Privacy Impact Assessment for

Healthcare and Insurance Programs Support (HIPS)

October 17, 2025

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OPM Form 5003

Abstract

The Healthcare and Insurance Programs Support (HIPS) is comprised of two applications; the Federal Disputed Claims System (FDC) and the Tribal Desk System (TD). OPM uses the FDC application to track and process appeals from Federal Employees Health Benefits (FEHB) Program and Postal Service Health Benefits (PSHB) Program members or their authorized representatives for claims denied by health plans participating in those programs, referred to as disputed claims. This Privacy Impact Assessment (PIA) is being conducted because requests for appeals involve the submission and review of Personal Identifiable Information (PII) and Personal Health Information (PHI), which are collected within the FDC application. FDC will be retained pursuant to the applicable records retention schedule.

The TD system is an internal-only application used to collect application information from tribal employers wishing to participate in the FEHB Program. This system contains business-related bank account information.

Overview

HIPS is a web-based, paperless suite of systems which support administration of the FEHB and PSHB Programs. The HIPS system, and specifically the FDC application, was established to assist OPM in managing its responsibilities to review appeals from FEHB and PSHB members or their authorized representatives. This involves the review of PHI in the form of medical records and letters from the requester that generally contain sensitive, personal information. The FEHB or PSHB member or authorized representative submits a written request to OPM with supporting documentation. The request is uploaded to the FDC system, and a case is created and tracked through the review process. During the review, the OPM Examiner or Nurse Consultant may input opinions that involve sensitive and medical information and uses all the information to render a determination. In cases that require independent medical judgment, OPM shares the information with an Independent Review Organization (IRO) contracted by OPM to perform such reviews. This information is collected in the form of data entry and uploaded documents which are maintained pursuant to the applicable records retention schedule.

The TD application was established to track applications from tribal employers wishing to purchase FEHB coverage for eligible tribal employees.

The Tribal Desk system provides for the web-based management of eligible tribal employers who apply and participate in FEHB. This application tracks the participation status and important contact information for all tribal employers that are currently participating in the FEHB and for those tribal employers who have submitted applications to participate and are in the review process. OPM also collects the banking account information (routing and account numbers) from each tribal employer for the purpose of withdrawing the monthly FEHB premiums if the tribal employer is determined eligible to participate. Other information collected includes business contact information and copies of the tribal employer's contracts with the federal government related to The Indian Self-determination and Education Assistance Act (ISDEAA) and the Indian Healthcare Improvement Act (IHCIA). Active contracts under ISDEAA and IHCIA are required for a tribal employer to be eligible to participate in the FEHB Program.

Section 1.0. Authorities and Other Requirements

1.1. What specific legal authorities and/or agreements permit and define the collection of information by the project in question?

The Federal Employees Health Benefits Act of 1959, 5 U.S.C. 8901 *et seq.* authorizes OPM to administer the FEHB and PSHB Programs including the review and final determination of disputed claims.

Section 10221 of the Affordable Care Act incorporated and enacted S. 1790, the Indian Health Care Improvement Reauthorization and Extension Act of 2009, resulting in the addition of § 409 to the Indian Health Care Improvement Act (IHCIA). IHCIA § 409 (now codified at 25 U.S.C. § 1647b) allowing Tribes, Tribal Organizations and Urban Indian Organizations carrying out programs under the Indian Self-Determination and Education Assistance Act (ISDEAA) or Title V of the Indian Health Care Improvement Act (IHCIA) to purchase the rights and benefits of the Federal Employees Health Benefits (FEHB) Program for their employees.

1.2. What Privacy Act System of Records Notice(s) (SORN(s)) apply to the information?

The records contained in the HIPS are covered by OPM/Central-27, FEHB Disputed Claims and Complaints Records.

1.3. Has a system security plan been completed for the information system(s) supporting the project?
Yes. A System Security Plan was completed as part of the Authority to Operate granted to Healthcare and Insurance Programs Support (HIPS) and is updated annually.

1.4. Does a records retention schedule approved by the National Archives and Records Administration (NARA) exist?
Yes. Records Schedule Number NC1-146-77-01 INS has been approved by NARA.

