

Information Security [HSIM.3]

Safeguarding company assets is the responsibility of all corporate CM employees. Such assets should be used and maintained with care and respect while guarding against waste and abuse. CM assets must be used according to all company policies and procedures, comply with security programs that help prevent their unauthorized use or theft, and abide by all regulations or contractual agreements governing their use.

Additional guidelines to keep in mind when using company property are:

- Company property, equipment, resources or services should not be used for personal gain—this is strictly prohibited
- Safeguard computer hardware, software, and data stored electronically against damage, loss, unauthorized alteration, theft or unauthorized access
- Protect and keep confidential computer passwords and other personal computer systems and network access information

CM clinical staff record or report important information in the course of their work. It is their responsibility to record and report information honestly, completely and accurately. Under no circumstances should misleading records be created or falsified or company documents be improperly destroyed.

Keeping and protecting confidential and vital information so that CM has the ability to respond to internal and external inquiries as required. Effective records management also means retaining information that is required and properly disposing of records and copies that no longer meet any compliance or business requirements.

All CM employees have an obligation to maintain the confidentiality of both employee and company information. Employees must abide by all privacy laws pertaining to any confidential data that may be kept by the company and related to employees or individuals.

During the course of business, clinical staff may learn of or create valuable proprietary business information. To help protect this valuable proprietary business information, clinical staff must follow these guidelines:

- Do not use confidential information for non work related purposes
- Do not disclose confidential information to any other person, whether a co-worker or outsider, except as required in the conduct for business purposes
- When disposing of documents that contain confidential or restricted information use care to avoid disclosure by mistake
- Do not discuss confidential information in any public place where someone may overhear
- Refer media, financial, regulatory or legal inquiries to the proper department within the company
- Guard against disclosing confidential information by mistake in talks with family members or friends

Because of the potentially sensitive nature of company documents, any clinical staff member who is terminated or resigns is prohibited from taking or retaining any documents that relate to their work at the company.

HIPAA Privacy and Confidentiality [HSIM.3]

All CM staff, corporate and field, are expected to adhere to policies with regard to Health Insurance Portability and Accountability Act (HIPAA) regulations and confidentiality requirements set forth by CM and any facilities where clinical staff are assigned.

Protected health information (PHI) is defined as any information, including demographic information, collected from an individual that (a) is created or received by a health care provider, health plan, employer or health care clearing house; and (b) relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision for health care to an individual and identifies the individual or with respect to which there is a reasonable basis to believe that the information can be used to identify the individual.

It is the policy of CM that all clinical staff:

1. Maintain and protect the privacy of all business information related to CM and any healthcare facility.
2. Maintain and protect the privacy of all protected health information relating to staff and/or patients.
3. Follow the HIPAA policy and procedure as defined by CM and, for clinical staff, by each individual health care facility the healthcare provider may be assign during job performance with CM.
4. Will not remove any staff information from the company or patient information from the healthcare facility.
5. Will not misuse confidential information and will only access information that is necessary for the individual to do his/her job. Confidential information, including protected health information, will not be used or disclosed in any manner (verbal, written, electronic) unless required to do so in order to provide appropriate and necessary care to the patient or as necessary to secure an assignment for a clinical staff member.
6. Will not share any staff or patient protected health information with any corporate employee of CM or other clinical staff employed by CM unless it is a necessary part of the job.
7. Will not share, alter, or destroy any confidential information unless it is a necessary part of the job. If it is necessary, the individual will follow the correct procedure as directed by CM management or management at the assigned facility.
8. Keep any computer passwords secret and do not share them. Clinical staff are responsible for protecting their password or other access to confidential information. The individual

understands that use of an electronic system at CM or an assigned facility may be periodically monitored and audited to ensure compliance with the law.

9. Will only print or download information from any computer system with it is necessary for legitimate work related purposes. The individual is responsible for this information until it is properly disposed of or filed.
10. Immediately report to appropriate management personnel at the company or assigned facility if the individual suspects anyone is misusing confidential information or is using his/her password. CM will not tolerate any retaliation against the clinical staff member for making such a report.
11. Will acknowledge that any confidential information learned on the job does not belong to the clinical staff member and he/she has no right or ownership to it. Access to confidential information may be removed by CM or the facility the individual is assigned to at any time.
12. Will, upon termination of job placement with CM or of assignment with any healthcare facility, promptly return any CM or facility documents or data containing CM or that facility's confidential information or data that is in the individual's possession or control.

Failure to comply with each term in this policy may result in disciplinary action up to and including termination of assignment and/or employment with CM.

