PRIVACY AND CONFIDENTIALITY NOTICE

FSA TPA, LLC is providing the following benefits records (Benefits Information) on behalf of a tribal member benefit plan. The Benefits Information is being provided for the limited purpose of claims payment, coordination of benefits, or related plan administration functions. The Benefits Information may contain medical and other information protected as confidential and private by the Privacy Act of 1974, as amended, the privacy regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended, and other applicable state and federal regulations.

The Health Insurance Portability and Accountability Act of 1996 specifically states that individually-identifiable health information may be provided without a valid authorization from the claimant for limited reasons – claims payment, coordination of benefits, or related plan administration functions. FSA TPA will not provide individually-identifiable health information for any other purpose without the individual's valid authorization.

It may be a violation of federal and state laws to disclose the Benefits Information, or any portion of it, in any manner that is likely to, or that does in fact, reveal the identity of any person named in the Benefits Information to any person or entity, except those individuals who are expressly authorized to view it for legitimate purposes. It may also be a violation of ERISA or other applicable laws to use this information in any manner that could result in the person who is the subject of the information from being denied any employment opportunities or having employment terminated.

The person receiving this information is, personally and on behalf of the tribal member benefit plan, hereby put on notice that the following information is, or may be, confidential in nature and should not be disclosed in any manner, to any person or entity, except as is inherently and necessarily required for claims payment, coordination of benefits, or other plan administration functions. The person receiving this information is responsible to protect the confidentiality of anyone who may be identified, or could reasonably be identified, from the protected health information being provided. Further, any person receiving this information who believes he or she cannot abide by the terms of this notice should immediately return any and all information being provided with this notice to FSA TPA who is acting on behalf of the tribal member benefit plan.