



WESTERN ND HONOR FLIGHT CONFIDENTIALITY AGREEMENT

All Veteran's Protected Health Information (PHI—which includes medical and financial information), personal information about the Board of Directors or other Volunteers (hereby referred to as WNDHF Associates), financial and operating data of the practice, and any other information of a private or sensitive nature are considered confidential. Confidential information should not be read or discussed by any WNDHF Associate unless pertaining to his or her specific job requirements. Examples of inappropriate disclosures include:

- WNDHF Associates discussing or revealing PHI or other confidential information to friends or family members.
- WNDHF Associates discussing or revealing PHI or other confidential information to others without a legitimate need to know.

The unauthorized disclosure of PHI or other confidential information by WNDHF Associates can subject each individual associate and the WNDHF Honor Flight Network to liability. Disclosure of PHI or other confidential information to unauthorized persons, or unauthorized access to, or misuse, theft, destruction, alteration, or sabotage of such information, is prohibited.

WNDHF Associate Confidentiality Agreement

I hereby acknowledge, by my signature below, that I understand that the PHI, other confidential records, and data to which I have knowledge and access in the course of my association with WDAY Honor Flight, is to be kept confidential, and this confidentiality is a condition of my association. This information shall not be disclosed to anyone under any circumstances, except to the extent necessary to fulfill my job requirements. I understand that my duty to maintain confidentiality continues even after I am no longer associated with Western ND Honor Flight.

I am familiar with the guidelines in place for Western ND Honor Flight pertaining to the use and disclosure of PHI or other confidential information. Approval should first be obtained before any disclosure of PHI or other confidential information not addressed in the guidelines and policies and procedures of Western ND Honor Flight is made. I also understand that the unauthorized disclosure of PHI and other confidential or proprietary information of is strictly prohibited.

Date:

Signature of Associate:

Print Name:
