures that records are retained for ongoing reference and operational requirements.	SO+5y	5y	DE
-30	<b>Reference materials</b> (arrange by topic)  RETENTION STATEMENT Destroy when no longer required for current operational and reference requirements.	SO	nil	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40420 NEGOTIATION SUPPORT- FRAMEWORK MEMORANDUM

Records relating to the negotiation of the framework memorandum between the Medical Services Commission (MSC), the Ministry of Health, and the British Columbia Medical Association (BCMA). This primary relates to the development of the framework memorandum agreement, the issues surrounding the negotiation and agreement development, the dispute resolution process, and the negotiation process itself.

Record types include reports, correspondence, and memoranda.

For approved framework and agreements, see primary 40050.

For economic analysis supporting negotiations, see primary 40100.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40420	NEGOTIATION SUPPORT- FRAMEWORK MEMORANDUM	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Framework memorandum negotiation preparation</b> (arrange by agreement number and component being developed)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40420	NEGOTIATION SUPPORT- FRAMEWORK MEMORANDUM	A	SA	FD
	SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and negotiation, and ongoing operational and reference requirements.			
-30	<b>Framework memorandum negotiation issue case files</b> (arrange by issue)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after the information is no longer required for operational and reference requirements.			
	SO: when information is no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and negotiation, and ongoing operational and reference requirements			
-40	<b>Framework memorandum negotiation</b> (arrange by agreement number and component being developed)	SO	10y	FR
	RETENTION STATEMENT Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.			
	SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and negotiation, and ongoing operational and reference requirements.			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40420	NEGOTIATION SUPPORT- FRAMEWORK MEMORANDUM	A	SA	FD
	FR: The government archives will fully retain Framework memorandum negotiation records because they document decisions made by the Medical Services Commission (MSC) and the Ministry of Health in the negotiation of agreements with the BC Medical Association (BCMA).			
-50	<b>Framework memorandum dispute resolution</b> (covers the development and maintenance of the dispute resolution process) (arrange by issue under dispute)	SO	10y	FR
	RETENTION STATEMENT Transfer to the government archives 10 years after final decision has been made and the records are no longer required for operational and reference requirements.			
	SO: when final decision has been made and the records are no longer required for current operational and reference requirements			
	10y: Records documenting dispute resolution are required to support future master agreement and working agreement negotiations or arbitrations.			
	FR: The government archives will fully retain Framework memorandum dispute resolution records because they document decisions made by the MSC and the Ministry of Health in the resolution of disputes with the BCMA about the interpretation, application or alleged breach of the framework memorandum.			

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40430 NEGOTIATION SUPPORT- PHYSICIAN MASTER AGREEMENT

Records relating to negotiations between the Ministry of Health, the Medical Services Commission and the BC Medical Association (BCMA) for the Physician Master Agreement (PMA). A master agreement establishes arrangements and processes for budget development and interaction and consultation between parties. The Physician Master Agreement replaces the previous Master Agreement and consolidates the relationship and economic agreements.

The Medical Services Plan (MSP) is responsible for supporting the negotiation process by providing advisory, administrative and research services throughout the negotiation process.

Includes records relating to the appeal of arbitration decisions and subsequent arbitration hearings and decisions relating to master agreements. The Medical Services Plan (MSP) is responsible for supporting the arbitration process by providing advisory, administrative and research services to the Ministry of Health and the Medical Services Commission throughout the arbitration process.

Record types include correspondence, legal briefs, legal submissions and rebuttals, draft agreements, reviews, research and reference material, reports, statistics, and legal and medical opinions, advice and presentations, and briefing materials.

For approved framework and agreements, see primary 40050.  
For economic analysis supporting negotiations, see primary 40100.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40430	NEGOTIATION SUPPORT- PHYSICIAN MASTER AGREEMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant			

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40430	NEGOTIATION SUPPORT- PHYSICIAN MASTER AGREEMENT	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Physician Master Agreement negotiation preparation</b> (arrange by agreement number and component being developed)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements.			
	SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.			
-30	<b>Physician Master Agreement issue case files</b> (arrange by issue topic)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after a decision has been made and the records are no longer required for operational and reference requirements.			
	SO: when a decision has been made and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40430	NEGOTIATION SUPPORT- PHYSICIAN MASTER AGREEMENT	A	SA	FD
-40	<b>Physician Master Agreement negotiation</b> (includes amendments to agreements) (arrange by agreement)  RETENTION STATEMENT Transfer to the government archives 10 years after agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.  SO:      when agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements  10y:      Records documenting negotiations of previous agreements are required to support future negotiations or arbitrations.  FR:      The government archives will fully retain Physician Master Agreement negotiation records because they document decisions made by the Medical Services Commission (MSC) and the Ministry of Health in the negotiation of agreements with the BCMA.	SO	10y	FR
-50	<b>Physician Master Agreement dispute resolution</b> (covers the development and maintenance of the dispute resolution process) (arrange by issue under dispute)  RETENTION STATEMENT Transfer to the government archives 10 years after final arbitration decision has been made and the records are no longer required for operational and reference requirements.  SO:      when final arbitration decision has been made and the records are no longer required for current operational and reference requirements  10y:      Records documenting arbitration are required to support future Physician Master Agreements and working agreement negotiations or arbitrations, and for ongoing operational and reference requirements.	SO	10y	FR

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40430	NEGOTIATION SUPPORT- PHYSICIAN MASTER AGREEMENT	A	SA	FD
	FR: The government archives will fully retain Physician Master Agreement dispute resolution records because they document decisions made by the MSC and the Ministry of Health in the resolution of disputes with the BCMA about the interpretation, application or alleged breach of the Physician Master Agreement.			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40440 NEGOTIATION SUPPORT- WORKING AGREEMENT

Records relating to negotiations between the Ministry of Health, the Medical Services Commission and the BC Medical Association (BCMA) for working agreements. The working agreement is the economic agreement between the province and doctors. It covers specific issues or processes such as fee increases, the BCMA reserve account, and physicians' benefits. The Medical Services Plan (MSP) is responsible for supporting the process by providing advisory, administrative and research services to the ministry and the Medical Services Commission.

Also includes records relating to the appeal of arbitration decisions and subsequent arbitration hearings and decisions relating to working agreements. The MSP is responsible for supporting the arbitration process by providing advisory, administrative and research services to the Ministry of Health and the Medical Services Commission throughout the arbitration process.

**NOTE:** Effective November 1, 2007, the Physician Master Agreement replaced the previous structure of a Master, Working and Subsidiary Agreements with a Master and Subsidiary Agreements that incorporate the Working Agreement and the 2006 Letter of Agreement. Therefore, this primary is no longer utilized, but remains effective for scheduling purposes when applied to records created before November, 2007.

Record types include background material, briefing material, correspondence, draft agreements, reports, studies, submissions, legal advice and opinions, medical consultations and presentations, rebuttals, reference material, statistics, and legal and medical opinions.

For approved framework and agreements, see primary 40050.  
For economic analysis supporting negotiations, see primary 40100.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40440	NEGOTIATION SUPPORT- WORKING AGREEMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40440	NEGOTIATION SUPPORT- WORKING AGREEMENT	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Working agreement negotiation preparation</b> (arrange by agreement number and component being developed)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.			
	SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.			
-30	<b>Working agreement issue case files</b> (arrange by issue)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after decision has been made and the records are no longer required for operational and reference requirements.			
	SO: when decision has been made and the records are no longer required for current operational and reference requirements			
	10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40440	NEGOTIATION SUPPORT- WORKING AGREEMENT	A	SA	FD
-40	<b>Working agreement negotiation</b> (arrange by agreement number and component being developed)  RETENTION STATEMENT Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.  SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.  FR: The government archives will fully retain Working agreement dispute resolution records because they document decisions made by the Medical Services Commission (MSC) and the Ministry of Health in the negotiation of agreements with the BC Medical Association (BCMA).	SO	10y	FR
-50	<b>Working agreement dispute resolution</b> (arrange by agreement number and component being developed)  RETENTION STATEMENT Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.  SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.	SO	10y	FR
(cont'd)				

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40440</b>	<b>NEGOTIATION SUPPORT- WORKING AGREEMENT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

FR: The government archives will fully retain Working agreement dispute resolution records because they document decisions made by the MSC and the Ministry of Health in the resolution of disputes with the BCMA about the interpretation, application or alleged breach of the Working agreements.

---

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40450 NEGOTIATION SUPPORT- SUBSIDIARY AGREEMENT

Records relating to the negotiation of subsidiary agreements that support the Physician Master Agreement (formerly the Master Agreement).

Includes records relating to the appeal of arbitration decisions and subsequent arbitration hearings and decisions relating to subsidiary agreements. The Medical Services Plan (MSP) is responsible for supporting the arbitration process by providing advisory, administrative and research services to the Ministry of Health and the Medical Services Commission throughout the arbitration process.

NOTE: Effective November 1, 2007, the Physician Master Agreement (PMA) consolidated the previous agreement structure and reduced the number of separate subsidiary agreements.

Record types include correspondence, briefing materials, submissions, rebuttals, reference and research material, presentation materials, reports, statistics, legal and medical opinions, advice, and presentations.

For approved framework and agreements, see primary 40050.

For economic analysis supporting negotiations, see primary 40100.

For financial records relating to alternative payments, see primaries 40600 to 40799.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40450	NEGOTIATION SUPPORT- SUBSIDIARY AGREEMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.				
SO:	when policy is replaced or becomes irrelevant			
FR:	The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40450	NEGOTIATION SUPPORT- SUBSIDIARY AGREEMENT	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-20	<b>Subsidiary agreement negotiation preparation</b> (arrange by agreement number and component being developed)  RETENTION STATEMENT Destroy 10 years after the agreement has been superseded by a new agreement and the records are no longer required for operational and reference requirements.  SO: when the agreement has been superseded by a new agreement and the records are no longer required for current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.	SO	10y	DE
-30	<b>Subsidiary agreement issue case files</b> (arrange by issue)  RETENTION STATEMENT Destroy 10 years after the decision has been made and the records are no longer required to support operational and reference requirements.  SO: when the decision has been made and the records are no longer required to support current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.	SO	10y	DE
-40	<b>Subsidiary agreement negotiation</b> (arrange by agreement number and component being developed)  RETENTION STATEMENT Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required to support operational and reference requirements.	SO	10y	FR
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40450	NEGOTIATION SUPPORT- SUBSIDIARY AGREEMENT	A	SA	FD
	<p>SO: when the agreement has been superseded by a new agreement and the records are no longer required to support current operational and reference requirements</p> <p>10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.</p> <p>FR: The government archives will fully retain Subsidiary agreement negotiation records because they document decisions made by the Medical Services Commission (MSC) and the Ministry of Health in the negotiation of agreements with the BC Medical Association (BCMA).</p>			
-50	<b>Subsidiary agreement dispute resolution</b> (arrange by agreement number and component being developed)	SO	10y	FR
	<p>RETENTION STATEMENT</p> <p>Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required to support operational and reference requirements.</p> <p>SO: when the agreement has been superseded by a new agreement and the records are no longer required to support current operational and reference requirements</p> <p>10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.</p> <p>FR: The government archives will fully retain Subsidiary agreement dispute resolution records because they document decisions made by the Medical Services Commission and the Ministry of Health in the resolution of dispute with the BCMA about the interpretation, application or alleged breach of the Subsidiary agreement.</p>			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40460 NEGOTIATION SUPPORT- SUPPLEMENTARY HEALTH CARE

Records relating to the negotiation of agreements between the Ministry of Health, special committees, and the association, or college, representing practitioners who provide supplementary health care services covered by the Medical Services Plan (MSP). These practitioner groups include oral surgeons, osteopaths, optometrists, surgical podiatrists and chiropractors. Until 2003, these negotiations were initiated and documented by the former Public Service Employee Relations Commission (PSERC) and its predecessors.

Record types include correspondence, briefing materials, submissions, rebuttals, reference and research material, presentation materials, reports, statistics and legal and medical opinions, advice, and presentations.

For approved agreements, see primary 40050.

For economic analysis supporting negotiations, see primary 40100.

For negotiation support with supplementary practitioner organizations, see primary 43020.

The ministry OPR is Agreements and Negotiations unless otherwise noted below. See specific secondaries for OPR retention schedules.

40460	NEGOTIATION SUPPORT- SUPPLEMENTARY HEALTH CARE	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40460	NEGOTIATION SUPPORT- SUPPLEMENTARY HEALTH CARE	A	SA	FD
-20	<b>Supplementary health care agreement development</b> (arrange by agreement number)  RETENTION STATEMENT Destroy 10 years after the agreement has been superseded by a new agreement and the records are no longer required to support operational and reference requirements.  SO: when the agreement has been superseded by a new agreement and the records are no longer required to support current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.	SO+2y	8y	DE
-30	<b>Supplementary health care agreement issue case files</b> (arrange by issue)  RETENTION STATEMENT Destroy 10 years after the decision has been made and the records are no longer required to support operational and reference requirements.  SO: when the decision has been made and the records are no longer required to support current operational and reference requirements  10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.	SO+2y	8y	DE
-40	<b>Supplementary health care agreement negotiation</b> (arrange by agreement number and component being developed)  RETENTION STATEMENT Transfer to the government archives 10 years after the agreement has been superseded by a new agreement and the records are no longer required to support operational and reference requirements.	SO+2y	8y	FR
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40460	NEGOTIATION SUPPORT- SUPPLEMENTARY HEALTH CARE	A	SA	FD
	<p>SO: when the agreement has been superseded by a new agreement and the records are no longer required to support current operational and reference requirements</p> <p>10y: The retention period ensures that records are retained for future agreement development and ongoing operational and reference requirements.</p> <p>FR: The government archives will fully retain Supplementary health care agreement negotiation records because they document decisions made by the Medical Services Commission and the Ministry of Health in the negotiation of agreements with associations or colleges representing practitioners who provide supplementary health care services covered by the Medical Services Plan.</p>			
<b>-50</b>	<p><b>Supplementary health care agreement dispute resolution</b> (arrange by agreement number and component being developed)</p> <p>RETENTION STATEMENT Transfer to the government archives 10 years after the dispute has been resolved and the records are no longer required to support operational and reference requirements.</p> <p>SO: when the dispute has been resolved and the records are no longer required to support current operational and reference requirements</p> <p>10y: The retention period ensures that records are retained for ongoing operational and reference requirements.</p> <p>FR: The government archives will fully retain Supplementary health care agreement dispute resolution records because they document decisions made by the MSC and the Ministry of Health in the resolution of dispute with the associations or colleges representing practitioners who provide supplementary health care services about the interpretation, application or alleged breach of a supplementary health agreement.</p>	SO+2y	8y	FR

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40500 STRATEGIC PROGRAM AND INITIATIVE – GENERAL

Records relating generally to medical and health care issues, studies or strategies initiated by or affecting the Medical Services Plan (MSP) with respect to the provision of physicians' and health care practitioners' services to residents of the province, including one-time or ongoing projects, programs and strategies. Strategic programs include rural health, physician planning, physician utilization, and primary health care. Strategic initiatives include chronic disease management, acute care and continuing care.

Record types include correspondence, reports, and reference material

For developing strategies, programs and initiatives, see primary 40520.

For development of newsletter and other publications, see [ARCS primary 312](#).

For implementation of strategies, programs and initiatives, see primary 40540.

For negotiation with the BC Medical Association, see primaries 40400 to 40500.

For post implementation management and maintenance of strategies, program and initiatives see primary 40560.

For web sites relating to strategic programs and initiatives, see primary 40000.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

40500	STRATEGIC PROGRAM AND INITIATIVE – GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40520 STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING

Records relating to the initiation, development and planning of medical and health care issues, studies or strategies initiated by, or affecting, the Medical Services Plan (MSP) with respect to the provision of physicians' and health care practitioners' services to residents of the province including one-time or ongoing projects, programs and strategies. Strategic programs include rural health, physician planning, physician utilization, and primary health care. Strategic initiatives include chronic disease management. This includes records relating to advice provided by medical consultants.

Record types include briefing material, correspondence, fact sheets, literature and reference material, presentation material, research papers, reports, statistics, strategic plans, and terms of reference.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

40520	STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40520	STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING	A	SA	FD
-02	<b>MSP strategy, program and initiative approved plan</b> (covers final and/or approved plans)	SO	nil	FR
RETENTION STATEMENT Transfer to the government archives when the strategy, program or initiative is no longer active and the records are no longer required for ongoing operational requirements.				
SO: when the strategy, program or initiative is no longer active and the records are no longer required for ongoing operational requirements				
FR: The government archives will fully retain MSP strategy, program and initiative approved plans because they document a government-approved plan for responding to significant health care issues.				
Ministry staff will box approved plans with other records designated for full retention.				
-20	<b>MSP strategy, program and initiative conceptualization/ development case files</b> (covers the initial theoretical definition and potential development of an idea towards a strategy, program or initiative) (arrange by concept, strategy, program or initiative)	SO+2y	5y	DE
RETENTION STATEMENT Destroy seven years after the strategy, program or initiative is no longer an active program or has been deemed inappropriate.				
SO: when the strategy, program or initiative is no longer an active program or has been deemed inappropriate at this time				
7y: The retention period ensures that records are retained for ongoing reference and operational requirements.				

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40520	STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING	A	SA	FD
	<p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the development of strategic program and initiative development and planning are adequately documented in approved plans and development and planning committee case files (secondaries 40520-02 and -30).</p>			
-30	<p><b>MSP strategy, program and initiative development and planning committee case files</b>  (covers committees whose mandate is to develop and plan a specific strategy, program or initiative)  (arrange by strategy, program or initiative)</p> <p>RETENTION STATEMENT  Transfer to the government archives seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.</p> <p>SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time</p> <p>7y: The retention period ensures that records are retained for ongoing reference and operational requirements.</p> <p>FR: The government archives will fully retain MSP strategy, program and initiative development and planning committee case files because they document decisions made by the government in the process of developing plans for dealing with significant health care issues.</p> <p>Ministry staff will box these files with other records designated for full retention.</p>	SO+2y	5y	FR
-40	<p><b>MSP strategic program and initiative implementation funding coordination</b>  (covers application to federal and provincial government and other agencies to finance a strategic program or initiative, and the identification of potential funding sources and the approval of recommended funding sources)  (includes letters of intent and submission documentation, journal vouchers, financial statements)  (arrange by program or initiative, then by subject or issue)</p>	SO+2y	5y	DE
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40520</b>	<b>STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.

SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved

7y: The retention period ensures that records are retained in compliance with Health Canada funding requirements.

DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the development of strategic program and initiative development and planning are adequately documented in approved plans and development and planning committee case files (secondaries 40520-02 and -30).

---

<b>-50</b>	<b>MSP strategy, program and initiative development and planning issue management case files</b> (arrange by strategy, program or initiative)	<b>SO+2y</b>	<b>5y</b>	<b>DE</b>
------------	--	--------------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.

SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time

7y: The retention period ensures that records are retained for ongoing reference and operational requirements.

DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the development of strategic program and initiative development and planning are adequately documented in approved plans and development and planning committee case files (secondaries 40520-02 and -30).

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40520	STRATEGIC PROGRAM AND INITIATIVE – DEVELOPMENT AND PLANNING	A	SA	FD
-60	<b>MSP strategic program and initiative development and planning research case files</b> (arrange by program or initiative, then research subject)  RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.  SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved  7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a> .  DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the development of strategic program and initiative development and planning are adequately documented in approved plans and development and planning committee case files (secondaries 40520-02 and -30).	SO+2y	5y	DE
-70	<b>MSP strategy, program and initiative development and planning reference materials</b> (covers material that is collected and referred to during the development and implementation of a strategy, program or initiative) (arrange by subject)  RETENTION STATEMENT Destroy when the information is no longer required for ongoing operational or reference requirements.  SO: when the information is no longer required for ongoing operational or reference requirements	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40540 STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION

Records relating to the implementation of strategic programs and initiatives to support and enable the provision of health services to all residents of the province. Strategic programs and initiatives include primary health care initiatives, rural health initiatives, chronic disease management, acute care programs, and continuing care programs. Implementation of these programs may include multiple partnerships and management of significant issues that can change the direction of the implementation.

Includes records relating to the management of the Primary Health Care Transition Fund (PHCTF) allocation from the federal government to improve primary health care for priority populations. The PHCTF is intended to strengthen family practice, reduce pressure on acute care, improve health care delivery and keep people healthy through diagnosis and early intervention; and providing patients with a wider range of options for accessing services at the local level.

Record types include correspondence, reports, memoranda, and briefing notes and other types of records as indicated under relevant secondaries.

**NOTE:** The implementation of a strategy, program or initiative may be staged or full. During the implementation of a strategy program or initiative, issues may arise which may halt the implementation of the strategy, program or initiative, or cause the ministry to reconsider the project. The outcome of the review could be to discontinue the project, or halt further implementation, leaving the partial implementation as the full implementation. Once a project has reached full implementation and will continue, management and ongoing maintenance of the project are documented in primary 40560.

For advertising, see [ARCS primary 295](#).

For initiation, development and approval of guidelines and protocols by and for the Guidelines and Protocols Advisory Committee (GPAC), see primaries 40200 to 40240.

For protocols and guidelines defined by the GPAC and approved by the Medical Services Commission (MSC), see primary 40050.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	All non-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
(cont'd)				

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	<p>RETENTION STATEMENT</p> <p>Transfer to the government archives five years after policy is replaced or becomes irrelevant.</p> <p>SO: when policy is replaced or becomes irrelevant</p> <p>FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.</p>			
-01	General	CY+1y	nil	DE
	<p>RETENTION STATEMENT</p> <p>Destroy at the end of the second calendar year.</p>			
-02	<p><b>MSP strategic program and initiative implementation approved guidelines and policy</b></p> <p>(covers approved guidelines created to support the program or initiative)</p> <p>RETENTION STATEMENT</p> <p>Transfer to the government archives three years after the guidelines have been superseded and/or the strategy, program or initiative is no longer active.</p> <p>SO: when the guidelines have been superseded and/or the strategy, program or initiative is no longer active</p> <p>FR: The government archives will fully retain MSP strategic program and initiatives implementation approved guidelines and policy because they document government decisions about how to address significant health care issues.</p> <p>Ministry staff will box approved guidelines and policy with other records designated for full retention.</p> <p>NOTE: Guidelines and protocols for physicians to use, and which the Medical Services Commission approves, are documented in the Minutes of the Commission, primary 40050.</p>	SO+1y	2y	FR

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
-20	<b>MSP strategic programs and initiative – implementation case management</b> (covers primary health care plan sites) (includes site or disease specific plans) (arrange by program or initiative, then site)  RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues pertaining to it have been resolved.  SO: when the program or initiative is no longer active and all issues pertaining to it have been resolved  7y: The retention period ensures that records are retained for ongoing operational and audit requirements.  DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.	SO+2y	5y	DE
-25	<b>MSP strategic program and initiative implementation committee records</b> (covers the Health Canada Advisory Committee on Primary Health Care, the Primary Health Care steering committee, chronic disease management committees, rural health committees) (include agendas, minutes, records of decision) (arrange by committee, then by critical records, subject or issue)  RETENTION STATEMENT Transfer to the government archives seven years after the program or initiative is no longer active and all issues pertaining to the program or initiative have been resolved.  SO: when the program or initiative is no longer active and all issues pertaining to the program or initiative have been resolved	SO+2y	5y	FR

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	<p>7y: The retention period ensures that records are retained for ongoing operational, audit and reference requirements.</p> <p>FR: The government archives will fully retain MSP strategic program and initiative implementation committee records because they document decisions made by the government relating to strategic program and initiative guidelines and policy.</p> <p>Ministry staff will box these files with other records designated for full retention.</p>			
-30	<p><b>MSP strategic program and initiative implementation collaboration with external organizations</b> (covers collaboration with health authorities and the pharmaceutical industry) (arrange by program or initiative, then organization or subject of discussion)</p> <p>RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.</p> <p>SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved</p> <p>7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a>.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.</p>	SO+2y	5y	DE



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
-35	<b>MSP strategic program and initiative implementation consultation and liaison</b> (covers consultation and liaison with federal, provincial, and local government, and stakeholder agencies) (arrange by program or initiative, then organization, agency, program or issue)  RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.  SO:      when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved  7y:      The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a> .  DE:      The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.	SO+2y	5y	DE
-40	<b>MSP strategic program and initiative implementation evaluation and monitoring</b> (covers the ongoing review of the implementation process including performance measurement) (arrange by program or initiative, then by issue or subject)  RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.  SO:      when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	<p>7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a>.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.</p>			
<b>-45</b>	<p><b>MSP strategic program and initiative implementation fund management</b> (covers distribution and monitoring of funds distributed to health authorities and other agencies in support of a strategic program or initiative, including funding requirements documentation) (arrange by program or initiative, then by subject or issue)</p> <p>RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.</p> <p>SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved</p> <p>7y: The retention period ensures that records are retained for ongoing operational and reference requirements.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.</p>	SO+2y	5y	DE
(cont'd)				

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	NOTE: Funding may originate from the provincial government, the federal government or from external stakeholders.			
-50	<b>MSP strategic program and initiative implementation fund management critical documents</b> (covers initial submission documentation and all audit or funding requirement documentation) (includes signed funding arrangement documents) (arrange by program or initiative, then by subject or issue)	SO+2y	5y	FR
	<b>RETENTION STATEMENT</b> Transfer to the government archives seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.			
	SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved			
	7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a> .			
	FR: The government archives will fully retain MSP strategic program and initiative implementation fund management critical documents because they document decisions made by the government regarding the implementation of significant health care programs and initiatives.			
	Ministry staff will box these files with other records designated for full retention.			
	NOTE: Funds may originate from within the provincial government, from the federal government, or from external stakeholders.			
-55	<b>MSP strategic program and initiative implementation guideline and policy development</b> (covers development of guidelines created to support the program or initiative and which are not approved by the Medical Services Commission) (arrange by program or initiative, then guideline or policy)	SO+2y	5y	DE
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40540</b>	<b>STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.

SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved

7y: The retention period ensures that records are retained for ongoing operational and reference requirements.

DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.

NOTE: Classify approved guidelines in secondary 40540-02.

---

<b>-60</b>	<b>MSP strategic program and initiative implementation - implementation critical documents</b>	<b>SO+2y</b>	<b>5y</b>	<b>FR</b>
------------	--	--------------	-----------	-----------

---

(covers staged and full implementations)

(includes business cases, patient registries, performance measures, web-based resources, shared care models, training, and records of decision)

(arrange by program or initiative, then implementation component)

### RETENTION STATEMENT

Transfer to the government archives seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.

SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved

(cont'd)

---

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
	<p>7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a>.</p> <p>FR: The government archives will fully retain MSP strategic program and initiative critical documents because they document decisions made by the government regarding the implementation of significant health care programs and initiatives.</p> <p>Ministry staff will box these files with other records designated for full retention.</p>			
<b>-65</b>	<p><b>MSP strategic program and initiative implementation issue management</b> (arrange by program or initiative, then issue)</p> <p>RETENTION STATEMENT Destroy seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.</p> <p>SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved</p> <p>7y: The retention period ensures that records are retained should an individual wish to initiate legal action pursuant to the <a href="#">Limitation Act (RSBC 1996, c. 266)</a>.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the implementation of strategic programs and initiatives are adequately documented in approved guidelines and policy, implementation committee records, fund management critical documents, implementation critical documents and implementation reports.</p>	SO+2y	5y	DE

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40540	STRATEGIC PROGRAM AND INITIATIVE – IMPLEMENTATION	A	SA	FD
-70	<b>MSP strategic program and initiative implementation reports</b> (covers interim, final, monitoring, and evaluation reports) (arrange by program or initiative, then report or report subject)  RETENTION STATEMENT Transfer to the government archives seven years after the program or initiative is no longer active and all issues relating to the program or initiative have been resolved.  SO: when the program or initiative is no longer active and all issues relating to the program or initiative have been resolved  7y: The retention period ensures that records are retained for ongoing operational and reference requirements.  FR: The government archives will fully retain MSP strategic program and initiative reports because they document the process and decisions made during the implementation of significant health care programs and initiatives.  Ministry staff will box these files with other records designated for full retention.	SO+2y	5y	FR
-75	<b>MSP strategic program and initiative reference materials</b> (arrange by subject)  RETENTION STATEMENT Destroy when the records are no longer relevant to the operations of the program.  SO: when the records are no longer relevant to the operations of the program	SO	nil	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40560 STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE

Records relating to the management and maintenance of medical and health care initiatives, programs or strategies initiated by or affecting the Medical Services Plan (MSP) with respect to the provision of physicians' and health care practitioners' services to residents of the province including one-time or ongoing projects, programs and strategies. Strategic programs include rural health, physician planning, physician utilization, and primary health care. Strategic initiatives include chronic disease management.

Includes records relating to issues management related to changes in the provision of health care services that affect how a strategic program or initiative will function. Issue management can result in revised implementation strategies, policy development, implementation or revision, consultation and collaboration with stakeholders, and ongoing evaluation and monitoring of the strategy or initiative. Maintenance of a strategy, program or initiative continues until the project is considered inactive or not viable to support the provision of health services to the residents of the province.

Record types include correspondence, reports, memoranda, and briefing notes.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

40560	STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40560	STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE	A	SA	FD
-02	<b>MSP strategy, program and initiative maintenance approved policies</b> (covers the approved policy that defines the provision of health services)  RETENTION STATEMENT Transfer to the government archives when the strategy, program or initiative is no longer active and the records are no longer required for ongoing reference requirements.  SO:      when the strategy, program or initiative is no longer active and the records are no longer required for ongoing reference requirements  FR:      The government archives will fully retain MSP strategy, program and initiative maintenance approved policies because they document government decisions regarding significant medical and health care initiatives.  Ministry staff will box these files with other records designated for full retention.	SO	nil	FR
-20	<b>MSP strategy, program and initiative maintenance committee case files</b> (covers records of committees who coordinate, review and manage the maintenance of strategies, programs and initiatives) (arrange by strategy, program or initiative, then by committee)  RETENTION STATEMENT Transfer to the government archives seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.  SO:      when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time  7y:      The retention period ensures that records are retained for ongoing reference and operational requirements.	SO+2y	5y	FR
(cont'd)				



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40560	STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE	A	SA	FD
	<p>FR: The government archives will fully retain MSP strategy, program and initiative maintenance committee case files because they document the decisions made by the government regarding the maintenance of significant medical and health care programs and initiatives.</p> <p>Ministry staff will box these files with other records designated for full retention.</p>			
-30	<p><b>MSP strategy, program and initiative maintenance evaluation and monitoring case files</b> (covers the ongoing evaluation and monitoring and review of fully implemented strategies, programs and initiatives including performance measurement) (arrange by strategy, program or initiative)</p> <p>RETENTION STATEMENT Destroy seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.</p> <p>SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time</p> <p>7y: This retention ensures the records are retained for ongoing reference and operational requirements.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the maintenance of strategic programs and initiatives are adequately documented in approved policies and maintenance committee records.</p>	SO+2y	5y	DE
-40	<p><b>MSP strategy, program and initiative maintenance issue management case files</b> (arrange by strategy, program or initiative)</p> <p>RETENTION STATEMENT Destroy seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.</p> <p>SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time</p>	SO+2y	5y	DE

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40560	STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE	A	SA	FD
	<p>7y: The retention period ensures that records are retained for ongoing reference and operational requirements.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the maintenance of strategic programs and initiatives are adequately documented in approved policies and maintenance committee records.</p>			
<b>-50</b>	<p><b>MSP strategy, program and initiative maintenance guideline and policy development case files</b> (arrange by strategy, program or initiative)</p> <p>RETENTION STATEMENT Destroy seven years after the strategy, program or initiative is no longer active, or has been deemed inappropriate.</p> <p>SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time</p> <p>7y: The retention period ensures that records are retained for ongoing reference and operational requirements.</p> <p>DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the maintenance of strategic programs and initiatives are adequately documented in approved policies and maintenance committee records.</p> <p>NOTE: Classify approved policy documentation in secondary 40560-02.</p>	SO+2y	5y	DE
<b>-60</b>	<p><b>MSP strategy, program and initiative maintenance guideline and policy review case files</b> (covers the review and evaluation of guidelines developed during the implementation of a strategy, program or initiative) (arrange by strategy, program or initiative)</p>	SO+2y	5y	DE

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40560</b>	<b>STRATEGIC PROGRAM AND INITIATIVE - MANAGEMENT/ MAINTENANCE</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after the strategy, program or initiative is no longer an active program or has been deemed inappropriate.

SO: when the strategy, program or initiative is no longer an active program or has been deemed inappropriate at this time

7y: The retention period ensures that records are retained for ongoing reference and operational requirements.

DE: The records covered by this secondary will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Records relating to the maintenance of strategic programs and initiatives are adequately documented in approved policies and maintenance committee records.

---

<b>-70</b>	<b>MSP strategy, program and initiative maintenance reference materials</b>	<b>SO</b>	<b>nil</b>	<b>DE</b>
------------	---	-----------	------------	-----------

(covers reference material collected or created, reviewed, and referenced during the maintenance of a strategy, program or initiative)

(arrange by strategy, program or initiative)

### RETENTION STATEMENT

Destroy when the strategy, program or initiative is no longer active, or has been deemed inappropriate.

SO: when the strategy, program or initiative is no longer active, or has been deemed inappropriate at this time

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 2

#### ALTERNATIVE PAYMENTS

#### PRIMARY NUMBERS

4 0 6 0 0 – 4 0 7 9 9

Section 2 covers records relating to the funding of physicians' and health care practitioners' services by the Medical Services Plan (MSP) through alternative payment methods rather than through conventional fee-for-service claims, in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#). This includes records relating to: reviewing applications from regional health authorities for funding for programs within their geographic areas of responsibility; developing and monitoring agreements with regional health authorities; monitoring programs funded by alternative payments methods and processing payments to regional health authorities in accordance with approved agreements.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 2 TABLE OF CONTENTS

#### ALTERNATIVE PAYMENTS

40600 – 40799

40600	ALTERNATIVE PAYMENTS	-	GENERAL
40700		-	FUNDING ALLOCATION APPLICATIONS AND APPROVALS
40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS		
40780	PROCESSING ALTERNATIVE PAYMENTS		

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40600 ALTERNATIVE PAYMENTS - GENERAL

Records not shown elsewhere in the alternative payment section that relate generally to the funding of physician and health care practitioner services through means other than fee-for-service payments. Alternative payments provide reimbursement to regional health authorities for costs associated with the provision of medical services through the province's regionalized health care system. Programs funded through alternative payments include teaching hospitals, community and hospital-based psychiatric services and physician services in rural areas. This includes records relating to one-time and ongoing issues and studies surrounding the funding of physician and health care practitioner services by the Medical Services Plan (MSP) through alternative payment methods.

Record types include correspondence, reports, literature, statistics, notes, drafts, briefing materials, forms, and memoranda.

The ministry OPR is Compensation Policy and Programs unless otherwise noted below. See specific secondaries for OPR retention schedules.

40600	ALTERNATIVE PAYMENTS - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	5y: The default active and semi-active retention period ensures that the operational requirements of the creating agency are met.			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40600	ALTERNATIVE PAYMENTS - GENERAL	A	SA	FD
	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.			
-20	<b>Alternative payments funding issues and studies case files</b> (includes correspondence, memoranda, reports, literature, statistics, briefings, news releases, background information, relating to specific issues) (arrange by issue or study topic)  RETENTION STATEMENT Destroy seven years after issue is resolved or study is complete.  SO: when issue is resolved or study is complete  7y: This retention ensures the records are retained for ongoing reference, operational and audit requirements.	SO+2y	5y	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40700 ALTERNATIVE PAYMENTS - FUNDING ALLOCATION APPLICATIONS AND APPROVALS

Records relating to the review and approval of applications submitted to the Alternative Payments Program (APP) of the Medical Services Plan (MSP) by regional health authorities requesting funding allocations. Funding is allocated to pay for physician and health care practitioner services provided by health care agencies within the geographic area managed by the regional health authority.

Agencies within a geographic region submit applications for program funding to their regional health authority. The regional health authority then completes a funding application package for all health care programs within its geographic area of responsibility and submits it to APP. All applications for funding, including records documenting funding application decisions, are retained together and organized by geographic area.

Record types include reports, correspondence, memoranda, and other records as indicated below specific secondaries.

For financial reports documenting payment, reconciliation and verification of payments to regional health programs, see primary 40780.

For monitoring of approved funding allocation agreements with regional health authorities, see primary 40740.

The ministry OPR is Compensation Policy and Programs unless otherwise noted below. See specific secondaries for OPR retention schedules.

