

**HIV CARE STATUS REPORTS (CSR)
SECURITY USE POLICY FORM**

This document describes security terms, conditions and responsibilities to which participating facilities must agree in order to use the HIV Care Status Reports (CSR) system. This document supersedes all previous versions.

I. Introduction

The New York City Department of Health and Mental Hygiene, hereafter referred to as NYCDOHMH, has developed the HIV Care Status Reports (CSR) system based on the following provision in the amended 2010 NYS Public Health Law, which allows for the limited sharing of individual-level data on persons living with HIV (PLWH) to HIV diagnostic/care providers. *“Nothing contained herein shall prevent the department, municipal health commissioner or district health officer from informing physicians and other persons authorized to order diagnostic tests or make medical diagnoses or their agents that there is no need for additional follow-up by such provider for such individual.”* [NYS RR Feb 2012]. The only individual-level data that will be returned from the HIV CSR system to providers are the three following care status outcomes:

- Follow-up needed
- No follow-up needed
- Non-case

Based on the 2010 NYS RR, more specific information related to the receipt of medical care, such as site/facility/clinic where care was received, date of the last laboratory report, or vital status, cannot be disclosed to providers at this time.

The CSR is a secure, web-based application that will enable facilities to electronically submit eligible out-of-care patients to the NYCDOHMH for a query against the HIV registry for return of limited information on the patients’ current HIV care status in NYC. Specifically, only those facilities that fulfill the following two criteria are eligible to access this system:

- 1) Conduct HIV diagnostic testing or care for PLWH. Specifically, the facility must have a physician or other person(s) authorized to either:
 - Perform diagnostic HIV tests to make a confirmed diagnosis of HIV and/or
 - Prescribe antiretroviral therapy as a part of ongoing HIV medical care for PLWH
- 2) The facility is located within one of the 5 boroughs of New York City

The purpose of this document is to:

- Define the security terms, conditions, and responsibilities for eligible facilities in order to participate in the CSR
- Define the duties and responsibilities of CSR Designees

II. Overall Security

The facility is responsible for the security of HIV CSR data physically located on, or transported over, its own network. This includes: validation of users who need to access the network, physical security of computers on its network and security of data that is removed from the HIV CSR system. **It is important to note that the facility is responsible for immediately notifying the NYC DOHMH’s HIV Care Status Unit when the status of the CSR Designee changes due to reassignment of duties, or change of employment.** Such notification must be e-mailed to csr@health.nyc.gov within **72 hours** of the change with the following information: whether a new CSR Designee has been identified. If identified, include the new CSR Designee’s first/last name, work email, and work phone as access to CSR will need to be enabled for this individual.

III. Data Disclosure

Employees/agents of the facility who have obtained information from CSR shall not disclose this information to any other persons unless that person is legally authorized to obtain this information and has official reason to see that information.

IV. Responsibility

The facility will be responsible for the actions of any of its employees/agents with regard to compliance with CSR policies. It is absolutely forbidden for any employee/agent to share a CSR account (password) or to use an account (password) assigned to another CSR user. Unauthorized disclosure of Confidential Information is a violation of New York City Health Code Section 11.11(d) and state law, subject to civil and/or criminal prosecution, penalties, forfeitures and legal action. See Section 558(e) of the City Charter and Section 3.11 of the New York City Health Code.

The Medical Director of the facility is responsible for designating a single CSR Designee per site who will be personally accountable for execution of the responsibilities defined in this document. The facility agrees to ensure that the CSR Designee will appropriately access the CSR system and carry out their duties and responsibilities in a timely manner and will not discriminate against, abuse or take any adverse action with respect to a person to whom the confidential information pertains. Should the CSR Designee not fulfill the responsibilities as described herein, e.g. is unresponsive to inquiries or alerts from the NYC DOHMH, the NYC DOHMH may direct the Medical Director to appoint a replacement. The Medical Director is responsible for designating and establishing a replacement CSR Designee. Former employees of the facility must continue to comply with confidentiality requirements after leaving employment.

V. Procedure for facility to obtain access to the HIV CSR System

Step 1: The Medical Director must designate one particular staff member within the facility to be the CSR Designee.

- The Medical Director may designate him- or herself as the CSR Designee. However, the CSR Designee does not need to be the Medical Director or an MD, PA, or NP. The NYC DOHMH does have not any requirements in who is designated to become the CSR Designee.
- If the organization has more than one affiliated site, the Medical Director can either assign one CSR Designee to each affiliated site or select a single CSR Designee to oversee all affiliate sites.

Step 2: The CSR Designee will initiate the one-time electronic request for access to the CSR system via NYC MED. The registration process will be completed via an email exchange to confirm the CSR Designee’s acceptance of their roles/responsibilities and ascertain whether the facility has any affiliates. (*Affiliate(s) is defined as another site(s) within the organization but outside the clinic at which a patient could receive care and would still be considered to be in care within the system/organization.*)

- If the CSR Designee does not have a NYC MED account, s/he must register at <https://a816-healthpsi.nyc.gov/>
- *Request for HIV CSR access cannot be made via phone, mail, or fax.*

Step 3: Once access to the CSR system has been granted, eligible out-of-care PLWH can be submitted via the NYC MED HIV CSR application. Patient submissions cannot be made via phone, mail, or fax.

