



We know children.



Confidentiality / User Login ID Agreement

I agree to abide by all federal, state and local laws pertaining to the confidentiality of identifiable medical, personal and financial information obtained in any form through my employment, and/or services may provide, or education I may receive at Children's Hospital and Medical Center, Children's Physicians, or Nebraska Pediatric Practice Inc., d/b/a Children's Specialty Physicians (Children's). I agree to adhere to all Children's policies and procedures adopted to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) governing the privacy, security and use of protected health information (PHI). I agree to amend this Agreement or any separate agreement as needed to comply with HIPAA, any other federal or state laws or any hospital policies or processes. I understand that failure to comply with the hospital HIPAA policies and processes may subject me to corrective action including termination, and/or loss of medical staff privileges, or access to Children's as an educational site.

I understand that state and federal laws protect the confidentiality of patient information and that I will be personally liable for any breach of these duties and may be held criminally liable under the HIPAA regulations for intentional and malicious release of PHI.

If granted Children's login ID(s), I understand that my Children's Hospital login ID(s) is/are the equivalent of my legal signature, and I will be accountable for all representations made at login and for all work done under my login ID(s). I will use my Children's computer access into patient records ONLY FOR THE PURPOSE OF LOOKING UP PATIENT INFORMATION ON PATIENTS CURRENTLY ASSIGNED TO ME FOR CARE OR REVIEW. I will NOT access patient information on patients NOT CURRENTLY ASSIGNED to me for care or review. I also agree to not discuss any information regarding the patients assigned to me with other students or third parties, unless so directed by my supervisor.

I further understand that I am responsible for maintaining the confidentiality of my login ID(s) and I will not share my login ID(s) with others. I understand that the electronic data and information stored in the computer systems may include confidential patient, financial, organizational and practitioner data or information and I must treat it with the same care or greater care as data and information in paper records.

If I believe someone has compromised or broken the security of my login ID(s) and password, I will immediately change my password and will immediately contact the IT Helpline at 955-6700. I understand that the misuse of my access to the computer systems of Children's, or of confidential information obtained, may subject me to corrective action including termination, and/or loss of medical staff privileges, or access to Children's as an educational site.

I understand I should contact my supervisor or the Children's Privacy Officer (955-4122) with any questions I may have prior to acknowledging my acceptance of the Agreement as provide below. I further understand that by executing this document, I am also agreeing to future amendments to Children's policies and procedures, changes to the Children's Employee Handbook, and any changes made to future versions of this agreement.

____ (Enter initials) I have read the Confidentiality and Login Use Agreement and fully understand that any failure on my part to comply with the agreement may immediately end my contract at Children's or any of its affiliated sites.

Employee/Learner Name _____

Employee/Learner Signature _____ Date: _____