1.5. If the information is covered by the Paperwork Reduction Act (PRA), provide the OMB Control number and the agency number for the collection. If there are multiple forms, include a list in an appendix. The HIPS the does not collect information via forms.

Section 2.0. Characterization of the Information
2.1. Identify the information the project collects, uses, disseminates, or maintains.
HIPS maintains information submitted by FEHB or PSHB members or their authorized representatives and tribal employer application information.

Information for FDC includes contact information that is PII, such as full names, dates of birth, phone number, email address and sensitive medical records. The application does not collect Social Security numbers. The information is reviewed by the OPM Claims Examiner as well as the OPM Nurse Consultant. When necessary, OPM shares the information, via the FDC application, with an external IRO that has been contracted by OPM to perform medical reviews to assist OPM in making a final determination.

TD includes business contact information and FEHB application information that includes copies of existing contracts with the Federal Government and tribal employer bank account information. The information is used to ensure that the tribal employer meets all of eligibility requirements to purchase FEHB coverage for their employees.

2.2. What are the sources of the information and how is the

information collected for the project?
FEHB and PSHB members or their authorized representatives request that OPM review a disputed claim in writing, usually a letter, with supporting documentation in the form of medical records. Requests may arrive at OPM via mail or submitted electronically. Hard copy requests are scanned and entered in the FDC application as electronic records and maintained in accordance with OPM/Central 27.

Tribal employers submit applications electronically via a designated secure email. These files are uploaded to the TD system.

2.3. Does the project use information from commercial sources or publicly available data? If so, explain why and how this information is used.

The project does not use information from commercial sources or publicly available data.

2.4. Discuss how accuracy of the data is ensured.

OPM disputed claims cases are reviewed by several OPM staff for accuracy by comparing the information submitted to the information entered into the application. Cases are originally entered by a contact representative, then reviewed by an examiner. When the case is identified as needing a medical judgment, it is also reviewed by an OPM nurse consultant.

In TD, tribal employer application information is also compared to the original application information submitted on a regular basis to verify accuracy.

2.5. Privacy Impact Analysis: Related to Characterization of the Information

Privacy Risk: There is a risk that information collected is not accurate or correct.

Mitigation: This risk is mitigated by OPM personnel by reviewing the information submitted and comparing the information received from the enrollee with information received from the FEHB Plan, to ensure the accuracy of the information.

Privacy Risk: There is a risk that HIPS collects more information than is required for the review.

Mitigation: This risk is mitigated by the OPM staff who carefully consider what information they need to achieve their business purpose and only send information to the IRO that is required to complete a thorough, independent physician review. This is usually a subset of the documentation that was originally submitted by the FEHB Member and the FEHB Plan.

Section 3.0. Uses of the Information

3.1 Describe how and why the project uses the information.

OPM uses HIPS to review disputed claims and to collect and track tribal employer application information.

To review a disputed claim, OPM manually enters contact information for individual requesting the appeal, the FEHB or PSHB enrollee, and the patient into the application. OPM uploads the initial request by the FEHB or PSHB member or authorized representative, which generally contains a written request and supporting documents in the form of medical records. OPM also collects the denial and first appeal information from the FEHB or PSHB plan. OPM uses this information to determine if the review and decision is a contractual issue or a medical issue. If medical, OPM may send the case to the IRO for an independent physician review. The IRO uploads a decision report. In addition, communication between the health plan and OPM is captured along with case notes. All the information is used to make the final determination.

OPM enters the tribal employer application information into TD directly. This information is a combination of manual data entry and uploaded documents. This information is used to determine if a tribal employer meets the eligibility requirement to participate in the FEHB Program as well as to periodically review that the requirements continue to be met after the tribal employer is already participating.

3.2 Does the project use technology to conduct electronic searches, queries, or analyses in an electronic database to discover or locate a predictive pattern or an anomaly? If so, state how OPM plans to use such results.

The project does not use technology to conduct electronic searches, queries, or analysis to identify predictive patterns or anomalies.

3.3 Are there other programs or offices with assigned roles and responsibilities within the system?

Within OPM, only members of Healthcare and Insurance project teams with a need-to-know have access to HIPS.

