**Data Transfer Authorization**

**WHEREAS,** XYZ Company (“Contractor”) performs services (“Services”) for the State of Wisconsin (“Employer”) pursuant to an administrative services agreement for population health and wellness services, which Services involve the use and/or disclosure of Employer’s participants’ information and/or other confidential information (“Information”); and

**WHEREAS,** Employer has requested that Contractor exchange Information with Employer’s vendor, ABC Company (“Vendor”) to facilitate the Services and/or to facilitate Vendor’s services to Employer; and

**WHEREAS,** Contractor, Employer, and Vendor intend to comply with all applicable laws, rules, and regulations governing the exchange of Information; and

**WHEREAS,** Contractor and Vendor have entered into a data sharing agreement setting forth the confidentiality obligations of Contractor and Vendor with respect to the exchange of Information. Contractor and Employer desire to memorialize Employer’s authorization to conduct exchanges of Information between Contractor and Vendor.

**NOW, THEREFORE,** Employer hereby authorizes the exchange of Information as follows:

1. Authorization. Employer hereby authorizes Contractor to exchange Information with Vendor.

**Employer:** Department of Employee Trust Funds ***SAMPLE***

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_ \_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_