

BeebeCare Link Site Agreement

The protection of health and other confidential information is a right protected by law and enforced by fines, criminal penalties as well as employer policy. Safeguarding confidential information is a fundamental obligation for all persons accessing confidential information.

Your signature at the end of this statement will commit you to that obligation and WILL be used as proof that you understand and agree to the stated basic duties and facts regarding privacy. Read it carefully.

What you agree to in signing this statement:

1. I agree to protect the privacy and security of confidential information I access through Beebe Healthcare's electronic records at all times.
2. I agree to a) access confidential information to the minimum extent necessary for my assigned duties and b) disclose such information only to persons authorized to receive it.
3. I agree that I understand the following:
 - Beebe Healthcare tracks all user IDs used to access electronic records. Those IDs enable discovery of inappropriate access to EITHER employee records or patient records.
 - Inappropriate access and/or unauthorized release of confidential or protected information will result in disciplinary action, up to and including termination of employment, and will result in a report to authorities charged with professional licensing, enforcement of privacy laws and prosecution of criminal acts. I further understand and agree that inappropriate access and/or unauthorized release of confidential or protected information may result in temporary and/or permanent termination of my access to Beebe Healthcare's electronic records.
 - That I will be assigned a User ID & a one-time use activation code. I agree to immediately select and enter a new password known only to me. I understand I may change my password at any time and will do so based on Beebe Healthcare's established policy and/or when prompted. I understand that I am to be the only individual using and in possession of my confidential password. I am aware that the User ID and password are equivalent to my signature. Also, I am aware that I am responsible for any use of the system utilizing my User ID and password. This includes data entered, viewed, printed or otherwise manipulated. If I have reason to believe that my password has been compromised I will report this information to Beebe Healthcare and I will also immediately change my password. I understand that User IDs cannot be shared. Inappropriate use of my ID (whether by me or anyone else) is my responsibility and exposes me to severe consequences.
4. *Confidential Health Information includes but is not limited to any individually identifiable information in possession or derived from a provider of health care regarding a patient's medical history, mental, or physical condition or treatment, as well as the patient's and/or their family members' records, test results, conversations, research records and financial information. Examples include, but are not limited to, physical medical and psychiatric records including paper, photo, video, diagnostic and therapeutic reports, laboratory and pathology samples, and patient insurance and billing records.*
 - *Employee and business Information that is not available in the public domain including but not limited to employee home telephone number and address, spouse or other relative names, social security number or income tax withholding records, information related to evaluation of performance, and other such information obtained from Beebe Healthcare's records, which if disclosed, would constitute an unwarranted invasion of privacy; or disclosure of protected or confidential information that would cause harm to Beebe Healthcare.*

- The designated Account Administrator agrees to assume full responsibility for managing user access to BeebeCare Link on behalf of their practice. This includes:
 - Creating and assigning user accounts only to staff who have a legitimate, job-related need to access patient information.
 - Reviewing and verifying each user's access needs prior to account creation.
 - Maintaining oversight of all active users at the practice site.
 - Immediately disabling or requesting the termination of access when:
 - An individual no longer requires access for their role, or
 - An individual's employment or affiliation with the practice ends.
- By signing this agreement, the Site Administrator acknowledges their role in ensuring that user access to BeebeCare Link remains appropriate, current, and in compliance with applicable privacy and security policies.

Practice Name: _____

Account/Site Administrator Name: _____

Title: _____

Contact number: _____

Contact email: _____

Date: _____

Signature: _____