40700	ALTERNATIVE PAYMENTS - FUNDING ALLOCATION APPLICATIONS AND APPROVALS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40700	ALTERNATIVE PAYMENTS - FUNDING ALLOCATION APPLICATIONS AND APPROVALS	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Alternative payment program blank application for funding packages</b> (includes general guidelines, detailed instructions, and application questions revised for each fiscal year and sent to applicants for completion and submission to APP)  RETENTION STATEMENT Transfer to the government archives at the end of the fourth fiscal year.  FR: The government archives will retain blank alternative payment program funding application packages because they document what information the government requires to determine qualification for funding. This also documents the type of information that becomes the basis for the funding agreements with health authorities and agencies.  Ministry staff will box these records with others designated for full retention.	FY+1y	2y	FR
-03	<b>Application review packages - distributed</b> (covers material distributed to the Funding Allocation Committee and to program areas for program area reviews of each application. Packages are compiled using information retained in secondary 40700-20)  RETENTION STATEMENT Destroy when no longer required for operational or reference requirements.  SO: when no longer required for operational or reference requirements  NOTE: Records documenting decisions by the Committee and feedback from program areas relating to specific applications are classified under secondary 40700-20.	SO	nil	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40700	ALTERNATIVE PAYMENTS - FUNDING ALLOCATION APPLICATIONS AND APPROVALS	A	SA	FD
-20	<b>Alternative payments funding allocation applications and approvals</b> (includes funding allocation applications received from regional health authorities; record of application ratings; application acknowledgement letters; application result letters; records of funding approval; application review documentation; feedback forms received from other ministry programs; rejection, regret or funding letters; application funding list) (arrange in alphabetical order by geographic area then by the health authority or agency applying for funding)  RETENTION STATEMENT Destroy seven years after the service agreement an approved funding allocation application is based on has expired or when the funding allocation application has been refused and no further issues arise from the refusal.  SO:      when the service agreement an approved funding allocation application is based on expires or when the funding allocation application has been refused and no further issues arise from the refusal  7y:      This retention ensures the records are retained for ongoing reference and operational requirements.  NOTE:    These records are linked to the service agreement and accountability records located in primary 40740. They document the approval process the service agreements are based on.	SO+1y	6y	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40740 MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS

Records relating to monitoring the provision of funding by the Medical Services Plan (MSP) for physician and health care practitioner services through alternative payment methods (that is, methods other than fee-for-service claims) to regional health authorities.

Regional health authorities are responsible for governing and managing medical services provided through agencies, facilities and programs within their geographic area. MSP, through the Alternative Payments Program (APP), allocates funds for medical services through service agreements or sessional funding agreements with regional health authorities. APP monitors the regional authority's adherence to the terms of the agreement, including compliance with agreed deliverables such as regular reports. APP also administers payments to regional authorities.

Record types include applications, agreements, approval letters, correspondence, reports, forms and other related records.

NOTE: Records documenting funding commitment approvals for approved agreements with regional health authorities are retained under this primary. Records relating to budget planning should be classified under ARCS primary 1000.

NOTE: Records relating to approved funding allocation agreements may be physically arranged by geographic area, regional health authority, health care program or other arrangement in order to facilitate efficient access to active records.

For financial records documenting payment, reconciliation and verification of payments to regional health authorities, see primary 40780.  
For funding allocation applications and approvals, see primary 40700.

The ministry OPR is Compensation Policy and Programs unless otherwise noted below. See specific secondaries for OPR retention schedules.

40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS	A	SA	FD
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Service agreements</b> (covers topical information)	CY+1y	2y	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
-03	<b>Sessional agreements</b> (covers topical information)	CY+1y	2y	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
-04	<b>Sessional rate adjustments</b> (covers annual adjustments made to sessional rates that agencies and health authorities will be funded for practitioner services)	FY+1y	6y	DE
	RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
	8y: This retention ensures the records are retained for ongoing audit, operational and reference requirements.			
-20	<b>Alternative payments agreement – accountability records (AC) case files</b>	SO+1y	6y	FR
	RETENTION STATEMENT Transfer to the government archives seven years after the funding allocation statement is modified or obsolete.			
	SO: when the funding allocation statement is modified or obsolete			
			(cont'd)	

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>40740</b>	<b>MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

7y: This retention ensures the records are retained for ongoing audit, operational and reference requirements.

FR: The government archives will fully retain alternative payments agreement accountability records case files because they document the funding allocated to health authorities and agencies for payment of physician services through means other than the fee-for-service method. These records also document the types of medical services for which this funding is approved. The ministry will transfer these files to off-site storage with other records designated for full retention by the government archives.

NOTE: A detailed funding allocation statement is the basic framework listing the maximum payments or FTEs or FTE rate that are identified in the service agreement. It is signed off by the agency agreeing to the APP conditions of funding and refers to the specific service agreement that identifies the funding. A detailed funding allocation statement is sent to every agency and must be signed off by the agency every fiscal year or as changes occur during the year. Service agreement terms are flexible and can run from short term (months) up to 3 years. Multiple service agreements may cover the duration of one funding allocation statement.

NOTE: A funding allocation statement may become obsolete or require modification if the program is no longer viable in the specific format it is using, an increase in funding is required due to an increase in service requirements, or changes in technology cause changes in the funding requirements.

<b>-30</b>	<b>Alternative payments agreement - contract monitoring (CM) case files - paper</b> (includes contract monitoring records and forms; monthly service reports, FTE reports; records relating to deliverables and contract amendments) (arrange by health region, then agency or health authority)	FY+3y	4y	DE
------------	--	-------	----	----

**RETENTION STATEMENT**

Destroy at the end of the eighth fiscal year.

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS	A	SA	FD
	<p>8y: This retention ensures the records are retained for ongoing audit and operational requirements.</p> <p>NOTE: Contract amendment documents are placed with the service agreement they are amending.</p>			
-31	<p><b>Alternate payments agreement – contract monitoring (CM) case files - electronic</b> (covers records managed on Excel spreadsheets and Word documents)</p> <p>RETENTION STATEMENT Destroy when no longer required for operational or reference requirements.</p> <p>SO: when no longer required for operational or reference requirements</p>	SO	nil	DE
-40	<p><b>Alternative payments agreement - cost centre (CC) case files</b> (includes correspondence and other documentation of issues relating to a specific regional authority) (arrange by health region, then agency or health authority)</p> <p>RETENTION STATEMENT Destroy at the end of the eighth fiscal year.</p> <p>8y: This retention ensures the records are retained for ongoing audit and operational requirements.</p>	FY+1y	6y	DE
-50	<p><b>Alternative payments agreements - descriptive case (DC) files</b> (includes annual reports, newspaper articles, brochures and other general information) (arrange by health region, then agency or health authority)</p> <p>RETENTION STATEMENT Destroy when no longer required for operational or reference requirements.</p> <p>SO: when no longer required for operational or reference requirements</p>	SO	nil	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS	A	SA	FD
-60	<b>Alternative payments agreements - patient based data case (PD) files – paper</b> (includes treatment information relating to services provided to individual beneficiaries supplied by regional health authorities) (arrange by health region, then agency or health authority)  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing audit, operational and reference requirements  FOI: Patient based data includes patient identification and treatment specific information. Access to this information is restricted in accordance with the provisions of the <a href="#">Freedom of Information and Protection of Privacy Act (RSBC 1996, c. 165)</a> .	FY+1y	6y	DE
-61	<b>Alternative payments agreements - patient based data case (PD) files - electronic</b>  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing audit and operational requirements.  DE: Electronic patient based data will be destroyed at the end of the active retention period.  NOTE: Each agency is contractually required to submit patient based data. The information includes: identification of the contractor (agency and site identifiers), patient's PHN and date of birth, date of service, MSP practitioner enrolment number for physician providing service, services/procedures provided, diagnosis and/or case mix group, identification of services for which payment is recoverable from a third party (i.e. ICBC, WCB, private pay patients, out of country, or out of province where there is no reciprocal agreement in place)	FY+7y	nil	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40740	MONITORING ALTERNATIVE PAYMENT APPROVED FUNDING ALLOCATION AGREEMENTS	A	SA	FD
-70	<b>Alternative payments agreement - service agreement (SA) case files</b> (includes service agreements, amendments, letters of agreement, correspondence and notes) (arrange by health region, then agency or health authority)  RETENTION STATEMENT Destroy seven years after the funding approval the service agreement is based on is modified or obsolete.  SO:      when the funding approval the service agreement is based on is modified or obsolete  7y:      This retention ensures the records are retained for ongoing audit and operational requirements.	SO+3y	4y	DE

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40780 PROCESSING ALTERNATIVE PAYMENTS

Records relating to processing, verification, and payment of funds allocated by the Medical Services Plan (MSP) to health authorities for the provision of service agreements or sessional claims.

Payments are processed by the Alternative Payments Program Claims System (APPCS) and data is then transferred to the Office of the Comptroller General via the Ministry of Finance Corporate Accounting System (CAS) for payment to agencies.

Record types include reports, statements, and forms, including batch payment reports; claims forms received from regional health authorities; claim rejection reports; quarterly review reports; third party cheque deposit forms [HLTH 2982]; and weekly CAS reports.

For budget planning and development, see [ARCS primary 1000](#).

For further information on the Alternative Payments Program Claims System (APPCS), see the information system overview (ISO).

For monitoring of approved funding allocation agreements with specific regional authorities, see primary 40740.

The ministry OPR is Compensation Policy and Programs unless otherwise noted below. See specific secondaries for OPR retention schedules.

40780	PROCESSING ALTERNATIVE PAYMENTS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40780	PROCESSING ALTERNATIVE PAYMENTS	A	SA	FD
-02	<b>Third party cheque deposit - paper</b> (includes a photocopy of the cheque and a cheque deposit receipt [HLTH 2982])  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing reference and operational requirements.	FY+1y	6y	DE
-03	<b>Third party cheque deposit - electronic</b> (includes excel spreadsheet tracking deposits received and deposited)  RETENTION STATEMENT Destroy when the information is no longer required for ongoing operational and reference requirements.  SO: when the information is no longer required for ongoing operational and reference requirements	SO	nil	DE
-04	<b>Practitioner issues correspondence</b> (covers correspondence received from practitioners relating to a variety of subjects that the Alternative Payment Program respond to)  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing reference and operational requirements.	FY+1y	6y	DE
-05	<b>Alternative payment records - paper</b> (includes sessional and salary claims for reimbursement of shareable expenditure forms [HLTH 1741 and HLTH 1741B] or equivalent)  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing reference and operational requirements.	FY+1y	6y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40780	PROCESSING ALTERNATIVE PAYMENTS	A	SA	FD
	<p><b>-06 Alternative payment records - electronic</b> (covers information stored on the Alternate Payment Program Claim System)</p> <p>RETENTION STATEMENT Destroy when the information is no longer required for operational and reference requirements.</p> <p>SO: when the information is no longer required for operational and reference requirements</p> <p>NOTE: Alternate Payments client representatives process and verify a claim, then the Alternate Payment Program Claim System (APPCS) assigns a document number to it. A cheque requisition is forwarded on to the ministry's financial services branch who review the requisition and forward the request to the Office of the Comptroller General (OCG) for payment via the Corporate Accounting System (CAS). Once confirmation that the cheque has been issued to the agency is received, the claim and supporting documentation are filed.</p>	SO	nil	DE
PIB	<p><b>-20 Alternative payment – certificate of service forms – paper</b> (includes certificate of service forms [HLTH 1733] or equivalent completed by individual physicians/practitioners) (arrange in alphabetical order by practitioner surname)</p> <p>RETENTION STATEMENT Destroy at the end of the seventh fiscal year.</p> <p>7y: This retention ensures these records are retained for audit and financial requirements.</p>	FY+1y	5y	DE
PIB	<p><b>-21 Alternative payment – certificate of service forms – electronic</b> (includes records retained on the Alternate Payment Program Claims System)</p> <p>RETENTION STATEMENT Destroy when no longer required for operational and reference requirements.</p>	SO	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40780	PROCESSING ALTERNATIVE PAYMENTS	A	SA	FD
	NOTE: A certificate of service form is submitted as supporting documentation with an agency's claim forms. Once verified, the certificate of service forms are separated and retained.			
-30	<b>Alternative payments processing and verification reports and statements - paper</b> (includes regular and ad hoc reports produced by Alternative Payments Program Claims System [APPCS] as well as reports and statements received from other agencies) (arrange by type and then date)  RETENTION STATEMENT Destroy at the end of the eighth fiscal year.  8y: This retention ensures the records are retained for ongoing reference and operational requirements.  NOTE: Many reports and statements produced and received by the Alternative Payment Program become working documents for verification and reconciliation purposes.	FY+1y	6y	DE
-31	<b>Alternative payments processing and verification reports and statements - electronic</b> (includes on the Alternative Payments Program Claims System [APPCS] as well as Excel reports and statements received from other agencies) (arrange by type and then date)  RETENTION STATEMENT Destroy when the records are no longer required for operational, reference, or audit requirements.  SO: when the records are no longer required for operational, reference, or audit requirements	SO	nil	DE
-40	<b>Alternative Payments Program Claims System (APPCS) (electronic database)</b>  RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational and reference requirements.  SO: when the records are no longer required for ongoing operational and reference requirements	SO	nil	DE
END OF PRIMARY				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 3

#### BILLING INTEGRITY

#### PRIMARY NUMBERS

40800 – 40999

Section 3 covers records relating to the monitoring and investigation of the billing patterns and practices of medical and health care practitioners in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#) and Part 8 of the [Medical and Health Care Services Regulation \(B.C. Reg 426/97\)](#). This includes records relating to: monitoring billing practices and patterns of medical and health care practitioners in order to detect and deter inappropriate billing of Medical Services Plan (MSP) claims; development and application of monitoring, case finding and audit criteria; administration of formal audit hearing panels; management of alternative dispute resolutions; and recovery of inappropriately paid monies.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 3 TABLE OF CONTENTS

#### BILLING INTEGRITY

40800 - 40999

40800	BILLING INTEGRITY – GENERAL
40820	– PROGRAM DEVELOPMENT AND EVALUATION
40830	– AUDIT AND INSPECTION AUTHORIZATION
40880	ALTERNATIVE DISPUTE RESOLUTION
40900	BILLING MONITORING – GENERAL
40920	– INVESTIGATIONS AND FORMAL AUDIT HEARINGS
40940	– STATISTICAL SCREENING
40960	AUDIT OFFICIAL APPOINTMENT
40980	SERVICE VERIFICATION AUDIT

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40800 BILLING INTEGRITY – GENERAL

Records not shown elsewhere in this section relating to the monitoring and investigation of billing patterns and practices of physicians and health care practitioners in order to detect and deter inappropriate and incorrect billing of Medical Services Plan (MSP) claims. This involves the development and application of monitoring and audit criteria, recovery of inappropriately paid monies, and recommendations to other program areas within MSP and the Ministry of Health regarding legislative and Medical Services Commission *Payment Schedule* changes.

This includes records relating to issues and/or studies that may affect the monitoring and investigation of billing patterns and practices of physicians and health care practitioners, the detection and deterrence of inappropriate or incorrect billing of Medical Services Plan (MSP) claims, and the recovery, by the Billing Integrity Program, of inappropriately paid monies. This includes one-time and ongoing issues and studies that relate to recommendations for changes to legislation or the Medical Services Commission's *Payment Schedule*.

Record types include briefing material, correspondence, literature, reports, statistics, and memoranda.

For monitoring activities relating to individual physicians, health care practitioners, laboratories or hospitals, see primary 40920.

For records of decision of the Medical Services Commission, see primary 40050.

The ministry OPR is Billing Integrity Program unless otherwise noted below. See specific secondaries for OPR retention schedules.

40800	BILLING INTEGRITY – GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	5y: The default active and semi-active retention period ensures that the operational requirements of the creating agency are met.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40800	BILLING INTEGRITY – GENERAL	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy 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 relate to topics that warrant specific classifications.			
-02	<b>Disposition of recovered amounts</b>	CY+3y	nil	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
-03	<b>Billing integrity issue management - other jurisdictions</b> (arrange by jurisdiction)	SO	nil	DE
	RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational and reference requirements.			
-20	<b>Billing integrity issues and studies</b> (arrange in alphabetical order by topic or subject)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after issue is resolved and the records are not required for current operational requirements.			
	SO: when issue is resolved and the records are not required for current operational requirements			
	7y: This retention ensures these records are retained for ongoing operational and reference requirements.			
	DE: Billing integrity issues and studies will be destroyed upon expiry of the scheduled active and semi-active retention periods and approval of the records officer. Decisions about how billing practices are or should be monitored are documented in secondary 40820-20.			

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40800	BILLING INTEGRITY – GENERAL	A	SA	FD
-30	<b>Billing integrity committees</b> (includes minutes, agenda, records of decision) (arrange in alphabetical order by committee, then chronologically by meeting date)  RETENTION STATEMENT Destroy seven years after the issues the committee is working on have been resolved.  SO:      when the issues the committee is working on have been resolved  7y:      This retention ensures the records are retained for ongoing operational and reference requirements	SO+2y	5y	DE
-40	<b>Billing integrity issue management - reference material</b> (includes literature and other reference materials on billing monitoring and investigation)  RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational or reference requirements.  SO:      when the records are no longer required for ongoing operational or reference requirements	SO	nil	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40820 BILLING INTEGRITY – PROGRAM DEVELOPMENT AND EVALUATION

Records relating to the development of billing integrity programs in order to evaluate their objectives and efficiency in supporting the monitoring and investigation of billing patterns and practices of medical and health care practitioners, detecting and deterring inappropriate and incorrect billing of Medical Services Plan (MSP) claims, and recovering inappropriately paid monies. This primary covers program management and changes to existing programs.

Records types include research data, statistics, reports, briefing materials, terms of reference, correspondence and memoranda.

For billing practice investigation issues, see primary 40800.

The ministry OPR is Billing Integrity Program unless otherwise noted below. See specific secondaries for OPR retention schedules.

40820	BILLING INTEGRITY – PROGRAM DEVELOPMENT AND EVALUATION	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Billing integrity program case files</b> (covers program monitoring, process assessment and modification) (arrange in alphabetical order by function or program)	SO+2y	5y	FR
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40820</b>	<b>BILLING INTEGRITY – PROGRAM DEVELOPMENT AND EVALUATION</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

### RETENTION STATEMENT

Transfer to the government archives seven years after the program development or evaluation project is completed or cancelled.

SO: when the program development or evaluation project is completed or cancelled

7y: This retention ensures the records are retained for ongoing operational and reference requirements of the program.

FR: The government archives will retain billing integrity program case files because they document decisions about how the government monitors the billing practices of medical practitioners in British Columbia.

---

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40830 BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION

Records relating to the authorization to initiate an audit and inspection of billing practices of individual practitioners by the Billing Integrity Program. The authority to initiate is given by the Audit and Inspection Committee (AIC) for physicians and the Health Care Practitioner Special Committee for Audit (HCPSCA) for health care practitioners. The AIC and HCPSCA have been delegated this responsibility by the Medical Services Commission (MSC) under the [Medicare Protection Act \(RSBC 1996, c. 286\)](#).

The AIC is a panel composed of representatives of the BC Medical Association (BCMA), the College of Physicians and Surgeons of BC (CPSBC), the general public, and the Medical Services Plan (MSP). The committee meets on an ad hoc basis to review referrals made to them by MSP, BCMA, Patterns Of Practice Committees (POPC) or other sources. If the review results in an on-site inspection of the physician's practice, the final audit report will be returned to the AIC which then decides if the physicians' billing practices are inappropriate. If so, the AIC recommends to the Medical Services Commission (MSC) that a hearing be held to determine if it is necessary to pursue recovery of funds. The MSC reviews the recommendation, and may then, through an order of the commission, require the physician to pay back the funds that had been inappropriately billed and paid.

The HCPSCA members are appointed by an order in council and perform the same function for non-physician practitioners as the AIC does for physicians.

The BCMA POPC functions include managing the budget for auditing each modality, recommending amendments to the fee schedule, and monitoring service provision to ensure the costs remain within the allotted budget.

Patterns of practice ensure that physicians and practitioners follow appropriate patterns of practice for provisions of services and billing.

Record types include reports, correspondence, and memoranda.

For orders in council appointing members to the Health Care Practitioners Committee for Audit, see [ARCS primary 140](#).

For the BCMA reference committee, see primary 41920.

For physician and practitioner monitoring, see primary 40920.

The ministry OPR is Billing Integrity Program unless otherwise noted below. See specific secondaries for OPR retention schedules.

40830	BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION	A	SA	FD
	All non-OPR offices will retain these records for:	SO	nil	DE

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40830	BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION	A	SA	FD
-00	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)  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:      The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Audit Inspection Committee annual summary report</b>  RETENTION STATEMENT Transfer to the government archives when no longer required for operational or reference requirements.  SO:      when no longer required for operational or reference requirements.  FR:      The government archives will fully retain Audit Inspection Committee annual summary report because they summarize the decisions and activities of the Audit and Inspection Committee.  Upon expiry of the active retention period, the ministry will box a paper copy of each annual report with other records designated for full retention by the government archives.	SO	nil	FR
-20	<b>Audit inspection committee records</b> (covers AIC subcommittees) (includes minutes, terms of reference, activity reports, policy and procedures for billing by physicians, correspondence, agenda, background, statistical information, summary reports) (arrange in chronological date by meeting date)	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40830</b>	<b>BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after the recommendations of the committee have been reviewed by the Medical Services Committee (MSC) and all issues arising from those recommendations have been resolved.

SO: when the recommendations of the committee have been reviewed by the Medical Services Committee (MSC) and all issues arising from those recommendations have been resolved. Issues could include appeal of an order of the MSC to the Supreme Court

7y: This retention ensures the records are retained for ongoing audit and legal requirements.

DE: Audit and inspection committee records will be destroyed upon expiry of the active and semiactive retention period and approval of the records officer. Committee activities and decisions are summarized in Audit inspection committee annual summary reports, which are fully retained by the government archives (40830-02).

---

<b>-30</b>	<b>Health Care Practitioner Committee for Audit</b>	<b>SO+2y</b>	<b>5y</b>	<b>DE</b>
------------	---	--------------	-----------	-----------

(includes correspondence and authorization to initiate audit, minutes)  
(arrange in chronological order by meeting date)

### RETENTION STATEMENT

Destroy seven years after the audit has been completed and all issues arising from the audit have been resolved.

SO: when the audit has been completed and all issues arising from the audit have been resolved

7y: This retention ensures the records are retained for ongoing audit and legal requirements.

DE: Health Care Practitioner Committee for Audit records will be destroyed upon expiry of the semiactive retention period and authorization of the records officer. Audit decisions are summarized in Audit Inspection Committee annual summary reports, which are fully retained by the government archives (secondary 40830-02).

(cont'd)

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40830	BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION	A	SA	FD
	NOTE: Records of subcommittees of the Health Care Practitioner Committee for Audit are documented in the investigation and monitoring file of the health care practitioner whose billing practices they are reviewing.			
-40	<b>Patterns of practice committees</b> (covers patterns of practice committees for AIC and HCPSCA) (includes correspondence, meeting minutes and agendas, reports, orders) (arrange in alphabetical order by special committee)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after the issues or projects dealt with by the special committee have been dealt with and all issues pertaining to the resolution or outcome have been resolved.			
	SO: when the issues or projects dealt with by the special committee have been dealt with and all issues pertaining to the resolution or outcome have been resolved			
	7y: This retention ensures the records are retained for ongoing audit and legal requirements.			
	DE: Patterns of practice committee records will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Audit decisions are summarized in Audit Inspection Committee annual summary reports, which are fully retained by the government archives (secondary 40830-02).			

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40830</b>	<b>BILLING INTEGRITY – AUDIT AND INSPECTION AUTHORIZATION</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

- FOI: The [Medical and Health Care Services Regulation \(BC Reg. 426/97\)](#), s. 46 provides the following special committees with permission to access physician and non-physician billing information for monitoring and audit purposes:
- a) an appropriate disciplinary body or appropriate licensing body under the Medicare Protection Act;
  - b) the Health Care Practitioners Special Committee for Audit Hearings;
  - c) the Patterns of Practice or the Reference Committee of the Association of Doctors of BC
  - d) the Patterns of Practice Committee of the Chiropractic Association;
  - e) the Patterns of Practice Committee of the Association of Dental Surgeons of British Columbia;
  - f) the Patterns of Practice Committee of the Massage Therapists' Association of British Columbia;
  - g) the Patterns of Practice Committee of the British Columbia Naturopathic Association;
  - h) the Patterns of Practice Committee of the British Columbia Association of Optometrists;
  - i) the Patterns of Practice Committee of the Physical Therapists' Association of British Columbia;
  - j) the Patterns of Practice Committee of the British Columbia Association of Podiatrists;
  - k) the Patterns of Practice Committee of the Midwives Association of British Columbia.
- 

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40880 ALTERNATIVE DISPUTE RESOLUTION

Records relating generally to the alternative dispute resolution (ADR) process, which is an alternative to resolving billing and practice issues through the formal audit hearing process. The ADR process incorporates several options for settling billing and practice disputes, ranging from informal problem solving to structured negotiation and mediation.

Record types include procedures, correspondence, and reports.

For alternative dispute resolution cases relating to specific physicians or health care practitioners, see primary 40920.

The ministry OPR is Billing Integrity Program unless otherwise noted below. See specific secondaries for OPR retention schedules.

40880	ALTERNATIVE DISPUTE RESOLUTION	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Alternative dispute resolution mediators</b> (includes lists of mediators)	SO+1y	nil	DE
	RETENTION STATEMENT Destroy when list is updated.			
	SO: when list is updated			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40900 BILLING MONITORING – GENERAL

Records not shown elsewhere in this primary block relating generally to monitoring and investigating the billing patterns and practices of individual physicians and health care practitioners or hospitals and laboratories in order to detect and deter inappropriate and/or incorrect billing practices for Medical Service Plan (MSP) claims.

Record types include correspondence, memoranda, and reports.

The ministry OPR is Billing Integrity Program unless otherwise noted below.  
See specific secondaries for OPR retention schedules.

40900	BILLING MONITORING – GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **40920 BILLING MONITORING – INVESTIGATIONS AND FORMAL AUDIT HEARINGS**

Records relating to monitoring and investigating the billing patterns and practices of individual physicians and health care practitioners, diagnostic facilities or departments, or diagnostic and treatment centers in order to detect and deter inappropriate and/or incorrect billing practices for Medical Services Plan (MSP) claims.

Case files are opened when surveys, billing profiles, other statistical screening tools or information received from other areas within MSP indicate that a physician, health care practitioner, diagnostic facility or department, or diagnostic and treatment centre may be billing MSP inappropriately. Investigations may involve the Legal Services Branch of the Ministry of Attorney General.

An investigation and audit may result in a hearing conducted before an audit hearing panel appointed by the Medical Services Commission. Under the [Medicare Protection Act \(RSBC 1996, c. 286, s. 37\)](#), a physician or health care practitioner has a right to a hearing before recovery of monies can be ordered. Hearings involve legal representation from the practitioner and the Medical Services Commission. The Audit Hearing Panel's decision takes the form of a formal, legally binding Medical Services Commission Order, which may require the physician or health care practitioner to compensate MSP for inappropriate billing or referrals. Orders can be appealed to the Supreme Court of British Columbia.

The Billing Integrity Program maintains the complete documentation for each practitioner investigation, including records relating to hearings and court cases created by other Ministry of Health programs, Medical Services Commission committees or by the Legal Services Branch, Ministry of Attorney General. Records documenting meetings of the Audit Hearing Panel are maintained by the Ministry of Attorney General, Legal Services Branch.

Records types include reports, correspondence, and memoranda.

**NOTE:** Case files remain open until the investigation is concluded and the issue is resolved. Resolution may consist of providing the practitioner with instructions for correct billing procedures; MSP determination that billings are warranted and correct; restitution from practitioner or facility of monies for payments inappropriately billed; conclusion of a formal audit hearing; conclusion of a Section 15 hearing leading to de-enrollment, or conclusion of an appeal to the BC Supreme Court. Case files are closed upon the recommendation of the medical consultant responsible for the case, with the concurrence of the Director, Billing Integrity Program.

(cont'd)

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

For annual practitioner profile reports, see primary 40940.  
 For Medical Services Commission orders, see primary 40050.  
 For Audit Hearing Panel selection, see primary 40960.  
 For a transcription of the Audit Hearing Panel meeting that lead to an order, see primary 40050.

The ministry OPR is Billing Integrity Program unless otherwise noted below.  
 See specific secondaries for OPR retention schedules.

40920	BILLING MONITORING – INVESTIGATIONS AND FORMAL AUDIT HEARINGS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Physician/practitioner monitoring inquiry files</b>	CY+1y	5y	DE
	RETENTION STATEMENT Destroy at the end of the seventh calendar year.			
	7y: This retention ensures these records are retained for ongoing operational requirements.			
	NOTE: Inquiries can be initiated by a variety of sources including all practitioners or patients. They include general information that is not relevant to specific monitoring cases, but may be related to an individual instance for which information is requested or artificial instances which require discussion.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40920	BILLING MONITORING – INVESTIGATIONS AND FORMAL AUDIT HEARINGS	A	SA	FD
<p>NOTE: If a specific physician or practitioner does become the subject of an inquiry file, that case will be reclassified to a monitoring case file (40920-20).</p>				
-03	<b>Error/response books</b>	SO	nil	DE
<p>RETENTION STATEMENT Destroy when case has been resolved and medical consultant recommends file closure.</p> <p>SO: when case has been resolved and medical consultant recommends file closure</p> <p>DE: These are copies of records maintained by the Ministry of Attorney General, Legal Services Branch.</p>				
-04	<b>ICBC/WCB requests for practitioner/physician billing information</b> (covers requests for practitioner/physician billing information that relates to a specific claim)	CY+1y	5y	DE
<p>RETENTION STATEMENT Destroy at the end of the seventh calendar year.</p> <p>7y: This retention ensures the records are retained for ongoing audit and legal requirements.</p>				
PIB	<b>-20 Physician/practitioner monitoring case files</b> (covers alternative dispute resolution, formal hearing by Audit Hearing Panel, and hearing under Section 15 of the <a href="#">Medicare Protection Act (RSBC 1996, c. 286)</a> ) (includes file summary, practitioner profile, daily distribution of services reports, on-site audit reports, other reports and reviews, copies of service verification reports, correspondence, submissions to the Audit and Inspection Committee, appeals including copies of correspondence between lawyers representing the Ministry and the practitioner, and settlement documentation) (arrange by practitioner billing number)	SO	57y	DE
<p>RETENTION STATEMENT Destroy 57 years after case has been resolved and medical consultant recommends file closure.</p>				
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40920	BILLING MONITORING – INVESTIGATIONS AND FORMAL AUDIT HEARINGS	A	SA	FD
	<p>SO: when case has been resolved and medical consultant recommends file closure</p> <p>57y: Case files relating to monitoring specific physicians and health care practitioners are required by the ministry for as long as the physician or practitioner maintains a practice in British Columbia. They provide required background information relating to previous billing integrity issues that may be required to support ongoing monitoring, future investigations, or recovery actions against a practitioner. Physicians are de-enrolled from the Medical Services Plan on December 31 of the year in which the physician reaches the age of 75. A retention period of 57 years after resolution of an investigation ensures the practice has been closed before the file is destroyed.</p> <p>NOTE: Case files include those files that are resolved quickly or that are determined to be unsubstantiated. Should a practitioner be involved in a future complaint, previous complaint documentation is used as background material.</p>			
PIB	<p><b>-25 Physician/practitioner monitoring audit working files</b> (includes audit working papers, correspondence, responses and reports) (arrange by practitioner billing number)</p> <p>RETENTION STATEMENT Destroy seven years after case has been resolved and medical consultant recommends file closure.</p> <p>SO: when case has been resolved and medical consultant recommends file closure</p> <p>7y: This retention ensures these records are retained for ongoing operational and audit requirements.</p> <p>NOTE: A copy of the on-site audit report is placed on the physician/practitioner monitoring case file (40920-20).</p>	SO	7y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40920	BILLING MONITORING – INVESTIGATIONS AND FORMAL AUDIT HEARINGS	A	SA	FD
-30	<b>Diagnostic and treatment unit/facility monitoring case files</b> (covers walk in clinics, treatment centers that offer diagnostic services as a component of care provision, stand alone private and public facilities and hospital departments providing laboratory, imaging and electrodiagnostic services) (includes practitioner audit file summary, practitioner profile analysis, on-site audit reports, correspondence, daily distribution of services reports, other reports and reviews, alternative dispute resolution documentation, submissions to the Audit and Inspection Committee, appeal documentation including copies of correspondence between lawyers representing the Ministry and the practitioner, and copies of correspondence between lawyers representing the ministry and the laboratory or hospital) (arrange alphabetically by facility or center)  RETENTION STATEMENT Destroy seven years after investigation has been completed or the unit is no longer in operation.  SO:      when investigation has been completed or the unit is no longer in operation  7y:      This retention ensures these records are retained for ongoing operational and audit requirements.  NOTE:    Additional monitoring information pertaining to individual physicians and practitioners is on the practitioner/physician monitoring case file (40920-20).	SO	7y	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40940 BILLING MONITORING – STATISTICAL SCREENING

Records relating to screening for unusual patterns of practice and billing by generating and reviewing statistical billing profiles for physicians, health care practitioners, services and groups of services. An automated computer screening process compares each practitioner's billing and referral statistics to the profiles of practitioners in the appropriate peer group.

Record types include electronic data maintained on Practitioner Profile System, microfiched reports, printed reports, and correspondence.

For Practitioner Profile System, see information system overview.  
For reports relating to monitoring specific physicians or health care practitioners, see primary 40920.

The ministry OPR is Billing Integrity Program unless otherwise noted below.  
See specific secondaries for OPR retention schedules.

40940	BILLING MONITORING – STATISTICAL SCREENING	A	SA	FD
	All non-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)  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: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Patterns of practice committee reviews</b> (covers reviews from patterns of practice committees of the BC Medical Association to health care practitioner associations and colleges including: chiropractic, massage therapists, naturopathic, optometrists, physical therapists, podiatrists associations, and dental societies)  (cont'd)	CY+1y	2y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>40940</b>	<b>BILLING MONITORING – STATISTICAL SCREENING</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy at the end of the fourth calendar year.

---

<b>-03</b>	<b>Guide to the interpretation of the MSP practitioner profiles</b> (covers the annually developed interpretation guide)	<b>FY+9y</b>	<b>47y</b>	<b>DE</b>
------------	---	--------------	------------	-----------

### RETENTION STATEMENT

Destroy at the end of the 57th fiscal year.

57y: This retention ensures these records are retained for ongoing operational and reference requirements. The guide is needed to interpret the profile data for that year.

NOTE: The guide to interpreting each annual set of reports is required for as long as the reports are in existence.

---

<b>PIB</b>	<b>-20</b>	<b>Annual practitioner profile reports - microfiche</b> (includes practitioner billing data transferred from Claims Processing System to Practitioner Profile System)	<b>FY+9y</b>	<b>47y</b>	<b>DE</b>
------------	------------	--	--------------	------------	-----------

### RETENTION STATEMENT

Destroy at the end of the 57th fiscal year.

57y: Annual practitioner profile reports are required by the ministry for as long as the physician or practitioner maintains a practice in British Columbia. They provide required background information relating to previous billing integrity issues that may be required to support ongoing monitoring, future investigations, or recovery actions against a practitioner. Physicians are de-enrolled from the Medical Services Plan on December 31 of the year in which the physician reaches the age of 75. A retention period of 57 years after resolution of an investigation ensures the practice has been closed or transferred to another physician before the file is destroyed.

NOTE: Microfiche practitioner profiles are available for all years since 1979.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40940	BILLING MONITORING – STATISTICAL SCREENING	A	SA	FD
PIB	<b>-21 Annual practitioner profile reports - electronic</b> (covers records on the Practitioner Profile System)  RETENTION STATEMENT Destroy when data is no longer required to support decisions or actions based on practitioner profile report.  SO: when data is no longer required to support decisions or actions based on practitioner profile report  NOTE: Copies of the annual practitioner profile reports are distributed to the BC Medical Association and all health care practitioner associations and colleges by May 31 of the year following in accordance with contractual agreements.	SO	nil	DE
PIB	<b>-22 Annual practitioner profile reports – electronic CD</b>  RETENTION STATEMENT Destroy when the data is no longer required to support decisions or actions based on practitioner profile report.  SO: when the data is no longer required to support decisions or actions based on practitioner profile report	SO	nil	DE
	<b>-23 Annual practitioner profile reports - paper</b> (includes individual practitioner and group practitioner profiles)  RETENTION STATEMENT Destroy when the information is no longer required to support decisions or actions based on practitioner profile report.  SO: when the information is no longer required to support decisions or actions based on practitioner profile report	SO	nil	DE
	<b>-25 Annual practitioner profile report development</b> (includes email, issue logs, work plans, matrices) (arrange in chronological order by fiscal year)  RETENTION STATEMENT Destroy at the end of the 55th calendar year.	CY+1y	53y	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40940	BILLING MONITORING – STATISTICAL SCREENING	A	SA	FD
	55y: The practitioner profile report development defines the statistical methodology used to review the billing practices that year. Each year, the methodology and the scope for the profiles changes. The development information must be retained for a period consistent with the profiles to enable interpretation of the profile information.			
PIB	<b>-30 Annual practitioner mini profiles</b> (covers mini profiles received from the BC Medical Association on CD) (electronic records)  RETENTION STATEMENT Destroy when the data is no longer required to support decisions or actions based on practitioner profile report.  SO: when the data is no longer required to support decisions or actions based on practitioner profile report  NOTE: BCMA produces these profiles and submits them to the ministry. They include summary information that can be presented in graphical format. Paper copies are maintained on the practitioner monitoring case files (40920-20)	SO	nil	DE
PIB	<b>-40 Practitioner Profile System</b> (electronic database)  RETENTION STATEMENT Destroy when the records are no longer required for operational purposes.  SO: when the records are no longer required for operational purposes	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40960 AUDIT OFFICIAL APPOINTMENT

Records relating to the appointment of audit hearing panels that conduct formal audit hearings by the Medical Services Commission to review billing problems that may require restitution of payments made inappropriately to a physician or health care practitioner by the Medical Services Plan (MSP). Audit hearing panels are composed of representatives from government, physician or health care practitioner associations, and the general public. Once eligibility is determined, individuals are contacted to serve on hearing panels as required. This also includes records relating to the appointment of practitioners to perform inspections regarding alleged billing mispractices by practitioners. Audit inspectors are practitioners nominated by their governing body and then appointed through the minutes of the Audit Inspection Committee.

Record types include correspondence, reports, and memorandum.

