



MNsure Grant Services Contract With County Navigator/In-Person Assister Attachment B

State of Minnesota

This Attachment sets forth the terms and conditions in which State will share data with and permit Contractor to Use or disclose Protected Information that the parties are legally required to safeguard pursuant to the Minnesota Data Practices Act under Minnesota Statutes, chapter 13, the Health Insurance Portability and Accountability Act rules and regulations codified at 45 C.F.R. Parts 160, 162, and 164 ("HIPAA") and other applicable laws.

DEFINITIONS

- A. "Agent" means Contractor's employees, contractors, subcontractors, and other non-employees and representatives.
- B. "Applicable Safeguards" means the state and federal provisions listed in Section 2.1 of this Attachment.
- C. "Breach" means the acquisition, access, Use, or Disclosure of unsecured protected health information in a manner not permitted by HIPAA, which compromises the security or privacy of protected health information.
- D. "Business associate" shall generally have the same meaning as the term "business associate" at 45 C.F.R. § 160.103, and in reference to the party in the Contract and this Attachment, shall mean Contractor.
- E. "Contract" means the Grant Services Contract between State and Contractor.
- F. "Disclose," "Disclosed," and "Disclosure" means the release, transfer, provision of access to, or divulging in any manner of information by the entity in possession of the Protected Information.
- G. "HIPAA" means the rules and regulations codified at 45 C.F.R. Parts 160, 162, and 164.
- H. "Individual" means the person who is the subject of protected information.
- I. "Privacy incident" means a violation of an information privacy provision of any applicable state and federal law, statute, regulation, rule, or standard, including those listed in the Contract and this Attachment.
- J. "Protected information" means any information that is or will be used by State or Contractor under the Contract that is protected by federal or state privacy laws, statutes, regulations or standards, including those listed in this Attachment. This includes, but is not limited to, individually identifiable information about a State, county or tribal human services agency client or a client's family member. Protected information also includes, but is not limited to, protected health information, as defined below, and protected information maintained within or accessed via a State information management system, including a State "legacy system" and other State application.
- K. "Protected health information" is a subset of "individually identifiable health information" in accordance with 45 C.F.R. § 160.103, but for purposes of this Attachment refers only to that information that is received, created, maintained, or transmitted by Contractor as a business associate on behalf of DHS. Protected health information is a specific subset of protected information as defined above.
- L. "Security incident" means the attempted or successful unauthorized Use or the interference with system operations in an information management system or application. Security

incident does not include pings and other broadcast attacks on a system's firewall, port scans, unsuccessful log-on attempts, denials of service, and any combination of the above, provided that such activities do not result in the unauthorized Use of Protected Information.

- M. "Use" or "Used" means any activity by the parties during the duration of the Contract involving protected information including its creation, collection, access, use, modification, employment, application, utilization, examination, analysis, manipulation, maintenance, dissemination, sharing, disclosure, transmission, or destruction. Use includes any of these activities whether conducted manually or by electronic or computerized means.
- N. "User" means an agent of either party, who has been authorized to use protected information.

1. INFORMATION EXCHANGED

- 1.1 This Attachment governs the data that will be exchanged pursuant to Contractor performing the services described in the Contract. The data exchanged under the Contract may include the following data elements about an Individual: name, address, phone number, email address, date of birth, social security number, age, sex, gender, income, medical information (e.g., health diagnoses, health conditions, and healthcare treatments), and human services program eligibility status. This data may be classified as:
 - (a) Private data (as defined in Minn. Stat. § 13.02, subd. 12), confidential data (as defined in Minn. Stat. § 13.02, subd. 3), welfare data (as governed by Minn. Stat. § 13.46), medical data (as governed by Minn. Stat. § 13.384), and other "not public" data (as defined in Minn. Stat. § 13.02, subd. 8a) governed by other sections in the Minnesota Government Data Practices Act (MGDPA), Minn. Stats. Chapter 13;
 - (b) Protected health information ("PHI") (as defined in and governed by the Health Insurance Portability and Accountability Act ("HIPAA") and 45 C.F.R. § 160.103);
 - (c) Records (as defined by the Privacy Act of 1974 at 5 U.S.C. § 552a(a)(4));
 - (d) Other data subject to applicable state and federal statutes, rules, and regulations affecting the collection, storage, Use, or dissemination of private or confidential information.
- 1.2 State is permitted to share the Protected Information with Contractor pursuant to Minnesota Statutes, section 62V.06, subdivision 5; 45 CFR §§ 164.506(c), and 164.512, in order for Contractor to help State perform the duties described in the Contract, which is primarily to help State guide Minnesota residents through the process of enrolling in health insurance options available through State (MNSure).