VI. CSR Designee Duties and Responsibilities

The CSR Designee is the principal point of contact concerning any issues that arise with the submission of patient information. The CSR Designee’s responsibilities include the following:

- 1) Submission of eligible patients should occur quarterly:**

- Eligible patients include either
 - A patient with a new, confirmed HIV diagnosis at the facility who did not link to HIV-related medical care in the past 12 or more months. *Please note: patients who are diagnosed during an inpatient hospitalization or emergency department visit at the facility and then referred to the facility's HIV/infectious diseases (ID) clinic but do not link to care at the HIV/ID clinic in the 12 months from the time of diagnosis are eligible to be submitted.*
 - OR**
 - A patient who was previously diagnosed with HIV and in care at the facility but has not returned for HIV-related medical care in the past 12 or more months.
- Required information that must be submitted for each patient:
 - Patient identifiers: first name, last name, date of birth, sex at birth
 - Medical record number (MRN)/facility identifier: number assigned by the facility that identifies an individual medical record. This number will serve as the unique identifier under which the care status of each individual will be reported back to the CSR Designee. *Please note that this MRN is solely used for the CSR Designee to identify the corresponding patient submitted. The MRN is not used during the care status query process.*
 - Date of the last HIV-related medical visit at the facility
 - Medical visit: visit with MD, DO, PA, or NP at the facility/site including the emergency department or inpatient visit if confirmatory testing was conducted during that visit.
 - If the date of the last HIV related medical visit is <12 months from the date the patient is submitted, the request will not be processed.
 - Date of the last HIV-related laboratory test at the facility
 - HIV-related laboratory test = CD4 count, HIV viral load, or confirmatory test (i.e., Multispot/immunodifferentiation assay, Western blot, IFA, NAAT)
 - Report the date the specimen was collected at the facility.
 - The value of the test result is NOT required.
 - Patient/provider verification step: the date of the laboratory test submitted will be matched against the Registry to confirm that the laboratory test date (within a set interval of time) is the same as the facility reported in the Registry. If this automated match fails to identify the laboratory date, additional investigation will be conducted before the care status match can proceed.
 - No minimum or maximum number of patients is required during patient submission.
 - Individual patients must be entered into the CSR system directly; batch uploading is not possible at this time.

2) Obtain Care Status outcomes for submitted patients:

- Definition of each outcome:
 - No additional follow-up needed:** the provider DOES NOT need to continue efforts to return this patient to care because the patient:
 - Has at least 2 HIV-related laboratory tests (CD4/VL) ordered and reported to the DOHMH HIV Registry by the same NYC facility at least 90 days apart in the 12 months prior to the date of the care status match. These laboratory based criteria for engagement in care are based on the National HIV/AIDS Strategy.

or

 - Matches to a death reported to the DOHMH Bureau of Vital Statistics or national death registries according to the most recent NYC HIV Registry data. Please note that the city health

code does not permit sharing of vital statistics information from the NYC DOHMH Bureau of Vital Statistics with providers.

- Follow-up needed:** the provider DOES need to continue efforts to return this patient to care as the patient did NOT meet the above criteria.
- Non-case:** unable to establish that the patient has ever been diagnosed with HIV and reported to the NYC DOHMH.
- Timing of reported results:
 - Outcomes results are posted the following business day for each patient name submitted if no issue was identified during the care status matching process.
 - Results of all patient lists submitted will be available in your facility's CSR account indefinitely.

3) Communicate with HIV Care Status Unit staff

- For submitted patients that require additional investigation, HIV Care Status Unit staff is only authorized to discuss these patients with the CSR Designee or Medical Director.

VIII. Notification

The Medical Director agrees to notify the NYCDOHMH at csr@health.nyc.gov at least three business days prior to any change in employment or affiliation affecting CSR access.

The Medical Director agrees to notify the NYC DOHMH immediately upon discovery of suspected or confirmed breaches of protocol, access or security that affects this security agreement. It is particularly important to notify the NYC DOHMH regarding sharing of a CSR account or use by an employee/agent of an account assigned to another CSR user. The notification should be made via csr@health.nyc.gov within 24 hours of the incident. In the absence of an appropriate organizational response to account sharing, user account privileges will be removed.

IX. Investigations

The Medical Director will notify the NYC DOHMH of any actual or suspected violations of this policy and will cooperate with the NYC DOHMH in any subsequent investigations. Detailed logging of all communications for user activity on the CSR occurs continually.

X. Revocation of Access

Access to the CSR is a privilege. The NYC DOHMH may direct a participating party to be replaced and/or reserves the right to revoke the use of an individual account or the facility participation if violations of CSR security policies occur.