

Authorization to Disclose Protected Health Information for Flexible Spending Accounts (FSA) or Health Reimbursement Arrangements (HRA)

1. What is Protected Health Information (also referred to as PHI)?

Protected Health Information is defined as; individually identifiable health information that is or has been maintained in or transmitted electronically. This includes claims, medical bills and supportive documentation submitted to BenefitHelp Solutions for the purpose of reimbursement under a Flexible Spending Account (FSA) or a Health Reimbursement Arrangement (HRA).

2. Why would I need to complete an Authorization to Disclose Protected Health Information?

If you expect your spouse to contact BenefitHelp Solutions to ask about claims status or to follow up on requests for additional documentation you will need to complete an Authorization to Disclose Protected Health Information giving BenefitHelp Solutions permission or authorization to disclose or discuss claims that you have submitted. You may want to do this at the start of the plan year to make it convenient for you and your family.

3. Why can't you just talk to my spouse without an Authorization to Disclose Protected Health Information?

You may have heard of a law passed by the federal government called the Health Information Portability and Accountability Act of 1996 (HIPAA). Under this act a health plan must maintain privacy standards for Protected Health Information. This means that BenefitHelp Solutions cannot talk to anyone except the plan participant about the claims submitted under their Flexible Spending Account (FSA) or Health Reimbursement Arrangement (HRA) unless we have either verbal authorization or a written Authorization to Disclose Protected Health Information from the plan participant.

4. What is a verbal authorization?

Verbal authorization is a one time limited authorization to discuss claims and account details and may include a conference call between BenefitHelp Solutions the participant and the other authorized individual.

5. How long does the Authorization to Disclose Protected Health Information last?

The Authorization to Disclose Protected Health Information will remain in effect until the participant requests in writing that we cancel or alter the authorization or after the authorization has been in effect for 24 months. The authorization can span more than one plan year. However, if there is a lapse of participation a new Authorization to Disclose Protected Health Information will be required.

6. Is there a limited number of Authorizations to Disclose Protected Health Information that can be in effect at one time?

No. An Authorization to Disclose Protected Health Information can be submitted for a spouse, a parent, a dependent or an ex-spouse for a child under the age of 18. The number and types of Authorization to Disclose Protected Health Information will depend on the individual family situation.

7. What if I want to limit the information that can be provided?

The Authorization to Disclose Protected Health Information form allows you to designate the type of information that can be disclosed to each authorized individual.

8. Where can I get an Authorization to Disclose Protected Health Information?

The Authorization to Disclose Protected Health Information form is available on the BenefitHelp Solutions website at www.benefithelpsolutions.com. Forms are also available by calling BenefitHelp Solutions at 888-398-8057. There may be a form in your open enrollment packet.