2. INFORMATION PRIVACY AND SECURITY

Contractor and State must comply with the Minnesota Government Data Practices Act, Minn. Stat. § 13, and the Health Insurance Portability Accountability Act ["HIPAA"], 45 C.F.R. § 164.103, et seq., as it applies to all data provided by State under the Contract, and as it applies to all data created, collected, received, stored, Used, maintained, or disseminated by Contractor under the Contract. The civil remedies of Minn. Stat. § 13.08 apply to Contractor and State. Additionally, the remedies of HIPAA apply to the release of data governed by that Act.

2.1 Compliance with Applicable Safeguards.

(a) State and Federal Safeguards.

The parties acknowledge that the Protected Information to be shared under the terms of the Contract may be subject to one of the following laws, statutes, regulations, rules, and standards, as applicable ("Applicable Safeguards"). The parties agree to comply with all rules, regulations and laws, including as amended or revised, applicable to the exchange, Use and Disclosure of data under the Contract, including:

- 1. Health Insurance Portability and Accountability Act rules and regulations codified at 45 C.F.R. Parts 160, 162, and 164 ("HIPAA");
- 2. Minnesota Government Data Practices Act (Minn. Stat. Chapter 13);

3. U.S. Privacy Act of 1974;
4. Computer Matching Requirements (5 U.S.C. 552a)
5. Final Exchange Privacy Rule of the Affordable Care Act (45 C.F.R. § 155.260), and
6. All [State of Minnesota “Enterprise Information Security Policies and Standards, including the Public Artificial Intelligence Services Security Standard.”](https://mn.gov/mnit/government/policies/security/)¹

(b) **Statutory Amendments and Other Changes to Applicable Safeguards.**

The Parties agree to take such action as is necessary to amend the Contract and this Attachment from time to time as is necessary to ensure, current, ongoing compliance with the requirements of the laws listed in this Section or in any other applicable law.

2.2 Contractor Data Responsibilities

(a) **Use Limitation.**

1. **Restrictions on Use and Disclosure of Protected Information.**

Except as otherwise authorized in the Contract or this Attachment, Contractor may only Use or Disclose Protected Information as necessary to provide the services to State as described herein, or as otherwise required by law, provided that such Use or Disclosure of Protected Information, if performed by State, would not violate the Contract, this Attachment, HIPAA, or other state and federal statutes or regulations that apply to the Protected Information.

2. **Federal tax information.**

To the extent that Protected Information Used under the Contract constitutes “federal tax information” (FTI), Contractor shall ensure that this data only be Used as authorized under the Patient Protection and Affordable Care Act, the Internal Revenue Code, 26 U.S.C. § 6103(C), and IRS Publication I 075.

(b) **Individual Privacy Rights.**

Contractor shall ensure Individuals are able to exercise their privacy rights regarding Protected Information, including but not limited to the following:

1. **Complaints.**

Contractor shall work cooperatively with State to resolve complaints received from an Individual; from an authorized representative; or from a state, federal, or other health oversight agency.

2. **Amendments to Protected Information Requested by Data Subject Generally.**

Within ten (10) business days, Contractor must forward to State any request to make any amendment(s) to Protected Information in order for State to satisfy its obligations under Minn. Stat. § 13.04, subd. 4. If the request to amend Protected Information pertains to Protected Health Information, then Contractor must also make any amendment(s) to protected health information as directed or agreed to by State pursuant to 45 C.F.R. § 164.526 or otherwise act as necessary to satisfy State or Contractor’s obligations under 45 CF.R. § 164.526 (including, as applicable, protected health information in a designated record set).

(c) **Background Review and Reasonable Assurances Required of Agents.**

1. **Criminal Background Check Required.**

All employees, agents and volunteers of the Contractor who are seeking certification to be a MNsure-certified navigator and will be accessing State’s Protected Information must undergo a computerized criminal history system background check.

