

Medicare Data Release Agreement

(Initial year: _____)

Carrier name _____ Contract # _____

Enrollment Code(s) _____

By the signature of the Contracting Official below, the Carrier contracting with the Office of Personnel Management, hereby agrees

- ✓ to limit access, use and disclosure, and
- ✓ to physically safeguard the records of CSRS and FERS retirees, their spouses, and survivor annuitants who are enrolled in the Plan named above and who are also Medicare enrollees,

in accordance with the FEHB/MEDICARE Enrollment Data Exchange Agreement between the Office of Personnel Management and the Social Security Administration, as follows:

Data Exchange Agreement

- "OPM and SSA agree that the data obtained from SSA will be used only for the administration of the Federal Employees Health Benefits Program (Chapter 89, title 5, United States Code) and in coordinating benefits through the individual health benefits carriers who contract with OPM;
- to restrict access to the records created by the exchange to authorized personnel whose duties and responsibilities require access;
- that the records involved in the exchange and the data contained therein will be provided adequate security;
- that the files exchanged will not be duplicated or disseminated within or outside OPM or SSA without written authority except as allowed by regulations which permit disclosures among Federal or federally assisted programs;
- files provided by OPM will remain the property of OPM, and files provided by SSA will remain the property of SSA;

- access to the data will be restricted to only those authorized employees and officials who need it to perform their official duties in connection with the intended use of the data;
- the data will be processed under the immediate supervision and control of authorized personnel in a manner which will protect the confidentiality of the data in such a way that unauthorized persons cannot retrieve the data by means of a computer, remote terminal or other means;
- personnel who will have access to the data will be advised of the confidential nature of the information and the civil sanctions for noncompliance contained in the applicable Federal Statutes;
- the data will be stored in an area that is physically safe from access by unauthorized persons during duty hours as well as non-duty hours or when not in use; and
- to reserve the right to make on-site inspections or to make other provisions to ensure that adequate safeguards are being maintained."

Further, Carrier acknowledges that the Medicare match information was obtained under assurances by OPM that all actions would be applied prospectively; therefore, the Carrier agrees that no action will be taken to collect overpaid benefit payments from subscribers based solely on information supplied by this match.

Authorized Contracting Official:

Signature _____ Date _____

Name & Title _____

Carrier: _____ Enrollment Code(s) _____

Phone _____ FAX _____ Email _____

Address: