SUBJECT: 2000 Medicare Match

Background

Each year the Office of Personnel Management (OPM) and the Social Security Administration (SSA) match payment records. The "Medicare Match" identifies people on OPM's annuity rolls who are also Medicare beneficiaries. We share the match results to help you coordinate benefits with Medicare, as your contract requires.

Delay

We have had trouble transmitting our annuity roll data to SSA. Until the problems are cleared up, SSA can't match our data to their beneficiary rolls. We will send your match data to you as soon as we can and expect to be able to send it by the end of March.

Data release agreement

Before we can send the data to you, you must agree to protect the privacy of individuals whose personal records are included in the match and to safeguard the data files on which the records are stored. If we do not have a current agreement on file, you must submit an agreement (Enclosure A) to your OPM contract specialist within 10 days.

Use the following to determine whether you need to submit the agreement:

1) If your FEHB contract began on January 1, 2000, submit the agreement.

2) If your FEHB contract began on January 1, 1999, or before, AND you have had a major reorganization, merger, or sale of assets since you submitted the last form, submit the agreement.

3) If (1) and (2) do not apply, take no action; do not send another agreement.
Delivery changes

The way we have delivered your data is overly time consuming. Because we want to get your data to you as quickly as possible, we are changing our delivery process. These are the changes:

- We will send match reports to official plan contacts. Please let your designated "Medicare match contact" know that they will get the report from you, not directly from us.
- We will not send hard-copy reports (printouts).
- We will send most plans one disk for each carrier code.
- We will send large plans a cartridge when the match produces too much data to send on disk.

For more information about this letter, please contact your OPM contract specialist or call Agnes Kalland at 202/606-0745.

Sincerely,

(signed)
Frank D. Titus
Assistant Director
for Insurance Programs

Enclosure
Medicare Data Release Agreement
(Initial year: 2000)

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: