



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

June 7, 2023

Dear Colleague:

The Michigan Department of Health and Human Services, Bureau of Laboratories, in Lansing has implemented a data reporting system that allows agencies to receive reports via encrypted E-mail (electronic mail).

To convert your agency to receive reports via E-mail transmission:

- 1) A letter must be mailed to the MDHHS Bureau of Laboratories on your agency letterhead consenting to becoming an automatic e-mail agency. The letter must be signed by a person who is authorized to make this request.
- 2) The enclosed statement of understanding must be completed, signed and returned along with the consenting letter.
- 3) You must **create** a secure password, it must contain the following: minimum of 8 characters, with at least one number, one Capital letter, one small letter. **Example: Qjs3qpst**
- 4) The following technical specifications must be met:
 - A) **A shared E-mail address.** This ensures that if one person is indisposed, reports will still be received in a timely manner.
 - B) **An application that allows the opening of a 256-bit encrypted password protected file.** WinZip is required
 - C) **A mail server that will allow a zipped file attachment of up to 3MB.**

The letter and statement of understanding must be mailed to MDHHS, Bureau of Laboratories via U.S. mail, to the following address:

Michigan Department of Health and Human Services
Bureau of Laboratories
Data & Specimen Handling Unit - Quality Assurance Section
3350 Martin Luther King, Jr. Boulevard
Lansing, MI 48906

(Continued)

If your agency chooses this E- mail reporting option, the delivery of Environmental laboratory reports through the United State Postal System or via FAX will be eliminated.

Please notify MDHHS if your secure E-mail is having problems. If an alternate, secure E-mail is available, reporting can be promptly changed to the alternate E-mail address.

Please notify MDHHS when your secure E-mail address is again operational. If your E-mail is down, and you do not have an alternate secure E-mail address, reports will be mailed until your E-mail is operational, without any unnecessary delays.

It is the responsibility of your agency to daily maintain a secure E-mail address.

Please note:

Reports from MDHHS clinical tests will continue to be delivered via *Automatic FAX Transmission* and the United States Postal System.

If you have any further questions, please contact the DASH Unit at (517) 335-8059 or Mary Bonifas at (517) 335-8074.

Best regards,

Matthew Bashore

Matthew Bashore, Supervisor
DASH Unit, Quality Assurance Section
Michigan Department of Health and Human Services
Bureau of Laboratories, Building 44, Room 155
P.O. Box 30035, Lansing, Michigan 48909
E-mail: bashorem@michigan.gov Phone: (517) 335-8059 FAX: (517) 335-9871

Please keep this letter for your records.

Space below for MDHHS BOL DASH Unit Use only

STATEMENT OF UNDERSTANDING

AGENCIES SELECTING E-MAIL (ELECTRONIC MAIL) TRANSMISSION OPTION:

1. I understand that ALL TRACE METALS reports for environmental testing, performed by the MDHHS Bureau of Laboratories, will be sent to this requesting agency via an encrypted email transmission.
2. I understand that upon conversion to an E-mail transmission agency, NO hard copy reports will be sent using the United States Postal Service.
3. The E-mail address provided to MDHHS meets the standards outlined below:
 - A) Only persons authorized to review confidential clinical laboratory reports, use or have access to incoming encrypted E-mail transmissions.
 - B) Our agency has a **shared E-mail address**. This ensures that if one person is indisposed, reports will still be received in a timely manner.
 - C) Our agency has **an application that allows the opening of a 256-bit encrypted, password protected file**. WinZip is recommended.
 - D) Our agency has **a mail server that will allow a zipped file attachment of up to 3MB**.

Our Agency sends specimens to the following Regional Labs for testing. Circle all that apply.

Lansing Kalamazoo Kent County Saginaw

Specimen Types (Circle all that apply):

Trace Metals (Dust Wipes/Soil)

Water Testing (PFAS/HABs)

Date _____

Agency Name _____

Agency Address (including street number, city, and zip code) _____

Authorized Signature _____

E-mail Address _____

E-mail password to open reports _____

Contact Person for E-mail Problems (Please Print) _____

Contact Person's Phone Number for Problems _____

(Please keep a copy for your records)