

Vermont Department of Health
Vermont Electronic Death Registration System (EDRS)
ACCESS AND CONFIDENTIALITY/PRIVILEGE AGREEMENT
for
Medical Clerks

STATEMENT TO EDRS USER

In Vermont, a licensed health care professional bears the primary responsibility for completing a certificate of death within 24 hours of the death "in a manner prescribed by the State Registrar", in those cases where he or she is the person "who last attended a deceased person". (18 VSA § 5202(a) (1))

The Vermont Electronic Death Registration System (EDRS) has been established as a means for Vermont licensed health care professionals to electronically submit and certify/sign the medical portion of a death record.

As an employee of a hospital or medical practice who provides support to a Vermont licensed health care professional, you may enter information into the medical portion of the EDRS application. However, you do not have authority or access to functions necessary to "certify" a death record.

EDRS USER'S AGREEMENT

As a person responsible for supporting licensed health care professionals in reporting deaths, I will submit death record information using the Vermont Electronic Death Registration System (EDRS), which requires and contains confidential and privileged data. As a user of EDRS, I hereby agree as follows:

1. I will access confidential and privileged information within EDRS only as needed to submit death data to the Department of Health.
2. I will not divulge in any way, copy, release, sell, loan, review, alter or destroy any confidential and privileged information except as properly authorized within the scope of my professional activities.
3. I will not misuse confidential and privileged information or treat such information carelessly.
4. I understand that reports printed from the EDRS including completed Preliminary Report of Death forms may contain information including the decedent's social security number that is not public record and will be kept confidential and privileged. Under no circumstances will these reports be issued to the public. This includes not sharing the decedent's Social Security number and taking other appropriate measures to assure confidentiality as required for all Vermont businesses and agencies by 9 VSA § 2440.
5. I will safeguard and will not disclose my access code or any other authorization I have that allows me to access EDRS. I accept responsibility for all activities undertaken using my access code and other authorization.

Vermont Department of Health

Vital Records Office

280 State Drive, Waterbury VT 05671-8370

Telephone: 802-863-7275

Fax: 802-651-1787

6. I will report activities by any individual or entity that I suspect may compromise the protection and privacy of confidential and privileged information. Reports made in good faith about suspect activities will be held in confidence to the full extent permitted by law, including the name of the individual reporting the activities.
7. I understand that my obligations under this Agreement will continue after termination of my privileges and access to EDRS information. I further understand that my privileges and access hereafter are subject to periodic review, revision, and, if appropriate, renewal.
8. I understand that I have no right or ownership interest in any information within EDRS to which I have access. The Department of Health may, at any time, revoke my authorization or access to any information in EDRS.
9. I will be responsible for my misuse or wrongful disclosure of confidential and privileged information and for my failure to safeguard my access code or other authorization access to confidential and privileged information.
10. I understand that failure to comply with this Agreement may result in loss of privileges to access EDRS.
11. I understand that any person who willfully, maliciously or negligently discloses the content of any confidential public health records without written authorization or other than as authorized by law shall be subject to civil penalties pursuant to 18 VSA § 1001(e).
12. I understand that the Department of Health will advise me of any new policies, procedures, or protocols as they are issued, especially those related to privacy and security and will work with me to implement any required.

(Signature)

(Date)

(Printed Name)

(Date of Birth)

(Hospital or Practice)

(Phone)

(E-mail Address)

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18 VSA § 1001

(e) Any person who:

(1) willfully or maliciously discloses the content of any confidential public health record without written authorization or other than as authorized by law or in violation of subsection (b), (c), or (d) of this section shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$25,000.00, costs and attorney fees as determined by the court, compensatory and punitive damages, or equitable relief, including restraint of prohibited acts, costs, reasonable attorney's fees, and other appropriate relief.

(2) negligently discloses the content of any confidential public health record without written authorization or other than as authorized by law or in violation of subsection (b), (c), or (d) of this section shall be subject to a civil penalty in an amount not to exceed \$2,500.00 plus court costs, as determined by the court, which penalty and costs shall be paid to the subject of the confidential information.

(3) willfully, maliciously, or negligently discloses the results of an HIV test to a third party in a manner that identifies or provides identifying characteristics of the person to whom the test results apply without written authorization or other than as authorized by law or in violation of subsection (b), (c), or (d) of this section and that results in economic, bodily, or psychological harm to the subject of the test is guilty of a misdemeanor, punishable by imprisonment for a period not to exceed one year or a fine not to exceed \$25,000.00, or both.

(4) commits any act described in subdivision (1), (2), or (3) of this subsection shall be liable to the subject for all actual damages, including damages for any economic, bodily, or psychological harm that is a proximate result of the act. Each disclosure made in violation of this chapter is a separate and actionable offense. Nothing in this section shall limit or expand the right of an injured subject to recover damages under any other applicable law.

(Amended 1979, No. 60, § 1; 1997, No. 7, § 1, eff. April 29, 1997; 1999, No. 17, § 2; 2007, No. 73, § 2; eff. April 1, 2008; 2007, No. 194 (Adj. Sess.), § 2; 2009, No. 81 (Adj. Sess.), § 1, eff. April 20, 2010; 2013, No. 34, § 30a; 2015, No. 37, § 2.)

18 VSA § 5000 (e)(4)

(e) The State Registrar shall, consistent with the requirements of this part

(4) prescribe the contents and form of vital record reports, vital event certificates, and related applications and documents; prescribe the contents and form of burial-transit permits; and distribute the same;

(Added 1979, No. 142 (Adj. Sess.), § 23; amended 2017, No. 46, § 2, eff. July 1, 2019 and § 3, eff. May 22, 2017 and July 1, 2019).

