

Computer Access Security Agreement

MUSC Office of the CIO
Operations
Main (843) 876-5000
Fax (843) 876-5271

To: Operations
Operations IOP Building

From: _____ Ext. _____

Dept: _____

Fax Number: **876-5271**

Date: _____ Time: _____

Number of pages including cover sheet: _____

Urgent reply requested? YES _ NO _

Please route additional copies to: _____

Computer Access Security Agreement

Purpose: To request a user account with Keane and to protect integrity, availability and confidentiality patient information. The employee, faculty, or staff member will abide by all policies that govern information to include HIPAA, Information Security, MUHA policy and enterprise wide MUSC policy.

Policies: Any employee who uses the Keane computer system to perform necessary job related functions will be subject to disciplinary action in accordance with UMA/MUSC Human Resources Management Policy, should he/she:

1. Allow his/her log-on password to be used by anyone else (3 Day suspension)
2. Use another employee's log-on password. (3 day suspension to dismissal)
3. Knowingly add inappropriate information or alter information. (dismissal)
4. Reveal confidential information to unauthorized personnel or third parties. (3 day suspension to dismissal)

Procedures:

1. Entry and update of information in the system will be monitored to ensure that the policies are followed. Employees' logon Ids will be periodically monitored to ensure patient confidentiality.
New employees will receive logon Ids from the appropriate system manager.
2. Any employee who cannot remember his/her password may obtain it from the OCIO-IS-Helpdesk.
3. CyberQuery privileges will be given with approval from Bob Harvey and Suzanne Rosenthal, Keane System Owner.
4. Upon termination of employment, the individual's logon ID will be disabled in the system.

Fax to 876-5271

Check if applicable (Coders Only):

ICD9 Code Access: Inpatient Outpatient 3M CRS (PC Encoder Interface 'T')

MNA/Network Logon ID: _____ TCODE LEVEL _____ Collector Code _____ RPT
CODE _____

User's Full Name (Last, First, Middle) _____ Initials: ___ ___

Employee ID # _____ Work Phone # _____

Department Name: _____ Location (Bldg/Room#): _____

Supervisor's Name: _____ Work Phone # _____

Supervisor's Signature: _____ Date: _____

Registration Trainer Approval Signature: _____ Date: _____

Employee Signature: _____ Date: _____

I have read and understand this statement and I have received a copy of it. By signing above, I agree with these policies and agree to follow these procedures.

Security Administrator Section – DO NOT WRITE IN THIS BOX	
Logon Id: _____	Password Assigned: _____
Application Completed Date: _____	By: _____
System Completed Date: _____	By: _____
____ ADD ____ CHANGE ____ DELETE ____ Recertification Date: _____	

Computer Access Security Agreement

Patient Account Management

Application Code: PA

User Name / User Logon ID: _____

Function	YES	Function	YES
1 001 Patient Inquiry	_____	16 016 Claims Data Entry	_____
2 002 Inquiry 1	_____	17 017 Patient Master Updates	_____
3 003 Inquiry/Update 1	_____	18 018 Insurance Balance Adjustments	_____
4 004 Inquiry/Update 2	_____	19 019 A/R to B/D Write-Off	_____
5 005 Inquiry/Update 3	_____	20 020 B/D to A/R Reinstatement	_____
6 006 Inquiry/Update 4	_____	21 021 Charge & Adjustment Entry	_____
7 007 Inquiry/Update 5	_____	22 022 Payment / Adjustment Entry	_____
8 008 Inquiry/Update 6	_____	23 023 Batch Balance & Error Rpt	_____
9 009 Inquiry/Update 7	_____	24 024 Account Consolidation	_____
10 010 Inquiry/Update 8	_____	25 025 Patient to Patient Link Maint	_____
11 011 Inquiry/Update 9	_____	26 026 Revenue Reclassifications	_____
12 012 Inquiry/Update 10	_____	27 027 Billing Requests & Prints	_____
13 013 Inquiry/Update 11	_____	28 028 Single Demand Bill	_____
14 014 Inquiry/Update 12	_____	29 029 Force Dayend Rebills	_____
15 015 Insurance Verification	_____	30 030 Force Dayend Bills	_____

