

RENEWAL 003
of the MEMORANDUM of AGREEMENT
Between
The Missouri Department of Health and Senior Services
And
City of Columbia

I. Background

On 4/16/2019, the Missouri Department of Health and Senior Services (DHSS) and City of Columbia (Facility) (collectively, the "Parties") entered into a Memorandum of Agreement ("Agreement") to provide the Facility with secure access to the Missouri State Public Health Laboratory (SPHL) OpenELIS and/or iConnect Lab Web Portals. The Agreement was effective from 4/16/2019 through 4/15/2022.

II. Review

In the Agreement, Facility agreed that, as part of the renewal process, it would review the list of its staff who have access to the OpenELIS and/or iConnect Lab Web Portals to ensure that only staff members who still need such access have access and that the access for all staff members who no longer need access has been revoked. Facility has completed its review and the updated list of staff has been attached to this Renewal as Exhibit 1 and is incorporated as if fully set forth herein.

III. Renewal

Pursuant to the Terms of Agreement, both Parties have reviewed the terms of the Agreement and have agreed to renew the MOA. Accordingly, the Parties hereby renew the Agreement for one year, effective 4/16/2022.

IN WITNESS WHEREOF, the parties hereunto subscribed their names.

JKB

Director, Division of Administration or Designee
Division of Administration
Missouri Department of Health and Senior Services

Date

Signature

Date

Print Name, Title

Facility Name

Approved as to form:

City Counselor

Exhibit I

OpenELIS Web Portal users

DHSS State Public Health Laboratory

Org Name	Org ID	Requestor (LN, FN)	Is Active OpenELIS / iConnect LWP
City of Columbia on behalf of Columbia- Boone County Health Department	2832	Vrana, David	Yes
		Vellema, Kristine (Kris)	Yes
		Griffitts, Kristie	Yes
		Thompson, Christy	Yes
		Millham, Ashley	
		Martin, Mary	Yes
		Bader, Valerie	
		Johnson, Carla	
		Hancik, Linda	
		Pina-Hauan, Zorina	
		Rahn, Elizabeth	Yes
Kelty, Ana			

Instructions: Please select one of the two options below to either confirm the above list of users is accurate, or to indicate updates are needed. Update as necessary, sign and date the form, and return the completed page with your signed MOA renewal form and any necessary Attachment A's.

Our email address is: MSPHLinformatics@health.mo.gov

I have reviewed the users named above and agree this is a current and accurate list of facility users requiring access to the webportal for the renewal period.

I have reviewed the users named above. Changes are needed and we are submitting an Attachment A for each addition, edit, and deletion for all staff needing access to the web portal for the upcoming annual period. If no changes are needed for any particular user, the original Attachment A will remain in effect for that user.

REVIEWED BY: _____ DATE: _____