18 VSA § 5202. Death certificate; duties of physician and authorized licensed health care professional

(a)(1) Within 24 hours after a death, the licensed health care professional who last attended a deceased person shall submit the medical portion of a report of death in a manner prescribed by the State Registrar. If the licensed health care professional who attended the death is unable to state the cause of death, he or she shall immediately notify the licensed health care professional, if any, who was in charge of the patient's care, and he or she shall fulfill this requirement.

(2) If neither health care professional is able to state the cause of death, the provisions of section 5205 of this title apply.

(3) The licensed health care professional may delegate to the funeral director or the person in charge of the body, with that individual's consent, the responsibility of completing the nonmedical portion of the report of death.

(4) The State Registrar shall furnish the agency responsible for veterans' affairs information as to the deceased's status as a veteran.

(5) The State Registrar shall register the report of death in the Statewide Registration System upon receipt of the required information. The portion of the report of death that is not confidential under section 5014 of this title is the death certificate.

(b) When a death certificate is not available prior to burial or transportation of a body, any licensed health care professional who has access to the facts and can certify that the death is not subject to the provisions of section 5205 of this title may complete and sign a preliminary report of death on a form prescribed by the State Registrar. The health care professional may delegate completion of the nonmedical facts to any funeral director or person in charge of the body with access to the nonmedical facts, with that individual's consent. A person authorized to issue a burial-transit permit shall accept a properly completed preliminary report and issue a burial-transit permit. The preliminary report may be destroyed six months after the death certificate has been registered. This subsection does not relieve a licensed health care professional from his or her responsibilities under subsection (a) of this section.

(Amended 1959, No. 329 (Adj. Sess.), § 27, eff. March 1, 1961; 1963, No. 102, § 2, eff. May 22, 1963; 1969, No. 265 (Adj. Sess.), § 10; 1979, No. 142 (Adj. Sess.), § 26; 1997, No. 40, § 22b.; 2009, No. 151 (Adj. Sess.), § 6, eff. Jan. 1, 2012; 2017, No. 46, § 47, eff. July 1, 2019.)

18 VSA § 5205. Death certificate when no attending physician; autopsy

(a) When a person dies from violence, or suddenly when in apparent good health or when unattended by a physician or a recognized practitioner of a well-established church, or by casualty, or by suicide or as a result of injury or when in jail or prison, or any psychiatric hospital, or in any unusual, unnatural, or suspicious manner, or in circumstances involving a hazard to public health, welfare, or safety, the head of the household, the jailer, or the superintendent of a psychiatric hospital where such death occurred, or the next of kin, or the person discovering the body or any doctor notified of the death, shall immediately notify the medical examiner who resides nearest the town where the death occurred and immediately upon being notified, such medical examiner shall notify the State's Attorney of the county in which the death occurred. The State's Attorney shall thereafter be in charge of the body and shall issue such instructions covering the care or removal of the body as he or she shall deem appropriate until he or she releases same.

(b) The medical examiner and a designated law enforcement officer shall thereupon together immediately make a proper preliminary investigation.

(c) Unless the cause and manner of death is uncertain, such medical examiner shall complete and sign a certificate of death. The medical examiner and the designated law enforcement officer shall each submit a report of investigation to the State's Attorney and the Chief Medical Examiner. If, however, the cause or circumstances of death are uncertain, he or she shall immediately so advise the State's Attorney of the county where the death occurred and notify the Chief Medical Examiner.

(d) The State's Attorney of each county, with the advice of the Commissioner of Public Safety or his or her designee, the sheriff, and the Chief of Police of any established Police Department, shall prepare a list of law enforcement officers in his or her county qualified to make an investigation and report. This list shall be made available to the medical officers concerned and such other persons as the State's Attorney deems proper.

(e) If an undertaker or embalmer shall, in the course of his or her employment, find evidence of physical violence on the body or evidence of an unlawful act sufficient to indicate to such a person that death might have been the result of an unlawful act, he or she shall immediately notify the State's Attorney of the county where the body is then located and shall proceed no further with the preparation and embalming process of such body until permitted to do so by the State's Attorney..

(f) The State's Attorney or Chief Medical Examiner, if either deem it necessary and in the interest of public health, welfare, and safety, or in furtherance of the administration of the law, may order an autopsy to be performed by the Chief Medical Examiner or under his or her direction. Upon completion of the autopsy, the Chief Medical Examiner shall submit a report to such State's Attorney and the Attorney General and shall submit a report of death to the State Registrar.

(g) When a person who is committed to the custody of the Department of Corrections or who is under the supervision of the Department of Corrections dies, the Commissioner of Corrections may request to be provided with a copy of any and all reports generated pursuant to subsection (f) of this section. No such request shall be granted where the medical examiner is unable to determine a manner of death or the manner of death is classified as a homicide. In other circumstances, the request shall be granted in the discretion of the Medical Examiner for good cause shown. Reports disclosed pursuant to this subsection shall remain confidential as required by law and shall not be considered to be a public record pursuant to 1 V.S.A. § 317. (Amended 1967, No. 254 (Adj. Sess.), §§ 1-3, eff. Feb. 20, 1968; 1969, No. 128, § 2; 1969, No. 265 (Adj. Sess.), § 12; 1971, No. 33, § 7; 1991, No. 191 (Adj. Sess.), § 1, eff. May 19, 1992; 2003, No. 128 (Adj. Sess.), § 2, eff. May 24, 2004; 2003, No. 157 (Adj. Sess.), § 13; 2013, No. 96 (Adj. Sess.), § 99; 2017, No. 46, § 50, eff. July 1, 2019.)