

NEW MEXICO AGING AND LONG-TERM SERVICES DEPARTMENT

Confidentiality Agreement

This CONFIDENTIALITY AGREEMENT is intended to maintain the privacy of confidential, personal information that may be provided by clients/consumers in the course of accessing services. Confidential, personal information may be provided and maintained in several forms—verbal, written or electronic (such as in a computer database). This CONFIDENTIALITY AGREEMENT must be signed by all persons who will access the A&D database, Ombudsman, APSS—Human Services databases (containing confidential, personal information) before they are provided with passwords to access the A&D database, Ombudsman, APSS—Human Services.

I understand that in the course of my work with the A&D database, Ombudsman, APSS—Human Services databases and NM Aging and Long-Term Services Information Systems, I may learn certain facts about individuals being served that are of a highly personal and confidential nature. Examples of confidential information are Social Security numbers, names of clients/consumers, medical conditions and treatments, income, assets, living arrangements and relationships with family members. Such information must be treated as completely confidential and is not to be shared with any unauthorized person without exception, including family members. Any breach of confidentiality concerning clients/consumers may result in severe penalties up to dismissal, as well as possible prosecution to the fullest extent of the law, where applicable.

Guidelines to follow to maintain confidential information are:

- 1. Secure confidential information and documents in locked cabinets when not in use:
- 2. Do not leave confidential information or data where it can easily be observed;
- 3. Do not remove any confidential information from an organization's office without specific authorization to do so;
- 4. Properly dispose of (shred) all confidential information when no longer needed;
- 5. Properly mark and secure confidential information before transmittal;
- 6. Immediately notify a supervisor or an authorized person of any possible violation of confidentiality;
- 7. Talk to a supervisor or an authorized person regarding any questions about confidentiality and/or any possible violation of such confidentiality.
- 8. When using the A&D database, Ombudsman, APSS—Human Services;
 - Keep all user logins and passwords confidential and secure;
 - Shut down the A&D database, Ombudsman, APSS—Human Services application and log out when the workstation is unattended:
 - Never delete or remove data from the A&D database. Ombudsman, APSS—Human Services.

Only authorized users who have signed this confidentiality agreement may use or view A&D, Ombudsman, APSS—Human Services.

I agree not to disclose client/consumer information of a personal and confidential nature to anyone except to those individuals with a valid need to know that my employer has identified after assuring that a client/consumer has signed a release of information form. My signature below warrants that I have read, understand, and will follow this New Mexico Aging and Long-Term Services Department CONFIDENTIALITY AGREEMENT.

For ALTSD employees, any breach of confidentiality concerning clients/consumers may result in severe penalties up to dismissal, as well as possible prosecution to the fullest extent of the law, where applicable.

For AAAs, any breach of confidentiality concerning clients/consumers may result in severe penalties and loss of A&D privileges up to and including termination of user authorization. Additional penalties may be determined by the AAA.

For Providers, any breach of confidentiality concerning clients/consumers may result in severe penalties and loss of A&D privileges up to and including termination of user authorization. Additional penalties may be determined by the Provider.

Mark those that apply:

□A&D User □Ombudsma		n User □APSS—Human Services U			
Signature					
Print name				Date	Click here to enter a date.
Name of Employ	yer Organization				,
Email Address				Phone	
Program Directo	or				,
Signature					
Print name				Date	Click here to enter a date.

A&D Business Operations Guide Form 500—Version 10.2025