Notice of Privacy Practices [HSIM.3]

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO YOUR INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

CM is required by law to maintain the privacy of protected health information, give notice of our legal duties and privacy practices with respect to protected health information and follow the terms of the notice that is currently in effect. CM is committed to protecting health information. As part of each of our staffing agreements, we must maintain a staff record to comply with certain legal, regulatory and facility specific requirements. This notice applies to all medical information and records we have on file. The facility where clinical staff are assigned to work may have additional or different policies or notices regarding the facility's use and disclosure of the medical information. Protected health information includes demographic and medical information that concerns the past, present, and future physical or mental health of an individual. Protected health information contains specific information that identifies a person or can be used to identify a person. This notice describes our organization's practices and that of any staff authorized to enter or view information in clinical staff personnel files. We expect all entities and persons who we have disclosed medical information to abide by all laws and regulations regarding the protection of protected health information.

How We May Use and Disclose Your Medical Information

For Company Operations – The use and disclosure of medical information are necessary to run the company and meet contracted facility requirements regarding the health status of temporary staff. CM uses medical information to determine whether or not clinical staff meet CM, as well

as individual contracted facility, health status requirements of healthcare providers. Health information may be used to secure a contracted position for clinical staff at a facility.

Appointment Scheduling and Reminders – We may use and disclose medical information about clinical staff when setting up appointments or reminders for medical testing and/or care at a healthcare facility.

As Required By Law – We disclose PHI when required to do so by federal, state or local law.

To Avert a Serious Threat to Health or Safety – We may use and disclose medical information when necessary to prevent a serious threat to clinical staff's health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

Special Situations for Use and Disclosure

Workers' Compensation – We may release medical information for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.

Lawsuits and Disputes – If any clinical staff are involved in a lawsuit, we may disclose relevant medical information in response to a court or administrative order. We may also disclose medical information in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell the individual about the request (which may include written notice) or to obtain an order protecting the information requested.

Law Enforcement – We may release medical information if asked to do so by a law enforcement official:

- In response to a court order, subpoena, warrant, summons or similar process
- To identify or locate a suspect, fugitive, material witness or missing person
- About the victim of a crime if, under certain circumstance, we are unable to obtain the person's agreement
- About a death we believe may be the result of criminal conduct
- In emergency circumstances to report a crime; the location of the crime or victims; or the identity, description or location of the person who committed the crime

Clinical Staff Rights Regarding Medical Information

Each clinical staff member has the following rights regarding the medical information we maintain:

1. *Right to Inspect and Copy* – Clinical staff have the right to inspect and copy medical information that may be used to make decisions about placement at healthcare facilities. Submit all requests in writing to:

Concentric Methods, LLC
7050 Infantry Ridge Road
Manassas, Virginia 20109

Fees for the costs of copying, mailing or other administrative and supply costs associated with each request may apply.

2. *Right to Amend* – If you feel that the medical information is incorrect or incomplete; you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the company. To request an amendment, your request must be made in writing and submitted to:

Concentric Methods, LLC
7050 Infantry Ridge Road
Manassas, Virginia 20109

Requests for an amendment may be denied if it is not in writing or does not include a reason to support the request. In addition, requests may be denied if the information:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment
- Is not part of the medical information kept by or for CM
- Is not part of the information that the individual would be permitted to inspect and copy
- Is accurate and complete

If a request for amendment is denied, the requestor has the right to submit a written addendum, not to exceed 250 words, with respect to any item or statement in their record that is believed to be incomplete or incorrect. If it is clearly indicated in writing that the individual wants the addendum to be made part of their medical record, we will attach it to the records and include it whenever we make a disclosure of the time or statement that is believed to be incomplete or incorrect.

3. *Right to a Paper Copy of this Notice* – Clinical staff have the right to a paper copy of this notice, and may ask for one at any time. Even if individuals have agreed to receive this notice electronically, they are still entitled to a paper copy of this notice. You can obtain a copy of this notice from <http://www.concentric-methods.com/>.

Changes to This Notice

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have as well as any information we receive in the future. The notice will contain an effective date.

Complaints

If any clinical staff believes their privacy rights have been violated, a complaint may be filed with the company or with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing to the company at the address listed previously in this notice. Clinical staff will not be penalized for filing a complaint.

Other Uses of Medical Information

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with the staff member's written permission. If permission to use or disclose medical information is provided, the individual may revoke that permission, in writing, at any time. If permission is revoked, we will no longer use or disclose medical information for the

reasons covered by our written authorization. We are unable to take back any disclosures we have already made with the staff member's permission, and we are required to retain our records of the medical information that we have already received.