For contracts with audit hearing panel members and contract-related expenses relating to specific panel members, see [ARCS primary 1070](#).

For formal audit hearings relating to specific physicians, practitioners, laboratories or hospitals, see primary 40920.

The ministry OPR is Billing Integrity Program unless otherwise noted below. See specific secondaries for OPR retention schedules.

40960	AUDIT OFFICIAL APPOINTMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40960	AUDIT OFFICIAL APPOINTMENT	A	SA	FD
	<b>-02 Audit official listing</b> (covers lists of eligible audit hearing panel members and audit inspectors)  RETENTION STATEMENT Destroy one year after information is updated or no longer required.  SO: when information is updated or no longer required	SO+1y	nil	DE
PIB	<b>-20 Audit inspector approval</b> (includes background checks)  RETENTION STATEMENT Destroy one year after the individual is no longer available or eligible to perform the investigation function and the investigations the inspector was involved with have been concluded and all issues relating to the decision have been resolved.  SO: when the individual is no longer available or eligible to perform the investigation function and the investigations the inspector was involved with have been concluded and all issues relating to the decision have been resolved	SO+1y	nil	DE
PIB	<b>-25 Formal audit hearing panel selection and approval</b> (includes orders-in-council designating eligibility, as well as records relating to nomination and selection of individual panel members eligible to sit on audit hearing panels) (arrange by surname of panel member)  RETENTION STATEMENT Destroy one year after individual is no longer available or eligible to sit on formal audit hearing panels and any hearings the panel member was involved with have concluded and any issues pertaining to the decision have been resolved.  SO: when individual is no longer available or eligible to sit on formal audit hearing panels and any hearings the panel member was involved with have concluded and any issues pertaining to the decision have been resolved	SO+1y	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 40980 SERVICE VERIFICATION AUDIT

Records relating to the monitoring and auditing of practitioners' (includes health care practitioners and physicians) billing practices using the service verification methodology. Patient verification surveys are distributed monthly to approximately 6,000 patients requesting verification of services received by a specified practitioner within the past four to six month period. Service verification audits are distributed to up to 200 patients of a practitioner who bills fee-for-service to the Medical Services Plan to determine billing irregularities. Family consultation surveys are randomly performed on a monthly basis to verify the billing practice for multiple members of one family who received services on one visit.

Record types include service verification letters, correspondence, reports, working papers, and memoranda.

For physician/practitioner monitoring case files, see primary 40920.

The ministry OPR is Service Verification Group unless otherwise noted below. See specific secondaries for OPR retention schedules.

40980	SERVICE VERIFICATION AUDIT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Comfort letter list</b> (covers letters notifying practitioners that their verification has been complete and there are no outstanding issues)	CY	nil	DE
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40980	SERVICE VERIFICATION AUDIT	A	SA	FD
	RETENTION STATEMENT Destroy at the end of the calendar year.			
	NOTE: A copy of the comfort letter is classified with each practitioners monitoring file.			
	NOTE: A copy of the comfort letter list is forwarded to the BC Medical Association notifying them of physicians who have had their billing verified and no problems have been identified.			
-03	Service verification inquiry file	CY+1y	5y	DE
	RETENTION STATEMENT Destroy at the end of the seventh calendar year.			
	7y: This retention ensures the records are retained for ongoing operational and reference requirements.			
	NOTE: These are inquiries resulting from the verification letter mail out that are not related to the audit and are responded to by the program or Ministry of Health executive.			
-04	VEGAS log report (covers statistical reports produced monthly after the verification letters) (arrange chronologically)	CY	nil	DE
	RETENTION STATEMENT Destroy at the end of the calendar year.			
	NOTE: These reports can be reproduced off the system at any time.			
	NOTE: These reports are a running record from the inception of VEGAS. The system produces a log report every month after the program produces the verification letters. It contains statistical information on who, why and how the practitioners and beneficiaries were selected for a given project and assigned a Project Number. The system then produces a log for the monthly projects and select projects that were produced that month.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40980	SERVICE VERIFICATION AUDIT	A	SA	FD
-05	<b>Practitioner listing</b> (covers lists of practitioners selected for service verification each month)  RETENTION STATEMENT Destroy when the listing is no longer required for ongoing operational and reference requirements.  SO:      when the listing is no longer required for ongoing operational and reference requirements  NOTE:    The list shows the practitioner name, practitioner number, project number assigned to that practitioner and location of the practitioner.	SO	nil	DE
-06	<b>BCMA service verification notification</b>  RETENTION STATEMENT Destroy at the end of the calendar year.  NOTE:    Letters are forwarded to the BC Medical Association twice a month – once with the list of physicians who received comfort letters and the second notifying the BCMA of which physicians were selected for a select audit that month.	CY	nil	DE
-07	<b>Service verification annual report</b>  RETENTION STATEMENT Destroy when the report is no longer required for ongoing operational or reference requirements.  SO:      when the report is no longer required for ongoing operational or reference requirements	SO	nil	DE
-20	<b>Physician/practitioner service verification case file</b> (includes correspondence, memoranda, forms, reports, documentation and verification information relating to an individual practitioner) (arrange by practitioner number)  RETENTION STATEMENT Destroy 10 years after the service verification audit is concluded.	SO	10y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40980	SERVICE VERIFICATION AUDIT	A	SA	FD
	SO: when the service verification audit is concluded			
	10Y: This retention ensures the records are retained for ongoing operational and reference requirements.			
-25	<b>Service verification survey - paper</b> (includes verification letters, working papers, file notes, reports, closure forms and response letters from enquiries directly relating to the audit itself) (arrange by project number)  RETENTION STATEMENT Destroy at the end of the seventh calendar year.  7y: This retention ensures the records are retained for audit purposes.  NOTE: A project number is comprised of the year and month the letters were sent.	CY+1y	5y	DE
-26	<b>Service verification survey - electronic</b> (covers records on the VEGAS database)  RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational and reference requirements.  SO: when the records are no longer required for ongoing operational and reference requirements	SO	nil	DE
-30	<b>Service verification committee files</b> (covers the practitioner review committee) (includes agendas and minutes) (arrange in alphabetical order by committee)  RETENTION STATEMENT Transfer to the government archives seven years after the records are no longer required for current operational and reference requirements.  SO: when the records are no longer required for current operational and reference requirements  7y: This retention ensures the records are retained for ongoing operational and reference requirements.	SO+2y	5y	FR
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

40980	SERVICE VERIFICATION AUDIT	A	SA	FD
	FR: The government archives will fully retain service verification committee files because they document government decisions about the service verification process.			
-40	<b>VEGAS system</b> (database)	SO	nil	DE
	RETENTION STATEMENT Destroy when government is no longer monitoring and auditing practitioners' billing practices.			
	SO: when government is no longer monitoring and auditing practitioners' billing practices			
	NOTE: For additional information on the system, see the Information System Overview.			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 4

#### DIAGNOSTIC FACILITIES ADMINISTRATION

##### PRIMARY NUMBERS

4 1 0 0 0 – 4 1 1 9 9

Section 4 covers records relating to approving and monitoring facilities providing diagnostic services to Medical Services Plan (MSP) beneficiaries. The Medical Services Commission is responsible for approving diagnostic facilities to claim payment from MSP for the provision of medical services, in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#) and the [Medical and Health Care Services Regulation \(BC Reg. 426/97\)](#) and subsequent legislation. This includes records relating to: accreditation of physicians and of diagnostic facilities, review and approval or denial of applications received from diagnostic facilities, Medical Services Commission hearings, and monitoring of diagnostic facilities to ensure compliance with the conditions of approval.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 4 TABLE OF CONTENTS DIAGNOSTIC FACILITIES ADMINISTRATION

41000 - 41199

41000	DIAGNOSTIC FACILITIES ADMINISTRATION – GENERAL
41080	DIAGNOSTIC ACCREDITATION OF PHYSICIANS
41100	DIAGNOSTIC FACILITIES APPROVAL - GENERAL
41120	- APPEAL/DISPUTE HEARINGS
41140	DIAGNOSTIC FACILITY APPROVAL AND MONITORING
41180	LABORATORY REQUISITION COMPLIANCE REVIEWS

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41000 DIAGNOSTIC FACILITIES ADMINISTRATION – GENERAL

Records not shown elsewhere in the diagnostic facilities administration section relating to the Medical Services Commission's approval (i.e., licensing) of diagnostic facilities in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#) and the [Medical and Health Care Services Regulation \(BC Reg. 426/97\)](#). This primary also relates to one-time or on-going issues which may affect the approval of diagnostic facilities, the accreditation of facilities and of physicians to perform diagnostic procedures, and/or the on-going administration and monitoring of diagnostic facilities to ensure compliance with approval requirements.

Record types include briefing materials, correspondence, forms, literature, reports, studies and statistics, and memoranda.

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

NOTE: This ORCS does not cover records relating to hospitals or other establishments performing inpatient diagnostic services funded by the global budget under the [Hospital Insurance Act \(RSBC 1996, c. 204\)](#).

For approval and monitoring of individual diagnostic facilities, see primary 41140.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41000	DIAGNOSTIC FACILITIES ADMINISTRATION – GENERAL	A	SA	FD
All non-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 policy is replaced or becomes irrelevant.				
SO:	when policy is replaced or becomes irrelevant			
FR:	The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41000	DIAGNOSTIC FACILITIES ADMINISTRATION – GENERAL	A	SA	FD
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy 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.			
-02	<b>Diagnostic facilities – surveys, statistics and reports</b> (arrange by name of survey, statistic or report)	SO+1y	nil	DE
	RETENTION STATEMENT Destroy one year after information is no longer required.			
	SO: when information is no longer required			
-04	<b>Diagnostic facilities administration – billing guidelines</b> (arrange by modality [type of service])	SO+1y	6y	FR
	RETENTION STATEMENT Transfer to the government archives seven years after superseded by new guidelines or no longer in effect and the records are no longer required for current operational and reference requirements.			
	SO: when superseded by new guidelines or no longer in effect and the records are no longer required for current operational and reference requirements			
	7y: This retention ensures the records are retained for ongoing operational and reference requirements.			
	FR: The government archives will fully retain Diagnostic facility administration guidelines because they document the history of the changes to the guideline for each modality.			
-20	<b>Diagnostic facilities administration issues and studies case files</b> (arrange by topic)	SO+2y	5y	DE
	RETENTION STATEMENT Destroy seven years after issue is resolved or information is no longer required.			
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41000</b>	<b>DIAGNOSTIC FACILITIES ADMINISTRATION – GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

SO: when issue is resolved or information is no longer required

7y: The retention ensures the records are retained for ongoing operational and reference requirements.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41080 DIAGNOSTIC ACCREDITATION OF PHYSICIANS

Records relating to accreditation of physicians to perform specific diagnostic services. The Medical Services Commission requires that diagnostic facilities and the physicians practicing in them be accredited through the BC College of Physicians and Surgeons' Diagnostic Accreditation Program (DAP) in order to receive payment from the Medical Services Plan (MSP). As part of the diagnostic facility review and approval process, MSP staff and the Advisory Committee on Diagnostic Facilities (ACDF) review applications from facilities to ensure that physicians performing diagnostic procedures are appropriately accredited.

Record types include reports, correspondence, and memoranda.

For accreditation of specific facilities by DAP, see primary 41140.

For the Advisory Committee on Diagnostic Facilities (ACDF), see primary 41140.

For the Practitioner Information File (PIF) database, see the information system overview.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41080	DIAGNOSTIC ACCREDITATION OF PHYSICIANS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41080	DIAGNOSTIC ACCREDITATION OF PHYSICIANS	A	SA	FD
-02	<b>Diagnostic accreditation guidelines</b> (covers accreditation guidelines developed by DAP for specific modalities [types of diagnostic service]) (arrange by modality [e.g., CT scanners; cytogenetics; radiology; etc.])  RETENTION STATEMENT Transfer to the government archives when the diagnostic accreditation program is no longer required by government and the information is no longer of operational value.  SO: when the diagnostic accreditation program is no longer required by government and the information is no longer of operational value  FR: The government archives will fully retain accreditation guidelines because they document the history of diagnostic service standards in British Columbia.	SO	nil	FR
-03	<b>Diagnostic accreditation of physicians - paper</b> (arrange by modality [type of diagnostic service] e.g., diagnostic vascular physicians; pulmonary function physicians; ultrasound physicians; etc, then within the case file by date documentation received by MSP)  RETENTION STATEMENT Destroy one year after the information is no longer required for current operational and reference requirements.  SO: when the information is no longer required for current operational and reference requirements	SO+1y	nil	DE
-04	<b>Superseded or obsolete physician accreditation documentation</b>  RETENTION STATEMENT Destroy when the information is no longer required for current operational requirements.	SO	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41080	DIAGNOSTIC ACCREDITATION OF PHYSICIANS	A	SA	FD
	NOTE: This secondary is intended for retention and disposition purposes only; files are not to be opened using this secondary. Diagnostic accreditation of physician files contain information received and reviewed on an ongoing basis to verify that physicians are accredited to perform specific diagnostic services. Documents within a file are removed when information relating to an individual physician is superseded by updated information or is obsolete (e.g., upon physician's retirement, or when physician ceases to work within a facility, etc.). The superseded documents are re-classified here while awaiting approval for destruction.			
-05	<b>Diagnostic accreditation of physicians - electronic</b> (covers data in the Practitioner Information File database)	SO	nil	DE
	RETENTION STATEMENT Destroy when information is updated or obsolete.			
	SO: when information is updated or obsolete			
	NOTE: The diagnostic services that practitioners are accredited to provide are on the PIF database. Other data on the PIF includes practitioner numbers, payment information, and addresses. The PIF database is classified as 42060-40 as the majority of the data relates to practitioner enrollment and services.			
-06	<b>Diagnostic Accreditation Program (DAP)</b>	CY+1y	2y	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41100 DIAGNOSTIC FACILITIES APPROVAL - GENERAL

Records relating to the approval of diagnostic facilities to claim payment for the performance of diagnostic services not shown elsewhere in this primary block.

Record types include reports, correspondence, and memoranda.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41100	DIAGNOSTIC FACILITIES APPROVAL - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41120 DIAGNOSTIC FACILITIES APPROVAL - APPEAL/DISPUTE HEARINGS

Records relating to hearings before a Medical Services Commission panel that are requested by owners of diagnostic facilities who wish to reverse a negative recommendation made against them by the Advisory Committee on Diagnostic Facilities (ACDF). The hearings usually concern the ACDF's recommendation to deny the owner's request for licensing approval, but they may also concern the ACDF's recommendation to amend, suspend or cancel the owner's existing approvals.

Record types include briefing material, correspondence, submissions, and decision documents.

For applications for approval from specific diagnostic facilities, see primary 41140.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41120	DIAGNOSTIC FACILITIES APPROVAL - APPEAL/DISPUTE HEARINGS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41120	DIAGNOSTIC FACILITIES APPROVAL - APPEAL/DISPUTE HEARINGS	A	SA	FD
-02	<b>Diagnostic facility appeal hearing decisions</b>  RETENTION STATEMENT Transfer to the government archives when the records are no longer of operational value to the ministry or government.  SO: when the records are no longer of operational value to the ministry or government  FR: The government archives will fully retain the diagnostic facility appeal hearing decisions because they document decisions of the Medical Services Commission in response to disputes or appeals about the denial, amendment, suspension, or cancellation of a diagnostic facility's approval to claim payment for the performance of diagnostic service.  NOTE: The Diagnostic Facilities Administration program is mandated by the Medical Services Commission (MSC) to retain these documents for the MSC.	SO	nil	FR
-20	<b>Diagnostic facility hearing case files</b> (includes submissions, and background information, agendas, minutes) (arrange by city then facility)  RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational and reference requirements.  SO: when the records are no longer required for ongoing operational and reference requirements  NOTE: The minutes of the appeal hearings are summarized in the records of decision of the MSC that are located in Section 1 of this ORCS.  NOTE: These records are required as background documents should an applicant reapply for another hearing at another time. Previous hearing information gives the ministry supporting documentation for a current appeal. Once the practitioner/facility will no longer be providing those services, these records will be no longer of value and can be destroyed.	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41140 DIAGNOSTIC FACILITY APPROVAL AND MONITORING

Records relating to the approval of diagnostic facilities by the Medical Services Commission. Facilities must be licensed in order to claim payments from MSP for the performance of diagnostic services.

Applications for licensing are received by MSP from diagnostic facilities and are reviewed by the Advisory Committee on Diagnostic Facilities (ACDF). The ACDF consists of representatives from the College of Physicians and Surgeons, the Ministry of Health and the public. The ACDF recommends to the Medical Services Commission whether an application should be approved or denied. If approved, the diagnostic facility receives a "Certificate of Approval", which is assigned a unique identifying number and a case file is created. Approval requirements remain in effect until a new application is required or the facility ceases to exist. MSP regularly monitors facilities to ensure the conditions of approval are met.

Record types include correspondence, reports, and memorandum.

For accreditation of individual physicians to perform diagnostic services, see primary 41080.

For hearings requested by diagnostic facilities appealing or disputing decisions of the Advisory Committee on Diagnostic Facilities (ACDF), see 41120.

For more information on the electronic records related to diagnostic facility approvals, see the information system overview.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41140	DIAGNOSTIC FACILITY APPROVAL AND MONITORING	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41140	DIAGNOSTIC FACILITY APPROVAL AND MONITORING	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Diagnostic facility denied applications</b> (arrange by modality [type of diagnostic treatment])  RETENTION STATEMENT Destroy 18 months after the date of application.  18m: Applicants who have been denied approval may not re-apply until 18 months after the date of the previous application.	18m	nil	DE
-20	<b>Diagnostic facility approval and monitoring case files</b> (includes approved applications, notifications, correspondence, ministry copies of certificates of approval, copies of payment assignment forms, monitoring documentation, excerpts from Medical Services Commission meetings containing decisions, and other related documents) (arrange by geographic area [city] and then by modality [type of diagnostic service])  RETENTION STATEMENT Destroy six years after facility no longer exists or has permanently ceased providing specific diagnostic service.  SO: when facility no longer exists or has permanently ceased providing specific diagnostic service	SO+6y	nil	DE
-21	<b>Diagnostic facility approved services</b> (electronic records)  RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational and reference requirements.  SO: when the records are no longer required for ongoing operational and reference requirements  NOTE: Electronic records pertaining to the services a diagnostic facility and/or practitioner is approved to provide are held on the Practitioner Information File database.	SO	nil	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41140	DIAGNOSTIC FACILITY APPROVAL AND MONITORING	A	SA	FD
-40	<b>Advisory Committee on Diagnostic Facilities</b> (includes agendas, minutes, background information, terms of reference) (arrange in chronological order by meeting date)  RETENTION STATEMENT Transfer to the government archives when the decisions of a specific meeting are no longer of operational value to the ministry or government.  SO:      when the decisions of a specific meeting are no longer of operational value to the ministry or government  FR:      The government archives will fully retain Advisory Committee on Diagnostic Facilities agenda and minutes because they document recommendations to the Medical Services Commission regarding the approval or denial of all applications for licensing of diagnostic facilities.	SO	nil	FR

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41180 LABORATORY REQUISITION COMPLIANCE REVIEWS

Records relating to the development of standard menus of diagnostic tests by the Medical Services Plan (MSP). Diagnostic facilities are required to restrict the diagnostic tests listed on their requisition forms to the standard tests approved by Medical Services Commission (MSC), in order to limit the number of tests for simple check off by physicians. Diagnostic facilities are monitored for adherence to MSP laboratory requisition standards.

Record types include correspondence, forms, and surveys.

For monitoring of diagnostic facilities, see primary 41140.

The ministry OPR is Diagnostic Facilities Administration unless otherwise noted below. See specific secondaries for OPR retention schedules.

41180	LABORATORY REQUISITION COMPLIANCE REVIEWS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Diagnostic facility laboratory requisition restrictions</b> (arrange alphabetically by city then facility)	SO+1y	nil	DE
	RETENTION STATEMENT Destroy one year after no longer required for operational or reference requirements.			
			(cont'd)	

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41180	LABORATORY REQUISITION COMPLIANCE REVIEWS	A	SA	FD
	NOTE: Changes to laboratory requisitions are approved by the Medical Services Commission and are documented in the records of the commissions and the minutes of the commission that are scheduled in secondaries 40050-40 and -50.			
-30	<b>Diagnostic facility laboratory requisition restrictions surveys</b> (arrange by survey subject)  RETENTION STATEMENT Destroy one year after the survey is completed, all issues pertaining to the survey are resolved, and the survey documentation is no longer required for current operational requirements.  SO: when the survey is completed, all issues pertaining to the survey are resolved, and the survey documentation is no longer required for current operational requirements	SO+1y	nil	DE
-40	<b>Working committee to review standard outpatient diagnostic requisition forms</b> (includes agendas, minutes, drafts, final submissions to the BCMA and MSC for approval) (arrange in chronological order by meeting date)  RETENTION STATEMENT Destroy when the records no longer have operational value to the ministry or government.  SO: when the records no longer have operational value to the ministry or government	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 5

#### MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING

##### PRIMARY NUMBERS

4 1 2 0 0 – 4 2 5 9 9

Section 5 covers records relating to the receipt, processing and payment of claims billed by physicians and supplementary health care practitioners to the Medical Services Plan (MSP). The Ministry of Health pays claims through the MSP in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#) and related legislation, in accordance with eligible treatments and fees designated in the *Medical Services Commission Payment Schedule*. Also included in this section are records relating to payment allowances and/or payment adjustments made to physicians in accordance with programs developed to improve access to medical services in remote locations of the province; the enrolment of medical and health care practitioners with MSP; the management of electronic and hard copy documentation of payment activities, the management of eligibility and payment adjustments; the provision of travel assistance to eligible beneficiaries; and the administration of claims by beneficiaries receiving medical services out of province or out of country.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### SECTION 5 TABLE OF CONTENTS

#### MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING

41200 - 42599

41200	MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING	- GENERAL
41280	ADJUDICATION OF CLAIMS	
41300	BILLING SUPPORT	- GENERAL
41340		- BENEFICIARY (PATIENT) BENEFITS AND CLAIMS
41360		- CRITICAL CARE COVERAGE
41380		- INSTITUTIONAL BILLING
41450	IN-PROVINCE AUTHORIZATIONS	
41520	OUT-OF-PROVINCE CLAIMS	
41540	RECIPROCAL AGREEMENTS	
41560	GENDER REASSIGNMENT SURGERY	
41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	
41760	RURAL PROGRAMS ADMINISTRATION AND PAYMENT	
41900	PAYMENT SCHEDULE ADMINISTRATION	- GENERAL
41910		- FEE ITEMS
41920		- FEE ITEM PAYMENT DISPUTES
42000	PRACTITIONER ENROLMENT AND SERVICES	- GENERAL
42040		- DIRECT DEPOSIT REQUESTS AND PAYMENT ADJUSTMENTS
42060		- MEDICAL SERVICES PLAN ENROLMENT
42080	TRAVEL ASSISTANCE PROGRAM	

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41200 MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL

Records not shown elsewhere in the medical services claim and payment processing section that relate generally to the processing and payment of claims submitted to the Medical Services Plan (MSP) by physicians and health care practitioners. This includes records relating to the development and negotiation of agreements between the medical services claims program and other agencies and ministries; the management of reports relating to claims and payments; and records relating to issues concerning the payment and adjudication of claims for billing.

Record types include reports, correspondence and memoranda, briefing notes, drafts, presentation materials, reference information, statistics, and studies.

For a description of the Claims Processing System, see the Information System Overview (ISO).

For development of acts and regulations, see [ARCS primary 125](#) and [ARCS primary 140](#).

For job control language reports, see [ARCS secondary 6820-20](#).

For master agreements, see primary 40050.

For routine reports of temporary usefulness, see special schedule 102901 (Transitory Information).

For strategic plans and initiatives relating to cross-program or cross-agency initiatives that affect or relate to the Medical Services Plan, see primaries 40500 to 40590.

The ministry OPR is Medical Services Health and Human Resources Division and the HIBC service provider unless otherwise noted below. See specific secondaries for OPR retention schedules.

41200	MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>41200</b>	<b>MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
<b>-01</b>	<b>General</b>	<b>CY+1y</b>	<b>nil</b>	<b>DE</b>
	RETENTION STATEMENT Destroy 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.			
<b>-02</b>	<b>(superseded by -30 Medical services claim and payment reference materials)</b>			
<b>-03</b>	<b>Annual claim and payment reports and statistics</b>	<b>SO</b>	<b>nil</b>	<b>FR</b>
	RETENTION STATEMENT Transfer to the government archives when information is no longer required.			
	SO: when information is no longer required			
	FR: The government archives will fully retain annual claim and payment reports and statistics because they provide an annual summary of facts and figures relating to payments for medical and health care services provided to MSP beneficiaries. The records have significant evidential and informational value.			
	NOTE: Claim and payment reports that do not summarize annual activities are classified under -04.			
<b>-04</b>	<b>Claim and payment reports</b> (covers ad hoc, statistical and routine reports produced from claims systems)	<b>SO</b>	<b>nil</b>	<b>DE</b>
	RETENTION STATEMENT Destroy when the function the report supports is complete and when information is no longer required.			
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41200	MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL	A	SA	FD
	SO: when the function the report supports is complete (i.e., data integrity checks are concluded, adjustments are made to payments, or trend analysis is complete) and when information is no longer required			
	NOTE: This secondary covers reports which are not classified elsewhere in this section. The following reports have their own classifications:			
	Annual claim and payment reports and statistics	41200-03		
	Adjudication processing run reports	41280-02		
	Adjudication statistical system reports	41280-25		
	Medical Services Plan claim processing reports	41580-20		
	Rural programs payment reports	41760-02		
	Practitioner claim reports	42060-04		
	TAP reports and statistics	42080-03		
-10	<b>Tracking logs and spreadsheets</b> (covers documents which track processes and information about MSP functions, such as tracking the status of cases, steps in the pre-review process or fee item implementation, expenditures, TAP form mailouts, or compiling statistical data for reports or queries by the ministry executive)	SO	nil	DE
	RETENTION STATEMENT Destroy when no longer required for operational or reference requirements.			
	NOTE: Only use this classification for information that is duplicated elsewhere and compiled or summarized in a spreadsheet as a convenient reference tool.			
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41200	MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL	A	SA	FD
	NOTE: Some of these spreadsheets and logs, such as ones for the payment schedule administration, may have long term reference value because they track the history of a process or business rules, and document decisions in a summary format.			
-20	<b>Issue, project, and study files regarding MSP claims and payments</b> (covers issue management, projects or studies on topics such as out-of-country claims, rural health, fee items and practitioner enrolment) (arrange by topic) (supersedes 41300-20 Billing support issue and study case files, 41520-40 Out-of-province claims issue, project and study case files, 41760-20 Rural and remote health payment premiums and special allowances issue and study files, 41900-20 Payment schedule administration fee item issue and study case files, and 42000-20 Practitioner enrolment and services issue and study case files)  RETENTION STATEMENT Destroy seven years after the issue has been resolved, the project or study completed, and/or the information is no longer required for active reference purposes.  SO: when the issue has been resolved, the project or study completed, and/or the information is no longer required for active reference purposes  7y: The retention period ensures that the records are available to document and support decisions made by the ministry	SO+2y	5y	DE
-25	<b>Medical services agreement negotiations</b> (covers agreements between the Ministry of Health and other ministries/agencies regarding claims and payment processing) (includes background and development materials and a copy of the signed agreement) (arrange by agreement)  RETENTION STATEMENT Destroy seven years after the agreement is signed and the information is no longer required to support the agreement.	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41200	MEDICAL SERVICES CLAIM AND PAYMENT PROCESSING - GENERAL	A	SA	FD
	SO: when the agreement has been signed and the information is no longer required to support the current agreement			
	7y: The retention period ensures that records are available to resolve claims payments issues and adjudication, and as reference material for studies and projects.			
	NOTE: Final signed agreements are classified under <a href="#">ARCS primary 146</a> . Master agreements are classified under primary 40050, and working agreements in the 40400 primary block.			
-30	<b>Medical services claim and payment reference materials</b> (arrange by topic) (supersedes -02 Claim and payment processing in other jurisdictions)	SO	nil	DE
	RETENTION STATEMENT Destroy when the records are no longer required for ongoing operational or reference requirements.			
	SO: when the records are no longer required for ongoing operational or reference requirements			
-40	<b>(superseded by the Claims Processing System Information System Overview)</b>			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41280 ADJUDICATION OF CLAIMS

Records relating to the adjudication of in-province claims submitted by physicians and health care practitioners for payment by the Medical Services Plan (MSP).

All submitted claims go through an automated adjudication process using business rules within the Claims-in-Processing System (CIPS), part of the overall Claims Processing System (CPS). Claims that cannot be paid automatically as submitted undergo further adjudication, first by the AION system (an automated system using more complex business rules), and then, if necessary, by adjudicators or by medical consultants.

Most adjudications are resolved by applying adjudication explanatory codes, which are programmed into the CPS; sometimes adjudication will require telephone and correspondence for clarification. Data relating to individual claims is maintained on the Claims Processing System.

Record types include electronic records, correspondence, and memoranda.

NOTE: Adjudication documentation relating to decisions made by a medical advisor or the Medical Services Commission's medical advisory committee regarding payment of specific claims, claim payment dispute adjudication, and claim billing substantiation documentation (operation reports, consultation reports) are classified in the appropriate beneficiary (patient) case file (41340) or practitioner information file (42060).

For adjudication of out-of-province medical services claims, see primary 41520. For Claims In Process, see the Claims Processing System (CPS) Information System Overview (ISO).

For a description of the Claims Processing System (CPS), see the ISO.

For routine reports of temporary usefulness, see special schedule 102901 (Transitory Information).

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

41280	ADJUDICATION OF CLAIMS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41280	ADJUDICATION OF CLAIMS	A	SA	FD
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Adjudication processing run reports</b> (covers reports produced off of the CPS)	CY+1y	2y	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
-03	<b>Adjudication reject codes</b> (includes list of codes explaining reasons for rejection of claim)	SO	nil	DE
	RETENTION STATEMENT Destroy when replaced by updated list of reject codes.			
	SO: when replaced by updated list of reject codes			
-04	<b>Explanatory codes</b> (covers the lists of codes used in the claims processing system)	SO	nil	DE
	RETENTION STATEMENT Destroy when no longer required for data research purposes.			
	SO: when no longer required for data research purposes			
	NOTE: Explanatory codes have value even after being cancelled because they provide point-in-time context when interpreting data and reports.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41280	ADJUDICATION OF CLAIMS	A	SA	FD
-20	(superseded by 41580-40 Claims payment file – data)			
	NOTE: This secondary, originally called adjudication of claims files, was for data in a phase of the claims process; information is added to the claim at this phase, but there is not a static set of data to be scheduled. Data added to the claim in this adjudication phase are classified under the claim payment file, which is the complete representation of all parts of the claim and its processes.			
-25	<b>Adjudication statistical system reports</b> (covers reports produced off of the CPS)	CY+2y	nil	DE
	RETENTION STATEMENT Destroy at the end of the third calendar year.			
	NOTE: Adjudication statistical system reports that need to be kept longer than three years for trend analysis purposes may be classified under 41200-04 Claim and payment reports, providing they are maintained for a minimum of three years.			
-30	<b>Outstanding rejected claims data</b> (covers claims which are not approved or refused during the current run of the adjudication phase of claims processing)	CY+5y	nil	DE
	RETENTION STATEMENT Destroy at the end of the sixth calendar year.			
	NOTE: Microfiching of these records stopped in July 2010. Data are transferred at the end of the run to DVD and kept onsite for the adjudication team to reference.			
-40	(superseded by the Claims Processing System Overview)			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41300 BILLING SUPPORT - GENERAL

Records relating to the provision of information to physicians and health care practitioners regarding the processing and payment of claims submitted to the Medical Services Plan (MSP), and not shown elsewhere in this primary block.

Record types include correspondence, forms and reports, and other records as indicated under the relevant secondaries.

For beneficiary (patient) specific claim information, see primary 41340.

For benefits and claims inquiries and documentation, see primary 41340.

For issues and studies relating to billing support, see primary 41200.

For payment processing relating to medical services paid for by other agencies, see primary 41580.

For routine reports of temporary usefulness, see special schedule 102901 (Transitory Information).

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

41300	BILLING SUPPORT - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Payment restrictions – paper</b> (secondary is closed; these records are no longer created)	CY+1y	2y	DE
-03	<b>(superseded by 42850-64 MSP beneficiary data)</b>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41300	BILLING SUPPORT - GENERAL	A	SA	FD
-20	(superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments)			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41340 BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS

Records relating to claims for medical services received by MSP beneficiaries (patients). This includes claim cards and forms, which initiate the claim process, as well as supporting documentation for claims. Details from these records are entered into the Claims Processing System (CPS) and are part of the electronic claims record. Claims information is linked to a beneficiary's personal health number (PHN); data relating to claims in the claims processing system (CPS) are linked to each beneficiary's PHN, the images of supporting documentation and correspondence on MaxImage are catalogued by PHN, and the claims history in MaxPath is accessed by the PHN.

The data in the CPS are used by staff to respond to inquiries from both practitioners and beneficiaries about payment of claims or beneficiary claims history. Staff refer to the CPS claims data and/or beneficiary eligibility data retained on the enrolment system and respond to the inquiries by telephone, in writing or electronically through the system using designated explanatory codes. This primary also covers records relating to court ordered requests for a beneficiary's medical claims history.

NOTE: This primary supersedes records schedules 120881 (*Medical Services Plan claims and benefits - inquiries*), and 121403 (*MSP claims – ICBC inquiries*).

For a description of the Claims Processing System (CPS), see the Information System Overview (ISO).

For out-of-province medical service claims, see primary 41520.

For the Patient History File on MAXPaTH, see the MAXPaTH ISO.

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

41340	BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41340	BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
	<b>-01 General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
PIB	<b>-02 Court ordered requests for medical history</b> (covers paper and Maximage records) (arrange by personal health number)	CY+1y	5y	DE
	RETENTION STATEMENT Destroy at the end of the seventh calendar year.			
	7y: The retention period ensures that records are available for verification of authority to release the claims history.			
	<b>-03 (superseded by 42060-31 Practitioner Information File (PIF) data)</b>			
	<b>-04 In-province claim cards/forms</b> (covers unscanned paper claim cards/forms received since January 2009 when microfilming stopped, and scanned images on Maximage) (arrange by plan reference number)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	8y: The retention period ensures records are available in the event of billing dispute, and satisfies fiscal and audit obligations.			
	NOTE: With the records officer's approval, paper claim cards/forms that have been scanned and verified may be destroyed under the special schedule 206175 ( <i>Redundant Source Information</i> ).			
	NOTE: This secondary supersedes records schedule 105042 ( <i>MSP in-province claim cards</i> ).			

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41340	BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS	A	SA	FD
-05	<b>In-province claim cards - microfilm</b> (secondary closed as of January 2009, when microfilming program ended)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period ensures records are available in the event of billing dispute and satisfies fiscal and audit obligations.  NOTE: In-province claim cards in formats other than microfilm are classified under -04.	CY+7y	nil	DE
-06	<b>In-province claim card/form data batches</b> (covers claim card data which is manually entered into file servers and routinely uploaded (copied) into the CPS to start the claim process. These original data are held in batch files, currently for three calendar months, for data verification purposes)  RETENTION STATEMENT Destroy when data verification phase is complete.  SO: when data verification phase is complete  NOTE: Claim cards/forms are classified under -04	SO	nil	DE
PIB	<b>-20 Beneficiary-specific claim related records</b> (includes correspondence, notes, medical reports, inquiries, complaints, records of decisions and claim adjudications relating to individual MSP beneficiaries [patients]) (arrange by personal health number [PHN]) (also known as patient details) (supersedes -22 Beneficiary (patient) claim case files – magnetic tape, -23 Beneficiary (patient) claim case files – laser disk, -25 Beneficiary general complaints and correspondence)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.	CY+7y	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41340	BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS	A	SA	FD
<p>NOTE: This secondary covers the following records</p> <ul style="list-style-type: none"> <li>• unscanned claims records offsite,</li> <li>• beneficiary-specific claims records in MaxImage (all claims records attached to a PHN), including out-of-province and paypatient claim records in MaxImage,</li> <li>• Patient History data (claim details) in Maxpath, and</li> <li>• Third Party History reporting data.</li> </ul> <p>8y: The retention period ensures records are available in the event of a billing dispute, and satisfies fiscal and audit obligations.</p> <p>NOTE: Out-of-province claim records in Maximage are covered by this secondary. For the Out-of-province claim files, see secondary 41520-20.</p> <p>NOTE: With the records officer's approval, paper claim records that have been scanned and verified may be destroyed under the special schedule 206175 (<i>Redundant Source Information</i>).</p>				
PIB	<b>-21 Adjudication patient history file data</b> (covers adjudication data on the patient history file also known as the 18 month file)	18m	nil	DE
RETENTION STATEMENT Destroy at the end of 18 months.				
	<b>-22 (superseded by -20 MSP Beneficiary-specific claim related records)</b>			
	<b>-23 (superseded by -20 MSP Beneficiary-specific claim related records)</b>			
	<b>-25 (superseded by -20 MSP Beneficiary-specific claim related records)</b>			
PIB	<b>-26 Patient history file master beneficiary data</b> (covers the core data on the Patient History File and Adjudication file [on MAXPaTH] which remain as long as the PHN exists; including name, gender, birth date, personal health numbers, one-time medical procedures, and power of attorney) (arrange by personal health number)	SO	nil	DE
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41340</b>	<b>BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

**RETENTION STATEMENT**

Destroy when the beneficiary is no longer enrolled with MSP, and when the data are no longer required to support the claims processing system.

