

# HEALTH ALERT NETWORK (HAN) WEB PORTAL REGISTRATION AUTHORITY AGREEMENT

**IN ORDER TO PROVIDE THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH (IDPH) WITH ACCESS AND IDENTIFICATION INFORMATION FOR THE PURPOSE OF USER ACCOUNT REGISTRATION AND ADMINISTRATION, IDPH WILL PROVIDE A DESIGNATED PUBLIC HEALTH PARTNER FACILITY (FACILITY) ACCESS TO THE IDPH HAN WEB PORTAL.**

**INDIVIDUALS APPLYING FOR THE ROLE OF THE PORTAL REGISTRATION AUTHORITY (PRA) FOR A PUBLIC HEALTH PARTNER FACILITY MUST READ THIS AGREEMENT BEFORE ACCEPTING THE RESPONSIBILITIES FOR THIS ROLE.**

- If the PRA does not agree to the terms and conditions of this Agreement, the PRA will not be authorized to administer the HAN Web Portal User Accounts for his/her Facility.
- This Agreement will become effective upon submission of the PRA application to, and acceptance by, the IDPH Security Administrator (SA). By submitting this PRA application he/she is requesting the authorization from IDPH to manage user accounts for his/her facility and are expressing his/her agreement to the terms of this PRA Agreement.

**The PRA agrees to:**

1. Act as a liaison, providing a single point of contact and coordination between the Facility and IDPH;
2. Provide true and trusted authentication of Facility HAN Web Portal Users for the purpose of issuing User accounts following the process outlined in the Portal Registration Process document;
3. Serve as a secure conduit of activation/recovery for User accounts and passwords requiring activation/recovery and ensuring prompt notification of terminated employees for the purpose of User account deactivation;
4. Immediately Inform the SA of any account/password compromise situation that would warrant disabling account usage of the detection of the compromise or suspected compromise;
5. Review and obtain a working knowledge of the IDPH HAN Web Portal and assist users with its authorized use;
6. Comply with and enforce all application policies, procedures and rules established by IDPH with regards to the use and protection of IDPH resources.

**The PRA agrees to adhere to the following Confidentiality Requirements:**

1. To access the HAN Web Portal only in the course of his/her official duties as an employee of the Facility;
2. To maintain confidentiality of all data, documents, memoranda and any other materials accessed from the HAN Web Portal;
3. In the event the PRA needs to share materials obtained from the Portal with other individuals, the PRA will only provide such materials to authorized employees at the facility, and the PRA will ensure those authorized employees agree to adhere to the requirements contained in this agreement;
4. That the information and materials the PRA may access at the Portal contains confidential and proprietary information of the Illinois Department of Public Health;
5. To not disclose orally, nor prepare any writings, reports, publications, etc., or disseminate in any other manner materials contained from the HAN Web Portal for release to third parties, except as specifically required by or with the written permission of the Illinois Department of Public Health;

6. If the PRA receives a request for information from the HAN Web Portal link, the PRA will notify the Department of Public Health immediately. A request for information includes a subpoena, court order, Freedom of Information Act request or a request from a researcher. Any issue whether information is to be released shall be resolved by the Department;
7. In the event the PRA fails to adhere to the provisions contained within the agreement, the PRA shall be subject to any or all of the following: termination from access to the Portal at the discretion of IDPH, and discipline and/or termination from employment at the discretion of the employer;
8. Maintain the confidentiality of passwords provided by the SA or other designated IDPH authorities;
9. All other information required to be kept confidential in accordance with Confidentiality/Privacy Policies enforced by IDPH;
10. The PRA shall inform the SA immediately in the event of the disclosure of any information contrary to this Agreement;
11. The PRA shall keep strictly confidential any passwords, identification, or other information belonging to a User;
12. The PRA shall not use, divulge, or otherwise compromise the integrity of a User account and password.
13. The PRA shall maintain on file signed original or copy User Registration Request forms for all facility requested portal accounts and email and/or other correspondence regarding access modification or deletion of active portal accounts.

### Violations of this Agreement

1. Violation of this agreement or of the trust relationship with IDPH may result in IDPH terminating the PRA agreement and revoking PRA privileges;
2. The PRA acknowledges that a violation of this agreement will result in irreparable harm, and hereby accepts responsibility for his/her actions;
3. Misuse of information technology resources may also subject a PRA to penalties under state and federal law not limited to the Computer Crime Prevention Law (720 ILCS 5/16D).

### Disclaimer of Liability

Neither the Illinois Department of Public Health nor any of its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the HAN Web Portal and assumes no responsibility for anyone's use of the information. In no event shall the IDPH web site, web portal, or its employees be liable for any direct, indirect, incidental, special, exemplary, or consequential damages (including, but not limited to, procurement or substitute goods or services; loss of use, data, or profits; or business interruption) however caused and on any theory of liability, whether in contract, strict liability, or tort (including negligence or otherwise) arising in any way out of the use of this system, even if advised of the possibility of such damage. This disclaimer of liability applies to any damages or injury, including but not limited to those caused by any failure of performance, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus, communication line failure, theft or destruction or unauthorized access to, alteration of, or use of record, whether for breach of contract, tortious behavior, negligence or under any other cause of action.

PRA Designee Signature	Date	Facility Administrator Signature	Date
------------------------	------	----------------------------------	------

PRA Designee Print Name	Facility Administrator Print Name
-------------------------	-----------------------------------

Representing Facility Name	PRA Telephone Number
----------------------------	----------------------

PRA Designee E-mail (Required)	Facility Address, City, State & Zip
--------------------------------	-------------------------------------

**Please sign, and Fax this document to the I-CARE Program at 217-558-3838 for processing.  
 Questions regarding this process can be directed to IDPH I-CARE at [dph.ICARE@illinois.gov](mailto:dph.ICARE@illinois.gov)  
 or the IDPH Helpdesk at 217-557-2923 or email [dph.helpdesk@illinois.gov](mailto:dph.helpdesk@illinois.gov)**