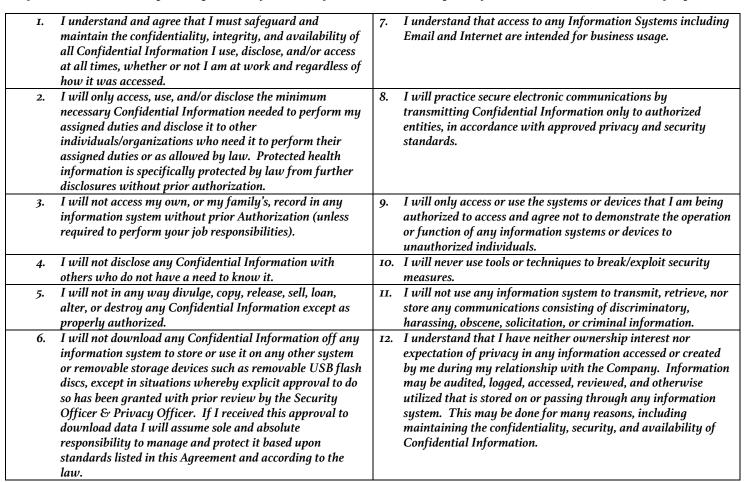
CONFIDENTIALITY AND INFORMATION ACCESS AGREEMENT

Summary

Molecular Match ("the Company") is dedicated to safeguarding and maintaining the confidentiality, integrity, and availability of ePHI, employee, and organizational information (collectively "Confidential Information"). ePHI refers to information includes protected health information that is any personal, employment-related, or medical information relating to a patient's treatment or payment that is created and/or stored in any information system. The confidentiality, integrity, and availability of protected health information must be maintained at all times.

This Confidentiality and Information Access Agreement ("Agreement") is required to be read, signed, and complied with by all users that access any of the organization's information systems as a condition of access to any information system. The information system user signing this Agreement may only access, use, and disclose Confidential Information in any medium as needed to perform his/her job responsibilities as allowed by law, organization policies and procedures, and/or as agreed upon between said user and the Company.



13.	I understand that my User Login ID(s), password(s) are used to control access to information systems and an electronic signature(s) is the equivalent to my legal signature. I will not disclose them to anyone nor allow anyone to access any information system using my User Login ID(s) and password(s) for any reason.	16.	I will immediately report to the Privacy officer any activity that violates this agreement, Confidential Information laws, or any other incident that could have any adverse impact on Confidential Information.					
14.	I will only use my officially assigned, personal User Login ID(s) and password(s).	17.	Upon completion and/or termination of access to any information system, the Human Resources department (or other designated department) will the Security Officer to delete users access to information systems/applications.					
15.	I will immediately notify the Privacy Officer if my password has been seen, disclosed, or otherwise compromised.	18.	I affirm that I will maintain the confidentiality, integrity, and availability of all Confidential Information even after termination, completion, cancellation, expiration, or other conclusion of access to any information system.					
19.	I understand that violation of this Agreement may result in disci		ry action, up to and including termination of employment or					
business relationship, suspension and loss of privileges, termination of authorization to work as well as legal actions.								
	Refer any questions related to this Agreement to the							
Security Officer or the Privacy Officer.								
By signing this Agreement, I agree to comply with its terms and conditions. Failure to read this Agreement is not an excuse for violating it. Access to information systems may be denied if this Agreement is not returned signed and dated.								
Sign	ature	Ī	Date					
Plea	se return this completed Agreement to: Privacy Officer							