

MT Program Peer Reviewer Confidentiality Agreement

As a reviewer of medical transcription programs for the purpose of MT Program Approval by the Association for Healthcare Documentation Integrity (AHDI) and the American Health Information Management Association (AHIMA), I understand that I have the duty to maintain the confidentiality of

- (1) all materials and information submitted by MT programs seeking approval
- (2) all findings, determinations, outcomes, and scores associated with the reviews I perform
- (3) all nonpublished policies, procedures, and scoring mechanisms associated with the program approval process.

I understand that this duty extends beyond the period of time during which I serve as a reviewer for AHDI's MT program approval, i.e., that I will be bound by this duty as a former reviewer with regard to confidential information and materials that I had access to during the period I was a reviewer.

I understand that the duty of confidentiality prohibits me from purposefully disclosing confidential information and requires me to act with due care in order to avoid the inadvertent disclosure of confidential information. Confidential information includes but is not limited to MT program approval policies and procedures, records, and reviewer assignments as well as the identity of applicants, their manuals, financial information, curriculum and all other proprietary information submitted by them. I understand that I must hold in confidence all information contained in any and all such records.

I agree to take all reasonable steps to ensure that no use by me, or by any third parties, shall be made of any applicant's confidential material. Further, I agree to return to AHDI all documentation sent to me for the purpose of review and not retain any copies of such documentation.

I agree not to disclose confidential Association, MT Program Approval applicant, or MT Program Approval information to people outside the Association or to other employees and volunteers who do not have a legitimate need to know, without prior approval of the Executive Director or Director of Education.

I understand that any deviation from the code of confidentiality may be grounds for immediate dismissal and possible legal action.

Reviewer's Name (printed): _____

Reviewer's Signature: _____

Date: _____