

# WEB PSI AND ADOPTION SCREEN ACCOUNT REQUEST FORM

## **Terms and Conditions of Use**

The Web PSI and Adoptions Screen is an application that allows authorized users to nominate persons who do not exist or view identification and health insurance coverage data on existing individuals who are registered with eHealth Saskatchewan as residents of Saskatchewan and to provide PSI and/or Adoption information for the purposes of providing access to provincial supplementary health care benefits. The information available in the Web PSI and Adoptions Screen is to provide authorized health care providers and health care organizations with the most appropriate and accurate information available.

## Web PSI and Adoptions Screen User Roles & Responsibilities

- Users are responsible for ensuring they have read and are familiar with the Web PSI and Adoptions Screen Procedure Manual.
- Users are responsible for ensuring that the use of the application is related to the purpose of their healthcare work and it is in accordance with their health organizations' policies and procedures and The Health Information Protection Act (HIPA).
- Users must use Web PSI and Adoptions Screen data only in accordance with established data access agreements between source organizations and consumer organizations and/or as authorized by the Ministry of Health.
- Users must be authorized by an Authorized Approver within an Approved Organization. Approvers and Organizations must be authorized by eHealth Saskatchewan in accordance with the Web PSI and Adoptions Screen Procedures Manual.
- A User is identified and authenticated by an Authorized Approver to view and use Web PSI and Adoptions Screen data. The Approved Organization and the Approver are accountable for actions of the User.
- Users who are entering or viewing data in the Web PSI and Adoptions Screen are responsible for the protection of the reuse of the information for purposes other than health care delivery.
- User access is audited.
- Inappropriate use of the Web PSI and Adoptions Screen shall be reported to eHealth Saskatchewan's Chief Privacy Officer.
- Any violation of privacy legislation and the Ministry Privacy and Security policy will be dealt with according to the Ministry's Privacy and Security Breach Management protocols.

#### Use is Consistent with the Purpose

The use of the Web PSI and Adoptions Screen must be in accordance with a need-to-know basis for the purposes of: (One or more should apply to the user's needs).

- Supporting the identification and registration of persons seeking or receiving health care services, including access to the Saskatchewan provincial health number.
- Supporting the accurate and timely management of client identification data within health care systems.
- Verifying health and program coverage eligibility.

#### **Restrictions on Use**

The Web PSI and Adoptions Screen will not be used for the following purposes:

- To look up information on a person(s) for personal reasons.
- To search for people for personal reasons.
- To use the information provided for personal reasons.
- To provide unauthorized research data or reports.
- To use or reuse data in a manner that is not consistent with HIPA.
- To use information for any other purpose other than the identified stated purpose.

#### **Training Options**

- The User will receive a procedure manual specific to their work unit for utilizing the Web Nomination Screen
- Support is provided by the eHealth Service Desk 1-888-316-7446.

### **Workstation Security**

- The User will secure all data available from the Web Nomination Screen. Access by unauthorized users will not be permitted.
- The User will keep all passwords associated with the system private.
- The User will secure the workstation with a screen-saver password to assure security when the machine is left unattended for an extended period of time.

eHealth Saskatchewan	WEE	-	ADOPTION S REQUEST FOR	-
<ul> <li>Call the Service Desk 1-888-316-7446 (local 337-0600) if you are unclear about any fields below.</li> <li>The Service Desk will complete the request within five days from receiving the request.</li> <li>Return to: Fax Number: 306-781-8480         <ul> <li>Email: servicedesk@ehealthsask.ca</li> </ul> </li> </ul>				
User Information				
Type of request (check one):	🗌 New user		Change in user typ	e 🗌 Remove
User's Full Name printed:			Work Phone #:	
Organization Name:			Office:	
Working Title:			Email Address:	
Working Unit (ie IAD, CFS)				
Environment (check one)	Production User Acceptance Test (UAT)		ance Test (UAT)	
Programs (check all that apply	PSI Assisted Adoption		ption	
to the Saskatchewan provincial health number.  Supporting the accurate and timely management of client identification data within health care systems. Verifying health and program coverage eligibility.  Service Authorization User's signature:				
				Date (YY/MM/DD)
		Date acce	ess is required:	Date (YY/MM/DD)
Manager's Information Name:				
	(please prin	t)		Work Phone Number
Signature:				
				Date (YY/MM/DD)
I acknowledge that the requestor has read and signed this form and understands their responsibilities and uses as described in this form and their obligations under HIPA. I further acknowledge that I understand my obligations under HIPA and have been authorized by eHealth Saskatchewan to grant this approval. <b>Authorized Approver's Information</b> Name:				
	(please prin	t)		Work Phone Number
Signature:				
				Date (YY/MM/DD)
If you need the name of an authorized approver, please call the Service Desk 1-888-316-7446 (local 337-0600) The most recent version of this form can be downloaded at: http://www.ehealthsask.ca/forms				