

CONFIDENTIALITY AGREEMENT

In order to ensure confidentiality and protect the interests of Carson Tahoe Regional Healthcare and its patients, the following is the organization's policy regarding confidential or proprietary information disclosed to all employees or other agents, consultants, etc. As a covered individual, you are required to read and sign the following.

Policy:

No officer, employee or other agent of Carson Tahoe Regional Healthcare shall reveal or disclose the identity, eligibility or health condition of any patient or any information related thereto, except to authorized individuals and as specifically authorized in the scope of the individual's duties to provide services to the patient; nor shall he/she in any other way make public or utilize confidential information unless specifically authorized in the scope of his/her duties.

Additionally, I may have access to personal information about other employees and/or physicians. I shall not reveal or disclose this information to others. Examples include, but are not limited to, information regarding an employee's schedule and contact information such as personal phone numbers.

I hereby agree to forward all requests for the release of confidential information to my supervisor, if applicable. I also agree to report any and all violations by myself or any other person to the appropriate Carson Tahoe Regional Healthcare official.

I hereby understand and agree that in the course of my service or affiliation with the organization, I may acquire confidential information and trade secrets concerning its operations, future plans and methods of doing business. For purposes of this provision, "confidential information" and "trade secrets" include, but are not limited to, the rules, guidelines and practices, service area expansion plans, pricing and discounting practices, information relative to employer group protocols and discount rates, information relating to the experience ratings of customers, pricing agendas and criteria for employer groups, and medical cost ratio data relating to employer groups. I understand and agree that disclosure of such information would be extremely damaging to the organization if disclosed to a competitor or made available to any other person or entity. I also understand and agree that such information has been divulged to me in confidence, and understand and agree that I will keep such information secret and confidential and not use such information for any purpose whatsoever. I also acknowledge and agree that the organization would be irreparably harmed by any violation or threatened violation of this Confidentiality Agreement and that therefore, the organization shall be entitled to an injunction prohibiting me from any violation or threatened violation of this confidentiality provision in addition to any other relief permitted by law.

Any individual covered by this policy who violates its provisions shall be subject to discipline and/or separation from service or affiliation with Carson Tahoe Regional Healthcare. The restrictions of this policy also pertain to any disclosure or use of confidential information after leaving affiliation with the organization.

All covered individuals shall agree to this policy as a condition of his/her affiliation with Carson Tahoe Regional Healthcare and having access to any such information.