2. **Reasonable Assurances.**

¹ See <https://mn.gov/mnit/government/policies/security/>

Contractor represents that, before its Agents are allowed to Use or Disclose Protected Information, Contractor has conducted and documented a background review of such Agents sufficient to provide Contractor with reasonable assurances that the Agent will comply with the terms of the Contract, this Attachment and Applicable Safeguards.

3. **Documentation.**

Contractor shall make available documentation required by this Section upon request by State.

(d) Ongoing Responsibilities to Safeguard Protected Information.

1. **Privacy and Security Policies.**

Contractor shall develop, maintain, and enforce policies, procedures, and administrative, technical, and physical safeguards to ensure the privacy and security of the Protected Information. Contractor's policies and procedures must include but not be limited to the following (these policies and procedures below are examples of some of the types of policies and procedures that may be required to achieve compliance with HIPAA and other relevant law applicable to Contractor's duties to safeguard Protected Information, Protected Health Information, and not public data accessed by Contractor under this Contract):

- A. Contractor shall develop, maintain, and enforce policies and procedures or usage rules for all devices with access to PHI or Protected Information.
- B. Contractor must provide training to employees on what devices employees can use for work purposes or services under this Contract.
- C. Contractor's employees or agents (including but not limited to Contractor's remote employees or employees who work from home) must have access to a shredder for the destruction of PHI or Protected Information.
- D. Contractor shall develop, maintain, and enforce policies and procedures or rules for remote work that involves access to PHI or Protected Information by Contractor's employees (such as policies or procedures that require locked cabinets for paper copies of PHI or Protected Information and require sound separation for phone calls that involve collection or sharing of Protected Information or PHI, as well as policies and procedures that ensure up-to-date software for devices used for remote work).

2. **Electronic Protected Information.**

Contractor shall implement and maintain appropriate safeguards, and comply with Subpart C of 45 C.F.R. Part 164 (HIPAA Security Rule) with respect to electronic Protected Information, including electronic Protected Health Information, to prevent the Use or Disclosure other than as provided for by the Contract or this Attachment.

3. **Encryption.** According to the State of Minnesota's "Enterprise Information Security Policies and Standards," Contractor must use encryption to store, transport, or transmit any Protected Information. Contractor must not use unencrypted email to send any of the State data described in this subsection to anyone.

4. **Monitoring Agents.**

Contractor shall ensure that any contractor, subcontractor, or other agent to whom Contractor discloses Protected Information on behalf of State, or whom Contractor employs or retains to create, receive, Use, store, Disclose, or transmit Protected Information on behalf of State, agrees to the same restrictions and conditions that apply to Contractor under the Contract and this Attachment with respect to such Protected Information, and in accordance with 45 C.F.R. §§ 164.502(e)(1)(ii) and 164.308(b)(2).

5. **Minimum Necessary Access to Protected Information.**

Contractor shall ensure that its Agents Use only the minimum necessary Protected Information needed to complete an authorized and legally permitted activity.

6. **Training.**

Contractor shall ensure that Agents are properly trained and comply with all Applicable Safeguards and the terms of the Contract and this Attachment.

(e) Responding to Privacy Incidents, Security Incidents, and Breaches.

Contractor will comply with this Section for all protected information shared under the Contract. Additional obligations for specific kinds of protected information shared under the Contract are addressed in Section 2.2(F).

1. Mitigation of harmful effects.

Upon discovery of any actual or suspected privacy incident, security incident, or breach, Contractor will mitigate, to the extent practicable, any harmful effect of the privacy incident, security incident, or breach. Mitigation may include, but is not limited to, notifying and providing credit monitoring to affected Individuals.

2. Investigation.

Upon discovery of any actual or suspected privacy incident, security incident, or breach, Contractor will investigate to (1) determine the root cause of the incident, (2) identify Individuals affected, (3) determine the specific protected information impacted, and (4) comply with notification and reporting provisions of the Contract, this Attachment and applicable law.

3. Corrective action.

Upon identifying the root cause of any privacy incident, security incident, or breach, Contractor will take corrective action to prevent, or reduce to the extent practicable, any possibility of recurrence. Corrective action may include, but is not limited to, patching information system security vulnerabilities, employee sanctions, or revising policies and procedures.

4. Notification to Individuals and others; costs incurred.

A. **Protected Information.** Contractor and State will coordinate to determine whether notice to data subjects and/or any other external parties regarding any privacy incident or security incident is required by law. If such notice is required, Contractor will comply with State's and Contractor's obligations under any applicable law requiring notification, including, but not limited to, Minn. Stat. §§ 13.05 and 13.055.

