
Confidentiality and Security Agreement

2.1 I will not access confidential information, including protected health information (PHI), business asset data, secret, proprietary, or private information which I have no legitimate need to know or for which I am not an authorized user. This includes my records and records of family members and friends. I will not access my own Personal Health Records except through MyWVUChart.com (MyChart).

I agree.

2.2 If I observe or have knowledge of unauthorized access, use or divulgence of confidential information, I will report it immediately to my supervisor and to the appropriate WVUHS Privacy or Security Officer.

I agree.

2.3 Proxy Access for others records (e.g., family) can only be granted through MyWVUChart, once proxy consent has been completed at the Health Information Management Department.

I agree.

2.4 I will not utilize another user's password in order to access any system. I will not reveal my computer access code to anyone else unless a confirmed request for access to my password has been made by the Information Technology Department and I am able to confirm the legitimacy of the request and the requestors. I accept personal responsibility for all activities occurring under my password.

I agree.

2.5 By accepting the Confidentiality & Security Agreement, I acknowledge that WVU Medicine has an active on-going program to review records and transactions for inappropriate access and I understand that inappropriate access or disclosure of information can result in penalties including disciplinary action, termination, refusal of access to premises, and/or legal action.

I agree.