Function	YES	Function	YES
31 031 Cycle Bill Maintenance	_____	46 046 Logs Account Inquiry	_____
32 032 Claims Maintenance	_____	47 047 Logs Account Addition	_____
33 033 A/R Admit / Reinstatement	_____	48 048 Logs Account Update	_____
34 034 B/D Admit / Reinstatement	_____	49 049 Logs Account Deletion	_____
35 035 Rugs Assessment Maint	_____	50 050 Interface Account Retransmit	_____
36 036 IRF CMG Coding Entry	_____	51 051 Pending Adjustments	_____
37 037 MSP Questionnaire	_____	52 052 Cycle Bill Corrections	_____
38 038 Patient / Census Search	_____	53 053 Invoice Tracking Update #1	_____
39 039 Online Census Summary	_____	54 054 Invoice Tracking Update #2	_____
40 040 Management Summary Inq	_____	55 055 Eligibility Checking – Stand A	_____
41 041 STAT Renorting	_____	56 056 Suspense Chrg Batch Correction	_____
42 042 Aged Cycle Billing Bal Rep	_____	57 057 Not For General Use	_____
43 043 Patient Profile Print	_____	58 058 Field Audit History	_____
44 044 Face Sheet / Embosser Reprint	_____	59 101 Visit Data Inquiry	_____
45 045 CQCS Report Writer	_____	60 102 Detailed Insurance Inquiry	_____

Prepared by: _____ Date: _____

Approved by: _____ Date: _____

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Patient Account Management

Application Code: PA

User Name / User Logon ID: _____

	Function	YES		Function	YES		
61	103	Charge / Pay Inquiry – Today	<input type="checkbox"/>	76	118	Admit Procedure Inquiry	<input type="checkbox"/>
62	104	Combined Transaction Inquiry	<input type="checkbox"/>	77	119	Current Procedure Inquiry	<input type="checkbox"/>
63	105	Charge Inquiry Previous	<input type="checkbox"/>	78	120	CPT Procedure Code Inquiry	<input type="checkbox"/>
64	106	Departmental Charge Inquiry	<input type="checkbox"/>	79	121	Patient Master Updates	<input type="checkbox"/>
65	107	Late Charge Inquiry	<input type="checkbox"/>	80	122	Patient Master Field Inquiry	<input type="checkbox"/>
66	108	Current Charge Summary	<input type="checkbox"/>	81	123	Mother Baby Link Inquiry	<input type="checkbox"/>
67	109	Current Room Charge Sum	<input type="checkbox"/>	82	124	Billing Summary Inquiry	<input type="checkbox"/>
68	110	Print Account Comments	<input type="checkbox"/>	83	125	Billing Holds Inquiry	<input type="checkbox"/>
69	111	Prior Bill Charge Summary	<input type="checkbox"/>	84	126	Census Activity Summary	<input type="checkbox"/>
70	112	Prior Bill Room Chrg Sum	<input type="checkbox"/>	85	127	Turn on for Workque Audit	<input type="checkbox"/>
71	113	Select Payment Inquiry	<input type="checkbox"/>	86	128	Prior Conversion Chrg Inq	<input type="checkbox"/>
72	114	Payment Inquiry	<input type="checkbox"/>	87	129	Revenue Code Sum Inquiry	<input type="checkbox"/>
73	115	Account Comments	<input type="checkbox"/>	88	130	1Mage Document Viewer	<input type="checkbox"/>
74	116	Admit Diagnosis Inquiry	<input type="checkbox"/>	89	131	Cost Accounting Inquiry	<input type="checkbox"/>
75	117	Current Diagnosis Inquiry	<input type="checkbox"/>	90	132	Account Follow-up Access	<input type="checkbox"/>

	Function	YES	
91	133	Adjustment Requests	<input type="checkbox"/>
92	134	T-Code Transfer Requests	<input type="checkbox"/>
93	135	Charge W/Off Requests	<input type="checkbox"/>
94	136	Refund Requests	<input type="checkbox"/>
95	137	Global Comment Posting	<input type="checkbox"/>
96	138	Invoice Tracking Inquiry	<input type="checkbox"/>
97	139	Charge Transfers	<input type="checkbox"/>
98	140	Workqueue Audit History Inq	<input type="checkbox"/>
99	141	Eligibility Response Inquiry	<input type="checkbox"/>
100	142	Admit Notification Inquiry	<input type="checkbox"/>
101	143	Field Audit History	<input type="checkbox"/>
102	145	Access TRX Updt Funcs	<input type="checkbox"/>
103	146	Charge Header Change Access	<input type="checkbox"/>
104	147	Payment Header Change Access	<input type="checkbox"/>
105	148	Charge Batch Delete Access	<input type="checkbox"/>
106	149	Payment Batch Delete Access	<input type="checkbox"/>

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