B. **Protected Health Information.** If a privacy incident or security incident results in a breach of protected health information, as these terms are defined in this Attachment, then Contractor will provide notice to individual data subjects under any applicable law requiring notification in coordination with State, including but not limited to providing notice as outlined in 45 C.F.R. § 164.404.

C. **Failure to notify.** If Contractor fails to notify individual data subjects or other external parties under subparagraphs (a) and (b), then Contractor will reimburse State for any costs incurred as a result of Contractor's failure to provide notification.

5. Obligation to report to State.

Upon discovery of a privacy incident, security incident, or breach, Contractor will report to State in writing as specified in Section 2.2(F).

A. **Communication with authorized representative.** Contractor will send any written reports to, and communicate and coordinate as necessary with, State's authorized representative.

B. **Cooperation of response.** Contractor will cooperate with requests and instructions received from State regarding activities related to investigation, containment, mitigation, and eradication of conditions that led to, or resulted from, the security incident, privacy incident, or breach.

C. **Information to respond to inquiries about an investigation.** Contractor will, as soon as possible, but not later than forty-eight (48) hours after a request from State, provide State with any reports or information requested by State related to an

investigation of a security incident, privacy incident, or breach.

6. **Documentation.**

Contractor will document actions taken under paragraphs 1 through 5 of this Section, and provide such documentation to State upon request.

(f) **Reporting Privacy Incidents, Security Incidents, and Breaches.**

Contractor will comply with the reporting obligations of this Section as they apply to the kind of protected information involved. Contractor will also comply with Section 2.2(E) above in responding to any privacy incident, security incident, or breach.

1. **Protected Health Information.**

Contractor will report breaches and security incidents involving protected health information to State and other external parties. Contractor will notify State, in writing, of (1) any breach or suspected breach of protected health information; (2) any security incident; or (3) any violation of an Individual's privacy rights as they involve protected health information created, received, maintained, or transmitted by Contractor or its Agents on behalf of State.

- A. **Breach reporting.** Contractor will report, in writing, any breach of protected health information to State within five (5) business days of discovery, in accordance with 45 C.F.R § 164.410.

Content of report to State. Reports to the authorized representative regarding breaches of protected health information will include:

- a. Identities of the Individuals whose unsecured Protected Health Information has been breached.
 - b. Date of the breach and date of its discovery.
 - c. Description of the steps taken to investigate the breach, mitigate its effects, and prevent future breaches.
 - d. Sanctions imposed on members of Contractor's workforce involved in the breach.
 - e. Other available information that is required to be included in notification to the Individual under 45 C.F.R. § 164.404(c).
 - f. Statement that Contractor has notified, or will notify, affected data subjects in accordance with 45 C.F.R. § 164.404.
- B. **Security incidents resulting in a breach.** Contractor will report, in writing, any security incident that results in a breach, or suspected breach, of protected health information to State within five (5) business days of discovery, in accordance with 45 C.F.R § 164.314 and 45 C.F.R § 164.410.
- C. **Security incidents that do not result in a breach.** Contractor will report all security incidents that do not result in a breach, but involve systems maintaining protected health Information created, received, maintained, or transmitted by Contractor or its Agents on behalf of State, to State on a monthly basis, in accordance with 45 C.F.R § 164.314.
- D. **Other violations.** Contractor will report any other violation of an Individual's privacy rights as it pertains to protected health information to State within five (5) business days of discovery. This includes, but is not limited to, violations of HIPAA data access or complaint provisions.
- E. **Reporting to other external parties.** Contractor will report all breaches of protected health information to the federal Department of Health and Human Services in coordination with State, as specified under 45 C.F.R 164.408. If a breach of protected health information involves 500 or more Individuals:

- a. Contractor will immediately notify State.
- b. Contractor will coordinate with State to report to the news media and federal Department of Health and Human Services in accordance with 45 C.F.R. §§ 164.406-408.

F. Other Protected Information.

Contractor will report all other privacy incidents and security incidents to State.