SO: when the beneficiary is no longer enrolled with MSP, and when the data are no longer required to support the claims processing system

NOTE: These data are the core (master) data on each person receiving MSP benefits. The data are foundational to the claims processing system; currently this means that regardless of MSP status the master beneficiary data are not deleted off of the system.

NOTE: Claim history records on the Patient history file (the details of a beneficiary's claim history) are classified under -20 Beneficiary-specific claim related records.

---

<b>PIB</b>	<b>-30</b>	<b>Practitioner inquiries - non-PHN-specific or multiple beneficiary</b>	<b>SO</b>	<b>nil</b>	<b>DE</b>
------------	------------	--	-----------	------------	-----------

---

(includes correspondence, notes and systems print-outs relating to billing inquiries of a general nature or inquiries relating to multiple beneficiaries (patients) received from practitioners)

(arrange by practitioner name)

**RETENTION STATEMENT**

Destroy upon response to inquiry or resolution of any issues resulting from inquiry.

SO: upon response to inquiry or resolution of any issues resulting from inquiry

NOTE: Inquiries or correspondence from physicians that are attached to a PHN are classified under -20 Beneficiary specific claim related records.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41340	BILLING SUPPORT – BENEFICIARY (PATIENT) BENEFITS AND CLAIMS	A	SA	FD
PIB	<p><b>-40 Requests for medical history</b> (covers requests for a medical history, such as Freedom of Information requests, from beneficiaries and from third parties. Also covers authorizations to release an individual's medical history to a third party, such as ICBC, and correspondence revoking approval to release a person's medical history) (arrange by personal health number)</p> <p>RETENTION STATEMENT Destroy six years after request is closed.</p> <p>SO: when request is closed</p> <p>NOTE: Requests for medical history that are in MaxImage (for workflow purposes) may be classified under -20 Beneficiary-specific claim related records, for ease of classification and file management.</p> <p>NOTE: The MAXPaTH data relating to third party requests for medical history are classified under -41.</p> <p>NOTE: This secondary supersedes records schedule 121403 (<i>MSP claims – ICBC inquiries</i>).</p>	SO+6y	nil	DE
PIB	<p><b>-41 Third party requests for medical history - data</b> (covers filtered patient history data held on the MAXPaTH system which is used in response to third party requests for medical history)</p> <p>RETENTION STATEMENT Destroy at the end of the eighth calendar year.</p> <p>8y: The retention period provides an adequate period for reporting and trend analysis purposes.</p>	CY+7y	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41360 BILLING SUPPORT - CRITICAL CARE COVERAGE

Records relating to paying claims made by physicians who have provided critical care services to patients who are not enrolled with the Medical Services Plan (MSP). Critical care services are defined as medical treatment for life-threatening or limb-threatening conditions, or medical care provided to patients who are unconscious and therefore unable to communicate with the attending physician about payment.

For these services to be covered by MSP, the patient must be a Canadian resident or landed immigrant, and a resident of British Columbia for at least three months.

Record types include patient documentation, completed claim cards and other billing records.

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

41360	BILLING SUPPORT - CRITICAL CARE COVERAGE	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Critical care coverage claims</b> (covers both approved and denied claims) (includes critical care coverage claim cards, medical reports, and proof of residency documents) (arrange by surname of patient)	CY+5y	2y	DE
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41360</b>	<b>BILLING SUPPORT - CRITICAL CARE COVERAGE</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy at the end of the eighth calendar year.

8y: The retention period ensures sufficient time to determine if a pattern of repetitious use exists.

NOTE: A critical care coverage claim is assessed prior to entering the claims system. If it is approved for payment, the claim data are entered into the claims processing system and processed the same as a "regular" claim. After the data input is complete, the claim cards are placed back on the individual critical care coverage claim file. If the claim is not approved nothing is entered into the system, as there is no PHN, and the information is held on the file.

---

**-21 (superseded by 41580-40 Claims payment details – data)**

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41380 BILLING SUPPORT – INSTITUTIONAL BILLING

Records relating to paying claims made by physicians and health care practitioners providing medical services to patients residing in provincial institutions other than correctional facilities.

Patients in provincial institutions (other than correctional facilities) retain their own Personal Health Numbers, so billing by institution is usually for services to patients that are not registered with the Medical Services Plan (MSP), such as visitors or residents that aren't registered with MSP. In this circumstance billing is processed under the generic billing number assigned to the institution.

Record types include correspondence, forms, and statements.

NOTE: Data relating to institutional billing claims for medical services provided to specific beneficiaries are maintained in the claims processing system.

For a description of the Claims Processing System, see the Information System Overview (ISO).

For claims for medical services provided to specific beneficiaries (patients), see primary 41340.

For claims for beneficiaries in correctional institutions, see secondary 42850-04.

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

41380	BILLING SUPPORT – INSTITUTIONAL BILLING	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.

SO: when policy is replaced or becomes irrelevant

FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41380	BILLING SUPPORT – INSTITUTIONAL BILLING	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-20	<b>(superseded by -00 Policy and procedures)</b>			
-21	<b>Institution file</b> (covers institution patient history, as well as the annual Provincial Institution History report data)  RETENTION STATEMENT Destroy at the end of the seventh calendar year.  7y: The retention period ensures records are available in the event of billing disputes and satisfies fiscal and audit obligations.	CY+1y	5y	DE

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41450 IN-PROVINCE AUTHORIZATIONS

Records relating to requests and approvals for medically required cosmetic surgery, orthodontia and dental surgery services. The Medical Services Plan (MSP) will cover surgery to alleviate significant physical symptoms, or to restore or improve functions to any area altered by disease, trauma, or congenital deformity. MSP will not cover surgery solely to alter or restore appearance except in specific instances which are outlined in the *Medical Services Commission Payment Schedule*. Authorization is required only for procedures that may not be a standard MSP benefit.

To start the authorization process the operative surgeon/orthodontist submits a formal request, which may include a treatment plan, and specifies the symptoms of medical necessity. When pre-authorization is granted, Health Insurance BC (HIBC) may require an operative report to support the claim in cases where different fee items may apply. If authorization has been denied, the practitioner/surgeon can request a review of the decision by providing additional medical information for review by the appropriate HIBC staff, who may consult with the ministry's medical advisor and Medical Advisory Council.

Record types include the applications, supporting correspondence, and reports.

For the records of the Medical Advisory Council (MAC), see secondary 41900-30.

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

41450	IN-PROVINCE AUTHORIZATIONS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.

SO: when policy is replaced or becomes irrelevant

FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>41450</b>	<b>IN-PROVINCE AUTHORIZATIONS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
	<b>-01 General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
PIB	<b>-20 Cosmetic and dental service requests</b> (covers documentation related to a practitioner's request to perform medically required cosmetic surgery, dental surgery, or IV sedation for dental services) (arrange by personal health number) (unscanned paper files, and MaxImage records)	CY+2y	8y	DE
	RETENTION STATEMENT Destroy at the end of the 11th calendar year.			
	11y: The retention period ensures that the records are available for all phases of an approved procedure, and provides an adequate reference period for subsequent procedure requests.			
	NOTE: With the records officer's approval, paper records relating to cosmetic and dental service requests that have been scanned and verified may be destroyed under special schedule 206175 ( <i>Redundant Source Information</i> ).			
	NOTE: Requests for orthodontic services are classified under -30 Orthodontics service approvals.			
	<b>-21 (superseded by 42060-31 Practitioner Information File (PIF) data)</b>			
PIB	<b>-30 Orthodontics service approvals</b> (includes request, supporting documents, approval/denial letter, follow-up material) (arrange by personal health number) (unscanned paper files, and MaxImage records)	SO+7y	nil	DE
	RETENTION STATEMENT Destroy seven years after beneficiary's 25th birthday, when services will no longer be covered by MSP or the BC Dental Association.			
	SO: upon beneficiary's 25th birthday, when services will no longer be covered by MSP or the BC Dental Association			(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41450</b>	<b>IN-PROVINCE AUTHORIZATIONS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	-----------------------------------	----------	-----------	-----------

---

7y: The retention provides sufficient follow-up time, ensures records are available in the event of billing dispute and satisfies fiscal and audit obligations.

NOTE: With the records officer's approval, paper records relating to cosmetic and dental service requests that have been scanned and verified may be destroyed under the special schedule 206175 (*Redundant Source Information*).

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41520 OUT-OF-PROVINCE CLAIMS

Records relating to claims submitted to the Medical Services Plan (MSP) for reimbursement of monies spent on medical services received outside of British Columbia, commonly called out-of-province claims.

Out-of-province claims cover medical services in other provinces and territories in Canada, as well as outside of Canada. Payments within the country are made in accordance with the provisions for portability for medical care outlined in the [Canada Health Act \(RSC 1985, c. C-6\)](#).

There are two types of out-of-province claims: out-of-province travel claims for payment of unplanned medical services, and out-of-province referrals for planned medical treatment, for which a physician has referred the patient and for which the MSP has pre-authorized full or partial funding.

The Medical Services Commission (MSC) has authority pursuant to the [Medicare Protection Act \(RSBC 1996, c. 286, s. 29\)](#), the [Medical and Health Care Services Regulation \(BC Reg. 426/97, s. 35\)](#), the [Hospital Insurance Act \(RSBC 1996, c. 204, s. 24\)](#) and the [Hospital Insurance Act Regulations \(BC Reg. 25/61, s. 6\)](#), to give prior written approval for elective (non-emergency) medically necessary out-of-province medical care. The administration of the prior written approval process is conducted by the Medical Services Branch (MSB) and its service provider Health Insurance BC (HIBC) on behalf of the MSC.

Also covered in this primary are records of the ministry's participation in the MSC out of country hearing panels, which are part of the appeal process for beneficiaries who are denied funding for elective (non-emergency) out-of-country medical care.

Record types include applications, correspondence, medical assessments, receipts and bills, claim forms, documentation of medical services provided, briefing notes, records of decision, drafts, presentation material, reports, statistics and studies, and other records as indicated under relevant secondaries.

NOTE: This primary supersedes records schedule 105046 (*MSP Claims Out-of-Province*).

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

41520	OUT-OF-PROVINCE CLAIMS	A	SA	FD
	All non-OPR offices will retain these records for:	SO	nil	DE

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41520	OUT-OF-PROVINCE CLAIMS	A	SA	FD
-00	<b>Policy and procedures</b> (covers final/approved versions of policies, procedures, standards, and guidelines pertaining to this section)  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:      The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Out-of-country claims cheque register – microfiche</b> (secondary closed July 2010, when microfiching stopped)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  NOTE: This function was transferred to the Ministry of Finance.	CY+7y	nil	DE
-03	<b>Out-of-country/out-of-province claims cleared and claims outstanding cheques - microfiche</b> (secondary closed July 2010, when microfiching stopped)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  NOTE: This function was transferred to the Ministry of Finance.	CY+7y	nil	DE
-04	<b>Out-of-province remittance statements</b> (secondary closed July 2010, when microfiching stopped)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.	CY+7y	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41520	OUT-OF-PROVINCE CLAIMS	A	SA	FD
	NOTE: See 41580-11 Medical services claims remittance statements - off-system data, for scheduling non-microfiched Out-of-province remittance statements.			
PIB	<b>-05 Updated patient history for out-of-province processed claims</b>	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	NOTE: Microfiching of these records ceased in July 2010. This secondary covers remaining microfiche as well as the data that are now stored on different media (currently DVD).			
PIB	<b>-20 Regular out-of-province claims</b> (covers unscanned paper claims, and out-of-province regular claims on MaxImage (called OOC REG CLAIM) for unplanned medical services while travelling) (includes correspondence, adjudication notes, forms, itemized bills and receipts, supporting documentation from doctors and/or hospitals, correspondence, documentation of services received out of province, and letters of approval or refusal for travel referral claims) (arrange by account number or Personal Health Number)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	8y: The retention period satisfies fiscal and audit obligations for payment records.			
	NOTE: HIBC will store hard copy out-of-province claim forms and related records under ongoing accession number 91-0413.			
	NOTE: With the records officer's approval, paper records relating to regular out of province claims that have been scanned and verified may be destroyed under special schedule 206175 ( <i>Redundant Source Information</i> ).			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41520	OUT-OF-PROVINCE CLAIMS	A	SA	FD
	<b>-21 Out-of-province claim data</b> (covers data held in the out-of-country claims table. Out-of-province claim data are manually entered into the out-of-country claims table (database), and routinely uploaded (copied) into CPS to start the claim payment process. The original data stays in the database and payment information is attached back to the claim)  RETENTION STATEMENT Destroy when operational usefulness has expired, and in accordance with approved business rules.  SO: when operational usefulness has expired, and in accordance with approved business rules	SO	nil	DE
PIB	<b>-25 Pre-authorized out-of-province claims</b> (covers pre-authorized out-of-province claims for medical services, including MSP reviews and assessments by medical consultants) (includes applications for funding, correspondence, adjudication notes, forms, itemized bills and receipts, supporting documentation from doctors and/or hospitals, correspondence, documentation of services received out of province, and letters of approval or refusal for out-of-province/out-of-country claims) (arrange by account number or Personal Health Number)  RETENTION STATEMENT Destroy at the end of the seventh calendar year within which the claim has been paid or denied, and any appeals have been resolved.  SO: the end of the calendar year within which the claim has been paid or denied, and any appeals have been resolved. Because pre-authorization for out-of-province medical treatment may cover more than one procedure (such as a series of treatments), these files will be closed by the Out-of-Province Authorization Coordinator  7y: The retention period satisfies fiscal and audit obligations for payment records.  NOTE: Out-of-province claims records on MaxImage are classified under 41340-20 Beneficiary-specific claim related records.	SO+1y	6y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41520	OUT-OF-PROVINCE CLAIMS	A	SA	FD
	<b>-30 (superseded by 41200-04 Claim and payment reports)</b>			
PIB	<b>-35 Medical Services Commission out-of-country/province hearing files</b> (includes the file brief prepared for the Commission, a copy of the out-of-country file, legal advice, a copy of the decision and correspondence) (arrange by beneficiary) (supersedes 41500-03 Hearing panels)  RETENTION STATEMENT Destroy one year after the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved.  OPR: Organizational Priorities and Workforce Planning  SO: when the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved  DE: These records will be destroyed upon expiry of the semi-active retention period and approval of the records officer. MSC decisions are adequately documented in secondaries 40050-40 and -50, which are fully retained by the government archives.  NOTE: This classification is for Beneficiary and Diagnostic Services' out-of-country hearing file. The MSC's hearing files are classified under secondary 40050-25.	SO+1y	nil	DE
	<b>-40 (superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments)</b>			
	<b>-45 Third party payee files</b> (covers contracts with third party payees, usually insurance companies who provide travel insurance for unplanned out of province medical care) (includes contract and letter of credit) (arrange by payee number)  RETENTION STATEMENT Destroy seven years after expiry or termination of the contract and conclusion of all extensions to the contract.	SO+1y	6y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41520</b>	<b>OUT-OF-PROVINCE CLAIMS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	-------------------------------	----------	-----------	-----------

---

OPR:	Beneficiary and Diagnostic Services
SO:	upon expiry or termination of the contract and conclusion of all extensions to the contract
7y:	The retention period provides a reasonable period for the legal value of the records to be extinguished and ensures the records are available for fiscal accountability.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41540 RECIPROCAL AGREEMENTS

Records relating to the development and management of reciprocal agreements between British Columbia and other provinces and territories for payment of claims for medical services. These agreements uphold the terms of the [Canada Health Act \(R.S.C., 1985, c. C-6\)](#), which requires portability of medical services between provinces and territories.

Record types include correspondence, briefing notes, drafts, presentation material, reports and studies.

For a description of the Claims Processing System, see the Information System Overview (ISO).

For claims payments for medical services received by individual beneficiaries (patients), see primary 41340.

For reciprocal claim payment, see secondary 41580-30.

For issues and studies relating to medical service claims and payments, see secondary 41200-20.

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

41540	RECIPROCAL AGREEMENTS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41540	RECIPROCAL AGREEMENTS	A	SA	FD
-02	(superseded by secondary -04 Reciprocal agreements)			
	NOTE: This secondary is deleted because the lists of services excluded from payment are a schedule appended to the agreement.			
-03	(superseded by secondary 41910-21 Fee schedule data)			
-04	<b>Reciprocal agreements</b> (covers inter-provincial bi-lateral agreements, as well as agreements-in-principle) (includes signed agreements, schedules and amendments)	SO	7y	DE
	RETENTION STATEMENT Destroy seven years after superseded by another agreement, or when agreement is terminated and upon conclusion of audit and other requirements stipulated in the agreement.			
	SO: when superseded by another agreement, or when agreement is terminated and upon conclusion of audit and other requirements stipulated in the agreement			
	7y: The retention period is based on the need to research the previous agreement documentation during the renegotiation phase, ensures the records are available for fiscal accountability, and also provides a reasonable period of time for the legal value of the records to be extinguished.			
	DE: Reciprocal agreements will be destroyed upon expiry of the retention periods and authorization of the records officer. They are fully retained by the Order in Council Administration office, the repository for all original extra-provincial agreements, in accordance with the <i>Order in Council Administration ORCS</i> (schedule 107559).			
	NOTE: This secondary covers final, signed agreements and records documenting the monitoring and management of the agreement. The negotiation and development material related to these agreements is classified under -20 in this primary.			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41540	RECIPROCAL AGREEMENTS	A	SA	FD
-20	<b>Reciprocal agreement development and approval files</b> (covers records relating to the negotiation of reciprocal agreements and subsequent amendments) (includes correspondence, eligibility criteria, impact analysis, reports, studies, drafts, and Privacy Impact Assessments (PIA's)) (arrange in order by province or item under negotiation)  RETENTION STATEMENT Destroy seven years after agreement is approved or negotiations are suspended.  SO:      when agreement is approved or negotiations are suspended  7y:      The retention period is based on the need to research the previous development documentation during the renegotiation phase and provides a reasonable period of time for the legal value of the records to be extinguished.  NOTE:    Final signed agreement documents are classified under -04 in this primary.	SO+2y	5y	DE

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41560 GENDER REASSIGNMENT SURGERY

Records relating to the assessment and decisions regarding requests for MSP funding for gender reassignment surgery (GRS). Gender reassignment surgery requires pre-authorization for MSP funding. The beneficiary's physician refers the request to MSP, where the application is assessed by Medical Services Branch staff, the consultant psychiatrist, and the Gender Reassignment Surgical Review Committee, who issues the letter of decision.

This also includes records relating to the resolution of complaints brought forth to the BC Human Rights Tribunal regarding gender reassignment issues, and general liaison records with the gender reassignment community and practitioners.

Record types include correspondence, memorandum, reports, records of decisions, policy and procedures manuals, and other types of records as indicated under relevant secondaries.

For agreements for surgical resources, see [ARCS primary 146](#).

For complaints, see [ARCS primary 155](#).

For issues and study files, see secondary 41200-20.

For ombudsperson investigations, see [ARCS secondary 155-20](#).

For reference material such as journal articles, peer reviewed journals, and international standards of care, see [ARCS secondary 358-20](#).

For tracking logs and spreadsheets, see secondary 41200-10.

The ministry OPR is Health Sector Workforce and Beneficiary Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

41560	GENDER REASSIGNMENT SURGERY	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures 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 [Government Records Officer](#).

## Key to *ARCS/ORCS* Codes and Acronyms

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41560</b>	<b>GENDER REASSIGNMENT SURGERY</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	------------------------------------	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy 13 years after approved surgery/ies and revisions are complete; or when the application is refused; or when the patient withdraws from or abandons surgical plans.

SO: when approved surgery/ies and revisions are complete; or when the application is refused; or when the patient withdraws from or abandons surgical plans

13y: The retention period allows for access to the case file in the event of subsequent surgeries and provides an adequate research period.

DE: Gender reassignment case files will be destroyed upon expiry of the active and semi-active retention periods and approval of the records officer. Gender reassignment surgery eligibility criteria, as well as assessment and approval procedures, are adequately documented in policy and procedures (41560-00).

---

<b>-30</b>	<b>GRS human rights complaints</b>	<b>SO+3y</b>	<b>10y</b>	<b>FR</b>
------------	------------------------------------	--------------	------------	-----------

(includes copy of complaint, investigation and resolution records, financial records and the decision document of the BC Human Rights Tribunal)  
(arrange by patient name)

### RETENTION STATEMENT

Transfer to the government archives 13 years after complaint is withdrawn or settled or report is submitted and decision has been made.

SO: when complaint is withdrawn or settled or report is submitted and decision has been made

13y: The retention period ensures the records are available for reference in defense of future complaints.

(cont'd)

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41560	GENDER REASSIGNMENT SURGERY	A	SA	FD
	FR: The government archives will fully retain GRS human rights complaints because they document the response of the government to the complaint, the hearing, the decision, and the issues raised by the nature of the complaint. These records have significant evidential and informational value.			

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41580 MEDICAL SERVICES CLAIMS PAYMENT PROCESSING

Records relating to processing and paying claims submitted by physicians and health care practitioners for payment by the Medical Services Plan (MSP) including processing and paying reciprocal payments for out of province claims, payments in response to direct patient claims and primary health care payments.

Physicians and practitioners submit claims on claim cards or with claim forms through Teleplan, a telecommunications system that allows physicians and practitioners to submit claims to the MSP electronically. Data are loaded or entered into the Claims Processing System (CPS) which receives and processes claims for payment. In the CPS claims are verified, either electronically or manually when required, adjudications are made, authorized payment adjustments applied, and payment is issued. The CPS sends electronic remittance statements to practitioners through Teleplan or by hardcopy, advising of payments that will be made on the remittance date.

See the CPS Information System Overview (ISO) for a more thorough overview of the claims payment process.

Record types include forms, electronic records, microfiche, regularly scheduled reports, ad hoc reports, and summary reports documenting claims billing and payment activities produced by the claims processing system.

NOTE: This primary supersedes records schedule 105075 (*Claim and refund cheques*).

For claims relating to specific beneficiaries (patients), see primary 41340.

For a description of the Claims Processing System see the ISO.

For routine reports of temporary usefulness, see special schedule 102901 (*Transitory Information*).

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Medical services claims cheque registers - paper</b> (secondary closed because paper cheque registers are no longer being produced. See -04 for guidance on scheduling cheque register data)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
-03	<b>Medical services claims cheque registers - microfiche</b> (secondary closed because cheque registers are no longer being microfiched. See -04 for guidance on scheduling cheque register data)	CY+7y	nil	DE
-04	<b>(superseded by -55 Teleplan data, for remittance statements in Teleplan, or -11 Medical services claims remittance statements, for remittance data transferred off-system from the Claims Processing system)</b>			
-05	<b>Inbound Teleplan claims - microfiche</b> (secondary closed because Inbound Teleplan claims are no longer being microfiched)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	NOTE: See -06 Inbound Teleplan claims – data for scheduling the data that used to be transferred to microfiche.			
-06	<b>Inbound Teleplan claims - data</b>	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	8y: The retention period satisfies fiscal and audit obligations for payment records.			
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
	NOTE: Inbound Teleplan claims are created during the pre-edit phase of the claim payment process, and represent the original submitted claim before the adjudication process is applied to it. Currently, this data is transferred to compact discs from the claims processing system on a weekly basis.			
-07	<b>Physician payment emergency file</b> (covers payment data pertaining to physicians paid by direct deposit)  RETENTION STATEMENT Destroy when the next emergency payment is calculated.  OPR: Beneficiary and Diagnostic Services  SO: when the next emergency payment is calculated, which is currently on a bi-weekly basis  NOTE: If the Corporate Accounting System (CAS) is unable to process electronic funds transfers (EFT) for practitioners' payments, the physician payment emergency file, which provides the payment authority information for emergency electronic funds transfer, is forwarded to the Ministry of Finance to ensure payment is made.	SO	nil	DE
-08	(superseded by -07 Physician payment emergency file)			
-09	(superseded by -07 Physician payment emergency file)			
-10	(superseded by -07 Physician payment emergency file)			
-11	<b>Medical services claims remittance statements – off-system data</b> (covers remittance statements transferred off the Claims Processing System at payment time and held on a standalone PC for the duration of the retention period) (includes pay doctor remittance statements, pay patient remittance statements, and out-of-province remittance statements)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period satisfies fiscal and audit obligations for payment records.	CY+7y	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
	NOTE: Remittance statement data used to be transferred to microfiche; this practice ceased in July 2010. This secondary also applies to any remaining microfiche.			
-12	<b>Medical services claims remittance statements – system data</b> (covers remittance statements stored on the Claims Processing System)	SO	nil	DE
	RETENTION STATEMENT Destroy when operational values expire.			
	SO: when operational values expire, which is currently after 24 payment cycles			
	NOTE: Remittance statements stored on the Teleplan database are classified under -55 Teleplan data.			
-13	<b>Medical services claims payment signing sheets</b> (covers payment reports printed off the payment details file which, upon signoff, authorize the Ministry of Finance to commence payment of claims by electronic funds transfer or cheque)	CY+2y	nil	DE
	RETENTION STATEMENT Destroy at the end of the third calendar year.			
	OPR: Beneficiary and Diagnostic Services			
-20	<b>Medical services claim processing reports</b> (includes claims outstanding reports; both standard and ad hoc reports) (arrange by report type)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	8y: The retention period ensures that records are retained for ongoing operational and reference requirements.			
-25	<b>(superseded by -27 Paypatient claims payment processing records)</b>			
-26	<b>(superseded by -40 Claims payment file - data)</b>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
PIB	<b>-27 Pay patient claims payment processing records</b> (arrange by Personal Health Number (PHN)) (supersedes -25 Other medical claims payment processing records – paper)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period satisfies fiscal and audit obligations for payment records.  NOTE: The data related to these claims are classified under -40 Claims payment details - data, and is processed through the Claims Processing System. Scanned records on MaxImage relating to these claims are classified under 41340-20 Beneficiary-specific claim related records.  NOTE: These claims are submitted by beneficiaries to be reimbursed for services received at a medical clinic or from an opted-out practitioner.	CY+1y	6y	DE
	<b>-30 Reciprocal medical services claim payment documentation</b> (covers records relating to payment for BC residents by other provinces, and MSP payments for residents of other provinces) (includes invoices, cheque requisitions, statements, reports, spreadsheets and correspondence) (arrange by province) (supersedes -31 Reciprocal medical services claim payment documentation – microfiche)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period satisfies fiscal and audit obligations for payment records.	CY+1y	6y	DE
	<b>-31 (superseded by -30 Reciprocal medical services claim payment documentation)</b>			
	<b>-32 (superseded by -40 Claims payment file - data)</b>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
-40	<b>Claim payment details - data</b> (covers all claims processed by the claims system, including Alternative Payments Program claims, Diagnostic Facilities and out-of-country/province claims) (includes payment summary and payment detail data on the claims processing system)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period satisfies fiscal and audit obligations for payment records and allows sufficient time for retroactive payment reference and reconciliation.  NOTE: These are the claims that have gone through the validation and adjudication steps, and include all additional information added through the processing phases. They are the best representation of claims processed under the MSP.  NOTE: A copy of these data are transferred to the ministry's Health Ideas office.	CY+7y	nil	DE
-42	<b>Claims payment file – DASD</b> (secondary closed – these data are transferred to the custody of the Ministry of Health's data stewardship program, and will be covered in a future ORCS which covers the data stewardship function)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.	CY+7y	nil	DE
-45	<b>Insurance Corporation of BC (ICBC)/WorkSafeBC billing data</b>  RETENTION STATEMENT Destroy when the data are no longer required for ongoing operational or reference requirements.  SO: when the data are no longer required for ongoing operational or reference requirements	SO	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
	NOTE: ICBC and WorkSafeBC data are held in the data file until the appropriate agency approves or refuses the claim. If the claim is refused it does not proceed to the next stage of the approval process and is returned to the submitter. If the claim is verified it proceeds to the adjudication phase of the claims process, and is classified as a claims payment file under secondary -40. This secondary classifies any data remaining in the file once the verification process is complete.			
-46	ICBC/WorkSafeBC billing file – off-system data	CY+2y	nil	DE
	RETENTION STATEMENT Destroy at the end of the third calendar year.			
	NOTE: Data from the ICBC/WorkSafe BC billing file are added to DB2 tables and disc storage daily. These data are used for reference purposes by the adjudication staff at HIBC.			
-50	Claims Processing System claim notes – data	SO	nil	DE
	RETENTION STATEMENT Destroy when operational usefulness expires.			
	SO: when operational usefulness expires			
	NOTE: The automated purge process for claims notes is currently 18 months.			
-55	Teleplan data	SO	nil	DE
	(includes submitted claims waiting to complete the pre-edit and edit eligibility phases and enter the claims processing system, as well as remittance statements and refused claims waiting for pickup by physicians)			
	RETENTION STATEMENT Destroy when operational requirements have expired.			
	SO: when operational requirements have expired; e.g., for inbound Teleplan claims, upon conclusion of the 90 day claim submission time limit. Currently, Teleplan data, which resides on the TeleMax database, is purged every 6 months			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41580	MEDICAL SERVICES CLAIMS PAYMENT PROCESSING	A	SA	FD
-60	<b>Primary Health Care (PHC) registration data</b> (includes Personal Health Numbers, registration information, physicians that patients are registered with, and effective cancellation dates)  RETENTION STATEMENT Destroy when the patient is no longer registered and trend analysis value has expired.  SO:      when the patient is no longer registered (i.e., deceased or moved out of province) and trend analysis value has expired  NOTE:    This secondary covers the PHC registration data on the Claims Processing System (CPS). See the CPS Information System Overview for information about the system.	SO	nil	DE

END OF PRIMARY



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### 41760 RURAL PROGRAMS ADMINISTRATION AND PAYMENT

Records relating to the administration of rural health programs, which are designed to improve patient care and availability of physician services in rural and remote areas of BC, per the Rural Practice Subsidiary Agreement (RSA).

The RSA is a subsidiary agreement of the Physician Master Agreement between the government, the British Columbia Medical Association (BCMA) and the Medical Services Commission.

Under the RSA, the Joint Standing Committee on Rural Issues (JSC) was established, and is comprised of members from the BCMA and the Ministry of Health (MoH), including health authority representation. The JSC advises the government and the BCMA on rural medical practice issues, and administers and oversees funding for a range of programs to assist rural communities in recruiting and retaining physicians. The records in this primary relate to the administration of these programs.

Rural health programs range from the provision of locum assistance (coverage during the absence of a principal physician) for eligible rural physicians, to travel assistance payments to physicians visiting rural and isolated communities so they may provide medical services which would not otherwise be available. Records include payments, travel allowances, locum payments and other fees, premiums and special allowances paid to physicians who practice in rural areas.

Record types include Rural Retention community reporting, correspondence, forms, questionnaires, requests for rural designation, reports, evaluations, memoranda, briefing notes, drafts, presentation material, and studies.

For analytic reporting, see primary 40100.

For audits, see [ARCS primary 975](#).

For a description of the Claims Processing System, see the Information System Overview.

For issues and studies relating generally to medical services claims and payments, see secondary 41200-20.

For JSC program implementation records, see primary 40540.

For JSC program management and maintenance records, see primary 40560.

For lists, such as locum lists, see secondary 41200-10.

For planning and performance reports, see [ARCS secondary 400-20](#).

For processing and paying claims, see primary 41580.

For reports not listed in this primary, see primary 41200.

For routine reports of temporary usefulness, see special schedule 102901 (*Transitory Information*).

For strategic programs that relate to plans and initiatives for improving provision of rural health care, see primaries 40500 to 40560.

The ministry OPR is Compensation Policy and Programs unless otherwise noted below. See specific secondaries for OPR retention schedules.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41760	RURAL PROGRAMS ADMINISTRATION AND PAYMENT	A	SA	FD
	All non-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)  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:      The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Rural programs payment reports</b> (covers system-produced statistical reports for rural programs; these are used for account balancing, adjustments, and data integrity purposes) (arrange by program)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  OPR:      HIBC service provider  8y:      The retention period ensures records are available in the event of billing dispute and satisfies fiscal and audit obligations.	FY+1y	6y	DE
-03	<b>Specialty services eligible for rural special allowance funding</b> (secondary closed because there is no evidence of use)	SO	nil	DE
-20	<b>(superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments)</b>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41760	RURAL PROGRAMS ADMINISTRATION AND PAYMENT	A	SA	FD
-30	<b>Rural Retention point assessments</b> (covers Rural Retention applications and the annual community points assessment required by the Rural Practice Subsidiary Agreement) (includes applications from communities, assessments, evaluation and approval documents, and tracking spreadsheets) (arrange by health authority)  RETENTION STATEMENT Destroy seven years after information is no longer required to support current or future eligibility decisions, and is not necessary for tracking point stabilization.  SO:      when information is no longer required to support current or future eligibility decisions, and is not necessary for tracking point stabilization  7y:      The retention period ensures that records are retained for ongoing operational and reference requirements.  DE:      Records will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Decisions about the eligibility of rural and remote communities for fee premiums paid to physicians who practice in remote areas of the province are documented in the records of the Joint Standing Committee on Rural Issues, which are fully retained by the government archives.  NOTE:    Rural and retention data pertaining to communities and practitioners on the Practitioner Information File database is classified under 42060-31.	SO+2y	5y	DE
-31	(superseded by -61 Rural programs requests and payments data)			
-40	(superseded by -60 Rural programs requests and payments)			
-41	(superseded by 42060-31 Practitioner Information File data)			
-50	(superseded by -60 Rural programs requests and payments)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41760	RURAL PROGRAMS ADMINISTRATION AND PAYMENT	A	SA	FD
-55	<p><b>Locum files</b>  (covers files for the practitioners enrolled in the locum pools, such as General Practitioners, (GP's) and Specialist pools)  (includes application to the locum pool, supporting documentation, contract, daily rates, confirmations and correspondence; may also have copies of funding requests and approvals)  (arrange by locum program, then by practitioner)</p> <p>RETENTION STATEMENT  Destroy seven years after the physician/practitioner withdraws from the locum program.</p> <p>SO:      when the physician/practitioner withdraws from the locum program</p> <p>7y:      The retention period provides a reasonable period for the legal value of the records to be extinguished and ensures the records are available for fiscal accountability.</p> <p>NOTE:    Active locum GP files are maintained in the Vancouver Health Match BC office, which currently manages the GP locum pool. When the files are closed they are sent to the Rural Health program for managing.</p> <p>NOTE:    Confirmation of locum assignments, commonly called the confirmation binders, are classified under -60 Rural programs requests and payments, because they document the payments to the physician/practitioners.</p>	SO+2y	5y	DE
-60	<p><b>Rural programs requests and payments</b>  (covers records of payment to practitioners, and the administration of rural health programs; this may include establishing eligibility, allocation of resources, and the payment of expenses for pre-approved travel to northern and isolated communities to provide medical services)  (includes assignment of payment (AOP) and confirmations, expense forms, receipts, invoices, daily payment sheets, correspondence, funding and usage tracking spreadsheets, funding requests and approvals, copies of supplemental and vacancy funding requests and approvals payment records)  (arrange by program, then by physician, health authority or community)</p>	FY+1y	6y	DE
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41760	RURAL PROGRAMS ADMINISTRATION AND PAYMENT	A	SA	FD
	<p>(also known as the payment, expense, approvals, reallocations and supplemental binders in the Rural Programs branch)</p> <p>(supersedes -40 Northern and Isolation Travel Assistance and Outreach Program (NITAOP), and -50 Northern and Rural Locum Program physicians' evaluations and day sheets case files)</p> <p>RETENTION STATEMENT</p> <p>Destroy at the end of the eighth fiscal year.</p> <p>OPR: Compensation Policy and Programs and the HIBC service provider</p> <p>8y: The retention period ensures records are available in the event of billing disputes, satisfies fiscal and audit obligations, and aligns with physician's records retention regulations.</p> <p>DE: Records will be destroyed upon expiry of the semi-active retention period and authorization of the records officer. Decisions about the eligibility of rural and remote communities for travel assistance funding for physicians visiting rural and isolated communities are documented on the records of the Joint Standing Committee on Rural Issues, which are fully retained by the government archives.</p>			
-61	<p><b>Rural programs requests and payments data</b></p> <p>(covers data residing in access databases and excel spreadsheets created for tracking requests and payments for rural programs. Examples of these are the GP database, the Specialist database, the NITAOP spreadsheet or the RRP flat fees database)</p> <p>RETENTION STATEMENT</p> <p>Destroy when reference and statistical value has expired, or the data have been copied to another system.</p> <p>SO: when reference and statistical value has expired, or the data have been copied to another system</p> <p>NOTE: This secondary is used to schedule the data within the systems, and the program spreadsheets. For the rural requests and payment files, see secondary -60.</p>	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### 41900 PAYMENT SCHEDULE ADMINISTRATION – GENERAL

Records relating generally to the development and maintenance of the *Medical Services Commission Payment Schedule*, including coordination to ensure commonality between clinical practices protocols, claims processing and Payment Schedule fee items. The records covered in this primary relate to the various medical committees which make decisions and recommendations regarding the payment schedule.

The BC Medical Association (BCMA) Tariff Committee receives requests from physicians for modification of the fee payment schedule. The Tariff Committee is comprised of BCMA physicians and staff and ministry staff. Through review and consultation with the ministry, the Tariff Committee recommends a change to the MSC Payment Schedule; the recommendation is sent to the MSC and will be documented in the Minutes of the Commission.

The Medical Advisory Council (MAC) is composed of the senior medical consultant, ministry staff, a Health Insurance BC (HIBC) representative, and private physicians who review and adjudicate submitted claims which cannot be adjudicated by the adjudication staff at HIBC. MAC decisions that become policy for adjudication of claims are documented through the MAC minutes, and are the basis for payment of future claims.

