

CryptoCard Usage and Responsibilities

I. Issuance/Replacement

I understand that the CryptoCard is solely the property of the University of Washington's Department of Pathology and may be recalled at any time. The card is temporarily issued to individuals to allow safe, secure remote access for work-related business (similar to the issuance of door keys). To acquire a CryptoCard, I must have authorization from a Department of Pathology designee.

I understand that if I lose or damage my card, I must contact Pathology Computer Support immediately (the general phone number is 206-221-5790) as this loss may pose a security risk that violates the HIPAA regulations. I also acknowledge that the replacement cost for a lost or damaged CryptoCard is \$75, regardless of whether or not I choose to apply for another card.

The CryptoCard **must be** returned immediately upon separation with the Department of Pathology or termination of access. I understand that my failure to return this card will result in an invoice being sent to me for \$75 plus UW handling fee. Failure to pay this invoice could result in this account being sent to collections per University of Washington regulations.

II. Use

The CryptoCard is one part of a two-factor authentication; the second part is a PIN (Personal Identification Number). The card issued is programmed to be unique from all other cards and is linked exclusively to a username. This measure provides strong authentication for those users coming from unsecured workstations/locations.

The CryptoCard is synchronized with the department's authentication servers. There is a small window of allowable passwords that the server will accept. Should I exceed this window by having the card generate passwords that I do not use to log in, the card will fall out of sync and need to be reprogrammed (contact Pathology Computer Support 206-221-5790).

I understand that I must secure the PIN and may not, under any circumstances, share it with anyone. Additionally, it is imperative that I do not write down the PIN number anywhere. If I violate this requirement, I may be violating the security standards set up by HIPAA (Health Insurance Portability and Accountability Act) and putting the network and patient information at risk. Lack of adherence to this requirement could result in revocation of the card and disciplinary action.

I will not attempt to open, reconfigure, reprogram, or perform any service or maintenance on the CryptoCard. The CryptoCards are designed to scramble their code upon tampering which will render the card useless, incurring a replacement fee to me.

I understand that the card is issued to allow safe, secure access to Department of Pathology resources. As such, all department, school, hospital, university, state, and federal rules and regulations regarding my access and use of state resources (and patient-identifiable data, if applicable) apply in their entirety.

For more information on these policies, please visit the following websites:
Department of Pathology: <http://www.pathology.washington.edu/admin/policies/>
University of Washington: <http://www.washington.edu/computing/rules/>

I agree to the above,

Signature & Date: _____