3.4 Privacy Impact Analysis: Related to the Uses of Information

Privacy Risk: There is a risk that OPM personnel who do not have a need to know the information in the system will be granted access.

Mitigation: This risk is mitigated through established standard operating procedures that describe which personnel should be granted access and levels of access based on their roles and responsibilities**.** OPM reviews all users with access regularly and reviews weekly reports that contain account lockout information for unusual email addresses or other anomalies.

Privacy Risk: There is a risk that authorized persons may access information in the system for an unauthorized use.

Mitigation: This risk is mitigated through defined user roles and access, which permit authorized users to only access information for which they have a need-to-know.

Section 4.0. Notice

4.1. How does the project provide individuals notice prior to the collection of information? If notice is not provided, explain why not.

Instructions for requesting that OPM review a disputed claim are in Section 8 of each plan's FEHB Brochure. The FEHB brochure is the contractual statement of benefits between OPM and the FEHB plan and is available on the OPM website as well as the FEHB Plan's website. The instructions include a list of all the information required to submit the request for appeal to OPM.

Tribal employers interested in applying to participate in the FEHB Program express interest and are then provided the application instructions via email.

4.2. What opportunities are available for individuals to consent to uses, decline to provide information, or opt out of the project?

FEHB and PSHB members or their authorized representatives take the first step to initiate a disputed claim review by OPM. Once a disputed claims case is initiated, OPM issues an acknowledgement letter to the party that sent the request. This letter contains OPM contact information. The FEHB member may

contact OPM to withdraw their request at any time prior to OPM making a final determination.

4.3. Privacy Impact Analysis: Related to Notice

Privacy Risk: There is a risk that individuals will not receive adequate notice concerning how their information will be used.

Mitigation: This risk is mitigated by providing FEHB Members complete instructions and a description of the review process in Section 8 of each FEHB Plan brochure. These instructions detail what must be sent to OPM for OPM to review a disputed claim; and notifies the member that when a medical judgement is required, OPM may consult with a healthcare professional who has appropriate training and experience in the field of medicine involved in the medical judgment, and who was not involved in making the initial decision.

Section 5.0. Data Retention by the Project

5.1. Explain how long and for what reason the information is retained.

OPM retains all HIPS-related records in accordance with the NARA Records Schedule NC1-146-77-01 INS.

5.2. Privacy Impact Analysis: Related to Retention

Privacy Risk: There is a risk that information will be retained for longer than it is needed to meet the business needs for which it was collected.

Mitigation: This risk is mitigated by ensuring that staff adheres to the applicable records schedule and deletes information when required. The System Owner, System Owner representative, and ISSO conduct annual reviews of the PTA, SSP, and FISMA control statements related to privacy and determine if any records need to be deleted at that time.

Section 6.0. Information Sharing

6.1. Is information shared outside of OPM as part of the normal agency operations? If so, identify the organization(s) and how the information is accessed and how it is to be used.

When an FEHB or PSHB member or authorized representative requests that OPM review a disputed claim, OPM conducts the review for contractual cases; but for medical judgment cases, OPM contracts with an IRO to provide a final

decision.

6.2. Describe how the external sharing noted in 6.1 is compatible with the SORN noted in 1.2.

OPM shares information with the IRO to review an adverse benefit determination at the request of the FEHB or PSHB member or authorized representative, which is directly compatible with the purposes outlined in OPM/Central-27, Disputed Claims and Complaints Records. The member's consent is implied when they submit a request for an appeal to OPM as outlines in Section 8 of the FEHB Plan Brochure.

6.3. Does the project place limitations on re-dissemination?

Yes. The IRO, by contract, is only permitted to use the information that OPM provides to make the necessary medical determination and cannot re-disseminate the information for any other purpose.

6.4. Describe how the project maintains a record of any disclosures outside of OPM.

HIPS saves and maintains records of any disclosures, such as system notifications, in an electronic log within the application.

6.5. Privacy Impact Analysis: Related to Information Sharing

Privacy Risk: There is a risk that information may be shared outside of OPM for a purpose that is not consistent with the purpose for which it was collected.

