



Linil Visiting Nurses, Inc.

2211 Lee Road Suite 109 Winter Park, FL 32789
Phone: (407)-790-4848 Fax: (407)-790-4847
www.LinilVisitingNurses.com

Employee Confidentiality Agreement

Employee Last Name:	
First Name:	
Employee ID#:	Date:

Employee Confidentiality Agreement of Patient Health Information in Accordance with HIPAA Regulations

For good consideration and as an inducement for LINIL VISITING NURSES, INC. (employer) to employ _____ (employee), the undersigned employee hereby agrees not to directly or indirectly use, manipulate or copy compete any patient health information(PHI), to include personal health information or personal contact information(address, phone, email address, etc.) with the business of the agency and its successors and assigns during the period of employment. Misuse of PHI, disclosure of information will result in a disciplinary action up to and including termination of employment/contact/association and report with action to HIPAA federal agencies. Fines related to civil and criminal offenses for gross misconduct with the above information are the direct responsibility of said employee.

The employee acknowledges that the agency shall or may in reliance of this agreement provide employee access to trade secrets, customers and other confidential data and good will. Employees agrees to retain said information as confidential and not to use said information on his or her own behalf or disclose same to any third party or for their own personal or monetary gain.

The employee agrees to not copy and to return all such agency supplied information immediately upon termination of employment. Further, employee agrees not to solicit any of the customers of employer for any purpose for a period of two years after termination.

This agreement shall be binding upon and inure to the benefit of the parties, their successors, assigns, and personal representatives.

Signed this _____ day of _____ 20____.

Agency

Date

Employee

Date