MEMORANDUM OF UNDERSTANDING
BETWEEN
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
AND
CITY OF COLUMBIA

The Missouri Department of Health and Senior Services (hereinafter referred to as Department) and the City of Columbia on behalf of its Department of Public Health and Human Services (hereinafter referred to as local health agency) enter into this Memorandum of Understanding (MOU) to facilitate access to the Missouri state data center which houses birth and death data needed for the local health agency to issue birth and death certificates; provide a means for the local health agency to access the technology resources necessary to provide services to the citizens of Missouri; and provide information technology support and technical assistance to the local health agency.

This MOU shall be effective for the period of September 1, 2017, through August 31, 2018, unless terminated as specified below.

I. The Department agrees to the following:

1. Provide access to Department applications.

2. Provide help desk services, telephone and on-site technical assistance to assure Internet access to Department web applications and access to the state data center mainframe.

3. Invoice the local health agency on a monthly basis based on mainframe transactions related to issuance of birth and death certificates by the agency.

4. Maintain the Missouri Public Health Information Management System (MOPHIMS) and provide partner-level access for LPHA staff.

II. The local health agency agrees to the following:

1. Maintain the secure Internet connection by ensuring the Department provided router (if applicable) is plugged to a working outlet at all times.

2. Adhere to the Uniform Vital Statistics Law, Sections 193.005 – 193.325, RSMo, and rules, regulations, and guidelines adopted to implement the Uniform Vital Statistics Law or as otherwise instructed in writing by the Missouri State Registrar.

3. The local and deputy registrars shall not permit anyone to disclose information contained in vital records or to copy or issue a copy of all or part of any vital record except as authorized in 19 CSR 10-10.090. The Local Registrar shall require identification of the applicant or a notarized statement for mailed applications prior to issuing certified copies of vital records.

4. The vital records database used to issue computer certifications of birth and death records is restricted to approved users. Access to the vital record system will be requested by completion of local registrar and deputy registrar forms and Automated Security Access Program (ASAP) procedures through the Bureau of Vital Records. A User ID and temporary password will be issued for the employee upon approval. The user will be required to change the temporary password. User IDs and passwords must be kept confidential and not divulged to any other individual or party. The local health agency shall notify the Department promptly if an approved user's access should be terminated for any reason.

5. For security purposes, users must not leave their computer unattended without first logging out, locking the workstation, or using a screen saver that requires a password to access the computer operating system.

6. The local and/or deputy registrar will utilize the State Public Health Laboratory Courier service or mail all death certificates presented for local registration to the Bureau of Vital Records, P.O. Box 570, Jefferson City, MO 65102 within one (1) business day of receipt.

7. Provide work space for local registrar staff in the local health agency facility in which vital records equipment and documents, such as certificates, certificate paper, seals, embossing and other equipment, can be secured in a locked room with access by authorized personnel only. Work space should be limited to authorized employees and not be accessible to unauthorized employees or non-employees.

8. Pay for all transactions related to issuance of birth and death certificates at the rate of $0.242 cents per transaction. A transaction occurs each time the "CTRl" and "PFS" or "FS" key is depressed by the individual on the personal computer.

9. Submit payment within forty-five (45) days of receipt of each monthly invoice to the following address:

   Missouri Department of Health and Senior Services
   Division of Administration
   Fee Receipts
   P.O. Box 570
   920 Wildwood Drive
   Jefferson City, MO 65102-0570

10. Understand and acknowledge that non-payment of monthly invoices over sixty (60) days from the invoice date or non-compliance with any of the provisions listed herein, shall be considered a breach of the MOU and access to the state data center mainframe computer and Department applications may be withdrawn 10 working days from notice from the Department**.**

11. Use information obtained from partner-level access in MOPHIMS for health assessment, planning activities, and program implementation.

12. Maintain confidentiality of all information by limiting access to those having an official need in order to perform their duties.

13. The local health agency at a minimum of twice per calendar year during the effective dates of this MOU, agrees to verify which of its employees are still employed and still require access to the Department's TN3270 Mainframe (PROD). The local health agency shall perform verification and updates with the TN3270 Mainframe (PROD) Program Security Officer at Division of Community and Public Health, Bureau of Vital Records.

14. The local health agency at a minimum of twice per calendar year during the effective dates of this MOU, agrees to verify which of its employees are still employed and still require access to the Department's Missouri Public Health Information Management System (MOPHIMS). The Contractor shall perform verification and updates with the MOPHIMS Partner Level Program Security Officer at Division of Community and Public Health, Bureau of Health Care Analysis and Data Dissemination.

AMENDMENT
Any change shall be accomplished by a formal signed amendment prior to the effective date of such change.

TERMINATION
This MOU may be terminated by either party with written notice a minimum of thirty (30) days' prior to the effective date of the termination.

SIGNATURES ON FOLLOWING PAGE

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

By: _____
Bret Fischer, Director
Division of Administration

Date: _____

CITY OF COLUMBIA, MISSOURI

By: _____
Mike Matthes, City Manager

Date: _____

ATTEST:

By: _____
Sheela Amin, City Clerk

APPROVED AS TO FORM:

By: _____
Nancy Thompson, City Counselor