The Medical Payment Issues Committee (MPIC) consists of ministry staff, an HIBC representative and the senior medical consultant. The committee addresses adjudication issues and questions from HIBC. These relate directly to the application of fee items to claims, and resolve outstanding issues as well as clarify policy for HIBC adjudicators.

Record types include correspondence, briefing materials, reports, minutes, and agendas.

For disputes resolved in conjunction with the BCMA Reference Committee, see primary 41920.

For explanatory codes, see secondary 41280-04.

For fee item payment disputes and hearings, see primary 41920.

For lists, tracking logs, registers, and spreadsheets, such as MPIC Sections, see [ARCS secondary 100-05](#).

For Minutes of the Commission, see primary 40050.

For records of the Medical Services Commission, see primary 40050.

For reference material, see [ARCS secondary 358-20](#).

For routine reports of temporary usefulness, see special schedule 102901 (*Transitory Information*).

For specific fee item histories, see primary 41910.

For the Senior Medical Consultant Committee (SMC), see [ARCS primary 200](#).

The ministry OPR is Health Sector Workforce and Beneficiary Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>41900</b>	<b>PAYMENT SCHEDULE ADMINISTRATION – GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
	All non-OPR offices will retain these records for:	SO	nil	DE
<b>-00</b>	<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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
<b>-01</b>	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
<b>-20</b>	<b>(superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments)</b>			
<b>-30</b>	<b>Medical Advisory Council (MAC) minutes</b> (arrange by medical specialty)	SO	nil	DE
	RETENTION STATEMENT Destroy when the medical review of the claim has been completed, the decision has been made, and when the records are no longer required for reference requirements.			
	SO: when the medical review of the claim has been completed, the decision has been made, and when the records are no longer required for reference requirements. Because the MAC minutes contain policy decisions regarding fee item billing, reference value for these records is long-term. The program director will determine when the file can be closed			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41900	PAYMENT SCHEDULE ADMINISTRATION – GENERAL	A	SA	FD
	DE: MAC minutes will be destroyed upon expiry of the retention periods and authorization of the records officer. The records provide the background information relating to how individual fee items apply to claims. This information is then incorporated on an ongoing basis into the <i>Medical Services Commission Payment Schedule</i> (41910-02) and Fee item business rules (41910-06). The records have insufficient value to warrant archival retention.			
-35	<b>Medical Payment Issues Committee (MPIC)</b> (includes agenda and minutes) (arrange by section, then by date)  RETENTION STATEMENT Destroy when no longer needed to review decisions and recommendations, and when reference value has expired.  SO: when no longer needed to review decisions and recommendations, and when reference value has expired  DE: Medical Payment Issues Committee records will be destroyed upon expiry of the retention periods and authorization of the records officer. The records provide the background information relating to how individual fee items apply to claims. This information is then incorporated on an ongoing basis into the <i>Medical Services Commission Payment Schedule</i> (41910-02) and Fee item business rules (41910-06). The records have insufficient value to warrant archival retention.	SO	nil	DE
-40	<b>BCMA Tariff Committee records</b> (covers the creation and amendment of fee items, and the distribution of funds) (includes correspondence, agenda, minutes, Board of Director motions and supporting documentation) (arrange chronologically by committee meeting)  RETENTION STATEMENT Destroy five years after the records are no longer required for ongoing interpretation of the payment schedule, or to clarify policy and precedence.	SO	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>41900</b>	<b>PAYMENT SCHEDULE ADMINISTRATION – GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

SO: when the records are no longer required for ongoing interpretation of the payment schedule, or to clarify policy and precedence

DE: Tariff Committee records will be destroyed upon expiry of the active and semi-active retention periods and authorization of the records officer. Decisions about fee items are documented in MSC records of minutes and changes to the fee schedule are documented in the payment schedule, both of which are fully retained by the government archives.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41910 PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS

Records relating to the development and maintenance of the *Medical Services Commission Payment Schedule*, in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286, s. 26\)](#). This includes the pre-review, development and history of each fee item included in the payment schedule, (i.e., a treatment designated as an MSP benefit), and also relates to supplementary benefits payment schedule fee items.

Also covered in this primary are records relating to the implementation of the fee items. This includes a range of functions and record types, including broadcast messages, which are the first communication to physicians about new or revised fee items; fee item profiles, which summarize the details and descriptions of each fee item; and the business rules, which define how the claims system will process claims under each fee item. A fee item is considered implemented when claims have been processed successfully under it.

Record types include correspondence, briefing materials, records of decision, reports, and statistics.

For explanatory codes, see secondary 41280-04.

For Medical Advisory Council minutes, see secondary 41900-30.

For out-of-province medical services excluded from payment, see secondary 41540-04.

For payment disputes, see primary 41920.

For preparation, printing and distribution of the payment schedule, see [ARCS primary 312](#).

For reference material, see [ARCS secondary 358-20](#).

For routine reports of temporary usefulness, see special schedule 102901 (*Transitory Information*).

For system change requests, see [ARCS secondary 6840-20](#).

For Tariff Committee agendas and minutes, see primary 41900.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

41910	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41910	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Medical Services Commission Payment Schedule</b>	SO	nil	SR
	RETENTION STATEMENT Transfer one copy of each annual bound paper version and online version of the <i>Medical Services Commission Payment Schedule</i> to the government archives when payment schedule is replaced or becomes irrelevant.			
	SR: The government archives will selectively retain the <i>Medical Services Commission Payment Schedule</i> because it documents the fees or amounts payable to medical practitioners for each type of listed benefit or medical service as defined in the <a href="#">Medicare Protection Act (RSBC 1996, c. 286, s. 26)</a> and the Master Agreement between the Medical Services Commission and the BC Medical Association. The records have significant evidential and informational value. The government archives will retain one copy of each annual <i>Medical Services Commission Payment Schedule</i> . Ministry staff will retain a complete copy of the online (web-based) <i>Medical Services Commission Payment Schedule</i> at the end of each year for FR disposition.			
-05	<b>Broadcast messages</b> (covers broadcast messages that communicate information about new or modified fee items to physicians) (arrange by remittance date)	SO	nil	DE
	RETENTION STATEMENT Destroy when reference value expires.			
	SO: when reference value expires; these records have enduring reference value because they document the dates policy was communicated to physicians, which can have relevance in dispute resolution processes			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41910	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS	A	SA	FD
-06	<b>Fee item business rules</b> (covers the business rules which define how the system will process claims) (includes the request sent to HIBC with criteria and supporting documentation justifying the reason for the rule) (arrange by routine block or reject message)  RETENTION STATEMENT Destroy when a minimum of seven years have passed since the business rule was implemented, to ensure it is available for resolution of claims payment issues, and when no longer needed for research purposes.  SO: when a minimum of seven years have passed since the business rule was implemented, to ensure it is available for resolution of claims payment issues, and when no longer needed for research purposes  NOTE: This secondary is for the final version of the business rules, which are submitted to HIBC to incorporate into the claims payment system. The development, research and evaluation records for business rules are classified under secondary -23. HIBC's copy of the request is classified under -35.	SO	nil	DE
-10	<b>Fee item profiles</b> (covers the profiles of individual fee items, which provide details, descriptions and the business requirements of the fee item) (arrange by payment schedule section)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.  8y: The retention period ensures the records are available for researching fee item history.	CY+7y	nil	DE
-20	<b>Fee item files</b> (includes documentation relating to specific fee items, including the application, pre-review and background documentation, Tariff Committee recommendations, and Medical Services Commission decisions for proposed, approved and amended fee items and payment levels) (arrange by payment schedule section, then by fee item number)	SO  (cont'd)	5y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41910	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS	A	SA	FD
	<p>RETENTION STATEMENT</p> <p>Destroy five years after the fee item application is abandoned/not approved; or if approved, when it is deleted and follow up active items are implemented, and when the fee item history is no longer required to document and support payment schedule fee item decisions made by MSP.</p> <p>SO: when the fee item application is abandoned/not approved; or if approved, when it is deleted and follow up active items are implemented, and when the fee item history is no longer required to document and support payment schedule fee item decisions made by MSP</p>			
-21	<p><b>Fee schedule data</b></p> <p>(covers data on the fee schedule database, which is part of the Claims Processing System)</p> <p>RETENTION STATEMENT</p> <p>Destroy when the data are no longer required for ongoing operational and reference requirements.</p> <p>OPR: HIBC service provider</p> <p>SO: when the data are no longer required for ongoing operational and reference requirements</p> <p>NOTE: All fee-for-services claims are paid based on the <i>Medical Services Commission Payment Schedule</i>, commonly called the fee schedule. These data are foundational to the Claims Processing System; this means that regardless of status, fee schedule data are currently not deleted off of the system.</p>	SO	nil	DE
-23	<p><b>Fee item implementation records</b></p> <p>(covers the working material created while implementing new or amended fee items)</p> <p>(includes correspondence, reports, research material, business rule development, monitoring and evaluation records)</p> <p>RETENTION STATEMENT</p> <p>Destroy eight years after fee item and associated business rules have been implemented and claims processed successfully under it.</p>	SO+3y	5y	DE
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41910	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEMS	A	SA	FD
	<p>SO: when fee item and associated business rules have been implemented and claims processed successfully under it</p> <p>8y: The retention period ensures the records are available for resolution of claims payment issues.</p> <p>NOTE: Do not apply this classification to fee item profiles, business rules or broadcast messages, which are part of the implementation process, but have their own distinct classifications in this primary.</p>			
-30	<p><b>Fee item data</b></p> <p>(covers data on the fee item database, which is managed by the ministry's Payment Schedule Administration team)</p> <p>RETENTION STATEMENT</p> <p>Destroy when the <i>Medical Services Commission Payment Schedule</i> ceases to be the basis for medical service claims, or when the data have been transferred to another system.</p> <p>SO: when the Medical Services Commission Payment Schedule ceases to be the basis for medical service claims, or when the data have been transferred to another system</p>	SO	nil	DE
-35	<p><b>Fee schedule service requests</b></p> <p>(covers requests from the ministry including the fee item profile, restrictions and billable rules)</p> <p>(arrange by year of request, then by fee item number)</p> <p>RETENTION STATEMENT</p> <p>Destroy two years after no longer required to provide evidence of authority to make the fee item changes to the systems, and system documentation value has expired.</p> <p>OPR: HIBC service provider</p> <p>SO: when no longer required to provide evidence of authority to make the fee item changes to the systems, and system documentation value has expired</p>	SO	2y	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 41920 PAYMENT SCHEDULE ADMINISTRATION – FEE ITEM PAYMENT DISPUTES

Records relating to the resolution of disputes between physicians and the ministry over payments of claims. Medical payment claims are based on the *Medical Services Commission Payment Schedule*; however, physicians may request review of claims and payments by the BC Medical Association's (BCMA) Reference Committee if they disagree with payment decisions.

The BCMA Reference Committee reviews these disagreements between the ministry and physicians and makes recommendations to resolve them. Ministry staff corresponds with the Reference Committee as part of this process, and decides whether they will pay the claim as presented by the Reference Committee, or defend their decision not to. The defense of a decision is made as a written report, citing precedence and policy. Documentation and responses are exchanged until the individual issue is resolved.

Also covered in this primary are the ministry's records of the MSC appeal hearings, which are the next step if resolution is not attained with the BCMA.

Record types include Reference Committee recommendations to the ministry, reports, correspondence, and documentation.

For MSC appeals see secondary 40050-25.

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

41920	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEM PAYMENT DISPUTES	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41920	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEM PAYMENT DISPUTES	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-20	<b>Payment dispute files - routine</b> (covers payment disputes which the ministry settles after receiving the Reference Committee's notice of dispute, and are not defended through the Report to the Reference Committee) (includes BCMA recommendations, supporting material, patient history, correspondence and records of settlement) (arrange by case number) (also known as Reference Committee files)  RETENTION STATEMENT Destroy 20 years after payment dispute is resolved.  SO:      when payment dispute is resolved  20y:      The retention period ensures that the records are available for the ministry to research precedent, and support the defense of its decisions.  NOTE: Cases that are defended through the Report to the Reference Committee are classified under secondary -30.	SO+5y	15y	DE
-25	<b>Payment dispute files – reported on</b> (includes reports to the committee, correspondence, supporting documentation and decision documents) (arrange by case number) (also known as Reference Committee files)  RETENTION STATEMENT Destroy 30 years after payment dispute is resolved.  SO:      when payment dispute is resolved  30y:      The retention period ensures that the records are available for the ministry to research precedent, and support the defense of its decisions.	SO+15y	15y	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

41920	PAYMENT SCHEDULE ADMINISTRATION – FEE ITEM	A	SA	FD
-------	--	---	----	----

	NOTE: This secondary covers disputed payment decisions which the ministry defends through the Report to the Reference Committee, and which may set precedent for future claims and payment disputes.			
--	--	--	--	--

PIB	<b>-30 Medical Services Commission payment schedule appeals</b> (includes the file brief prepared for the Commission, supporting documentation, legal advice, a copy of the decision and correspondence) (arrange by appeal subject)	SO	nil	DE
-----	--	----	-----	----

### RETENTION STATEMENT

Destroy when the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved; and when not required for reference.

OPR: Beneficiary and Diagnostic Services

SO: when the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved; and when not required for reference

NOTE: This classification is for the Beneficiary and Diagnostic Services' appeals hearing file. The MSC's hearing files are classified under secondary 40050-25.

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42000 PRACTITIONER ENROLMENT AND SERVICES - GENERAL

Records relating generally to practitioner enrolment services such as enrolment, direct deposit of remittances, payment adjustments and payment assignments.

For issues and studies relating to medical services claim and payment issue, project, and study case files, see secondary 41200-20.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

42000	PRACTITIONER ENROLMENT AND SERVICES - GENERAL	A	SA	FD
All non-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 policy is replaced or becomes irrelevant.				
SO: when policy is replaced or becomes irrelevant				
FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.				
-01	<b>General</b>	CY+1y	nil	DE
RETENTION STATEMENT Destroy at the end of the second calendar year.				
-20	<b>(superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments)</b>			

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42040 PRACTITIONER ENROLMENT AND SERVICES – DIRECT DEPOSIT REQUESTS AND PAYMENT ADJUSTMENTS

Records relating to the management of direct bank deposits for claims payments to practitioners and authorized adjustments to claims payments. This includes written requests and void cheques authorizing direct deposit or changes to direct deposit information (e.g., change of bank) received from practitioners.

This also includes authorized deductions from payments to practitioners ordered by Revenue Canada or the Family Maintenance Enforcement Program (FMEP), as well as other payment adjustments including payment premiums and rural health program payments. Except for Revenue Canada or FMEP deduction authorizations, hardcopy records relating to payment adjustments are retained in the practitioner case files under primary 42080.

Record types include authorizations, correspondence, forms, printouts, and voided cheques.

For direct deposit applications for employee travel claims and vendor payments, see [ARCS secondary 925-06](#).

For the Practitioner Information File database, see the Claims Processing System Information System Overview (ISO).

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

42040	PRACTITIONER ENROLMENT AND SERVICES – DIRECT DEPOSIT REQUESTS AND PAYMENT ADJUSTMENTS	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42040	PRACTITIONER ENROLMENT AND SERVICES – DIRECT DEPOSIT REQUESTS AND PAYMENT ADJUSTMENTS	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>Practitioner direct bank deposit register – paper</b> (secondary closed because paper records haven't been produced since 2010)  RETENTION STATEMENT Destroy at the end of the seventh calendar year.	CY+6y	nil	DE
-03	<b>Practitioner direct bank deposit register – microfiche</b> (secondary closed July 2010, when microfiche stopped)  RETENTION STATEMENT Destroy at the end of the seventh calendar year.	CY+6y	nil	DE
-04	<b>(superseded by special schedule 102901 (<i>Transitory Information</i>))</b>  NOTE: The practitioner direct bank deposit register reports originally covered by this secondary are system-produced reports which list all direct deposits made in the pay period. They are stored as an electronic file on the mainframe, and are routinely “dropped” off the system so that only the last 10 are kept.			
-20	<b>(superseded by 41200-04 Claim and payment reports)</b>			
PIB	-30 <b>Practitioner direct deposit requests - paper</b> (includes Application for Direct Bank Payment or Request for Change to Banking Information forms and void cheques) (arrange by practitioner payment number)  RETENTION STATEMENT Destroy when replaced by new direct deposit request information (keep current plus previous request) or when practitioner is permanently de-enrolled from MSP.  SO: when replaced by new direct deposit request information (keep current plus previous request) or when practitioner is permanently de-enrolled from MSP (i.e., deceased)	SO	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42040	PRACTITIONER ENROLMENT AND SERVICES – DIRECT DEPOSIT REQUESTS AND PAYMENT ADJUSTMENTS	A	SA	FD
	NOTE: Practitioner direct deposit requests are kept in folders, each covering a range of payment numbers. When an individual record is no longer active (the current and previous application are kept as active), it may be removed from the folder and destroyed, upon the authorization of the records officer.			
PIB	<b>-31 Practitioner direct deposit requests - electronic</b> (covers direct deposit requests on MaxImage) (arrange by practitioner payment number)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	8y: The retention period ensures the records are available for resolution of claims payment issues.			
	NOTE: For the paper copy of the direct deposit requests see -30.			
	<b>-40 Third party deduction files</b> (arrange by practitioner name)	SO+1y	nil	DE
	RETENTION STATEMENT Destroy one year after requirements of payment deduction order have been fulfilled and payment deductions are no longer required.			
	SO: when requirements of payment deduction order have been fulfilled and payment deductions are no longer required			
	NOTE: Third party deduction information pertinent to individual practitioners is stored on the CPS Practitioner Information File database. Third party deduction information pertinent to the payment of the deductions is stored on the CPS claims payment file. Adjustments to the third party deductions are updated using the adjustment detail report (41200-04).			
	<b>-41 (superseded by 42060-31 Practitioner Information File (PIF) data)</b>			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42060 PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT

Records relating to the enrolment of physicians and health care practitioners with the Medical Services Plan (MSP) and the assignment of payment and practitioner (billing) numbers that allow them to claim payment for medical services provided to MSP beneficiaries.

Also covers correspondence relating to physicians who want to work within areas of need in British Columbia, or those travelling to expand their expertise in specific areas of practice. Examples of this correspondence would be confirmation of need letters, supporting the immigration of an International Medical Graduate (IMG) to practice under provisional licence in British Columbia (BC); or the provincial letters of support for physicians travelling under a J1 Visa to the United States for a fellowship or training in a sub-specialty.

Record types include applications, authorization forms, correspondence, documentation of eligibility or status, reports, studies, statistics and forms such as Application for MSP Billing Number, Application for Teleplan Services, Assignment of Payments Under the Medical Services Plan (MSP), Application for Additional Payment Number and forms relating to Rural Health programs.

For annual practitioner profile reports, see primary 40940.

For direct bank deposit requests and authorizations, see primary 42040.

For the Practitioner Information File (PIF), see the Claims Processing System Information System Overview.

For Return of Service contracts, see [ARCS primary 1070](#).

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

42060	PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42060	PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Incorporation</b> (secondary closed because there is no evidence of use)			
-03	<b>Mandatory de-enrolment</b> (secondary closed because function is no longer performed)			
-04	<b>Practitioner claim reports</b>	CY+1y	2y	DE
	RETENTION STATEMENT Destroy at the end of the fourth calendar year.			
-05	<b>Practitioner profile change verification</b> (secondary closed because there is no evidence of use. Practitioner profiles are managed in primary 40940)			
PIB	<b>-06 Provincial letters of support or confirmation of need</b> (covers the province's correspondence relating to physicians travelling out of the province for broader experience, or international physicians working in BC to support areas in need of medical services) (includes supporting documentation and correspondence, the letter of support or confirmation, and any attachments) (arrange by health authority, or by practitioner)	FY+2y	5y	DE
	RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
	OPR: Health Workforce Planning and Implementation Branch			
	8y: The retention period ensures that records are retained for the maximum terms and renewal periods of a provisional licence or J1 Visa			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42060	PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT	A	SA	FD
	<b>-07 Practitioner enrolment annual statistics</b>	SO	nil	FR
	RETENTION STATEMENT Transfer to the government archives when no longer required for current operational or reference requirements.  FR: The government archives will fully retain Practitioner enrolment annual statistics because they provide annual statistics on the number of billing numbers MSP issues for each medical specialty.			
PIB	<b>-08 Unprocessed or declined applications for letters of support</b> (covers correspondence relating to physician applications for J1 Visas or applications to practice in BC that do not meet the criteria or are abandoned) (includes supporting documentation and correspondence)  RETENTION STATEMENT Destroy at the end of the second calendar year.  OPR: Health Workforce Planning and Implementation Branch  2y: The retention period ensures that the records are available if the physician comes back for reconsideration.  NOTE: This classification covers unsuccessful applications, usually because the application does not meet the criteria, or is abandoned. If the physician provides extra documentation and meets the criteria, the record relating to that application will be classified under -06.	CY+1y	nil	DE
	<b>-20 Mandatory de-enrolment exemption request and hearing files</b> (secondary is closed because function is no longer performed)  RETENTION STATEMENT Destroy seven years after records are no longer required for operational purposes.	SO+2y	5y	DE
				(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42060	PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT	A	SA	FD
NOTE: This secondary is closed because the province no longer requires mandatory de-enrolment of physicians based on age.				
PIB	<b>-30 Practitioner files</b> (includes recruitment information, licence to practice from the BC College of Physicians and Surgeons, applications, correspondence, forms, incorporation documentation and verification information relating to individual practitioners) (arrange by practitioner number)  RETENTION STATEMENT Destroy seven years after practitioner de-enrols with MSP, or has not billed the MSP in at least eight years.  SO: when practitioner de-enrols with MSP, or has not billed the MSP in at least eight years  7y: The retention period ensures that records are available in the event of a billing dispute, and are available for the reapplication period. A practitioner can de-enrol for one year and then re-apply within seven years without any significant requirements. After eight years, a practitioner must apply for a new payment number.	SO+2y	5y	DE
PIB	<b>-31 Practitioner Information File (PIF) data</b> (covers records held on the Practitioner Information File (PIF) database, which is part of the Claims Processing System)  RETENTION STATEMENT Destroy when data is overwritten by new data.  SO: when data is overwritten by new data  NOTE: A practitioner number is unique to each practitioner and is not reassigned. These numbers and related data are not deleted off the system.	SO	nil	DE

(cont'd)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>42060</b>	<b>PRACTITIONER ENROLMENT AND SERVICES – MEDICAL SERVICES PLAN ENROLMENT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

NOTE: The Practitioner Information File (PIF) database contains data unique to each practitioner including the practitioner number, payment number, practitioner or payee assignments, specialties, data centres, direct deposit banking information and address, payment adjustment information (for Receiver General or Family Maintenance). These data are foundational to the claims processing system; this means that regardless of status, PIF data are currently not deleted off of the system.

---

**-40 (superseded by the Claims Processing System Overview)**

---

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42080 TRAVEL ASSISTANCE PROGRAM

Records relating to the administration of travel cost discounts for eligible Medical Services Plan (MSP) beneficiaries who must travel within the province for non-emergency medical specialist services not available in their own community.

The Travel Assistance Program (TAP) is a corporate partnership between the Ministry of Health and private transportation carriers; the program is coordinated by the Ministry of Health and the transportation partners who agree to waive or discount their regular fees.

Record types include correspondence, reports, and statistics.

For ad hoc reporting from the TAP system see secondary 41200-04.

For audits, see [ARCS primary 975](#).

For correspondence received from beneficiaries, see primary 41340.

For a description of the Travel Assistance Program (TAP) system, see the Information System Overview.

For routine reports of temporary usefulness, see special schedule 102901 (*Transitory Information*).

For tracking of TAP form mail outs, see secondary 41200-10.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

42080	TRAVEL ASSISTANCE PROGRAM	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.				
SO: when policy is replaced or becomes irrelevant				
FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.				

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42080	TRAVEL ASSISTANCE PROGRAM	A	SA	FD
-01	<b>General</b> (covers ad hoc inquiries regarding the TAP program)  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>TAP participating transportation carriers</b> (covers the list published on the website)  RETENTION STATEMENT Destroy when list is updated.  SO:     when list is updated	SO	nil	DE
-03	<b>TAP reports and statistics</b> (covers reports printed from the TAP Report and Analysis database) (also known as “web-based reports”)  RETENTION STATEMENT Destroy when no longer required for analysis purposes.  SO:     when no longer required for analysis purposes  NOTE: Web based reports may be reproduced from the TAP system.	SO	nil	DE
-05	<b>TAP statistical reporting data</b> (electronic record) (covers anonymized data on the TAP Report and Analysis database; the source for “web-based reports”)  RETENTION STATEMENT Destroy when no longer required for trend analysis purposes.  OPR:     HIBC service provider and Beneficiary and Diagnostic Services  SO:     when no longer required for trend analysis purposes	SO	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42080	TRAVEL ASSISTANCE PROGRAM	A	SA	FD
	NOTE: The HIBC service provider manages the database holding the data, and Beneficiary and Diagnostic Services uses the data. Both parties need to be consulted before data are purged.			
	NOTE: See the TAP ISO for system information.			
-20	<b>TAP master data</b> (covers the data in the TAP system, which document TAP applications and approvals/refusals)	CY+2y	nil	DE
	RETENTION STATEMENT Destroy at the end of the third calendar year.			
	OPR: HIBC service provider			
	3y: The retention period provides adequate reference time for the staff who manage approvals for the TAP program. A copy of the TAP master data is semiannually transferred to the TAP report and analysis database, scheduled under -05 TAP statistical reporting data.			
	NOTE: See the TAP ISO for system information.			
-25	<b>TAP approvals</b> (covers the approval and issuance of confirmation number process, and includes denied applications) (includes TAP form, receipts, correspondence)	FY+1y	6y	DE
	RETENTION STATEMENT Destroy at the end of the eighth fiscal year.			
	OPR: HIBC service provider			
	8y: The retention period ensures the records are available for resolution of payment issues and satisfies fiscal and audit obligations.			
-30	<b>(superseded by the Travel Assistance Program (TAP) Information System Overview)</b>			
-35	<b>TAP service verifications</b> (covers research and response to tips and inquiries regarding suspected fraudulent use of the TAP program) (includes tips, background research material, and correspondence)	FY+1y	3y	DE
		(cont'd)		

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>42080</b>	<b>TRAVEL ASSISTANCE PROGRAM</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	----------------------------------	----------	-----------	-----------

---

RETENTION STATEMENT  
Destroy at the end of the fifth fiscal year.

---

END OF PRIMARY

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 6

#### MSP ENROLMENT AND ELIGIBILITY

##### PRIMARY NUMBERS

4 2 6 0 0 – 4 2 9 9 9

Section 6 covers records relating to the enrolment of eligible British Columbia residents with the Medical Services Plan (MSP) in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#). This includes records relating to: applications for enrolment with MSP by individuals or through group plans; determination of eligibility for MSP coverage; premium assistance for eligible beneficiaries; maintaining beneficiary account information; and statistical reporting relating to beneficiaries and MSP coverage.

NOTE: Responsibility for premium billing and temporary premium assistance functions was transferred to the Ministry of Finance September 1, 2002. Before that date, the billing records are interfiled with registration records. Therefore, ongoing records schedules approved for these mixed records will continue to be applied to their retention and disposition. Enrolment records created after September 1, 2002 will be retained and disposed of in accordance with this ORCS.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 6 TABLE OF CONTENTS MSP ENROLMENT AND ELIGIBILITY

42600 - 42999

42600	MSP ENROLMENT AND ELIGIBILITY	- GENERAL
42640	ELIGIBILITY FOR COVERAGE	- GENERAL
42660		- ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS
42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42600 MSP ENROLMENT AND ELIGIBILITY - GENERAL

Records not shown elsewhere in this section which relate generally to the enrolment of eligible British Columbia residents with the Medical Services Plan (MSP) and to issues concerning determination of eligibility, premium assistance, and changes in coverage.

This includes records relating to issues and studies concerning eligibility, plan enrolment, as well as resolving situations pertaining to specific individuals and groups, such as the creation, issuance and management of CareCards; the eligibility of immigrants to Canada to enrol with the MSP; residency requirements and other issues affecting eligibility.

Record types include correspondence, reference materials, forms, reports, statistics, studies and other types of records as indicated under relevant secondaries.

For information system development and enhancements, see [ARCS section 6](#).  
For interactive voice recognition (IVR) system reports, see [ARCS secondary 6820-20](#).

For job control language reports, see [ARCS secondary 6820-20](#).

For the Registration and Premium Billing system, see the Information System Overview.

For system control reports, see [ARCS secondary 6820-20](#).

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

The ministry OPR is Beneficiary and Diagnostic Services/HIBC service provider unless otherwise noted below. See specific secondaries for OPR retention schedules.

42600	MSP ENROLMENT AND ELIGIBILITY - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42600	MSP ENROLMENT AND ELIGIBILITY - GENERAL	A	SA	FD
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy 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 relate to topics that warrant specific classifications.			
-02	<b>Demographic and statistical coverage reports</b> (covers statistical reports from the MSP enrolment system regarding specific criteria or demographics such as CareCards, persons over 65, immigrations, total subscribers etc.) (arrange by type of report) ( also known as management reports or SCI reports) (paper and electronic) (supersedes secondary -03 Registration and Premium Billing system status coverage information statistical reports – electronic)	SO	10y	DE
	RETENTION STATEMENT Destroy 10 years after no longer required for operational and statistical reference purposes.			
	SO: when no longer required for active operational and statistical reference purposes			
	10y: The retention period allows for trend analysis and additional statistical reference			
-03	<b>(superseded by secondary -02 Demographic and statistical coverage reports)</b>			
-04	<b>Financial adjustment reports</b> (covers reports from MSP enrolment system such as account recertification, income verification, financial obligation and premium rate adjustments) (supersedes secondary -05 Registration and premium billing system statistical reports – electronic)	FY+2y	5y	DE
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42600	MSP ENROLMENT AND ELIGIBILITY - GENERAL	A	SA	FD
<p>RETENTION STATEMENT Destroy at the end of the eighth fiscal year.</p> <p>8y: The retention period allows for trend analysis and fiscal accountability.</p> <p>NOTE: Do not use this classification for statements or reports which are used to:</p> <ul style="list-style-type: none"><li>• verify changes made to the system (data integrity),</li><li>• identify data errors on the system which need to be corrected, or</li><li>• cover automated processes of the MSP enrolment system.</li></ul> <p>Classify these reports under ARCS secondary 6820-20 Information system maintenance records.</p>				
-05	(superseded by secondary -04 Financial adjustment reports)			
-07	<b>Enrolment and eligibility correspondence</b> (covers complaints, informal appeals, policy interpretation, and other correspondence that are not subscriber specific and are not covered elsewhere in this ORCS)	CY	7y	DE
<p>RETENTION STATEMENT Destroy at the end of the eighth calendar year.</p> <p>8y: The retention period satisfies operational reference value for the issues documented in this secondary.</p> <p>NOTE: Classify HIBC complaints, correspondence, appeals, cancellation of coverage records and other records which are specific to a subscriber under secondary 42850-42 MSP beneficiary records. Classify ministry records of requests for waiver of wait periods and eligibility reviews under primary 42660.</p>				
-10	<b>Enrolment and eligibility reference materials</b> (covers material collected for reference purposes only and does not include records generated by ministry or HIBC staff) (arrange by topic)	SO	nil	DE
<p>RETENTION STATEMENT Destroy when no longer required for current operational or reference requirements.</p>				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42600	MSP ENROLMENT AND ELIGIBILITY - GENERAL	A	SA	FD
-20	<b>MSP enrolment and eligibility issues, projects and studies</b> (covers issues, projects and studies relating to CareCards, eligibility, enrolment, immigration, and residency) (arrange by topic then issue, project or study) (supersedes secondaries 42640-30 Eligibility issue, project and study case files, and 42850-20 Enrolment issue, project and study case files)  RETENTION STATEMENT Destroy seven years after the issue has been resolved or the information is no longer required for current operational requirements.  SO:      when the issue has been resolved or the information is no longer required for current operational requirements  7y:      The retention period ensures that records are retained for ongoing operational and reference requirements.	SO+2y	5y	DE
-30	(superseded by ARCS 6820-20 Information system maintenance records)			
-31	(superseded by ARCS 6820-20 Information system maintenance records)			
-40	(superseded by Vital Statistics Services ORCS, Schedule 163600, primary 24210 and the Client Registry System ISO)			
-45	(superseded by Vital Statistics Services ORCS, Schedule 163600, primary 24210 and the Client Registry System ISO)			
-50	(superseded by Vital Statistics Services ORCS, Schedule 163600, primary 24210)			
-55	(superseded by Registration and Premium Billing System Information System Overview)			

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42640 ELIGIBILITY FOR COVERAGE - GENERAL

Records not shown elsewhere in this primary block which relate to establishing the eligibility of individuals to enrol for coverage under the Medical Services Plan (MSP). Eligibility for MSP coverage is based on residency requirements described in the [Medicare Protection Act \(RSBC 1996, c. 286\)](#).

This primary also covers records relating to the release of subscriber information to relevant legal authorities, usually to support a legal or criminal issue which has a connection to MSP, such as identity theft. This may be done under consultation with legal counsel.

Record types include correspondence, memoranda, briefing notes and papers, copies of documents related to individuals, legal advice, opinions and decisions, reports, statistics, studies, and other types of records as indicated under relevant secondaries.

For eligibility reviews, hearings, and appeals, see primary 42660.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

42640	ELIGIBILITY FOR COVERAGE - GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
PIB	<b>-04 Release of subscriber information</b> (covers requests from relevant authorities, such as police or ministries, for MSP subscriber information)	CY+1y (cont'd)	5y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>42640</b>	<b>ELIGIBILITY FOR COVERAGE - GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	---	----------	-----------	-----------

---

(includes legal advice, request for information and the authority it is being requested under, copy of records released, and correspondence)  
(arrange by year, then by surname)

### RETENTION STATEMENT

Destroy at the end of the seventh calendar year.

7y: The retention period provides a reasonable period of time for the legal value of these records to be extinguished.

NOTE: See secondary 41340-40, Request for medical history, for beneficiary requests for their own medical history.

---

<b>-20</b>	<b>Legal consultation regarding eligibility for coverage</b> (covers non-case specific legal consultation, opinions and decisions about issues such as BC Services Cards and CareCards, eligibility and immigration, and eligibility and residency) (arrange by issue)	<b>SO+2y</b>	<b>5y</b>	<b>DE</b>
------------	--	--------------	-----------	-----------

### RETENTION STATEMENT

Destroy seven years after the issue is resolved or abandoned.

SO: when the issue is resolved or abandoned

7y: The retention period ensures that records are available for ongoing operational and reference requirements.

NOTE: File case-specific legal advice and opinions with the relevant case file, such as the MSP eligibility review investigations under secondary 42660-40, or the Medical Services Commission beneficiary hearing files under secondary 42660-35.

---

<b>-30</b>	<b>(superseded by secondary 42600-20 MSP enrolment and eligibility issues, projects and studies)</b>
------------	--

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **42660 ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS**

Records relating to the review of beneficiary eligibility for Medical Services Plan (MSP) coverage. This includes records relating to individuals currently enrolled with MSP, individuals who have applied for enrolment, and cancellation of coverage for those who do not meet residency requirements as defined in the [Medicare Protection Act \(RSBC 1996, c. 286\)](#).

The functions documented in this primary span the process of MSP eligibility reviews from an investigation to determine eligibility through to the decision to continue coverage or the cancellation process, including the hearings before the Medical Services Commission (MSC). A review may be identified through various sources, and is investigated to establish the applicant or subscribers eligibility. The Investigation Unit will then make a recommendation for continuation or cancellation of coverage. Should the recommendation be for cancellation, a "21-day letter", formally titled Eligibility for Provincial Health Care Benefits, is sent to the subscriber offering a chance to provide extra information, or to request a hearing before the MSC.

The participants in this process include: the Ministry of Health to facilitate the review process, MSC to authorize cancellation of coverage, and Health Insurance BC (HIBC) to process cancellation of coverage.

Record types include memoranda, notes, legal advice, supporting documentation, file briefs, reports, letters of decision, eligibility review documentation, notification letters and other correspondence sent by MSP to the individual, correspondence received, copies of or excerpts from investigation reports, notes, claims histories, systems reports, and other types of records as indicated under relevant secondaries.

NOTE: HIBC complaints, correspondence, appeals, cancellation of coverage records and other records which are specific to a subscriber will be classified under secondary 42850-42 MSP beneficiary records.

For correspondence regarding complaints or informal appeals, see secondaries 42600-07 and 42850-42.

For information on the Registration and Premium Billing System (R&PB), see the Information System Overview.

For non-case specific legal consultation, opinions, or decisions, see secondary 42640-20.

For records transferred to the Ministry of Finance as of September 1, 2002, see Appendix A.

For the records of the Medical Services Commission (MSC), including hearings, see primary 40050 Medical Services Commission.

