Medicare Data Release Agreement

(Initial year: 2001)

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:

REPORT DESCRIPTION—Annuitant Medicare Match Lists

SOCIAL SECURITY NUMBER. (9 characters) The Social Security number of the named individual as carried in the CSRS or FERS master payment record.

OPM CLAIM NUMBER. (9 characters) OPM's retirement claim number for identifying every individual who is either an annuitant or survivor annuitant. A claim number prefixed by "A" means the person receives a CSRS or FERS annuity based on his or her own Federal employment. A claim number prefixed by "F" means the person receives an annuity as the survivor of a deceased Federal annuitant or employee. Generally, a spouse's claim number is the claim number of the annuitant who elected to provide the survivor benefit if the Spouse Code is "1".

MEDICARE CLAIM NUMBER. (9 characters) Social Security Administration's enrollment number under which the named individual has coverage or eligibility for Medicare.

MEDICARE BIC. (2 characters) The Basic Insurance Code. The BIC is provided by SSA and indicates current Medicare coverage status.

SURNAME/FIRST NAME/MIDDLE INITIAL. (up to 20 characters) The name of the individual identified by the matching process. Names are listed alphabetically with surname first.

BIRTH DATE. (8 characters) The named individual's date of birth -- YYYYMMDD.

OPTION. (1 character) Means the FEHB enrollment is "1" for self only or "2" for self-and-family. For plans with a standard option, "4" means self only/standard option, and "5" means family/standard option.

MEDICARE CODE. (1 character) Means the person's Medicare coverage according to SSA's records.
- "A" means the person matched with SSA's records as having Medicare Part A;
- "B" means the person matched with SSA's records as having Medicare Part B;
- "C" means the person matched with SSA's records as having both Parts A and B;
- "X" means the individual matched with SSA's records but is not eligible for Medicare;
- "Z" means the individual did not match with SSA's records, and we do not know the Medicare status; and
- "N" means the individual is on the CSRS or FERS roll but the name was not sent to SSA to be matched -- for instance, because the Social Security Number is missing, and we do not know the Medicare status.

SPOUSE CODE. (1 character) Distinguishes the individual as either an annuitant or spouse of an annuitant; "0" means the individual is a retiree or survivor annuitant; "1" means a spouse for whom an annuitant elected to provide a survivor annuity.

ANNUITANT MEDICARE MATCH

File Record Layout

Record

Field	Description Length	Position	
Social Security Number		1-9	9
OPM Claim Number	A,F**	10-18	9
Medicare Claim Number	from SSA	19-27	9
Medicare BIC	Basic Ins. Code	28-29	2
Member Name	Last First MI	30-49	20
Date of Birth	YYYYMMDD	50-57	8
Enrollment Code	XX1, XX2, XX4 or XX5	58-60	3
Medicare Status	A,B,C,X,N,Z*	61	1
Spouse Code	Indicator	62	1

* A = A Only
   B = B Only
   C = Both A & B
   X = None
   N = Unknown
   Z = Unknown

** A = Annuitant
    F = Survivor

Records are in Undelimited Ascii. (Can be opened with WordPad or Notepad.)