

## South Dakota Department of Health Administrative Policies and Procedures

### STATEMENT NO. 66

**TITLE: Vital Records – Availability of Records**

**ISSUED: November 1, 2006**

**REVISED: July 25, 2016**

#### **A. Availability of Individual Records**

Certified vital records are subject to SDCL 1-27-1 and must be made available to any person who meets the criteria established by SDCL 34-25-52.

#### **B. Publication of Vital Records Data**

Published vital records information may not contain any information that would identify an individual who was a participant in a vital event (i.e., birth, death, fetal death, marriage, or divorce). Data published by the Office of Data, Statistics, and Vital Records will be published as follows:

- Data published at the state level need not be suppressed;
- Data published broken down by city or county should not contain cell sizes less than three with the exception of zero; and
- Non-suppressed data may be released in a public health event as approved by the Director of the Division of Administration.

#### **C. Publication of Abortion Data**

Abortion data published by the Office of Data, Statistics, and Vital Records may not contain any information that would identify an individual participating in an abortion. Data published at the state level need not be suppressed. Data published broken down by geographic location should not contain cell sizes less than ten with the exception of zero.

#### **D. Request for Vital Records Information**

Federal, state, local, and other public or private agencies, may, upon request, be furnished with blocks of vital records data upon specific terms or conditions as may be prescribed by the Secretary of Health (see SDCL 34-25-52.1) and in accordance with *Administrative Policy Statement No. 26*. Before approving health-related requests for a block of vital records data, the Secretary of Health may require any or all of the following information:

- A statement of confidentiality signed by the person/agency requesting the data;
- A statement as to the purpose for which the data will be used;
- A statement that the data will not be released or used by any person or organization other than the person or organization requesting the data;
- A statement as to how the data will be disposed of after use;
- A statement that data provided will be available to authorized personnel only;
- A statement that data not being actively used will be stored in a secure location to protect confidential status; and

- A statement that the requestor agrees to pay for the actual costs associated with fulfilling the data request.

In cases of non-health-related requests, bulk vital records data will receive the lowest priority, on a time available basis.

#### **E. Data Request Fees**

The following charges will apply to all data requests:

1. A set-up fee of \$100 for data requests that require development of a computer program to retrieve the requested data.
2. For reproduction of a record:
  - (a) \$0.25 per page for 0 to 5,000 records;
  - (b) \$0.15 per page for 5,001 to 10,000 records; and
  - (c) \$0.10 per page for over 10,000 records.
3. An hourly fee, equal to the compensation rate of the person or persons required to generate the data request, for each hour of staff time required to complete the request.
4. Cost of transmittal if postage or courier services are required.

The custodian should provide the requestor with a cost estimate prior to completing the data request.

#### **F. Requests for Individual Birth Certificates for Medical Research Purposes**

The DOH may provide researchers the medical information from an individual's birth certificate if the researcher provides the following:

- A research protocol explaining that the information will only be used for medical research purposes;
- A signed release, on a form provided by the Department of Health (DOH), for each person whose record is being requested; and
- The search fee for each record requested.

Requests must be submitted to the Secretary of Health for approval. All requests must be made in accordance with federal Health Insurance Portability and Accountability Act (HIPAA) standards and meet guidelines established by the DOH in *Administrative Policy Statement No. 26*.