The ministry OPR is Beneficiary and Diagnostic Services unless otherwise noted below. See specific secondaries for OPR retention schedules.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42660	ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS	A	SA	FD
	All non-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)  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:     The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.	SO	5y	FR
-01	<b>General</b>  RETENTION STATEMENT Destroy at the end of the second calendar year.	CY+1y	nil	DE
-02	<b>(superseded by secondary 40050-50, MSC Records of Decision)</b>			
-04	<b>Complaints Desk data</b> (covers data within the off the shelf IssueTrak System [ also known as the Complaints Desk] which is used to track the resolution of complaints brought by the Vendor Management Office to HIBC) (electronic records)  RETENTION STATEMENT Destroy when reference and statistical value has expired.  OPR:     HIBC  SO:     when reference and statistical value has expired  NOTE:    This secondary is not for filing. It is used to schedule the data within the system.	SO	nil	DE

[Key to ARCS/ORCS Codes and Acronyms](#)



# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42660	ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS	A	SA	FD
-05	<b>Cursory review database data</b> (electronic records) (covers data within what is also known as the No Case Made Access Database that contains details about the reviews of tips that do not become actual investigations)  RETENTION STATEMENT Destroy when reference and statistical value has expired.  OPR: Investigations Unit  SO: when reference and statistical value has expired  NOTE: This secondary is not for filing. It is used to schedule the data within the system. For the cursory review files, see secondary -50.	SO	nil	DE
-10	<b>Master investigations log</b> (covers a tracking spreadsheet which logs the status and details of all eligibility review investigations, and provides statistical information and charts for MSP investigations reports, classified under secondary - 60)  RETENTION STATEMENT Destroy when no longer required for current operational or reference requirements.  OPR: Investigations Unit	SO	nil	DE
-20	<b>(superseded by secondary 42850-42 MSP beneficiary records)</b>			
-21	<b>(superseded by secondary 42850-64 MSP beneficiary data)</b>			
PIB	<b>-25 Waiver of wait period requests</b> (covers the records of the waiver of wait period panel, which determines whether an individual's waiting period, as defined by the <a href="#">Medicare Protection Act (RSBC 1996, c. 286)</a> , may be waived) (includes correspondence, supporting material and records of decision) (arrange by subscriber surname)  RETENTION STATEMENT Destroy at the end of the eighth calendar year.	CY+2y	5y	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

# OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

<b>42660</b>	<b>ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
	<p>8y: The retention period ensures that records are retained for ongoing operational, financial and reference requirements.</p> <p>NOTE: This secondary does not cover HIBC's records of waiver of wait periods. Those are classified under secondary 42850-42 MSP beneficiary records.</p>			
PIB	<p><b>-30 21-day letter files</b>            (covers the Beneficiary and Diagnostic Services's correspondence with subscribers whose MSP coverage eligibility is in question)            (includes the 21-day letter, report recommendations from the ministry investigator, declaration of nonresidency status, verification correspondence, Commission cancellation letter, and cancellation correspondence)            (arrange by year, then by subscriber surname)            (also known as the Eligibility for Provincial Health Care Benefits letter)</p> <p>RETENTION STATEMENT            Destroy at the end of the seventh calendar year.</p> <p>7y: The retention period ensures that records are retained for ongoing operational and reference requirements.</p> <p>NOTE: If the eligibility review is brought before the MSC, reclassify the relevant 21-day letter to secondary -35, as part of the hearing file.</p>	CY+1y	5y	DE
	<b>-31 (superseded by secondary 42850-42 MSP beneficiary records)</b>			
	<b>-32 (superseded by secondary 42850-64 MSP beneficiary data)</b>			
PIB	<p><b>-35 Medical Services Commission beneficiary hearing files</b>            (includes the file brief prepared for the Commission, the 21-day letter file, a copy of the decision, cancellation letter, a summary of the investigation report which is sent to HIBC, and legal advice)            (arrange by beneficiary)</p>	SO+1y	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42660	ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS	A	SA	FD
-------	---	---	----	----

### RETENTION STATEMENT

Destroy one year after the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved.

SO: when the decision has been made, all parties have taken required actions, and any issues pertaining to the decision are resolved

NOTE: The official hearing file is held with the records of the MSC, classified under secondary 40050-25.

PIB	-40	<b>MSP eligibility review investigations</b>	SO+2y	5y	DE
-----	-----	--	-------	----	----

(includes audit letters, eligibility correspondence, verification correspondence and material collected to determine the residency of the subscriber, the 21- day letter, legal opinions, eligibility case report, notifications for health authorities, hospital calculations, and cancellation letters)  
(arrange by subscriber surname and the last four digits of the PHN)  
(supersedes secondary -42, Eligibility review case files ("working files") – electronic records)

### RETENTION STATEMENT

Destroy seven years after the case is closed, all parties have taken required actions, and issues pertaining to the review are resolved.

OPR: Investigations Unit

SO: when the case is closed, all parties have taken required actions, and issues pertaining to the review are resolved

7y: The retention period ensures that records are retained for ongoing operational and reference requirements.

-41	(superseded by secondary 42850-64 MSP beneficiary data)
-----	---

-42	(superseded by secondaries -40 Eligibility review investigations, and 42850-42 MSP beneficiary records)
-----	---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42660	ELIGIBILITY FOR COVERAGE - ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS	A	SA	FD
PIB	<p><b>-50 Cursory review files</b> (covers cases which do not warrant action, or cannot be investigated to a successful completion and which may apply to more than one person) (includes tips, background research, and reports) (arrange by year, then by surname)</p> <p>RETENTION STATEMENT Destroy at the end of the third calendar year.</p> <p>OPR: Investigations Unit</p> <p>NOTE: The data in the Cursory reviews database, ( also known as the No-Case-Made database), which logs the details of cursory reviews, is classified under secondary -05.</p>	CY+2y	nil	DE
	<p><b>-60 MSP investigation reports</b> (covers monthly, year-end and ad hoc reports, which may use information from the Master investigation log [see secondary - 10] as source material) (arrange by date)</p> <p>RETENTION STATEMENT Destroy when the reports are no longer required for statistical reference and operational planning purposes.</p> <p>OPR: Investigations Unit</p> <p>SO: when the reports are no longer required for statistical reference and operational planning purposes</p> <p>NOTE: This secondary does not cover eligibility case reports, which are classified with the case file under - 40 MSP eligibility review investigations.</p>	SO	nil	DE

END OF PRIMARY

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 42850 ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)

Records relating to the mandatory enrolment of all BC residents with the Medical Services Plan (MSP) in accordance with the *Medicare Protection Amendment Act* (SBC 2000, c. 24).

Includes records documenting the legal evidence of an individual's ongoing eligibility for coverage, and includes coverage, maintenance information, and applications for health and drug coverage from individuals or group plan administrators on behalf of individuals.

NOTE: The MSP enrolment process is carried out by Health Insurance BC (HIBC). Primarily, HIBC processes the applications, account maintenance changes, inquiries, resolution of complaints and informal appeals, and provides policy clarification for BC residents. Formal appeals, waivers of the wait period, and investigations of fraud are carried out by the Ministry of Health, and are classified under primary 42660.

NOTE: HIBC's records repository is MaxImage, which holds verified scanned images of all records received by HIBC. The OPR retentions in this primary will be applied to the images and related metadata in MaxImage.

NOTE: Responsibility for premium billing and temporary premium assistance functions was transferred to the Ministry of Finance on September 1, 2002.

Record types include change notices, forms, correspondence, and other types of records as indicated under relevant secondaries.

For the MSP Direct web site, see [ARCS primary 340](#).

For the Registration and Premium Billing (R&PB) system, see ISO section.

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-02	<b>Closed secondary (was Group billing listings – comfiche)</b>	CY+2y	4y	DE
	RETENTION STATEMENT Destroy at the end of the seventh calendar year.			
	NOTE: This secondary is closed because the function was transferred to the Ministry of Finance.			
-03	<b>Closed secondary (was Group billing listings – electronic)</b> (covers records retained on the R&PB system)	CY+7y	nil	DE
	RETENTION STATEMENT Destroy at the end of the eighth calendar year.			
	NOTE: This secondary is closed because the function was transferred to the Ministry of Finance.			
-04	<b>Appeals inbox correspondence</b> (covers email correspondence in the appeals inboxes, primarily from ministries concerning routine actions such as address searches for adoptions, or re-establishing medical coverage for inmates being released)	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
	NOTE: Classify any complex correspondence or summary investigation reports which come through the Appeals inbox under secondary 42850-42, MSP beneficiary records.			
-20	<b>(superseded by secondary 42600-20 MSP enrolment and eligibility issues, projects and studies)</b>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
-30	<b>Routine MSP beneficiary account changes</b> (covers maintenance changes to beneficiaries accounts, which may be received through MSP Direct, telephone, fax or correspondence) (includes routine change notices which do not require a response, such as applications for addition of family members already in the system, group application changes, Employee Record Cards (ERC's), or the continuation of coverage from employer paid plan) (arrange by personal health number [PHN])  RETENTION STATEMENT Destroy six months after changes have been made in the MSP enrolment system and transaction completed.  SO:      when changes have been made in the MSP enrolment system and transaction completed  NOTE:   Records covered by this secondary were formerly covered by the Medical Services Plan Change Notices <i>ORS</i> , schedule 870788.  NOTE:   See Appendix D for a detailed spreadsheet of MSP forms, document types and <i>ORCS</i> classifications.  NOTE:   The retention period applies to the official file copy. For assistance in identifying the official file copy, see Appendix C. Duplicates of the official file copy, such as paper that has been scanned, may be destroyed under the Special Schedule for Redundant Source Information, schedule 206175.	SO+6m	nil	DE
-31	<b>(superseded by secondary -64 MSP beneficiary data)</b>			
-35	<b>Power of Attorney documentation</b> (includes power of attorney or third party decision maker documentation) (paper and image)  RETENTION STATEMENT Destroy seven years after the power of attorney is no longer in effect.  SO:      when the power of attorney is no longer in effect	SO+7y	nil	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
	<p>NOTE: The program area is in the process of determining whether the image of power of attorney records will be used as the official file copy to meet retention requirements. This decision will be made following completion of the current system transformation project. If the decision is made to retain the paper record as the official file copy, the retention period will be amended at that time to reflect the administrative requirements for managing the paper record.</p> <p>NOTE: This classification is effective as of January 1, 2012. Prior to that date power of attorney records were mixed with a large volume of indivisible records.</p>			
-40	(superseded by secondary -42 MSP beneficiary records)			
-41	(superseded by secondary -42 MSP beneficiary records)			
-42	<p><b>MSP beneficiary records</b></p> <p>(covers MSP enrolment applications of new dependents previously not on the system, new residents, out of province and out of country student coverage, and coverage for unusual circumstances)</p> <p>(includes applications, eligibility documentation and correspondence)</p> <p>(arrange by PHN or account number)</p> <p>(supersedes secondaries 42660-20 Eligibility cancellation/refusal commission case files – paper, 42660-31 Eligibility review, cancellation and refusal correspondence – electronic image, 42660-42 Eligibility review case files (“working files”) – electronic image, 42850-40 Beneficiary and group applications and correspondence – paper and 42850-41 Beneficiary and group applications and correspondence - microfilm)</p> <p>RETENTION STATEMENT</p> <p>Destroy at the end of the eighth calendar year.</p> <p>8y: The retention period provides for operational reference and referral needs.</p>	CY+7y	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
-------	---	---	----	----

NOTE: This secondary includes documents such as:

- applications for coverage,
- addition of new dependents previously not on the system,
- out of province and out of country student coverage documentation,
- power of attorney,
- eligibility documentation (proof of residency),
- eligibility review, cancellation and refusal of applications for enrolment,
- waiver of wait period documentation,
- immigration documents,
- complex correspondence and,
- HIBC's records from the ministry regarding appeals, cancellation of coverage, or waiver of waits

NOTE: File routine beneficiary account maintenance documentation, such as address changes or group enrolment changes under secondary -30 Routine beneficiary account changes.

NOTE: See Appendix D for a detailed spreadsheet of MSP forms, document types and ORCS classifications.

NOTE: The retention period applies to the official file copy. For assistance in identifying the official file copy, see Appendix C. Duplicates of the official file copy, such as paper that has been scanned, may be destroyed under the Special Schedule for Redundant Source Information, schedule 206175.

NOTE: This secondary covers the cancellation of a beneficiary's MSP account because of ineligibility, or because they have moved out of the province. Employee Record Cards (ERC's) have a more routine nature, and are classified under -30 Routine MSP beneficiary account changes.

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
	<p>NOTE: This secondary supersedes the following ongoing records schedules for records created or received after September 1, 2002:</p> <ul style="list-style-type: none"><li>• Purged Correspondence, schedule 880013</li><li>• MSP Subscriber Files (routine), schedule 114207</li><li>• MSP Applications, schedule 870727</li><li>• MSP Subscriber Files (legal), schedule 114205</li></ul> <p>The ongoing records schedules will still apply to all pre-September 1, 2002 records.</p>			
-43	(superseded by secondary -64 MSP beneficiary data)			
-50	<p><b>Applications for health and drug coverage</b></p> <p>(covers all applications for health and drug coverage and any supporting documentation including power of attorney, income tax filed forms, confirmation of earnings and recertification documents)</p> <p>(arrange by date received)</p> <p>(supersedes secondaries -51 Premium assistance applications – microfilm, -52 Premium assistance records, -53 Premium assistance recertification cards, and 70315-20 Income based benefits applications and consents from the PharmaCare Services ORCS, schedule 123389)</p> <p>RETENTION STATEMENT</p> <p>Destroy at the end of the 100th calendar year.</p> <p>100y: This retention period ensures the records are retained for the ongoing audit requirements of the Canada Revenue Agency (CRA).</p> <p>NOTE: The 100 year retention period applies to the official file copy. For assistance in identifying the official file copy, see Appendix C.</p> <p>NOTE: The Application for Health and Drug Coverage (AHDC) form replaced the Medical Services Plan (MSP) Application for Enrolment, the MSP Application for Supplementary Benefits, and the Fair PharmaCare Plan Registration forms. This secondary supersedes secondary 70315-20 Income based benefits applications and consents in the PharmaCare Services ORCS.</p>	CY	99y	DE
-51	(superseded by secondary -50 Applications for health and drug coverage)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
PIB	<b>-52</b> (superseded by secondary -50 Applications for health and drug coverage)			
	<b>-53</b> (superseded by secondary -50 Applications for health and drug coverage)			
	<b>-54</b> (superseded by secondary -64 MSP beneficiary data)			
	<b>-60</b> (superseded by secondary -64 MSP beneficiary data)			
	<b>-61</b> (superseded by secondary -64 MSP beneficiary data)			
PIB	<b>-63</b> <b>Master MSP beneficiary data</b> (covers the core data of a person enrolled with MSP, such as name, gender, account and personal health numbers, current address, and power of attorney information)	SO+7y	NA	NA
<p>RETENTION STATEMENT</p> <p>Migrate the data off the active enrolment system and classify under secondary -65 Archived MSP beneficiary data, seven years after there are no more coverage periods for the account or person.</p> <p>SO: when there are no more coverage periods for the account or person</p> <p>7y: the retention period meets operational requirements</p> <p>NA: When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.</p>				
PIB	<b>-64</b> <b>MSP beneficiary data</b> (covers MSP enrolment system data) (supersedes secondaries 42660-21 Eligibility cancellation/refusal commission case files – electronic, 42660-32 Eligibility review, cancellation and refusal correspondence – electronic, 42660-41 Eligibility review case files (“working files”) – electronic, 42850 -31, Beneficiary and group correspondence not requiring a response – electronic, 42850-43 Beneficiary and group applications and correspondence – electronic, and 42850-54 Premium assistance applications – electronic)	CY+7y	NA	NA

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

42850	ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)	A	SA	FD
<p>RETENTION STATEMENT</p> <p>Migrate the data off the active enrolment system and classify under secondary -65 Archived MSP beneficiary data at the end of the eighth calendar year.</p> <p>8y: the retention period meets operational requirements.</p> <p>NA: When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.</p> <p>NOTE: At the time of this ORCS publication, the system used to process MSP enrolment is the Registration and Premium Billing System (R&amp;PB). There is a system transformation project underway to change the system, but its function, and the types of records it contains, will remain the same and this classification will apply to the data on the new system</p>				
-65	<p><b>Archived MSP beneficiary data</b></p> <p>(covers all beneficiary data that has been migrated off of the active MSP enrolment system)</p> <p>(supersedes secondaries 42850-60 Registration and Premium Billing system purged data - microfiche, 42850-61 Registration and Premium Billing system purged data - electronic)</p> <p>RETENTION STATEMENT</p> <p>Destroy when the beneficiary account is closed, and the information is no longer required for ongoing statistical and reference requirements.</p> <p>OPR: HIBC service provider and the Ministry of Health. At the conclusion of the current business transformation project the OPR will be updated to reflect custodianship agreements for the data.</p> <p>SO: when the beneficiary account is closed, and the information is no longer required for ongoing statistical and reference requirements</p> <p>NOTE: Operational functionality for archived data is being established as part of the business transformation process; the OPR does not signify who will be developing and managing the archive database.</p>	SO	nil	DE

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>42850</b>	<b>ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

NOTE: Active MSP beneficiary data is classified under secondary -64 MSP beneficiary data, and -63 Master MSP beneficiary data.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 7

#### SUPPLEMENTARY BENEFITS PROGRAMS

##### PRIMARY NUMBERS

4 3 0 0 0 – 4 3 0 4 0

Section 7 covers records relating to the development of policies, programs and agreements guiding the provision of supplementary health care benefits to patients in the Province of British Columbia that are paid for by the Medical Services Plan (MSP) in accordance with the [Medicare Protection Act \(RSBC 1996, c. 286\)](#). This includes records relating to: the management of supplementary health care issues and the development of programs relating to supplementary health care; support to the Ministry of Health in its negotiations with the associations and colleges governing supplementary health care practitioners in order to determine funding priorities and payment levels for supplementary health care services; and the provision of support to the special committees responsible for managing supplementary health care policy development, implementation and negotiations.

The Medical Services Plan supplementary benefits program was reduced in January 2002 to cover only dental, surgical podiatry, and optometry services, except for beneficiaries receiving premium assistance.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SECTION 7 TABLE OF CONTENTS SUPPLEMENTARY BENEFITS PROGRAMS

43000 - 43040

43000	SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL
43020	AGREEMENT NEGOTIATION SUPPORT
43040	SUPPLEMENTARY BENEFIT ISSUES MANAGEMENT

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 43000 SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL

Records not shown elsewhere in the supplementary benefits programs section that relate generally to providing support to the Medical Services Plan (MSP) or special committees relating to supplementary health care specialties. This includes records relating to negotiations between the provincial government and representative bodies of practitioners including physiotherapists, dental surgeons and dentists, and occupational therapists. Prior to 2003, The provincial government human resources agency (BCPSA, prior to that Public Service Relations Commission (PSERC), and prior to that GPSD) negotiated the agreements with representatives of practitioner groups. As of 2003, the Ministry of Health has assumed the role of negotiator between the MSC and practitioner governing bodies.

Record types include reports, correspondence, and memoranda.

For audit specific records of the Health Care Practitioners Special Committee for Audit (HCPSCA), see primary 40830.

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

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

43000	SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.

SO: when policy is replaced or becomes irrelevant

5y: The default active and semi-active retention period ensures that the operational requirements of the creating agency are met.

FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

43000	SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL	A	SA	FD
-01	<b>General</b>  RETENTION STATEMENT Destroy 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.	CY+1y	nil	DE
-20	<b>Approved agreements</b> (covers approved agreements which the Medical Service Commission is deemed to be responsible for under the <a href="#">Medicare Protection Act (RSBC 1996, c. 286)</a> ) (arrange in alphabetical order by agreement)  RETENTION STATEMENT Transfer to the government archives when the agreement period has lapsed and the records are no longer required for ongoing operational or reference requirements.  SO: when the agreement period has lapsed and the records are no longer required for ongoing operational or reference requirements  FR: These agreements document the formal relationship between the government and the medical community and the changes in that relationship.	SO	nil	FR
-30	<b>Supplementary benefit committees</b> (covers supplementary benefit special committees and liaison committees) (includes agendas, minutes, correspondence) (arrange in alphabetical order by type and then modality)  RETENTION STATEMENT Destroy seven years after the records are no longer required for current operational and reference requirements.  SO: when the records are no longer required for current operational and reference requirements  7y: This retention ensures the records are retained for ongoing operational and reference requirements.	SO+2y	5y	DE
(cont'd)				

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

43000	SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL	A	SA	FD
	DE: Committee records can be destroyed as the records of decision are documented in secondary 43000-35.			
<b>-35</b>	<b>Supplementary benefit committees records of decision</b> (covers the records of decision) (includes agendas and minutes) (arrange in chronological order by meeting date)	SO+2y	5y	FR
	RETENTION STATEMENT Transfer to the government archives seven years after the records are no longer required to support current decision making.			
	SO: when the records are no longer required to support current decision making			
	7y: This retention ensures the records are retained for ongoing reference requirements.			
	FR: The government archives will fully retain supplementary benefit committees records of decision because they document the decisions of committees who act on behalf of the Medical Service Commission. These records define the relationship between the Government of British Columbia and the representatives of health care practitioners.			
<b>-40</b>	<b>Supplementary Benefit web site</b>	SO	nil	DE
	RETENTION STATEMENT Destroy when the web site is altered, updated or redesigned.			
	SO: when the web site is altered, updated or redesigned			
	DE: As the web site is updated, superseded/obsolete version of documents on it may be destroyed in accordance with approved retention schedules. When the web site is closed, it can be destroyed after relevant schedules have elapsed and/or the documents have been classified elsewhere. Because this is a simple system, an information system overview has not been developed.			

(cont'd)

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>43000</b>	<b>SUPPLEMENTARY BENEFITS PROGRAMS – GENERAL</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

NOTE: This web site provides information to beneficiaries, and health care practitioners on the supplementary benefit services covered by the Medical Service Plan. All documents presented on the web site are classified under appropriate secondaries within this ORCS or in the *Administrative Records Classification System (ARCS)*.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 43020 AGREEMENT NEGOTIATION SUPPORT

Records relating to agreements between the Ministry of Health, special committees, and the association or college representing practitioners who provide supplementary health care services covered by the Medical Services Plan (MSP). MSP is responsible for supporting the negotiation process by providing advisory, administrative and research services to the Ministry of Health and the special committee responsible for each supplemental health service.

Record types include correspondence, briefing material, draft agreements, reviews, and research and reference material relating to negotiations, draft agreements and approved agreements.

NOTE: Records may be physically organized in files, folders, bound booklets or binders for ease of access.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

43020	AGREEMENT NEGOTIATION SUPPORT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.			
	SO: when policy is replaced or becomes irrelevant			
	FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Agreement negotiation support</b> (includes correspondence, draft agreements, reviews relating to agreements and agreement amendments) (arrange in alphabetical order by modality)	SO+5y	5y	DE
	(cont'd)			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>43020</b>	<b>AGREEMENT NEGOTIATION SUPPORT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--------------------------------------	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy 10 years after the records are no longer required to support operational and reference requirements.

SO: when the records are no longer required to support current operational and reference requirements

10y: Records documenting negotiations of previous agreements are required to support future negotiations or arbitrations.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### 43040 SUPPLEMENTARY BENEFIT ISSUES MANAGEMENT

Records relating to issues and studies concerning supplementary health care benefits covered by the Medical Services Plan (MSP) including chiropractic services, dentistry (dental and oral surgery, and orthodontia), massage therapy, naturopathy, optometry, physical therapy and podiatry. This includes records relating to one-time or ongoing projects, strategies and initiatives, including those involving coordination with associations or colleges governing supplementary benefits practitioners.

Record types include briefing material, correspondence, fact sheets, literature and reference material, research papers, reports, statistics, and strategic plans.

For agendas, minutes and records of decision resulting from meetings of special committees, see primary 43000.

For Medical Services Commission *Payment Schedule* fee item history files for specific supplementary benefits, see primary 41910.

The ministry OPR is Organizational Priorities and Workforce Planning unless otherwise noted below. See specific secondaries for OPR retention schedules.

43040	SUPPLEMENTARY BENEFIT ISSUES MANAGEMENT	A	SA	FD
	All non-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 policy is replaced or becomes irrelevant.  SO: when policy is replaced or becomes irrelevant  FR: The government archives will retain all policy and procedures files created by offices having primary responsibility for policy and procedures development and approval. These records have evidential value.			
-01	<b>General</b>	CY+1y	nil	DE
	RETENTION STATEMENT Destroy at the end of the second calendar year.			
-20	<b>Supplementary benefit issue, project and study case files</b> (includes issues, projects and/or studies relating to some or all supplementary benefits) (arrange alphabetically by modality then topic)	SO+2y  (cont'd)	5y	DE

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

<b>43040</b>	<b>SUPPLEMENTARY BENEFIT ISSUES MANAGEMENT</b>	<b>A</b>	<b>SA</b>	<b>FD</b>
--------------	--	----------	-----------	-----------

---

### RETENTION STATEMENT

Destroy seven years after information is no longer required to support current operational requirements.

SO: when information is no longer required to support current operational requirements

7y: This retention ensures the records are retained for ongoing operational and reference requirements.

---

END OF PRIMARY

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### MEDICAL SERVICES PLAN

#### OPERATIONAL RECORDS CLASSIFICATION SYSTEM (ORCS)

### SYSTEMS SECTION TABLE OF CONTENTS

<u>SECTION AND TITLE</u>	<u>PAGE NO.</u>
ALTERNATIVE PAYMENT PROGRAM CLAIMS SYSTEM (APPCS)	2
CLAIMS PROCESSING SYSTEM (CPS)	6
CURSORY REVIEW DATABASE	11
FEE ITEMS DATABASE	13
HIBC COMPLAINTS DESK TRACKING SYSTEM	15
MAXIMAGE SYSTEM (MAXIMAGE)	17
MAXPATH	21
PRACTITIONER PROFILE SYSTEM (PPS)	23
REGISTRATION AND PREMIUM BILLING SYSTEM (R&PB SYSTEM)	26
RURAL HEALTH PROGRAMS DATABASES	32
TRAVEL ASSISTANCE PROGRAM (TAP) SYSTEM	34
VERIFICATION GROUP AUDIT SYSTEM (VEGAS)	36



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### SYSTEM SECTION

#### ALTERNATIVE PAYMENT PROGRAM CLAIMS SYSTEM (APPCS)

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health  
Medical and Pharmaceutical Services  
Alternative Incentive Programs  
Alternative Payments Program

##### **Date of System Description**

2005-02-21

##### **Purpose**

The APPCS is used to verify and reconcile the claims for payment made by agencies and health authorities to the alternative payment program as a result of funding agreements. The system also links with the Practitioner Information File (PIF) (primarily used by Medical Services Plan Claims Branch) for verification of practitioner eligibility for Northern Isolation Allowance (NIA), geographic differential fee premium (GDPF), and provision of practitioner data used to calculate sessional rates; and with the Ministry of Finance Corporate Accounting System (CAS) for payment of claims.

##### **Information Content**

The system contains information related to the financial accounting and commitment controls used to pay agencies funded by the program. This includes:

1. Payment and identification information: practitioner numbers, payee numbers (the number assigned to an individual, clinic, or agency for payment purposes), agency identification (identifying number, address, contact), site identification (information relating to a specific location such as a cancer clinic within a hospital), percentages practitioners are to be paid (for NIA), and approval data for individual agencies;
2. Funding allocation specifics: funding allocations for each agency and/or practitioner, funding allocations for specific programs within an agency (i.e. allocation for critical care, surgery), service agreement specifics (the funding allocations to be paid under a specific service agreement); and
3. Commitment control: expenditures paid out to individual agencies to cover the services provided by practitioners within that agency for each program, total expenditure paid to individual agencies (cumulative total).

##### **Inputs, Processes, and Outputs**

The funded agency submits an alternative payment sessional claim for reimbursement of shareable expenditure form (HLTH 1741 and HLTH 1741B or equivalent) and the physician's certificate of services form (HLTH 1733), which documents the physician's hours. The certificate of service provides the physician's name, number, sessional rate, the agency name and number, the facility/site name and number, the program name and number, the control name and number and the sub-control name and number, and the dates of services, time worked (from and to), the amount billed and the GDPR/NIA.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

The APPCS links with the PIF to verify eligibility for NIA and GDPR and the allowance amount or percentage, then automatically enters the payment value. All of this information is verified on the agency's claim form, which is filed by physician surname separate from the agency claim documentation.

The salaried claim form provides the agency name and number, the facility/site name and number, the program name and number, the control name and number, and the subcontrol name and number, the period the claim is being made for, the doctor's number and name, the time worked, the annual full-time equivalent salary rate, the monthly salary, the percentage of time shareable by the Alternative Payment Branch, the amount of the claim and an explanation (identification of any issue that causes a specific claim to be out of the ordinary, such as the claim date is only a part of a month).

The data is entered onto the system. At this point, the status of the claim is defined as pending (P). Once a remittance number is assigned to the claim by the system, the claim becomes approved (A). When a cheque requisition is issued for the claim via the Corporate Accounting System (CAS) to the Office of the Comptroller General (OCG) by the Ministry of Health financial services the status of the claim is updated to finance (F). At this time the system assigns a document number to the claim. This number is sequentially assigned and is used to organize the claims on file. When the CAS daily transaction detail report is printed (weekly) identifying the document number, vendor name, payment number, payment date and transaction amount, the cheque data is manually entered onto the system and the claim status is upgraded to complete (C). The cheque number is written onto the paper claim that is then filed by document number.

A monthly cheque register is printed off to verify that each claim document number has a cheque issued and each cheque links with a claim document number. The cheque register includes payee number, payee/agency, cheque number, document number, cheque date, cheque code, replaces cheque number, replaced by cheque number, and cheque amount.

Summary displays may be printed off in a report format. Other system reports include:

1. Cross reference reporting: agency listing, program list, practitioner list, payee list, programs by agency, practitioners by program, programs by practitioner cross reference, payee numbers by agency/program/practitioner, sessional commitment categories by agency/program, rate table report, code list table report, agency/site cross reference, site/agency cross reference;
2. Standard reporting: cashflow control by agency/program, practitioner payments by program, salaried/sessional/contract/subsidy listing, payments to physicians, agency cheque register, monthly and fiscal year cheque register, payee/agency mailing labels, agency commitment approval, expenditure vs. commitment statement; and
3. Supplementary reporting: APS registrations due for renewal, detailed funding allocation statement, summary funding allocation statement, active service agreements report, expiring service agreements, APB (Alternative Payments Branch) financial statement, commitment forecast, retroactive adjustments, overlapping service periods by practitioner, pending claims report.
4. Additional Reports through the Online Information System: APB agency list, APB sites, APB program list, APB control level list, APB sub-control level list, monthly cheque

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

register, unpaid claims, claim throughput reports, draft expenditure forecast report, draft session forecast report, payments by agency, program and practitioner, fee for service payments for practitioner and payee, fee for service payments for practitioner and fee item, commitments, sessions entered vs. commitments, on-call hours entered vs. commitments report, APB practitioners with FFS payments.

Data from the APPC system is downloaded nightly to the Health Data Warehouse and is available the next day for reporting extracts from that system.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### **ALTERNATIVE PAYMENT PROGRAM CLAIMS SYSTEM (APPCS)**

#### **DATA RETENTION PLAN**

<b>Data Description</b>	<b>Data Retention Period</b>
Alternative payment records - electronic Classification 40780-06	Destroy when the information is no longer required for operational and reference requirements.
Alternative payment – certificate of service forms – electronic Classification 40780-21	Destroy when no longer required for operational and reference requirements.
Alternative payments processing and verification reports and statements - electronic Classification 40780-31	Destroy when the records are no longer required for operational, reference, or audit requirements.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### CLAIMS PROCESSING SYSTEM (CPS)

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health  
HIBC service provider

##### **Date of System Description**

2014-04-10

##### **Purpose**

The CPS supports the receipt, adjudication, processing and payment of claims made by physicians and health care practitioners for medical services provided to Medical Services Plan (MSP) beneficiaries.

##### **Information Content**

The CPS processes and pays claims submitted by medical practitioners. The CPS contains all data pertinent to individual claims, including beneficiary information, practitioner information, payment details, and billing rules. Within CPS there are a number of databases and data files containing information contributing to the claims process. These include:

- The Practitioner Information File database, which holds practitioner information such as payment details, specialties, and service information. This data provides a filter for verifying claim details.
- The Fee Schedule database, which holds descriptions, details and monetary values for each service (fee item) MSP pays for. This supports the business rules applied to the claims.
- The Patient History File, which holds details related to medical services beneficiaries (patients) have received. The data is linked to a person's Personal Health Number (PHN) and contains personal information, medical procedures provided and explanatory notes. The patient history data is held in three streams:
  - the Adjudication History File, which is used for processing current claims
  - Third Party History, which holds an ongoing "7 year history file" of filtered data, and includes the third party history requests which tracks requests for patients' claim history, and
  - the Patient History File database (on the MAXPatH system - see the MAXPaTH ISO)
- The Insurance Corporation of British Columbia (ICBC)/WorksafeBC cumulative holding claim files, which are holding places containing claim data for claims that are being preauthorized / refused as an ICBC or WorksafeBC claim.
- The Claims Payment File which holds two "files"; the Payment Detail File, containing the original submission, subsequent adjustments, and necessary details to make payment such as practitioner numbers and details, explanatory codes and other claim details; and the Payment Summary data, which documents payment information such as method of payment, to whom the payments goes to, and amounts and adjustments made.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### Inputs, Processes, and Outputs

The Claims Processing System automates the claims process. Claims are primarily received through a website interface called the Teleplan web portal. Through Teleplan the practitioner, hospital or service provider can submit claims, retrieve remittance statements for claims that have been processed, view refused claims and check eligibility of patients prior to submitting a claim. This data is stored in a database called Telemax. Claims received in hard copy are manually entered into CPS.

The first phase a claim will go through is the pre-edit phase – which is an automated pass/fail syntax checking process. If the claim details pass through pre-edit it will move to the edit and eligibility phase. Edit and eligibility validates the claim details to determine whether the claim will be eligibilized, rejected or refused. In this phase the system accesses the enrolment system to determine patient eligibility; and accesses the practitioner information database and fee schedule database to verify the practitioner and fee item data for the date of service on the claim.

If refused through any part of this review phase, the claim is returned to the Teleplan portal for the physician to retrieve and modify details for resubmission. If it is rejected it goes to the Claims in Process database. If it passes through the edit and eligibility checks, it can then proceed through to the semi-monthly adjudication process, or to the ICBC/WorksafeBC or Primary Health Care processes.

The exception to this process is claims related to out-of-province medical care, which are manually received and processed. After the initial review and approval, the data are entered onto the Out-of-Country table in the Claims In Process database, and biweekly the data are transferred from the out-of-country table to edit and eligibility.

If a claim is indicated as being an ICBC/WorksafeBC claim, it moves to a cumulative holding place while relevant claim details are sent to the third party for verification and pre-authorization. The claim is returned to CPS from the agency with pre-authorization or refusal instructions. The refused claim is returned to the Teleplan portal for the physician to retrieve and modify details for resubmission, and the pre-authorized claim is sent to the semi-monthly adjudication process.

The semi-monthly adjudication process considers the Adjudication History File data to apply fee-item-specific business rules to the claims to determine whether the claims will be paid, refused or rejected (and sent to manual adjudication). New claim data are added to the Adjudication History File. Claims are further examined for possible adjustments to the claim payment, such as checks for daily/annual billing limits placed upon practitioners or fiscal billing limits for laboratory services. If a claim is rejected at any step in this process the claim is loaded into the CIPS database for closer consideration.

Rejected claims from the automated phases are moved to the Claims in Process (CIPS) database. CIPS holds the claims and cycles them through the artificial intelligence business rules (AION), then if required, to adjudicators for manual processing. Once they are actioned they are returned to adjudication for re-processing. The last phase in CPS is payment processing, where the final calculations and adjustments are applied.

The claims payment process occurs semi-monthly; payment remittance data are transmitted to Teleplan for the practitioners who submitted their claims electronically, payment data for claims received in hard copy are produced on a remittance statement that is mailed to the practitioner. Payment details are forwarded electronically via the Corporate Accounting System (CAS) to the Ministry of Finance for payment, either by producing and mailing cheques or direct deposit.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

During the payment process, data regarding payments are automatically added to the Practitioner Information database. Data files of approved and refused claim data, and related practitioner and fee item information are created and sent to ICBC, WorksafeBC, reciprocal provinces, and the Office of the Superintendent of Motor Vehicles. Claims, practitioner and fee item data are sent to the Ministry of Health's AHIP data warehouse for research purposes; the payment data are kept in the payment file for 7 years for follow-up and reference purposes; the original claim from the pre-edit process, out-of-country and remittance data are transferred to CD and loaded on standalone computers for reference purposes for adjudicators.

### Historical Note

*This system overview supersedes the following Information Overviews for Subsystems: Master Claims database (MCDB), Claims Payment File, ICBC/WCB Billing file, Patient History File, Master Practitioner Information File database (MPIF), and Teleplan database (Teleplan), and the Fee Schedule database.*

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### CLAIMS PROCESSING SYSTEM (CPS)

#### DATA RETENTION PLAN

Data Description	Data Retention Period
In-province claim card/form data batches Classification 41340-06	Destroy when data verification phase is complete.
Beneficiary-specific claim related records Classification 41340-20	Destroy at the end of the eighth calendar year.
Adjudication patient history file data Classification 41340-21	Destroy at the end of 18 months.
Out-of-province claim data Classification 41520-21	Destroy when operational usefulness has expired, and in accordance with approved business rules.
Medical services claims remittance statements – system data Classification 41580-12	Destroy when operational values expire.
Claim payment details - data Classification 41580-40	Destroy at the end of the eighth calendar year.
Claims Processing System claim notes – data Classification 41580-50	Destroy when operational usefulness expires.
Primary Health Care (PHC) registration data Classification 41580-60	Destroy when the patient is no longer registered and trend analysis value has expired.
Fee schedule data Classification 41910-21	Destroy when the data are no longer required for ongoing operational and reference requirements.

