

CONTRACTOR/VENDOR CONFIDENTIALITY STATEMENT

CDA 1024 (REV 1/07)

CERTIFICATION	
I hereby certify that I have reviewed this Confidentiality Statement and will comply with the following Statements.	
CONTRACTOR/VENDOR NAME: El Dorado County	CONTRACT NUMBER: NS-0809-29
AUTHORIZED SIGNATURE:	PRINTED NAME AND TITLE OF PERSON SIGNING: Ron Briggs, Chairman El Dorado County Board of Supervisors
<p>In compliance with Government Code 11019.9, Civil Code 1798 Et. Seq., Management Memo 06-12 and Budget Letter 06-34 the California Department of Aging (CDA) hereby requires the Contractor/Vendor to certify that:</p> <ul style="list-style-type: none"> • confidential information shall be protected from disclosure in accordance with all applicable laws, regulations and policies. • all access codes which allow access to confidential information will be properly safeguarded. • activities by any individual or entity that is suspected of compromising confidential information will be reported to CDA by completing a Security Incident Report, CDA 1025. • any wrongful access, inspection, use, or disclosure of confidential information is a crime and is prohibited under State and federal laws, including but not limited to California Penal Code Section 502; California Government Code Section 15619, California Civil Code Section 1798.53 and 1798.55, and Health Insurance Portability and Accountability Act. • any wrongful access, inspection, use, disclosure, or modification of confidential information may result in termination of this Contract/Agreement. • obligations to protect confidential information obtained under this Contract/Agreement will continue after termination of the Contract/Agreement with CDA. • all employees/subcontractors of the Contractor/Vendor will complete the required Security Awareness Training module located at www.aging.ca.gov, within 30 days of the start date of this Contract/Agreement or within 30 days of the start date of any new employee or subcontractor. • all employees/subcontractors of the Contractor/Vendor will be notified of CDA's confidentiality and data security requirements. • CDA or its designee will be granted access to any computer-based confidential information within the custody of the Contractor/Vendor. 	

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- I agree to protect the following types of confidential information which include but not limited to:
 - Social Security number
 - Medical information
 - Claimant and employer information
 - Driver License information
 - Information about individuals that relate to their personal life or identifies or describes an individual
 - Other agencies' confidential and proprietary information
 - Criteria used for initiating audit selection
 - Methods agencies use to safeguard their information (computer systems, networks, server configurations, etc.)
 - Any other information that is considered proprietary, a copyright or otherwise protected by law or contract.

- I agree to protect confidential information by:
 - Accessing, inspecting, using, disclosing or modifying information only for the purpose of performing official duties
 - Never accessing, inspecting, using, disclosing, or modifying information for curiosity, personal gain, or any non-business related reason
 - Securing confidential information in approved locations
 - Never removing confidential information from the work site without authorization.