Mitigation: This risk is mitigated through training project team members on the proper handling of the information in the system, including appropriate disclosures. In addition, the contract with the IRO clearly defines the purpose for which the medical information is being provided.

Section 7.0. Redress

7.1. What are the procedures that allow individuals to access their information?

FEHB or PSHB members may request access to any records related to their Disputed Claims case by writing to the U.S. Office of Personnel Management, FOIA/PA Requester Service Center, 1900 E Street, NW, Washington, D.C. 20415-7900. Individuals must furnish the following information when making their request: full name; date and place of birth; Social Security Number; signature; available information regarding the type of information requested, including the name of the FEHB or PSHB Plan involved in any disputed claim and the approximate date of the request for disputed claim; the reason why the individual believes the system contains information about them; and the address to which the information may be sent.

In addition, individuals requesting access must also follow OPM's Privacy Act regulations on verification of identity and access to records (5 CFR part 297) and provide a notarized statement or unsworn declaration made in accordance with 28 U.S.C. § 1746.

7.2. What procedures are in place to allow the subject individual to correct inaccurate or erroneous information?

If FEHB or PSHB members or their authorized representatives submit inaccurate or erroneous information, they can notify OPM by phone and obtain instructions for submitting the corrected information.

In addition, individuals wishing to request amendment of records about them may write to the U.S. Office of Personnel Management, FOIA/PA Requester Service Center, 1900 E Street NW, Room 5415, Washington, DC 20415–7900. ATTN: Healthcare and Insurance. Individuals must furnish the following information in writing for their records to be located: full name; date and place of birth; Social Security Number; signature; and available information regarding the type of information that the individual seeks to have amended, including the name of the FEHB Plan involved in any disputed claim and the approximate date of the request for an appeal by OPM.

7.3. How does the project notify individuals about the procedures for correcting their information?

The FDC application generates acknowledgment letters that are sent to those requesting that OPM review a disputed claim. The letters contain information about

how to contact OPM if they have questions or additional information.

7.4. Privacy Impact Analysis: Related to Redress

Privacy Risk: There is a risk that FEHB members or their authorized representatives will not know the status of their requests for appeal or how to contact OPM if they have questions.

Mitigation: The FDC application generates acknowledgment letters that are sent to those requesting that OPM review a disputed claim. The letters contain information about how to contact OPM if they have questions or additional information.

Section 8.0. Auditing and Accountability

8.1. How does the project ensure that the information is used in accordance with stated practices in the PIA?

OPM maintains Standard Operating Procedures around the collection and maintenance of the information, and all OPM staff working on the HIPS complete IT Security and Privacy Awareness Training on an annual basis.

8.2. Describe what privacy training is provided to users either generally or specifically relevant to the project.

OPM staff complete required IT Security and Privacy Awareness Training on an annual basis. OPM Disputed Claims staff also take additional training specific to the project, including topics such as general customer service, information handling procedures, and sensitivity of information.

8.3. What procedures are in place to determine which users may access the information and how does the project determine who has access?

HIPS uses a web-based user management tool that allows for HI system administrators/account managers to provide account and role management such as creating and modifying user accounts.

Additionally, these same account management users can assign system roles to accounts.

The tool is a password restricted subcomponent that requires given roles to access functionality. It also allows for account management administration of user accounts, including locking or unlocking accounts, enabling, or disabling accounts, resetting passwords, email addresses, or other user account information, and adding or removing roles from individual accounts.

All actions within the tool are fully logged with a date and time of action, data changed with recorded history, and the user responsible for the change. This includes creation of or updates to user accounts, addition of or removal from roles, and any emails triggered by the system through new account creation, password reset, or account unlock actions.

8.4. How does the project review and approve information sharing agreements, MOUs, new uses of the information, new access to the system by organizations within OPM and outside?

The OPM project team reviews potential situations or arrangements that could require information sharing, new uses of the information, and/or new access by other organizations regularly. The project team works with the appropriate offices within OPM to execute the most appropriate plan or strategy depending on the situation.

Responsible Official

Demi Mozian
System Owner, Healthcare & Insurance

Approval Signature

Becky Ronayne
Senior Agency Official for Privacy