

AdvocateAuroraHealth

Non-Employee Confidentiality Agreement

The confidentiality of our patients' protected health information (PHI) is required by federal laws, such as the Health Insurance Portability and Accountability Act (HIPAA), state laws, and Advocate Aurora Health (AAH) policies. PHI is any information regarding a patient's visit at AAH. This includes, but it not limited to clinical, billing, financial, and demographic information. Even the fact that an individual received care at AAH is protected. Violation of the privacy laws may lead to civil and/or criminal penalties.

You are required to conduct yourself in strict conformance of all applicable laws and AAH policies governing PHI. You may incidentally encounter or have access to confidential patient information. It is important that you recognize that any PHI that you see or hear must be kept confidential. You cannot share PHI with any acquaintances. This includes posting on social media. For additional information on the privacy laws and AAH's privacy policies, contact your leader or mentor.

As a condition and in consideration of your potential access to PHI, you understand and agree to the following:

- You will not disclose (share) any PHI learned while at AAH.
- You will comply by AAH's privacy policies and state and federal privacy laws.
- You understand that any privacy violation will result in termination of further experiences at AAH and may lead to civil and/or criminal penalties.

My signature below indicates that I have read, accept, and agree to abide by all the terms and conditions of this Agreement.

Print Non-Employee Name: _____

Non-Employee Signature: _____ Date: _____

Leader/Mentor Name: _____

Leader/Mentor Signature: _____ Date: _____

This form must be retained for a minimum of 6 years by the responsible department leader.