



**North Dakota**

**Public Employees Retirement System**

1600 E Century Ave Ste 2 • PO Box 1657 • Bismarck, North Dakota 58503-0649

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**NOTICE OF PRIVACY PRACTICES – Effective February 16, 2026**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. THIS IS INFORMATIONAL ONLY – NO ACTION IS REQUIRED ON YOUR PART. PLEASE RETAIN A COPY OF THIS NOTICE FOR YOUR RECORDS**

**USES AND DISCLOSURES OF HEALTH INFORMATION**

The North Dakota Public Employees Retirement System (NDPERS) uses health information about You:

- For treatment, for example, when your doctor sends us information about your diagnosis and treatment plan so we can arrange additional services;
- To obtain payment for treatment, for example, when we share information about you with your dental plan to coordinate payment for your dental work;
- For administrative purposes, for example, when we provide your employer with certain statistics to explain the premiums we charge; and
- To evaluate the quality of care that You receive, for example, when we use health information about you to develop better services for you.

Subject to certain requirements, we may give out Your health information if you have given written authorization to have your health information disclosed; or if a personal representative of yours (with proper authorization) has requested NDPERS to disclose your health information.

NDPERS may use or disclose “protected (identifiable) health” information about You without Your authorization for several reasons: (1) subject to a court order; (2) when disclosure is required under a federal or state law (such as an audit of NDPERS financial records); or, (3) for research purposes. But, in the case of disclosure for research, we will disclose information only if the project is approved by the NDPERS Board (Plan Sponsor), and the information is “summary information” from which all direct identifiers such as name, address, Social Security number, date of birth, etc. have been removed. NDPERS may also use Your health information to contact You to provide information about treatment alternatives or other health-related benefits and services that may be of interest to You.

NDPERS also limits the use and disclosure of health information as required by section 54-52.1-11 and section 54-52.3-05 of the North Dakota Century Code, which provide for the confidential treatment of health information of individuals receiving health care benefits under the Uniform Group Insurance Program and the Pretax Benefits Program, respectively.

NDPERS will not disclose individually identifiable health information about You or other plan members to the “Plan Sponsor” (NDPERS Board). Only aggregate de-identified information will be disclosed to the Plan Sponsor for the purpose of evaluating NDPERS health plan benefits structure, expenditure trends, premium financing and related matters.

NDPERS will not use individually identifiable health information that is genetic information for underwriting purposes.

NDPERS is prohibited from selling any protected health information without your authorization and will not use your information for marketing purposes without your authorization.

Furthermore, only aggregate, summarized, de-identified health information (such as total annual amounts, average payments per member per month, and trends for the utilization of hospital, ambulatory, and prescription drug benefits) will be disclosed to any insurance underwriter or consultant for the purpose of evaluating NDPERS health plan benefits structure, expenditure trends, premium financing and related matters.

NDPERS will not disclose substance use disorder treatment records received from a federally-assisted program subject to 42 CFR part 2 (SUD records) for use in civil, criminal, administrative, or legislative proceedings against You, unless (1) You provide written consent or (2) a court orders the use or disclosure of the records after You are provided written notice and an opportunity to be heard. A court

order authorizing use or disclosure must be accompanied by a subpoena or other legal requirement compelling disclosure before the requested record is used or disclosed. If we receive SUD records through a limited consent you provided, we will honor the permission you provide and continue to comply with 42 CFR part 2. If your consent permits our use and disclosure for all future treatment, payment, and health care operations purposes, we may use or disclose that information for those purposes and otherwise in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Except as stated above, NDPERS will not “use” or “disclose” Your health information, unless You have given NDPERS Your written authorization to do so. You may revoke this authorization at any time to stop any future uses and disclosures by sending NDPERS a written revocation of Your authorization.

## **YOUR RIGHTS**

- In the event that NDPERS discovers that a breach of Your health information has occurred, contrary to allowed uses and disclosures, You have the right to be notified of such breach.
- You have the right to request restrictions on certain uses and disclosures of protected health information, but NDPERS is not required to agree to a requested restriction, unless the purpose relates to carrying out payment or health care operations, the information pertains to a health care item or service for which the health care provider involved has been paid out of pocket in full and disclosure is not required by law.
- You have the right to receive confidential communications of protected health information subject to certain limitations.
- In most cases, You have the right to look at or get a copy of health information about You that we use to make decisions about You.
- You have the right to request that NDPERS amend Your health information, if You believe that Your information is incorrect.
- You also have the right to receive a list of certain instances when we have disclosed health information about You except for disclosures (1) to You, subject to certain limited exceptions; (2) to carry out treatment, payment and health care operations; (3) incidental to a use or disclosure otherwise permitted or required by the HIPAA privacy rule; (4) pursuant to an authorization; (5) for a facility’s directory or to persons involved in Your care; or, (6) for certain other purposes provided in 45 C.F.R. § 164.508.
- If Your health information is disclosed electronically then the accounting of disclosures will include information about treatment, payment and health care operations

Accounting requests may be made for periods of time going back six (6) years; if an accounting request relates to an electronic health record it may go back three (3) years. NDPERS will provide the first accounting You request during any 12-month period without charge. Subsequent accounting requests may be subject to a reasonable cost-based fee. NDPERS will inform You in advance of the fee, if applicable.

Requests for any of the above must be made in writing and submitted to the Privacy Officer at 1600 E Century Avenue, Ste 2, PO Box 1657, Bismarck, ND 58502-1657.

## **OUR DUTIES**

NDPERS is required by law to maintain the privacy of protected health information, to provide You with notice of Our legal duties and privacy practices with respect to identifiable health information about You, to provide You notice of a breach of unsecured protected health information, and to follow the practices which are currently in effect as described in this notice. You have the right, even if You agreed to receive the notice electronically, to obtain a paper copy of the notice from NDPERS upon request.

We reserve the right to change the terms of this Privacy Notice and to make the new notice provisions effective for all protected health information that NDPERS maintains. If NDPERS changes our policies and procedures, NDPERS will revise the Notice, post a copy of the revised Notice on the NDPERS website, [www.ndpers.nd.gov](http://www.ndpers.nd.gov), and provide information to You on how you may obtain a copy of the revised Notice within 60 days of the change. For more information about our privacy practices, contact the person listed at the end of this Notice.

## **COMPLAINTS**

You have the right to file a complaint with NDPERS or the Secretary of the Department of Health and Human Services (DHHS) if You believe that Your privacy rights have been violated. Any complaints to NDPERS should be made in writing to Privacy Officer, 1600 E Century Ave Ste 2, Box 1657, Bismarck, ND 58503.

You may receive information on how to file a federal complaint by contacting the Regional Manager, Office for Civil Rights, U.S. Department of Health and Human Services, 1961 Stout Street, Room 08-148, Denver, CO 80294, Phone (800) 368-1019, FAX (202) 619-3818, TDD (800) 537-7697 or the Office for Civil Rights, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201. To file online, visit <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>.

***NDPERS will not retaliate against YOU for filing a complaint.***

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**NDPERS PRIVACY CONTACT**

NDPERS has designated a Privacy Officer as its contact person for all issues regarding patient privacy and Your privacy rights. If You have any questions about NDPERS privacy policy or Your privacy rights, please submit a written request to:

NDPERS Privacy Officer 1600 E Century Ave Ste 2, Box 1657, Bismarck, ND 58503 or call 701-328-3900  
or 1-800-803-7377.

You also may obtain a copy of the current version of the NDPERS Privacy Notice at our website – [www.ndpers.nd.gov](http://www.ndpers.nd.gov).

**EFFECTIVE DATE:**

This Notice was revised effective February 16, 2026.