



Email request to: Remotelabsupport@dshs.texas.gov

FACILITY SECURITY AGREEMENT For Laboratories, Hospitals, Providers, State/Local Health Facilities

Form with fields for Facility Name, Mailing Address, City/State/Zip, Submitter ID, TPI, NPI, Administrator Name/Title, Telephone, E-mail, and Test types.

Please select the type of report(s) needing access to (Must make a selection or request will not be processed)

- Checkboxes for Newborn Screening, Clinical Chemistry, and Microbiology with descriptions.

*1 "Yes" is automatically defaulted for Austin Laboratory Microbiology hard copy (mailed) DSHS final result report(s)

DSHS LAB STAFF ONLY:

Form with fields for LIMS Accounts and Date RDS Access Database Updated.

This agreement between the Department of State Health Services (DSHS) and "the Facility" recorded above sets forth expectations for security and confidentiality with respect to the DSHS Information Resources (IR), (network, software and all associated data).

All Facility personnel provided access to DSHS IR must comply with DSHS Security Policies, as well as federal and state confidentiality laws including, but not limited to, the Health Insurance Portability and Accountability Act.

The Facility will not use or disclose any information contained in the DSHS IR, except as authorized by state and federal law. The user name and password used to access the system will also be safeguarded and will not be shared with anyone.

The facility will maintain computers properly equipped to access DSHS IR through an Internet browser and will provide reliable Internet service. The facility's computers and network will be configured to include appropriate anti-virus software, firewalls, security patches and other controls that will prevent security risks to the DSHS network and to its resources.

Failure to comply with the Security Agreement requirements may result in termination of the agreement and access to DSHS IR. This agreement will be renewed annually for compliance; otherwise it is effective until terminated.

I agree that this facility will adhere to the terms of this agreement.

Facility Administrator's Signature

Date

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Facility Security Agreement Form Instructions

Facility Information:

- **Facility Name** – Name of clinic that will submit tests remotely or print reports remotely.
- **Facility Mailing Address** – Complete mailing address of Facility.
- **Facility 8-digit Submitter ID Number** – DSHS assigned clinic identification number for Newborn Screening and Microbiology tests. Can be found next to submitter name on result reports or in Section 1 of the specimen submission form(s).
- **Facility 9-digit TPI Number** – TMHP assigned clinic Medicaid Texas Providers Identification number for submission of Texas Health Steps / Clinical Chemistry tests. Can be found next to submitter name on result reports or in Section 1 of the specimen submission form(s).
- **Facility 10-digit NPI Number** – National Provider Identifier number.
- **Facility Administrator** – Name and Title of Facility Administrator. This is usually the office manager.
- **Telephone Number, Ext** – Telephone number of the Facility Administrator.
- **E-mail** – Email address of the Facility Administrator. **Only work email address are acceptable.** If a personal email address is provided, your request will not be processed. DSHS will include your e-mail in the web application – Remote Users distribution list to inform you about any important updates or as part of troubleshooting.
- **Tests Currently Submitted To** – Indicate the DSHS Laboratory your Facility submits its tests to. Default is Austin Laboratory.

Security Agreement:

- **Facility Administrator** – The point of contact at the Facility that can authorize web user setup, web user termination and maintain current Facility and provider information. This is usually the office manager.

Please submit the completed form to DSHS Remote Laboratory Support:

- **Email** – remotelabsupport@dshs.texas.gov
- **Fax** – Attention: Remote Lab Support L-601, (512) 776-7223. Due to high demand, faxing is not recommended

For further assistance or additional clarification, please e-mail remotelabsupport@dshs.texas.gov.