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

Data Description	Data Retention Period
Practitioner Information File (PIF) data Classification 42060-31	Destroy when data is overwritten by new data.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

### CURSORY REVIEW DATABASE

#### SYSTEM OVERVIEW

**Creating Agency**

Ministry of Health  
Investigations Unit

**Purpose**

This Access database, commonly called the No-Case- Made database, logs details about the cursory reviews of tips regarding suspected eligibility fraud that don't become actual investigations. The database is used for statistical and tracking purposes.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### CURSORY REVIEW DATABASE

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Cursory review database data Classification 42660-05	Destroy when reference and statistical value has expired.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

### **FEE ITEMS DATABASE**

#### **SYSTEM OVERVIEW**

##### **Creating Agency**

Ministry of Health

Payment Schedule Administration, Medical Services Branch

##### **Purpose**

This Access database is used to track details regarding the Medical Services Commission Payment Schedule fee items. Data includes fee item details such as fee item codes, names, monetary value and other fee item information.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### FEE ITEMS DATABASE

### DATA RETENTION PLAN

Data Description	Data Retention Period
Fee item data Classification 41910-30	Destroy when the <i>Medical Services Commission Payment Schedule</i> ceases to be the basis for medical service claims, or when the data have been transferred to another system.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### HIBC COMPLAINTS DESK TRACKING SYSTEM

#### SYSTEM OVERVIEW

**Creating Agency**

Ministry of Health  
HIBC, Appeals Unit

**Purpose**

This tracking system is used to log issues raised by the Business Management Office to HIBC. This simple system assigns a ticket number to each issue, which it then uses to track the resolution of the issue, and produces simple reports.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### HIBC COMPLAINTS DESK TRACKING SYSTEM

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Complaints Desk data Classification 42660-04	Destroy when reference and statistical value has expired.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **MAXIMAGE SYSTEM (MAXIMAGE)**

#### **SYSTEM OVERVIEW**

##### **Creating Agency**

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

##### **Date of System Description**

2014-04-10

##### **Purpose**

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, the MSP Claims Processing System 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 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 are stored in the RDBMS. Oracle also manages indexing, which allows for searching and retrieval of documents based on data that have 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

---

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

that can be automatically detected by the scanning process to open the same virtual envelope that was 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, MSP Claims Processing System or MSP enrolment system (currently 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 cover sheet, 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 cover sheets 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 highresolution 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 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 Medical Services Plan related records. However, MaxImage also encompasses records relating to PharmaCare services. For these records, see the MaxImage System Overview in the PharmaCare Services ORCS, schedule 123389.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### **MAXIMAGE SYSTEM (MAXIMAGE)**

#### **DATA RETENTION PLAN**

<b>Data Description</b>	<b>Data Retention Period</b>
Court ordered requests for medical history Classification 41340-02	Destroy at the end of the seventh calendar year.
In-province claim cards/forms Classification 41340-04	Destroy at the end of the eighth calendar year.
Beneficiary-specific claim related records Classification 41340-20	Destroy at the end of the eighth calendar year.
Practitioner inquiries - non-PHN-specific or multiple beneficiary Classification 41340-30	Destroy upon response to inquiry or resolution of any issues resulting from inquiry.
Cosmetic and dental service requests Classification 41450-20	Destroy at the end of the 11th calendar year.
Orthodontics service approvals Classification 41450-30	Destroy seven years after beneficiary's 25th birthday, when services will no longer be covered by MSP or the BC Dental Association.
Regular out-of-province claims Classification 41520-20	Destroy at the end of the eighth calendar year.
Pay patient claims payment processing records Classification 41580-27	Destroy at the end of the eighth calendar year.
Practitioner direct deposit requests - electronic Classification 42040-31	Destroy at the end of the eighth calendar year.

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

Data Description	Data Retention Period
Routine MSP beneficiary account changes Classification 42850-30	Destroy six months after changes have been made in the MSP enrolment system and transaction completed.
Power of Attorney documentation Classification 42850-35	Destroy seven years after the power of attorney is no longer in effect.
MSP beneficiary records Classification 42850-42	Destroy at the end of the eighth calendar year.
Applications for health and drug coverage Classification 42850-50	Destroy at the end of the 100 <sup>th</sup> 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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### MAXPATH

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health  
HIBC service provider

##### **Date of System Description**

2014-04-10

##### **Purpose**

The MAXPatH system, formerly called the Patient History File database, is a stand-alone application that provides online access to 8 years (7 previous plus the current year) of patient claim history data. It is used by operational staff to adjudicate claims, supply answers to submitting parties regarding the payment or refusal of specific claims, and conduct claim-related investigations.

##### **Information Content**

The MAXPatH database contains: patient name, patient personal health number (PHN), the treatment provided and the corresponding payment schedule fee item number, explanatory codes, date of service, explanatory notes, whether the claim was approved for payment, rejected or refused, etc. The content is a subset of the original claim data in the claims processing system.

##### **Inputs, Processes, and Outputs**

On a semi-monthly basis, MAXPatH receives history data files from the adjudication phase of the claims processing system with instructions to delete, update or insert records into the database. This update database activity occurs outside of the normal business hours to ensure timely data availability during the business day.

Online query access to the history information for a specific patient requires the patient's PHN and a date of service range. Data can be viewed only (not updated). A printout of the viewed data can be sent to a local printer of the user's choice.

On an annual calendar year basis, patient history records that are older than 7 years are deleted from the MAXPatH database (classified under secondary 41340-41 Third party requests for medical history data).

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### MAXPATH

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Beneficiary-specific claim related records Classification 41340-20	Destroy at the end of the eighth calendar year.
Patient history file master beneficiary data Classification 41340-26	Destroy when the beneficiary is no longer enrolled with MSP, and when the data are no longer required to support the claims processing system.
Third party requests for medical history - data Classification 41340-41	Destroy at the end of the eighth 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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **PRACTITIONER PROFILE SYSTEM (PPS)**

#### **SYSTEM OVERVIEW**

##### **Creating Agency**

Ministry of Health  
Strategic Initiatives and Corporate Services  
Finance and Decision Support  
MSP Decision Support  
Billing Integrity Program

##### **Date of System Description**

2005-02-21

##### **Purpose**

PPS supports the monitoring functions of the Billing Integrity Program. It is a collection of programs and databases employed to create annual Practitioner Profile reports. The Practitioner Profile provides an overview of the practitioner's paid claims for services provided personally, and for claims submitted by other practitioners as a result of referrals. It is a summary of the patients, services, and costs associated with a practitioner in a calendar year and compares practice-specific data with group average data for the peer group. These comparisons show if the practitioner's pattern of practice is or is not within statistical norms for his/her peer group.

##### **Information Content**

PPS uses fee-for-service data taken from the Claims Processing System. It also uses payment data provided by the Alternative Payments Program.

##### **Inputs, Processes, and Outputs**

The main data source for PPS is fee-for-service claims processed by the Claims Processing System for services in the previous calendar year. Included in the data are claims paid under the MSP budget as well as claims paid by MSP on behalf of the Insurance Corporation of BC (ICBC) and the Workers Compensation board (WCB). Payment data is also provided by the Alternative Payments Program, which funds physicians for salaried payments, sessional payments and service agreements. The MSP input data to the profile reports are all payments up to March 31 of the current year for claims made with a date of service within the previous calendar year (practitioners have 90 days to submit a claim for payment after providing a service).

PPS is run after May to produce the profile reports for the previous calendar year. It groups practitioners into peer groups (for example, by medical specialty), and compares statistics of the peer group to individual practitioners' billing patterns and identifies anomalies. PPS makes adjustments to claims and alternative payments input data (for example, deleting billing reversals or balancing fee item levels) and creates a unique profiles database. The information on the database is then summarized for each practitioner. Practitioners whose statistics are outside normal bounds are flagged.

PPS is a "manually run" system, in that the data must be reviewed and reporting parameters adjusted throughout the annual reporting process in order to produce the required information. Annual profiles take several weeks of data input, data review, and adjustment before the final reports are produced.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

Practitioner profiles are produced on an annual basis. There are four versions:

- Regular annual profiles
- Split profiles (ICBC+WCB and MSP+ICBC+WCB)
- Ranking Run Profile
- Group Average Profile

Profile data in computable form is transferred to compact disks that are sent to the BC Medical Association (BCMA) and to the associations or colleges that govern supplementary health care providers. Data must be sent to the BCMA by the end of May each year to avoid financial penalty.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### PRACTITIONER PROFILE SYSTEM (PPS)

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Annual practitioner profile reports - electronic Classification 40940-21	Destroy when data is no longer required to support decisions or actions based on practitioner profile report.

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 [System Section FAQ](#).

END OF OVERVIEW



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### **REGISTRATION AND PREMIUM BILLING SYSTEM (R&PB SYSTEM)**

#### **SYSTEM OVERVIEW**

##### **Creating Agency**

Ministry of Health  
Strategic Initiatives and Corporate Services  
Health Benefits Operations  
MSP Operations

##### **Date of System Description**

2014-04-10

##### **Purpose**

The purpose of the Registration and Premium Billing system (R&PB system) is to document eligibility for coverage under the Medical Services Plan (MSP) and the review of that eligibility, to enroll eligible residents for coverage and to track eligible residents who have short term coverage. The system:

- collects information which will determine the premium a subscriber will pay;
- administers premium assistance programs;
- produces bills for distribution to subscribers and Group Administrators for premium payments;
- generates correspondence to clients;
- assists the Ministry of Finance in accounts maintenance for delinquent accounts;
- produces CareCards; and collect fees for replacement CareCards;
- de-enrols non-residents;
- gathers and disseminates information to other databases (Provincial, Federal, Employer Groups, IBM);
- produces electronic billing for Employer Groups;
- facilitates the collection of subscriber premiums by electronic means (internet/telephone banking, Pre-Authorized debits); and
- collects information from other databases (Provincial)

##### **Information Content**

The R&PB system is composed of three data structures (databases). The Person Database contains demographic data on an individual covered under MSP whether the individual is a subscriber (on a self-pay or a Group account) or a dependent. The demographic information includes date of birth, Personal Health Number (PHN), CareCards issued (including replacement cards), coverage status, residency documentation, and out of province status. The Group Database contains data identifying the Group Administrator, billing information for the individual Groups (including the names of individuals covered by each Group), and names and addresses of the Group Administrators. The Contract Database identifies the coverage information and all recorded addresses (past and present) linked to each account whether the contract is with an individual or a Group. The Contract database for self-pay accounts contains billing specifics (amounts owing and paid), and premium coverage data (reduced premium amount for individual subscribers or individuals within a Group).

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### Inputs, Processes, and Outputs

Data is entered into the system in the registration process. Subscribers and employers submit registration correspondence, applications and payments and this information is stored on the Person, Group and Contract databases. The information is entered by beneficiary services staff from mailed in registrations; Employer Groups via the Ministry's MSP Direct web application; and the Ministry of Social Development who register their clients for coverage by interface and by Government Agent offices.

The registration process generates correspondence (confirmation of coverage letter) that is distributed to subscribers advising them of the status of their contract including date of coverage, premium amount, and dependent information. The registration process also calls existing data from the system, such as a previous name and PHN.

Client services representatives update the R&PB system databases via online transactions. These data inputs are also written to the daily TRAP (Transaction Processing) file, which is a data capture mechanism. TRAP is one of the many significant data processing jobs used by MSP Operations. Others include Group Billing, Pay-Direct Billing, Overage processing, automatic cancellations and enrollments, statistical reporting and interfaces between agencies internal and external to the Ministry of Health. The TRAP batch job initiates the nightly computer schedule and, in addition to gathering online updates, is used throughout and between the nightly batch jobs for contingency purposes. Subsequent jobs in the schedule include internal processes to enroll or cancel contracts, update premium rates, bill contracts, post payments, and issue CareCards as well as input/output to external agencies. The jobs also initiate the production of correspondence including: confirmation of coverage letters, premium assistance application letters, premium assistance verification letters, letters confirming limited-term coverage to subscribers holding temporary immigration status and paid-to-date letters.

After initial registration, any changes required to a contract are made through the registration maintenance process. This process receives change notices, recertification information, requests for regular or temporary premium assistance, and overage letter correspondence, and requests for enrollments or cancellations from subscribers and Group Administrators. These requests for changes are updated to the Person, Group and Contract databases via online transactions. Any changes to account size (i.e., enrolment or cancellation of persons) or the application of premium assistance or temporary premium assistance which alter the account balances are written to the Contract Database and will be reflected in subsequent billings.

All individuals covered by the Medical Services Plan (MSP) are issued a CareCard. The CareCard identifies the individual's full name, PHN, and their date of birth. CareCards are generated by the registration of new persons, name changes and by request. A hospital, medical clinic or other practitioner who will be providing a service to the individual will link to the R&PB system via the Provider Services Teleplan interface to confirm that the individual receiving the care is registered and covered by MSP. The data linked to CareCards is stored in the Person and CareCard databases. If an individual loses, or damages their card or if the card is stolen, they can request a replacement. Replacement card requests are stored in the CareCard database. Where payment is required for the replacement of a card, the request is also stored in the CareCard database. Receipt of the payment triggers the issuance of the card. The record is then passed to IBM, which produces CareCards on behalf of MSP.

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

When a dependent child approaches their 19th birthday, the overage process generates correspondence to the subscriber advising them that the dependent may only continue to be covered on the subscriber's contract if the dependent is a full time student and then only until the age of 25. The subscriber is advised to respond if the dependent intends to continue studying. They must specify the name of the educational institute and the duration of studies. At the same time the letter is generated, the dependent's coverage is cancelled and they are enrolled on a new account. If the subscriber responds to the letter, the dependent's new account is cancelled and they are re-enrolled on the subscriber's account with a pre-set cancel date which represents the expected end of studies. Subsequently, at the end of studies or when the dependent reaches 25, they will again be cancelled from the subscriber's account and enrolled independently.

On a regular basis, the Billing systems examine all Pay-Direct accounts and Group contracts for their accounts status. Unless there is sufficient credit on account to meet the premium for the next billing month, the account / contract will be billed. There are three types of bills:

- Initial Bills, run twice weekly, which create first bills for new (and renewed) Pay-Direct Accounts;
- Regular Bills, run monthly and during the first two weeks of the month, which generate all subsequent bills for Pay-Direct Accounts; and
- Group Bills, run monthly on or about the 20th day, which generate bills to third party administrators, typically client employers. There is no separate billing process for new Group Contracts.

Initial Bills and regular Pay-Direct Bills are only written to paper. The functions of Initial and Regular Billing are to:

- Walk the databases and gather billable accounts
- Identify account balances, debit and credit activity
- Update Bill Codes
- Write Bill Histories to the Pay-Direct Accounts
- Update the databases
- Create bills

Pay-Direct clients may elect to pay their accounts on a monthly, quarterly, semi-annual or annual basis, with their only obligation being to remit sufficient funds to meet their premiums for the current bill month. These clients may remit by mail, bank (counter payments), through Government Agent offices, by internet/telephone banking or by pre-authorized debits. The billing process also identifies delinquent accounts. The billing process will produce three bills. If no response is received from the subscriber by the due date of the third bill, the account becomes delinquent and is written to a file, which is then passed to the Ministry of Finance for collection of premiums.

Group Bills may be written to paper, electronic cartridge, or electronic file for pick-up by the Group Administrators. Additionally, all Group Billing data is written to microfiche. The functions of Group Billing are to:

- Walk the databases and gather billable accounts
- Identify account balances, debit and credit activity
- Update Bill Codes
- Write Bill Histories to the Group Contracts

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

- Update the databases
- Create bills
- Create fiche

Group accounts are billed on a monthly basis, with no option to pre-pay. Group Administrators may remit by mail, bank (counter payments), through Government Agent offices or by internet/telephone banking. Delinquent Group accounts are manually tracked.

Premiums are directed to the Ministry of Finance (FIN). After reconciling the amounts paid, FIN forwards payment data files to MSP for input to the Contract and Group databases. If there are any errors in the payment information (e.g. incorrect or missing account number, mismatched or missing surname) or if the contract has not been established for a new subscriber, the data is stored on the suspense pay direct file (individual subscribers) or the Group Suspense Cash file (Group) until the account number can be located and the payment is posted.

The system also generates automatic refunds for overpaid or unused premiums. The Cash Processing System then generates refund cheques to the subscriber or Group Administrator.

Data pertaining to individuals who received medical services is verified by the Provider Services Claims Processing System (CPS). The R&PB system verifies edit/eligibility data (see the CPS ISO), remittance and pay patient data, practitioner premium deductions, transfer/re-enrollment/re-instatement data, and responses to adhoc inquiries.

The R&PB system generates management reports which are provided to the staff of the Beneficiary Services Branch and the Ministry of Finance. These reports are used to monitor and audit the functions of the system, input statistical analysis and identify errors which place the databases at risk.

In order to ensure the integrity of the large data structure, the System Control process ensures that data changes are balanced. For example, it identifies the number of new subscribers enrolled with MSP during a 24-hour period. It must also then identify that a similar number of new contracts were created. This process is run using the System Control Database which obtains the data from the batch data processing. This ensures the integrity of the system. The System Control process produces reconciliation reports which identify the balanced changes to the system. The process also produces reports which identify imbalances in the databases.

The R&PB system interacts regularly with internal ministry organizations and external organizations. Internally, the system interfaces with the Client Registry System, which updates demographic data and provides the R&PB system with updated person information. The system also interacts regularly with the claims processing system as identified earlier. The Pharmaceutical Services Division obtains data on subscribers to assist with their PharmaCare services operations, as does Ambulance Billing to determine the premium payment rating an individual has for billing purposes. Externally, the R&PB system interacts with the Ministry of Social Development and with the Ministry of Children and Family Development (MCFD) who, via an interface, enrol income assistance clients and children in care and provide the system with updated demographic data pertaining to their clients. Ministry of Social Development receives from MSP subscriber information.

Quarterly, the R&PB system generates a magnetic tape of individuals who have requested premium assistance. The Canada Revenue Agency returns this tape with additional data including the income tax specifics received from the last income tax return filed. The data is linked with the R&PB system

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

(registration maintenance process), which processes the data and applies a rate code identifying the amount of premiums the individual should be paying. If the amount is different from the amount currently being paid by the subscriber, the registration maintenance process generates correspondence identifying the amount that is owed or credited to the subscriber's account. The Pension Corporation, acting as the Group Administrator for retired public service employees, uses the results of this process to update information pertaining to the individuals within that Group.

Data from the R&PB system as a whole is used by many internal and external organizations. The Ministry of Finance's Cash Processing section obtains payment inquiry data. The Ministry of Attorney General accesses the data to support administration of the Family Maintenance Program. Care Services obtain surname and demographic data on subscribers. FIN's Accounting Operations receives earning and statistical reports and their Collection unit receives lists of delinquent account holders. The Continuing Care program within the ministry also views the income verification data received from the Canada Revenue Agency to determine billing levels for their clients, and Internal Audit receives responses to audit statement inquiries. Externally, Statistics Canada receives immigration statistics and the Ministry of Finance receives public service subscriber data and data identifying very delinquent account holders.

The R&PB system produces a variety of reports including statistical and operational reports. The statistical reports include billing and status coverage information, statistical reporting, summary and detail reports including: persons 65 or older, total billing units active, and total persons covered on subsidy. Operational reports are used to verify changes made to the system (data integrity function) or identify data errors on the system which need to be corrected, listings, information data (e.g. identifying the pre-existing conditions required for specific messages to be included on a bill produced by the bill process), and cash processing process results (e.g. cash totals received and distributed).

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### REGISTRATION AND PREMIUM BILLING SYSTEM (R&PB SYSTEM)

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Financial adjustment reports Classification 42600-04	Destroy at the end of the eighth fiscal year.
Secondary closed - retention still applies to existing data Classification 42850-03	Destroy at the end of the eighth calendar year.
Master MSP beneficiary data Classification 42850-63	Migrate the data off the active enrolment system seven years after there are no more coverage periods for the account or person.
MSP beneficiary data Classification 42850-64	Migrate the data off the active enrolment system at the end of the eighth calendar year.
Archived MSP beneficiary data Classification 42850-65	Destroy when the beneficiary account is closed, and the information is no longer required for ongoing statistical and reference requirements.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

### RURAL HEALTH PROGRAMS DATABASES

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health

Rural Programs, Physician Compensation

##### **Purpose**

These Access databases are used to track requests and payment amounts for the rural programs. There are multiple databases, each for specific programs, such as GP database, the NITAOP spreadsheet or the RRP flat fees database, and they are used for both tracking and statistical purposes.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### RURAL HEALTH PROGRAMS DATABASES

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Rural programs requests and payments data Classification 41760-61	Destroy when reference and statistical value has expired, or the data have been copied to another system.

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 [System Section FAQ](#).

END OF OVERVIEW



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### TRAVEL ASSISTANCE PROGRAM (TAP) SYSTEM

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health  
HIBC service provider

##### **Date of System Description**

2014-04-10

##### **Purpose**

TAP is a partnership between the Ministry of Health and transportation carriers that provide fare discounts to patients using air, land and ferry travel for required medical services. The TAP system consists of two databases – one of which holds the supporting data for the subsidy requests and provides the confirmation number for the patient, and the other which provides reporting data on the TAP program for the ministry.

##### **Information Content**

TAP contains metadata on each request for a TAP subsidy, including TAP number, patient information, referring doctor and specialties, and addresses.

##### **Inputs, Processes, and Outputs**

Patients file a request for a TAP discount prior to travel. TAP requests are submitted either by telephone to HIBC or through the IVR system portal (an interactive voice response telephone system). If there is question regarding the patient's eligibility from an IVR request, the request is redirected to HIBC customer service staff.

Relevant information regarding the medical travel is captured in the on-line TAP system; every request is issued a unique confirmation number, which is given to the patient upon approval, and the patient supplies that number at the time of travel to the transportation carrier. The system keeps both refused and approved requests.

Every six months the TAP master data is extracted and loaded into the TAP Report and Analysis database. The TAP Report and Analysis database is used for trend and statistical reporting.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### TRAVEL ASSISTANCE PROGRAM (TAP) SYSTEM

#### DATA RETENTION PLAN

Data Description	Data Retention Period
TAP statistical reporting data Classification 42080-05	Destroy when no longer required for trend analysis purposes.
TAP master data Classification 42080-20	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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### VERIFICATION GROUP AUDIT SYSTEM (VEGAS)

#### SYSTEM OVERVIEW

##### **Creating Agency**

Ministry of Health  
Strategic Initiatives and Corporate Services  
Finance and Decision Support  
MSP Decision Support  
Billing Integrity Program

##### **Date of System Description**

2005-02-21

##### **Purpose**

VEGAS assists Service Verifications Group staff with the monitoring and auditing of practitioners' billing practices.

##### **Information Content**

Practitioner billing information is selected from data maintained by Decision Support Services Section (DSS). DSS downloads the data from the Claims Processing System, Master Practitioner Information File (MPIF). The information retrieved to run a survey project can include: practitioner name, number, modality (also known as specialty), fee item numbers claimed, beneficiary name, number, date of service.

##### **Inputs, Processes, and Outputs**

VEGAS accesses files and tables held by the DSS on a monthly basis. Information received from a beneficiary in response to the service verification survey may also be input into the system.

VEGAS copies only the data from the DSS that it requires to run a specific survey. These tables are maintained to support the specific project or survey that the system is completing.

The audit function of the VEGAS system serves to ensure that practitioner and beneficiary selection is random. On a monthly basis, VEGAS randomly selects practitioners to be audited. The system produces a series of verification letters that will be sent to randomly selected beneficiaries who have received services from the randomly selected practitioner.

The family consult function of the VEGAS system verifies the billing practice of a practitioner when multiple members of one family visit the office on the same day. On a monthly basis, the system accesses the DSS data, randomly selects families who have had services billed after a family visit, and then a service verification letter is sent to the subscriber.

The VEGAS system produces service verification letters that are sent to beneficiaries to confirm that the practitioner provided the service on that date for the individual or family. It also produces statistical and ad hoc reports. Upon satisfactory conclusion of the verification audit, VEGAS produces the "comfort letters" which are sent to practitioners notifying them that they were audited and their practices are in compliance with billing norms. It also produces lists of practitioners who were audited, who received comfort letters, the log report and the annual report. Upon completion of a specific

---

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

---

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

---

project, the system also creates and maintains the results of the survey. Key statistics for each run are maintained on DB2 tables.

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### VERIFICATION GROUP AUDIT SYSTEM (VEGAS)

#### DATA RETENTION PLAN

Data Description	Data Retention Period
Service verification survey - electronic Classification 40980-26	Destroy when the records are no longer required for ongoing operational and reference requirements.

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 [System Section FAQ](#).

END OF OVERVIEW

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

---

### APPENDICES

#### TABLE OF CONTENTS

<u>APPENDIX CODE</u>	<u>APPENDIX TITLE</u>
APPENDIX A	Premium Billing Records Transferred to Ministry of Provincial Revenue
APPENDIX B	Summary of Changes to the <i>MSP ORCS</i> (concordance table)
APPENDIX C	Defining the official file copy (OPR) for media in primary 42850 classifications
APPENDIX D	Envelope categories for HIBC scanned records in MaxImage

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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 Records Management Branch. For assistance in implementing *ORCS*, contact your Records Officer.

A      SA      FD

### APPENDIX A

#### RECORDS SUPPORTING FUNCTIONS TRANSFERRED TO MINISTRY OF PROVINCIAL REVENUE AS OF SEPTEMBER 1, 2002

As a result of government restructuring, the premium billing function and management of the temporary premium assistance program were transferred to the Ministry of Provincial Revenue on September 1, 2002.

These records, created prior to September 1, 2002, remain in the custody and control of the Ministry of Health Services and are scheduled under ongoing records schedule 114207.

Records received or created after September 1, 2002 are under the control of the Ministry of Provincial Revenue. These records include:

- Direct pay correspondence including billing issues; enquiry from public trustee, power of attorney, status of account
- Temporary premium assistance – all applications, appeals and correspondence
- Direct payment documentation
- CareCard cash
- Group payment correspondence
- Correspondence resulting in or from billing or reconciliation problems including change of ownership of a company, deceased beneficiary, temporary absence notifications, complex billing problems

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

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
-----------------------	-------	----------------	--------------------------	------------------

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.

SECTION 1				
40050-02	Medical Services Commission annual reports	New.	SO nil FR	2014/04/10
40050-25	Medical Services Commission hearing files	New.	CY+2y 4y DE	2014/04/10
40050-30	Medical Services Commission	Title changed to Medical Services Commission correspondence.	N/A	2014/04/10
SECTION 3				
40920-25	Physician/practitioner monitoring audit working files	Retention changed from SO+2y 5y DE.	SO 7y DE	2013/05/08
40920-30	Diagnostic and treatment unit/facility monitoring case files	Retention changed from SO+2y 5y DE.	SO 7y DE	2014/05/14

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
40980-20	Physician/practitioner service verification files	Retention changed from SO+2y 8y DE.	SO 10y DE	2013/05/08
SECTIONS 5 AND 6				
Entire Sections 5 and 6	<p><b>PLEASE NOTE:</b> <i>Almost every scope note, cross-reference section, secondary qualifier and note was changed in the 2014 amendment. In the interests of efficiency, the changes listed below that relate to the 2014 amendment reflect only the structural and retention changes.</i></p> <p><b>NOTE FOR SECONDARIES WHICH ARE LISTED AS CLOSED:</b> <i>Secondaries are closed when a function has ceased, such as stopping a microfilming program. Any records that still exist under a closed secondary can carry out the remaining lifespan according to the retention schedule – the closed secondary remains in the ORCS to allow for this to happen. Unless otherwise indicated, no reclassification is necessary.</i></p>			