- a. **Initial report.** Contractor will report all other privacy and security incidents to State, in writing, within five (5) days of discovery. If Contractor is unable to complete its investigation of, and response to, a privacy incident or security incident within five (5) days of discovery, then Contractor will provide State with all information under Section 2.2(E)(1)-(4), of this Attachment that are available to Contractor at the time of the initial report.
- b. **Final report.** Contractor will, upon completion of its investigation of and response to a privacy incident or security incident, or upon State's request in accordance with Section 2.2(E)(5) submit in writing a report to State documenting all actions taken under Section 2.2(E)(1)-(4), of this Attachment.

(g) Protected Health Information Designated Record Set.

If, on behalf of State, Contractor maintains a complete or partial designated record set, as defined in 45 C.F.R. § 164.501, upon request by State, Contractor shall:

- 1. Provide the means for an Individual to access, inspect, or receive copies of the Individual's Protected Health Information.
- 2. Provide the means for an Individual to make an amendment to the Individual's Protected Health Information.
- 3. Provide the means for access and amendment in the time and manner that complies with HIPAA or as otherwise directed by State.

(h) Access to Books and Records, Security Audits, and Remediation.

Contractor shall conduct and submit to audits and necessary remediation as required by this Section to ensure compliance with all Applicable Safeguards and the terms of the Contract and this Attachment.

- 1. Contractor represents that it has audited and will continue to regularly audit the security of the systems and processes used to provide services under the Contract and this Attachment, including, as applicable, all data centers and cloud computing or hosting services under contract with Contractor. Contractor will conduct such audits in a manner sufficient to ensure compliance with the security standards referenced in this Attachment.
- 2. This security audit required above will, to the extent permitted by applicable law, be deemed confidential security information and not public data under the Minnesota Government Data Practices Act, Minn. Stat. § 13.37, subd. 1(a) and 2(a).
- 3. Contractor agrees to make its internal practices, books, and records related to its obligations under the Contract and this Attachment available to State or a State designee upon State's request for purposes of conducting a financial or security audit, investigation, or assessment, or to determine Contractor's or State's compliance with Applicable Safeguards, the terms of this Attachment and accounting standards. For purposes of this provision, other authorized government officials includes, but is not limited to, the Secretary of the United States Department of Health and Human Services.
- 4. Contractor will make and document best efforts to remediate any control deficiencies identified during the course of its own audit(s), or upon request by State or other authorized government official(s), in a commercially reasonable timeframe.

(i) Documentation Required.

Any documentation required by this Attachment, or by applicable laws, standards, or policies,

of activities including the fulfillment of requirements by Contractor, or of other matters pertinent to the execution of the Contract, must be securely maintained and retained by Contractor for a period of six (6) years from the date of expiration or termination of the Contract, or longer if required by applicable law, after which the documentation must be disposed of consistent with Section 2.6 of this Attachment.

Contractor shall document disclosures of Protected Health Information made by Contractor that are subject to the accounting of disclosure requirement described in 45 C.F.R.. 164.528, and shall provide to State such documentation in a time and manner designated by State at the time of the request.

(j) **Requests for Disclosure of Protected Information.**

If Contractor or one of its Agents receives a request to disclose Protected Information, Contractor shall inform State of the request and coordinate the appropriate response with State. If Contractor discloses Protected Information after coordination of a response with State, it shall document the authority used to authorize the disclosure, the information disclosed, the name of the receiving party, and the date of disclosure. All such documentation shall be maintained for the term of the Contract and shall be produced upon demand by State.

(k) **Conflicting Provisions.** Contractor shall comply with all applicable provisions of HIPAA and with the Contract and this Attachment. To extent that the parties determine, following consultation, that the terms of this Attachment are less stringent than the Applicable Safeguards, Contractor must comply with the Applicable Safeguards. In the event of any conflict in the requirements of the Applicable Safeguards, Contractor must comply with the most stringent Applicable Safeguard.

(l) **Data Availability.** Contractor, or any entity with legal control of any protected information provided by State, shall make any and all protected information under the Contract and this Attachment available to State upon request within a reasonable time as is necessary for State to comply with applicable law.

2.3 Data Security.

(a) **State Information Management System Access.**

If State grants Contractor access to Protected Information maintained in a State information management system (including a State "legacy" system) or in any other State application, computer, or storage device of any kind, then Contractor agrees to comply with any additional system- or application-specific requirements as directed by State.

