

Instructions for the HHSC Data Use Agreement (V.8.3 - Intergovernmental)

Following these instructions will help you complete and submit the Health and Human Services Commission (HHSC) Data Use Agreement. HHSC requires the agreement you submit to contain original, handwritten signatures.

Print and review the document and all attachments. The Data Use Agreement and all attachments must be completed and submitted to HHSC. Follow these steps below to complete the required portions of the agreement and attachments:

1. Data Use Agreement

- a. Headers on all pages – The blank after “HHSC Contract No.” should remain empty. The HHSC Contract Manager will add this information for the executed contract.
 - b. Page 1 of 11, Title -- In the blank at the top of the page stating “Contractor”, insert the name of your company or the name of the individual contracting with HHSC. If this name is included in the document you receive, please verify the name serving as “Contractor” is correct.
 - c. Page 1 of 11, First paragraph -- Place the name of your company or the name of the individual contracting with HHSC in the blank prior to the word “(CONTRACTOR)”. If this name is included in the document you receive, please verify the name listed as “CONTRACTOR” is correct.
 - d. Page 1 of 11, First paragraph -- The blank after “HHSC Contract No.” should remain empty. The HHSC Contract Manager will add this information in the executed contract.
 - e. Page 11 of 11, Article 7. Authority to Execute – In the section marked “Contractor”, an executive officer or a person with legal authority for the company or individual, must:
 - i. Sign the document in the blank above the word “Signature”;
 - ii. Print the name of the person signing the agreement in the space marked “Printed Name”;
 - iii. Provide the job title of the person signing the agreement in the blank above the word “Title”; and,
 - iv. Indicate the date the document was signed in the area marked “Date”.
2. Attachment 1. Subcontractor Agreement Form – Attachment 1 is required to be completed for each person or entity in which you or your company subcontract and share Confidential Information for the purpose of performing activities associated with the contract and subject to the terms and conditions of the DUA.
- a. Second paragraph, first blank – Print the name of the individual or entity you subcontract with to perform activities for the contract.
 - b. Bottom of page, “Contractor” – The contractor must:

- i. Sign the document in the blank labeled “By”;
 - ii. Print the name of the individual, whose signature is listed above, in the blank marked “Name”;
 - iii. Provide the job title of the individual in the blank labeled “Title”;
 - iv. Indicate the date the signature was provided in the blank marked “Date”.
- c. Bottom of page, “Subcontractor” – The subcontractor must:
 - i. Sign the document in the blank labeled “By”;
 - ii. Print the name of the individual, whose signature is listed above, in the blank marked “Name”;
 - iii. Provide the job title of the individual in the blank labeled “Title”;
 - iv. Indicate the date the signature was provided in the blank marked “Date”.