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
SECTION 5				
Section 5 Table of Contents	Table of Contents	Updated to reflect the following: <ul style="list-style-type: none"><li>• 41200 title changed to MEDICAL SERVICES CLAIMS AND PAYMENT PROCESSING – GENERAL</li><li>• 41400 primary superseded by 42850-04</li><li>• 41420 primary superseded by 41300-01</li><li>• 41450 title changed from COSMETIC AND DENTAL SERVICE APPROVALS to INPROVINCE AUTHORIZATIONS</li><li>• 41500 primary superseded by 41520-01.</li><li>• 41520 title changed from OUT-OF-COUNTRY to OUT OF PROVINCE CLAIMS</li><li>• 41540 title changed from OUT-OF-PROVINCE to RECIPROCAL AGREEMENTS</li><li>• 41760 title changed from RURAL AND REMOTE PAYMENT PREMIUMS AND SPECIAL ALLOWANCES to RURAL PROGRAMS ADMINISTRATION AND PAYMENT</li></ul>	N/A	2014/04/10
All Section 5 primaries		Primary base retention changed from CY+1y 2y DE.	CY+1y nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
All Section 5 primaries -01	General	Removed the secondary-specific retention – now uses the primary's base retention.	N/A	2014/04/10
41200	MEDICAL SERVICES CLAIMS AND PAYMENTS – GENERAL	Primary title changed to MEDICAL SERVICES CLAIMS AND PAYMENT PROCESSING – GENERAL.	N/A	2014/04/10
41200-02	Claim and payment processing in other jurisdictions	Secondary closed.  Superseded by -30 Medical services claim and payment reference materials.	N/A	2014/04/10
41200-03	Claim and payment reports and statistics	Title changed to: Annual claim and payment reports and statistics.  Retention changed from SO nil SR.  (SR retention rationale said to keep the annual health reports, and equivalent, subsequent, and similar annual reports – this change reflects that selection criteria).	SO nil FR	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41200-04	Claim and payment reports	<b>New.</b>  See the extensive note of cross-references to other report secondaries in the ORCS.	SO nil DE	2014/04/10
41200-10	Tracking logs and spreadsheets	<b>New.</b>	SO nil DE	2014/04/10
41200-20	Medical services claim and payment issue, project, and study files	Title changed to Issue, project, and study files regarding MSP claims and payments.  Supersedes: <ul style="list-style-type: none"><li>• 41300-20 Billing support issue and study case files</li><li>• 41520-40 Out-of-province claims issue, project and study case files</li><li>• 41760-20 Rural health payment premiums and special allowances issue and study files</li><li>• 41900-20 Payment schedule administration fee item issue and study case files</li><li>• 42000-20 Practitioner enrolment and services issue and study case files</li></ul>	N/A	2014/04/10
41200-25	Medical services claim and payment negotiation case files	Title changed to Medical services agreement negotiations.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41200-40	Claims Processing System (CPS)	<b>Deleted.</b>  Superseded by the Claims Processing System Information System Overview.	N/A	2014/04/10
41280-04	Explanatory codes	<b>New.</b>	SO nil DE	2014/04/10
41280-20	Adjudication of claim files	<b>Secondary closed.</b>  Superseded by 41580-40 Claims payment file – data.  NOTE: This secondary was closed because it was for data in a phase of the claims process; information is added to the claim at this phase, but there is not a static set of data to be scheduled.	CY+7y nil DE	2014/04/10
41280-30	Outstanding rejected claims	Title changed to Outstanding rejected claims data.  Retention changed from 6m 54m DE.	CY+5y nil DE	2014/04/10
41280-40	Claims in Process (CIPS)	<b>Deleted.</b>  Superseded by the Claims Processing System Overview.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41300-02	Payment restrictions – paper	<b>Closed.</b>  These records are no longer created.	N/A	2014/04/10
41300-03	Payment restrictions – electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	CY+7y NA NA	2014/04/10
41300-20	Billing support issue and study case files	<b>Deleted.</b>  Superseded by 41200-20 Issue, project and study files regarding MSP claims and payments.	N/A	2014/04/10
41340-02	Court ordered requests - paper	Title changed to Court ordered requests for medical History.  Note added to clarify that this secondary covers paper and MaxImage records.	N/A	2014/04/10
41340-03	Court ordered requests – electronic	<b>Deleted.</b>  Superseded by 42060-31 Practitioner Information File (PIF) data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41340-04	Medical Services Plan in-province claim cards – paper	Title changed to In-province claims cards/forms.  Retention changed from SO nil DE.  NOTE: With the Records Officer's approval, paper claim cards/forms that have been scanned and verified may be destroyed under the special schedule 206175 (Redundant Source Records).	CY+7y nil DE	2014/04/10
41340-05	Medical Services Plan in-province claim cards – microfilm	<b>Closed.</b>  Title changed to In-province claims cards – microfilm.  Secondary closed as of January 2009, when microfilming program ended.	N/A	2014/04/10
41340-06	Medical Services Plan in—province claim cards – electronic	Title changed to In-province claim card/form data batches.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41340-20	Beneficiary (patient) claim case files - paper	<p>Title changed to Beneficiary-specific claim related records.</p> <p>Retention changed from CY+2y 5y.</p> <p>Supersedes:</p> <ul style="list-style-type: none"><li>-22 Beneficiary (patient) claim case files – magnetic tape</li><li>-23 Beneficiary (patient) claim case files – laser disk</li><li>-25 Beneficiary general complaints and correspondence</li></ul> <p>Scope broadened - secondary now covers:</p> <ul style="list-style-type: none"><li>unscanned claims records offsite</li><li>beneficiary-specific claims records in MaxImage (claim records attached to a PHN)</li><li>Patient History data in Maxpath</li><li>Third Party History data</li></ul>	CY+7y nil DE	2014/04/10
41340-21	Beneficiary (patient) claim case files - electronic	<p>Title changed to Adjudication Patient History File data.</p> <p>Retention changed from SO nil DE.</p> <p>Original SO interpretation was when the data were transferred to magnetic tape and laser disk – this is no longer the practice.</p>	18m nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41340-22	Beneficiary (patient) claim case files - magnetic tape	<b>Deleted.</b>  Superseded by -20 Beneficiary-specific claim related records.  Retention changed from FY+7y nil DE.	CY+7y nil DE	2014/04/10
41340-23	Beneficiary (patient) claim case files - laser disk	<b>Deleted.</b>  Superseded by -20 Beneficiary-specific claim related records.  Retention changed from FY+7y nil DE	CY+7y nil DE	2014/04/10
41340-25	Beneficiary general complaints and correspondence	<b>Deleted.</b>  Superseded by -20 Beneficiary-specific claim related records.  Retention changed from CY+1y 5y DE.	CY+7y nil DE	2014/04/10
41340-26	Patient History File master beneficiary data	<b>New.</b>	SO nil DE	2014/04/10
41340-30	Non-specific or multiple beneficiary claim inquiries	Title changed to Practitioner inquiries – non-PHN specific or multiple beneficiary.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41340-40	Request for medical history – paper	Title changed to Requests for medical history.  Retention changed from SO nil DE.	SO+6y nil DE	2014/04/10
41340-41	Request for medical history – electronic	Third party requests for medical history – data.  Retention changed from SO nil DE.	CY+7y nil DE	2014/04/10
41360-20	Critical care coverage claims case files – paper	Title changed to Critical care coverage claims.  Retention changed from CY+2y 5y DE.	CY+5y 2y DE	2014/04/10
41360-21	Critical care coverage claims case files – electronic	<b>Deleted.</b>  Superseded by 41580-40 Claims payment details – data.	CY+7y nil DE	2014/04/10
41380-20	Institutions – paper	<b>Deleted.</b>  Superseded by -00 policy and procedures.  Secondary deleted because institutions lists are actually held with procedural records.	SO 5y FR	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41380-21	Institutions – microfiche	Title changed to Institution file.	N/A	2014/04/10
41400	BILLING SUPPORT – PROVINCIAL CORRECTIONAL FACILITIES BILLING	<b>Primary deleted.</b>  Superseded by 42850-04.  (the reassignment of PHN's to former prisoners is managed by the enrolment accounts team in HIBC, and classified in section 6)		2014/04/10
41420	BILLING SUPPORT – OTHER AGENCIES	<b>Primary deleted.</b>  Superseded by 41300-01 General - Billing Support.		2014/04/10
41450	COSMETIC AND DENTAL SERVICE APPROVALS	Primary title changed to IN-PROVINCE AUTHORIZATIONS.		2014/04/10
41450-20	Cosmetic and dental service request case files – paper	Title changed to Cosmetic and dental service requests.  Retention changed from SO+2y 5Y DE.	CY+2y 8y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41450-21	Cosmetic and dental service request case files – electronic	<b>Deleted.</b>  Superseded by 42060-31 Practitioner Information File (PIF) data.	N/A	2014/04/10
41450-30	Orthodontics service approvals	<b>New.</b>	SO+7y nil DE	2014/04/10
41500	EXTERNAL MEDICAL SERVICES CLAIMS	<b>Primary deleted.</b>  Primary has no evidence of use and primary block dissolved.  Superseded by 41520, OUT-OF-PROVINCE CLAIMS.		2014/04/10
41520	EXTERNAL MEDICAL SERVICES CLAIMS – OUT OF COUNTRY	Primary title changed to OUT-OF-PROVINCE CLAIMS.  Note: both out-of-country and out-of-province claims are now simply referred to as out-of-province.		2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41520-02	Out of country claims cheque register – microfiche	<b>Closed.</b>  Secondary closed July 2010, when microfiching stopped.  Retention changed from SO nil DE, new retention to be applied to existing records.  This function was transferred to the Ministry of Finance.	CY+7y nil DE	2014/04/10
41520-03	Out of country/out of province claims cleared and claims outstanding cheques - microfiche	<b>Closed.</b>  Secondary closed July 2010, when microfiching stopped.  Retention changed from SO nil DE, new retention to be applied to existing records.  This function was transferred to the Ministry of Finance.	CY+7y nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41520-04	Out of province remittance statements - microfiche	<b>Closed.</b>  Secondary closed July 2010, when microfiche stopped.  Retention changed from SO nil DE, new retention to be applied to existing records.  See 41580-11 Medical services claims remittance statements - off-system data, for scheduling non-microfiche out-of-province remittance statements	CY+7y nil DE	2014/04/10
41520-05	Updated patient history for out of province processed claims - microfiche	Title changed to Updated patient history for out-of-province processed claims.  Retention changed from SO nil DE.  Scope of secondary broadened to include data and microfiche.	CY+7y nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41520-20	Out of country/province claim case files - paper	<p>Title changed to Regular out-of-province claim files.</p> <p>Scope refined to payment for unplanned medical services while travelling. Pre-authorized travel is classified under -25.</p> <p>Retention changed from SO+1y 6y DE.</p> <p>NOTE: The term out-of-province includes out-of-country</p>	CY+7y nil DE	2014/04/10
41520-21	Out of country/province claim case files - electronic	<p>Title changed to Out-of-province claim data.</p> <p>Retention changed from SO nil DE.</p>	CY+7y nil DE	2014/04/10
41520-25	Pre-authorized out-of-province claims	<p><b>New.</b></p> <p>Secondary covers pre-authorized out-of-province claims for medical services. Emergency/unplanned medical claims from out-of-province are covered under -20.</p> <p>NOTE: The term out-of-province includes out-of-country.</p>	SO+1y 6y DE	2014/04/10
41520-30	Out of Country/Out of Province claim reports	<p><b>Deleted.</b></p> <p>Superseded by 41200-04 Claim and payment reports.</p>	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41520-35	Medical Services Commission out-of-country/ province hearing files	<b>New.</b>	SO+1y nil DE	2014/04/10
41520-40	Out of province claims issue, project, and study case files	<b>Deleted.</b>  Superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments.	N/A	2014/04/10
41520-45	Third party payee files	<b>New.</b>	SO+1y 6y DE	2014/04/10
41540	EXTERNAL MEDICAL SERVICES CLAIMS – OUT OF PROVINCE	Primary title changed to RECIPROCAL AGREEMENTS.  New title better reflects primary contents.		2014/04/10
41540-02	Out of province medical services excluded from payment – paper	<b>Deleted.</b>  Superseded by -04 reciprocal agreements.	SO 7y DE	2014/04/10
41540-03	Out of province medical services excluded from payment – electronic	<b>Deleted.</b>  Superseded by 41910-21 Fee schedule data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41540-04	Reciprocal agreements	Retention changed from SO nil FR because they are fully retained by the Order in Council Administration office in accordance with the <i>Order in Council Administration ORCS</i> (schedule 107559).	SO 7y DE	2014/04/10
41560	GENDER REASSIGNMENT	Primary title changed to GENDER REASSIGNMENT SURGERY.		2014/04/10
41560-02	Gender reassignment Surgical Review Committee	Title changed to Gender Reassignment Surgical Review Committee records.  Retention changed from SO+2y 5y DE.	CY+2y 5y DE	2014/04/10
41560-10	GRS liaison records	<b>New.</b>	CY+2y nil DE	2014/04/10
41560-20	Gender reassignment case files	Title changed to Gender reassignment surgery case files.  Retention changed from SO+2y 5y DE.	SO+3y 10y DE	2014/04/10
41560-30	GRS human rights complaints	<b>New.</b>	SO+3y 10y FR	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41580-02	Medical services claims cheque registers – paper	<b>Closed.</b>  Paper cheque registers are no longer being produced.	N/A	2014/04/10
41580-03	Medical services claims cheque registers – microfiche	<b>Closed.</b>  Secondary closed July 2010, when microficheing stopped.	N/A	2014/04/10
41580-04	Medical services claims cheque registers – electronic	<b>Deleted.</b>  Superseded by -55 Teleplan data, for remittance statements in Teleplan, or -11 Medical services claims remittance statements, for remittance data transferred off-system from the Claims Processing system.	N/A	2014/04/10
41580-05	Inbound Teleplan claims - microfiche	<b>Closed.</b>  Secondary closed July 2010, when microficheing stopped.	N/A	2014/04/10
41580-06	Inbound Teleplan claims – electronic	Title changed to Inbound Teleplan claims – data.	CY+7y nil DE	2014/04/10
41580-07	In-province emergency electronic transfer of funds payment authority – paper	Title changed to Physician payment emergency file.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41580-08	In province emergency electronic transfer of funds payment authority - diskette	<b>Deleted.</b>  Superseded by -07 Physician payment emergency file.	N/A	2014/04/10
41580-09	In province emergency electronic transfer of funds payment authority – magnetic disk	<b>Deleted.</b>  Superseded by -07 Physician payment emergency file.	N/A	2014/04/10
41580-10	In province emergency electronic transfer of funds payment authority – magnetic tape cartridge	<b>Deleted.</b>  Superseded by -07 Physician payment emergency file.	N/A	2014/04/10
41580-11	Medical services claims remittance statements – microfiche	Title changed to Medical services claims remittance statements – off-system data.  Note: this secondary applies to off-system data in any format – microfiche or on a PC.	N/A	2014/04/10
41580-12	Medical services claims remittance statements – electronic	Title changed to Medical services claims remittance statements - system data.	N/A	2014/04/10
41580-13	Medical services claims payment signing sheets	Retention changed to provide for reference requirements.	CY+2y nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41580-25	Other medical claims payment processing records – paper	<b>Deleted.</b>  Superseded by -27 Paypatient claims payment processing records.	CY+1y 6y DE	2014/04/10
41580-26	Other medical claims payment processing records – electronic	<b>Deleted.</b>  Superseded by -40 Claims payment file – data.	CY+7y nil DE	2014/04/10
41580-27	Other medical claims payment processing records – microfiche	Title changed to Paypatient claims payment processing records.  Retention changed from CY+7Y nil DE.  NOTE: <ul style="list-style-type: none"><li>The data related to these claims is classified under -40 Claims payment file - data, and is processed through the Claims Processing System.</li><li>Scanned records on MaxImage relating to these claims are classified under 51340-20 Beneficiary-specific claim related records</li></ul>	CY+1y 6y DE	2014/04/10
41580-30	Reciprocal medical services claim payment documentation – paper	Title changed to Reciprocal medical services claim payment documentation.  Retention changed from CY+7Y nil DE.	CY+1y 6y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41580-31	Reciprocal medical services claim payment documentation – microfiche	<b>Deleted.</b>  Superseded by -30 Reciprocal medical services claim payment documentation.  Retention changed from CY+7Y nil DE.	CY+1y 6y DE	2014/04/10
41580-32	Reciprocal medical services claim payment documentation – electronic	<b>Deleted.</b>  Superseded by -40 Claims payment file – data.  Retention changed from SO nil DE.	CY+7y nil DE	2014/04/10
41580-40	Claims payment file – electronic	Title changed to Claims payment details – data.  Retention changed from SO nil DE.	CY+7y nil DE	2014/04/10
41580-42	Claims payment file - DASD	<b>Closed.</b>  This secondary originally covered the claims data copied to DASD; currently, the data is transferred to virtual tape/disc storage. These records go to the custody of the data stewardship program area in the ministry, and will be covered in a future ORCS which covers their data stewardship function.	N/A	2014/04/10
41580-45	ICBC/WCB Billing Data	Title changed to Insurance Corporation of BC (ICBC)/WorkSafeBC billing data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41580-46	ICBC/WCB billing file – magnetic tape	Title changed to ICBC/WorkSafeBC billing file – off-system data.  Retention changed from SO nil DE.	CY+2y nil DE	2014/04/10
41580-50	Medical Services Plan (MSP) claim notes	Title changed to Claims processing system claim notes – data.  Retention changed from SO+1y nil DE.	SO nil DE	2014/04/10
41580-60	Primary Health Care (PHC) registration data	<b>New.</b>	SO nil DE	2014/04/10
41760	RURAL AND REMOTE PAYMENT PREMIUMS AND SPECIAL ALLOWANCES	Primary title changed to RURAL PROGRAMS ADMINISTRATION AND PAYMENT.		2014/04/10
41760-02	Rural and remote payment reports	Rural programs payment reports.  Retention changed from CY+1y 2y DE.	FY+1y 6y DE	2014/04/10
41760-03	Specialty services eligible for rural and remote special allowance funding	<b>Closed.</b>  No evidence of use.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41760-20	Rural and remote health payment premiums and special allowances issue and study files	<b>Deleted.</b>  Superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments.	N/A	2014/04/10
41760-30	Rural and remote community eligibility case files - paper	Title changed to Rural Retention point assessments.	N/A	2014/04/10
41760-31	Rural and remote community eligibility case files – electronic	<b>Deleted.</b>  Superseded by -61 Rural programs requests and payments data.	N/A	2014/04/10
41760-40	Northern and isolation travel assistance and outreach program (NITAOP) case files – paper	<b>Deleted.</b>  Superseded by -60 Rural programs requests and payments.  Retention changed from FY+2y 5y DE.	FY+1y 6y DE	2014/04/10
41760-41	Northern and isolation travel assistance and outreach program (NITAOP) case files – electronic	<b>Deleted.</b>  Superseded by 42060-31 Practitioner Information File data.	SO nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41760-50	Northern and Rural Locum Program physician's evaluations and day sheets case files	<b>Deleted.</b>  Superseded by -60 Rural programs requests and payments.  Retention changed from SO+3y 7y DE.	FY+1y 6y DE	2014/04/10
41760-55	Locum files	<b>New.</b>	SO+2y 5y DE	2014/04/10
41760-60	Rural and remote payment and special allowances case files – paper	Title changed to Rural programs requests and payments.  Retention changed from SO+2y 5y DE.  Supersedes <ul style="list-style-type: none"> <li>-40 Northern and Isolation Travel Assistance and Outreach Program (NITAOP)</li> <li>-50 Northern and Rural Locum Program physicians' evaluations and day sheets case files</li> </ul>	FY+1y 6y DE	2014/04/10
41760-61	Rural and remote payment and special allowances case files – electronic	Title changed to Rural programs requests and payments data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41900-20	Payment schedule administration fee item issue and study case files	<b>Deleted.</b>  Superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments.	N/A	2014/04/10
41900-30	Medical Advisory Council	Title changed to Medical Advisory Council (MAC) minutes.	N/A	2014/04/10
41900-35	Medical Payment Issues Committee	<b>New.</b>	SO nil DE	2014/04/10
41900-40	Tariff Committee	Title changed to BCMA Tariff Committee records.  Retention changed from SO+2y 5y DE.	SO 5y DE	2014/04/10
41910-02	<i>Medical Services Commission Payment Schedule</i>	Retention changed from SO nil FR.  SR instructions: Ministry staff will print a complete copy of the <i>Medical Services Commission Payment Schedule</i> at the end of each calendar or fiscal year. This printout will be boxed with other records designated for full retention (FR).	SO nil SR	2014/04/10
41910-05	Broadcast messages	<b>New.</b>	SO nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41910-06	Fee item business rules	<b>New.</b>	SO nil DE	2014/04/10
41910-10	Fee item profiles	<b>New.</b>	CY+7y nil DE	2014/04/10
41910-20	Fee item case files - paper	Title changed to Fee item files.  Retention changed from SO nil DE.	SO 5y DE	2014/04/10
41910-21	Fee item case files – electronic	Title changed to Fee schedule data.	N/A	2014/04/10
41910-23	Fee item implementation records	<b>New.</b>	SO+3y 5y DE	2014/04/10
41910-30	Fee schedule database	Title changed to Fee item data.	N/A	2014/04/10
41910-35	Fee schedule service requests	<b>New.</b>	SO 2y DE	2014/04/10
41920-20	Payment dispute case files	Title changed to Payment dispute files – routine.  Retention changed from SO+5y 2y DE.	SO+5y 15y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
41920-25	Payment dispute files – reported on	<b>New.</b>	SO+15y 15y DE	2014/04/10
41920-30	Medical Services Commission payment schedule appeals	<b>New.</b>	SO nil DE	2014/04/10
42000-20	Practitioner enrollment and services issues and study case files	<b>Deleted.</b>  Superseded by 41200-20 Issue, project, and study files regarding MSP claims and payments.	N/A	2014/04/10
42040-02	Practitioner direct bank deposit register - paper	<b>Closed.</b>  Secondary closed July 2010, because paper records stopped being produced.	N/A	2014/04/10
42040-03	Practitioner direct bank deposit register - microfiche	<b>Closed.</b>  Secondary closed July 2010, when microfiche stopped.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42040-04	Practitioner direct bank deposit register – electronic	<b>Deleted.</b>  Superseded by special schedule 102901 ( <i>Transitory Records</i> ), see note in ORCS.  Retention changed from CY+6y nil DE.	SO nil DE	2014/04/10
42040-20	Adjustment detail reports	<b>Deleted.</b>  Superseded by 41200-04 Claim and payment reports.	N/A	2014/04/10
42040-31	Practitioner direct deposit requests – electronic	Retention changed from SO nil DE.	CY+7y nil DE	2014/04/10
42040-40	Third party deduction case files – paper	Title changed to Third party deduction files.	N/A	2014/04/10
42040-41	Third party deduction case files - electronic	<b>Deleted.</b>  Superseded by 42060-31 Practitioner Information File (PIF) data.	N/A	2014/04/10
42060-02	Incorporation	<b>Closed.</b>  Secondary closed because there is no evidence of use.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42060-03	Mandatory de-enrolment	<b>Closed.</b>  Secondary closed because function is no longer performed.	N/A	2014/04/10
42060-05	Practitioner profile change verification	<b>Closed.</b>  Secondary closed because there is no evidence of use.	N/A	2014/04/10
42060-06	Requests for foreign trained practitioner's services	Title changed to Provincial letters of support or confirmation of need.  Retention changed from SO+2y 5y DE.	FY+2y 5y DE	2014/04/10
42060-08	Unprocessed or declined applications for letters of support	<b>New.</b>	CY+1y nil DE	2014/04/10
42060-20	Mandatory de-enrolment exemption request and hearing files	<b>Closed.</b>  Secondary closed because mandatory de-enrolment due to age is no longer required.	N/A	2014/04/10
42060-30	Practitioner case files - paper	Title changed to Practitioner files.	N/A	2014/04/10
42060-31	Practitioner case files - electronic	Title changed to Practitioner Information File (PIF) data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42060-40	Practitioner Information File (PIF) database	<b>Deleted.</b>  Superseded by the Claims Processing System Overview.	N/A	2014/04/10
42080-03	Travel Assistance Program reports and statistics	Title changed to TAP reports and statistics.  Retention changed from CY+1y 2y DE.	SO nil DE	2014/04/10
42080-05	TAP statistical reporting data	<b>New.</b>	SO nil DE	2014/04/10
42080-20	Travel Assistance Program data	Title changed to TAP master data.  Retention changed from SO nil DE.	CY+2y nil DE	2014/04/10
42080-25	TAP approvals	<b>New.</b>	FY+1y 6y DE	2014/04/10
42080-30	Travel Assistance Program database	<b>Deleted.</b>  Superseded by the Travel Assistance Program (TAP) Information System Overview.	N/A	2014/04/10
42080-35	TAP service verifications	<b>New.</b>	FY+1y 3y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
SECTION 6				
Section 6 Table of Contents	Table of Contents	Updated to reflect the following: <ul style="list-style-type: none"><li>Section title changed to MSP ENROLMENT AND ELIGIBILITY</li><li>42600 title changed to MSP ENROLMENT AND ELIGIBILITY - GENERAL</li><li>42660 title changed to ELIGIBILITY/RESIDENCY REVIEW, HEARINGS AND APPEALS</li><li>42850, title changed to ENROLMENT UNDER THE MEDICAL SERVICES PLAN (MSP)</li></ul>	N/A	2014/04/10
All Section 6 primaries		Primary base retention changed from CY+1y 2y DE.	CY+1y nil DE	2014/04/10
All Section 6 primaries -01	General	Removed the secondary-specific retention – now uses the primary's base retention.	N/A	2014/04/10
42600	REGISTRATION AND PREMIUM BILLING – GENERAL	Primary title changed to MSP ENROLMENT AND ELIGIBILITY – GENERAL.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42600-02	Registration and Premium Billing system status coverage information statistical reports - paper	Title changed to Demographic and statistical coverage reports.  Supersedes 42600-03 Registration and Premium Billing system status coverage information statistical reports – electronic.	N/A	2014/04/10
42600-03	Registration and Premium Billing system status coverage information statistical reports – electronic	<b>Deleted.</b>  Superseded by 42600-02 Demographic and statistical coverage reports.	N/A	2014/04/10
42600-04	Registration and Premium Billing system statistical reports - paper	Title changed to Financial adjustment reports.  Supersedes 42600-05 Registration and Premium Billing system statistical reports – electronic.  Changed retention from SO nil DE.	FY+2y 5y DE	2014/04/10
42600-05	Registration and Premium Billing system statistical reports - electronic	<b>Deleted.</b>  Superseded by 42600-04 Financial adjustment reports.	N/A	2014/04/10
42600-07	Enrolment and eligibility correspondence	<b>New.</b>	CY 7y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42600-10	Enrolment and eligibility reference materials	<b>New.</b>	SO nil DE	2014/04/10
42600-20	Registration and premium billing issue, project and study case files	Title changed to MSP enrolment and eligibility issues, projects and studies.  Supersedes: <ul style="list-style-type: none"><li>42640-30 Eligibility issue, project and study case files</li><li>42850-20 Enrolment issue, project and study case files</li></ul>	N/A	2014/04/10
42600-30	Registration and Premium Billing system nonstatistical reports - paper	<b>Deleted.</b>  Superseded by <i>ARCS</i> 6820-20.	N/A	2014/04/10
42600-31	Registration and Premium Billing system nonstatistical reports - electronic	<b>Deleted.</b>  Superseded by <i>ARCS</i> 6820-20.	N/A	2014/04/10
42600-40	Client registration	<b>Deleted.</b>  Superseded by <i>Vital Statistics Services ORCS</i> , (schedule 163600), primary 24210 and the Client Registry System ISO.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42600-45	Client Registry System	<b>Deleted.</b>  Superseded by <i>Vital Statistics Services ORCS</i> , (schedule 163600), primary 24210 and the Client Registry System ISO.	N/A	2014/04/10
42600-50	Client Registry System data reports	<b>Deleted.</b>  Superseded by <i>Vital Statistics Services ORCS</i> , (schedule 163600), primary 24210.	N/A	2014/04/10
42600-55	Registration and Premium Billing System	<b>Deleted.</b>  Superseded by Registration and Premium Billing Information System Overview.	N/A	2014/04/10
42640-04	Release of subscriber information	<b>New.</b>	CY+1y 5y DE	2014/04/10
42640-20	Eligibility for coverage legal opinions/decisions	Title changed to Legal consultation regarding eligibility for coverage.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42640-30	Eligibility issue, project and study case files	<b>Deleted.</b>  Superseded by 42600-20 MSP enrolment and eligibility issues, projects and studies.	N/A	2014/04/10
42660-02	Suspension of provincial health care benefits decisions and definitions	<b>Deleted.</b>  Superseded by 40050-50, MSC Records of Decision.	N/A	2014/04/10
42660-04	Complaints Desk data	<b>New.</b>	SO nil DE	2014/04/10
42660-05	Cursory reviews data	<b>New.</b>	SO nil DE	2014/04/10
42660-10	Master Investigations log	<b>New.</b>	SO nil DE	2014/04/10
42660-20	Eligibility cancellation/refusal commission case files - paper	<b>Deleted.</b>  Superseded by 42850-42 MSP beneficiary records.	N/A	2014/04/10
42660-21	Eligibility cancellation/refusal commission case files - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42660-25	Appeal of waiting committee	Title changed to Waiver of wait period requests.  Changed retention from SO+2y 5y DE.	CY+2y 5y DE	2014/04/10
42660-30	Eligibility review, cancellation and refusal correspondence - paper	Title changed to 21-day letter files.  Changed retention from SO+2y 5y DE.	Cy+1y 5y DE	2014/04/10
42660-31	Eligibility review, cancellation and refusal correspondence – electronic image	<b>Deleted.</b>  Superseded by 42850-42 MSP beneficiary records.	N/A	2014/04/10
42660-32	Eligibility review, cancellation and refusal correspondence - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10
42660-35	Medical Services Commission beneficiary hearing files	<b>New.</b>	SO+1y nil DE	2014/04/10
42660-40	Eligibility review case files (“working files”) - paper	Title changed to MSP eligibility review investigations.  Supersedes 42660-42, Eligibility review case files (“working files”) – electronic records.  Changed retention from SO nil DE.	SO+2y 5y DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42660-41	Eligibility review case files ("working files") - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10
42660-42	Eligibility review case files ("working files") - electronic image	<b>Deleted.</b>  Superseded by: <ul style="list-style-type: none"> <li>• 42660-40 Eligibility review investigations, and</li> <li>• 42850-42 MSP beneficiary records, whichever is appropriate</li> </ul>	N/A	2014/04/10
42660-50	General Medical Services Plan misuse investigation	Title changed to Cursory review files.  Changed retention from SO+2y 5y DE.	CY+2y nil DE	2014/04/10
42660-60	Medical Services Plan investigation month end reports	Title changed to MSP investigation reports.	N/A	2014/04/10
42850-02	Group billing listings - comfiche	<b>Closed.</b> Function was transferred to the Ministry of Finance.	N/A	2014/04/10
42850-03	Group billing listings - electronic	<b>Closed.</b> Function was transferred to the Ministry of Finance.	CY+7y nil DE	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-04	Appeals inbox correspondence	<b>New.</b>	Cy+1y nil DE	2014/04/10
42850-20	Enrolment issue, project and study case files	<b>Deleted.</b>  Superseded by secondary 42600-20 MSP enrolment and eligibility issues, projects and studies.	N/A	2014/04/10
42850-30	Beneficiary and group correspondence not requiring a response – paper	Title changed to Routine MSP beneficiary account changes.  Retention changed from SO nil DE.  Original SO = when the records are no longer required for ongoing operational and reference requirements	SO+6m nil DE  SO = when changes have been made in the MSP enrolment system and transaction completed	2014/04/10
42850-31	Beneficiary and group correspondence not requiring a response - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-35	Power of attorney documentation	<b>New.</b>  NOTE: This classification is effective as of January 1, 2012. Prior to that date power of attorney records were mixed with a large volume of indivisible records.  NOTE: The program area is in the process of determining whether the image of power of attorney records will be used as the official file copy to meet retention requirements. This decision will be made following completion of the current system transformation project. If the decision is made to retain the paper record as the official file copy, the retention period will be amended at that time to reflect the administrative requirements for managing the paper record.	SO+7y nil DE  SO = when the power of attorney is no longer in effect	2014/04/10
42850-40	Beneficiary and group applications and correspondence - paper	<b>Deleted.</b>  Superseded by 42850-42 MSP beneficiary records.	N/A	2014/04/10
42850-41	Beneficiary and group applications and correspondence - microfilm	<b>Deleted.</b>  Superseded by 42850-42 MSP beneficiary records.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-42	Beneficiary and group applications and correspondence - electronic image	Title changed to MSP beneficiary records.  Supersedes: <ul style="list-style-type: none"><li>42660-20 Eligibility cancellation/refusal commission case files – paper. Retention was SO+2y 5y DE</li><li>42660-31 Eligibility review, cancellation and refusal correspondence – electronic image. Retention was SO nil DE</li><li>42660-42 Eligibility review case files (“working files”) – electronic image. Retention was SO nil DE</li><li>42850-40 Beneficiary and group applications and correspondence – paper. Retention was SO nil DE</li><li>42850-41 Beneficiary and group applications and correspondence – microfilm. Retention was Cy+7y nil DE</li></ul>	CY+7y nil DE	2014/04/10
42850-43	Beneficiary and group applications and correspondence - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-50	Premium assistance applications – paper	Title changed to Premium assistance records – microfilm and paper.  Retention changed from SO nil DE.  Supersedes: <ul style="list-style-type: none"><li>• 42850-51, Premium assistance applications – microfilm. Retention was CY+1y 98y DE</li><li>• 42850-53 Premium assistance recertification cards. Retention was SO 99y DE</li></ul>	CY 99y DE	2014/04/10
42850-50	Premium assistance records – microfilm and paper	Title changed to Applications for health and drug coverage.  Supersedes: <ul style="list-style-type: none"><li>• -52 Premium assistance records</li><li>• 70315-20 Income based benefits applications and consents from the PharmaCare Services ORCS, schedule 123389</li></ul>	N/A	2024/03/27
42850-51	Premium assistance applications – microfilm	<b>Deleted.</b> Superseded by 50 Premium assistance records – microfilm and paper.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-52	Premium assistance applications – electronic image	Title changed to Premium assistance records.  Retention changed from SO nil DE.  Supersedes -53 Premium assistance recertification cards. Retention was SO 99y DE.	SO+7y nil DE  SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records.	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-52	Premium assistance records	<b>Deleted.</b>  Superseded by -50 Applications for health and drug coverage.	N/A	2024/03/27
42850-53	Premium assistance recertification cards	<b>Deleted.</b>  Superseded by: <ul style="list-style-type: none"><li>• 42850-50 Premium assistance records – microfilm and paper, and,</li><li>• 42850-52 Premium assistance records, whichever is appropriate</li></ul>	N/A	2014/04/10
42850-54	Premium assistance applications - electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10
42850-60	Registration and Premium Billing system purged data – microfiche	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10
42850-61	Registration and Premium Billing system purged data – electronic	<b>Deleted.</b>  Superseded by 42850-64 MSP beneficiary data.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-63	Master MSP beneficiary data	New.	SO+7y NA NA  SO = when there are no more coverage periods for the account or person  NA = When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.	2014/04/10

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-64	MSP beneficiary data	<p><b>New.</b></p> <p>Supersedes:</p> <ul style="list-style-type: none"><li>• 42660-21 Eligibility cancellation/refusal commission case files – electronic</li><li>• 42660-32 Eligibility review, cancellation and refusal correspondence – electronic</li><li>• 42660-41 Eligibility review case files (“working files”) – electronic</li><li>• 42850 -31, Beneficiary and group correspondence not requiring a response – electronic</li><li>• 42850-43 Beneficiary and group applications and correspondence – electronic</li><li>• 42850-54 Premium assistance applications – Electronic</li></ul> <p>Retention changed (in all cases) from SO nil DE.</p>	<p>CY+7y NA NA</p> <p>NA = When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.</p>	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
42850-65	Registration and Premium Billing archive data	Title changed to Archived MSP beneficiary data.  Supersedes: <ul style="list-style-type: none"><li>42850-60 Registration and Premium Billing system purged data – microfiche. Retention was: SO nil DE</li><li>42850-61 Registration and Premium Billing system purged data – electronic. Retention was: SO nil DE</li></ul>	N/A  SO = when the beneficiary account is closed and the information is no longer required for ongoing statistical and reference requirements	2014/04/10
ISO SECTION				
SIMPLE SYSTEM SECTION	Cursory review database	<b>New.</b>	N/A	2014/04/10
SIMPLE SYSTEM SECTION	Fee schedule database	<b>New.</b>	N/A	2014/04/10
SIMPLE SYSTEM SECTION	HIBC Complaints desk tracking system	<b>New.</b>	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
SIMPLE SYSTEM SECTION	Rural Health Programs databases	<b>New.</b>	N/A	2014/04/10
ISO	CPS Claims Payment file	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10
ISO	CRS Client Registry System	<b>Deleted.</b>  Superseded by the <i>Vital Statistics Services ORCS</i> , 2006/03/01.	N/A	2014/04/10
ISO	ICBCWSBC ICBC/WCB billing file	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10
ISO	MAXI MaxImage System	<b>New.</b>	N/A	2014/04/10
ISO	MAXP MAXPaTH System	<b>New.</b>	N/A	2014/04/10
ISO	MCDB Master Claims database	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX B: Summary of Changes to the *Medical Services Plan ORCS*

Primary/ Secondary	Title	Type of Change	New retention A/SA/FD	Approval date
ISO	MPIF Master Practitioner Information file database	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10
ISO	PHF Patient history file	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10
ISO	TELE Teleplan database	<b>Deleted.</b>  Superseded by the Claims Processing System ISO.	N/A	2014/04/10
ISO	TAP Travel Assistance Program	<b>New.</b>	N/A	2014/04/10

[Key to ARCS/ORCS Codes and Acronyms](#)



## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX C: Defining the official file copy (OPR) for media in primary 42850 classifications

Underlying premise: all scanned paper (except premium assistance records) will be processed under the Special Schedule for Redundant Source Records, 206175.

Primary/ Secondary	Title	OPR Retention	Micro- film	Unscanned Paper	Data	Image	Notes
42850-02	Group Billing listings – comfiche	CY+2Y 4Y DE	OPR	N/A	N/A	N/A	Closed this secondary. Can still apply to existing records. Added note regarding Ministry of Finance having responsibility
42850-03	Group billing listings – electronic	CY+7y nil DE	N/A	N/A	OPR	N/A	(Covers records on R&PB system) Closed this secondary. Can still apply to existing records. Added note regarding Ministry of Finance having responsibility.
42850-04	Appeals inbox correspondence	CY+1y nil DE	N/A	N/A	N/A	N/A	This secondary applies to emails received in a specific outlook account.
42850-30	Routine MSP beneficiary account changes	SO+6m nil DE	N/A	OPR	See -64	OPR	SO = when changes have been made in the system and transaction completed.

N/A = these records have not been created in this media type

OPR = use the official OPR (Office of Primary Responsibility) retention as listed

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX C: Defining the official file copy (OPR) for media in primary 42850 classifications

Primary/ Secondary	Title	OPR Retention	Micro- film	Unscanned Paper	Data	Image	Notes
42850-35	Power of Attorney Documentation  NOTE: This classification is effective as of January 1, 2012.	SO+7y nil DE	N/A	OPR  (includes scanned paper)	See -63	OPR	SO = when the power of attorney is no longer in effect  NOTE: The program area is in the process of determining whether the image of power of attorney records will be used as the official file copy to meet retention requirements. This decision will be made following completion of the current system transformation project. If the decision is made to retain the paper record as the official file copy, the retention period will be amended at that time to reflect the administrative requirements for managing the paper record.  (This classification ensures both types of records, paper and the image, are retained until the image decision is made)
42850-42	MSP beneficiary records	CY+7y nil DE	OPR	OPR	See -64	OPR	Retention changed to CY to reflect system capacity & electronic environment.  Applies to microfilm, which was stopped in 2002, any unscanned paper, and the image in the MaxImage system.

N/A = these records have not been created in this media type

OPR = use the official OPR (Office of Primary Responsibility) retention as listed

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX C: Defining the official file copy (OPR) for media in primary 42850 classifications

Primary/ Secondary	Title	OPR Retention	Micro- film	Unscanned Paper	Data	Image	Notes
42850-50	Applications for health and drug coverage	CY 99y DE	OPR	OPR	See -64	OPR	Premium assistance applications were microfilmed until February 28, 2001. Between February 28, 2001 and the spring of 2004, the applications began to be imaged; the paper copy from that period is to be retained to meet contractual requirements.
42850-63	Master MSP beneficiary data	SO+7y NA NA	N/A	N/A	OPR	N/A	<p>This secondary covers the core (master) data of a person enrolled with MSP, such as name, gender, account and personal health numbers, current address, and power of attorney information.</p> <p>SO = when there are no more coverage periods for the account or person</p> <p>NA = When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.</p>

N/A = these records have not been created in this media type

OPR = use the official OPR (Office of Primary Responsibility) retention as listed

## OPERATIONAL RECORDS CLASSIFICATION SYSTEM

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

### APPENDIX C: Defining the official file copy (OPR) for media in primary 42850 classifications

Primary/ Secondary	Title	OPR Retention	Micro- film	Unscanned Paper	Data	Image	Notes
42850-64	MSP beneficiary data	CY+7y NA NA	N/A	N/A	OPR	N/A	<p>This secondary covers all active MSP enrolment system beneficiary data.</p> <p>NA = When the active retention has expired, the data is migrated off of the active enrolment system and classified under secondary -65 Archived MSP beneficiary data.</p> <p>NOTE: At the time of this ORCS publication, the system used to process MSP enrolment is the Registration and Premium Billing System (R&amp;PB); there is a system transformation project underway to change the system, but its function, and the types of records it contains, will remain the same and this classification will apply to the data on the new system.</p>
42850-65	Archived MSP beneficiary data	SO nil DE	OPR	N/A	OPR	N/A	<p>Covers all beneficiary data that has been migrated off of the active MSP enrolment system, regardless of the platform on which it resides.</p> <p>SO = when the beneficiary account is closed and the information is no longer required for ongoing statistical and reference requirements</p>

N/A = these records have not been created in this media type

OPR = use the official OPR (Office of Primary Responsibility) retention as listed

## Appendix D - Envelope categories for HIBC scanned records in MaxImage

Underlying premise: all scanned paper will be processed under the Special Schedule for Redundant Source Records, 206175.

Envelope category	Envelope description	Scan? Y/N OCR	ORCS #	ORCS retention	Notes
3RD PARTY	3rd party Registration	Y	42850-42	CY+7y nil DE	
ADDRESS CHGS	Address changes, both in and out of province	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
ADOPTIONS	Adoptions, both in and out of Canada	Y	42850-42	CY+7y nil DE	
APPEALS	Appeals	Y	42850-42	CY+7y nil DE	
BABYREG	Baby Registration	Y	42850-42	CY+7y nil DE	
CANCEL CVG	Cancel coverage but still in province, e.g., marriage, and Employee Record Cards (ERC's) (CANCEL CVG GRP) (CANCEL COVG PD)	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
CARECARD REQUESTS	CareCard requests, including those with cash and cheques, or damaged cards attached (CARECARD DMG) (CARECARD CASH)	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
CHGS IN PROV	Account changes: both in province and out of province, such as addition or removal of a dependant	Y	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
COMPANY CHGS	Company Changes (group administrator)	Y	42850-42	CY+7y nil DE	
COMPLEX CORR	Complex Correspondence	Y	42850-42	CY+7y nil DE	
CRA LETTERS	CRA Letters	N	42850-42	CY+7y nil DE	
CUAET CLAIM	Reimbursement request for the Canada-Ukraine Authorization for Emergency Travel (CUAET) Medical Exam	Y	41340-20	CY+7y nil DE	

## Appendix D - Envelope categories for HIBC scanned records in MaxImage

Underlying premise: all scanned paper will be processed under the Special Schedule for Redundant Source Records, 206175.

Envelope category	Envelope description	Scan? Y/N OCR	ORCS #	ORCS retention	Notes
CURRENT PA	PA Current Year	Y	42850-50	SO+7y nil DE	SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records. PA = premium asst.
DIRECTPAY APP	Direct Pay Apps	N	42850-30 42850-50	SO 6m DE SO+7y nil DE	If PA is enclosed then ORCS # will be 42850-50.
EMP DEPT CHGS	Employee Dept. number changes	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
ERC	Employee Record Cards	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
GROUP APPS	Group Applications	Y	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
GRP ADDR CHKS	Group Address Checks	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
HLTH CDA	Health Canada (Native) New resident applications for First Nations, filed by Health Canada	Y	42850-42	CY+7y nil DE	
IMMREN	Immigration Renewal - straightforward renewal of existing documentation	Y	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
IMMREN OTHER	Immigration Renewal - extension of an existing file but with complex documentaiton	Y	42850-42	CY+7y nil DE	

## Appendix D - Envelope categories for HIBC scanned records in MaxImage

Underlying premise: all scanned paper will be processed under the Special Schedule for Redundant Source Records, 206175.

Envelope category	Envelope description	Scan? Y/N OCR	ORCS #	ORCS retention	Notes
MHR	MHR	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed MHR = Ministry of Human Resources
MSP FOI	Beneficiary/MSP FOI request	Y	41350-40	SO nil DE	Retention will change to CY+1y 5y DE when section 5 is revised, to be in line with PHAR ORCS
MULTILIST	Multi-list	N	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
NEWRESAPP	New Resident App	Y	42850-42 42850-50	CY+7y nil DE SO+7y nil DE	If PA is enclosed then ORCS # will be 42850-50.
OVERAGE	Overage student - both in and out of Canada (OVERAGE IN) (OVERAGE OOC) (OVERAGE OUT)	Y	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
PA MULTI-YR	PA Multi-Year	Y	42850-50	SO+7y nil DE	SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records. PA = premium asst.

## Appendix D - Envelope categories for HIBC scanned records in MaxImage

Underlying premise: all scanned paper will be processed under the Special Schedule for Redundant Source Records, 206175.

Envelope category	Envelope description	Scan? Y/N OCR	ORCS #	ORCS retention	Notes
PA WITH ENROL	PA received with enrolment	Y	42850-50	SO+7y nil DE	SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records. PA = premium asst.
PERM MOV	Permanent Moves OOP	Y	42850-42	CY+7y nil DE	
PERSONAL CHG	Personal Status Changes, such as marriage, change of name, change of personal information	Y	42850-30	SO 6m DE	SO = when changes have been made in the system and transaction completed
PREV 2YR PA	PA previous two years	Y	42850-50	SO+7y nil DE	SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records. PA = premium asst.



## Appendix D - Envelope categories for HIBC scanned records in MaxImage

Underlying premise: all scanned paper will be processed under the Special Schedule for Redundant Source Records, 206175.

Envelope category	Envelope description	Scan? Y/N OCR	ORCS #	ORCS retention	Notes
RECERT VER	PA Recert Verification	Y	42850-50	SO+7y nil DE	SO = The SO definition will be established when the program area determines whether the image of premium assistance records will be used as the official file copy to meet CRA audit requirements, which will be after completion of the current system transformation project. At that point the SO interpretation will be updated; until that time the body of records will be retained as active records. PA = premium asst.
REFUGEE CLAIM	Refugee Claimants (REFUGEE CONV)	Y	42850-42	CY+7y nil DE	
RESEARCH REVIEW	Appeals		42850-42	CY+7y nil DE	
TEMP ABSENCE	Temporary absences	Y	42850-42	CY+7y nil DE	
TEMPDOCAPP	Temporary Doc App (TEMPDOC OTHER)	Y	42850-42	CY+7y nil DE	