(b) **Electronic Transmission.**

The parties agree to encrypt electronically transmitted Protected Information in a manner that complies with NIST Special Publications 800-52, Guidelines for the Selection and Use of Transport Layer Security (TLS) Implementations; 800-77, Guide to IPsec VPNs; 800-113, Guide to SSL VPNs, or others methods validated under Federal Information Processing Standards (FIPS) 140-2.

(c) **Portable Media and Devices.**

The parties agree to encrypt Protected Information written to or stored on portable electronic media or computing devices in a manner that complies with NIST SP 800-111, Guide to Storage Encryption Technologies for End User Devices.

2.4 Contractor Permitted Uses and Responsibilities.

(a) **Management and Administration.**

Except as otherwise limited in the Contract or this Attachment, Contractor may:

1. Use Protected Health Information for the proper management and administration of Contractor or to carry out the legal responsibilities of Contractor.
2. Disclose Protected Health Information for the proper management and administration of

Contractor, provided that:

- A. The disclosure is required by law; or
- B. The disclosure is required to perform the services provided to or on behalf of State or the disclosure is otherwise authorized by State, and Contractor:
 - a. Obtains reasonable assurances, in the form of a data sharing agreement, from the entity to whom the Protected Health Information will be disclosed that the Protected Health Information will remain confidential, and will not be Used or Disclosed other than for the contracted services or the authorized purposes; and
 - b. Contractor requires the entity to whom Protected Health Information is disclosed to notify Contractor of any compromise to the confidentiality of Protected Health Information of which it becomes aware.

(b) **Notice of Privacy Practices.**

If Contractor's duties and responsibilities require it, on behalf of State, to obtain individually identifiable health information from Individual(s), then Contractor shall, before obtaining the information, confer with State to ensure that any required Notice of Privacy Practices includes the appropriate terms and provisions.

(c) **De-identify Protected Health Information.**

Contractor may Use Protected Health Information to create de-identified Protected Health Information provided that Contractor complies with the de-identification methods specified in 45 C.F.R. § 164.514.

(d) **Aggregate Protected Health Information.**

Contractor may Use Protected Health Information to perform data aggregation services for State. The Use of Protected Health Information by Contractor to perform data analysis or aggregation for parties other than State must be expressly approve by State.

2.5 State Data Responsibilities

- (a) State shall disclose Protected Information only as authorized by law to Contractor for its Use or Disclosure.
- (d) State shall obtain any consents or authorizations that may be necessary for it to disclose Protected Information with Contractor.
- (e) State shall notify Contractor of any limitations that apply to State's Use and Disclosure of Protected Information that would also limit the Use or Disclosure of Protected Information by Contractor.
- (f) State shall refrain from requesting Contractor to Use or Disclose Protected Information in a manner that would violate applicable law or would be impermissible if the Use or Disclosure were performed by State.

2.6 Obligations of Contractor Upon Expiration or Cancellation of the Contract.

Upon expiration or termination of the Contract for any reason:

- (a) Contractor shall retain only that Protected Health Information which is necessary for Contractor to continue its proper management and administration or to carry out its legal responsibilities, and maintain appropriate safeguards and comply with Subpart C of 45 C.F.R. Part 164 with respect to electronic Protected Health Information to prevent the impermissible Use or Disclosure of any retained Protected Health Information for as long as Contractor retains the Protected Health Information.
- (b) For all other Protected Information, in compliance with the procedures found in the Applicable Safeguards listed in Section 2.1, or as otherwise required by applicable industry standards, or directed by State, Contractor shall immediately, destroy or sanitize (permanently de-identify without the possibility of re-identification), or return in a secure manner to State all Protected Information that it still maintains.

- (c) Contractor shall ensure and document that the same action is taken for all Protected Information shared by State that may be in the possession of its contractors, subcontractors, or agents. Contractor and its contractors, subcontractors, or agents shall not retain copies of any Protected Information.
- (d) In the event that Contractor cannot reasonably or does not return or destroy Protected Information, it shall notify State of the specific laws, rules or policies and specific circumstances applicable to its retention, and continue to extend the protections of the Contract and this Attachment and take all measures possible to limit further Uses and Disclosures of the client data for so long as Contractor or its contractors, subcontractors, or agents maintain the Protected Information.
- (e) Documentation required by this Section shall be made available upon demand by State.
- (f) Any costs incurred by Contractor in fulfilling its obligations under this Section will be the sole responsibility of Contractor.