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

**I.** **Background**

Trovagene is a provider of laboratory testing services. In providing testing services, Trovagene receives, creates and discloses protected health information. This information is private and confidential. Trovagene has policies and procedures in place to protect the information against unlawful use and disclosure. This notice describes information we collect, how we use that information, and when and to whom we may disclose it.

**II.** **Protected Health Information and Our Obligations**

Protected health information or “PHI” (also called “personal health information”), is current, past or future information created or received by Trovagene from physicians about patients for whom testing is ordered from Trovagene. It may indicate the physical condition of a patient, the provision of health care to that patient, or payment for the provision of health care to that patient. The term PHI does not generally include publicly available information, or information available or reported in a summarized format.

Certain laws require Trovagene to maintain the privacy of PHI and to make available this notice of our legal duties and privacy practices with respect to PHI. When we use or disclose PHI, we are required to abide by the terms of this notice (or other notice in effect at the time of the use or disclosure).

**III. Information Collected and Created by Trovagene**

Trovagene collects the information that is minimally necessary to provide testing services and to obtain payment for these services. This may include name, address, telephone number, social security number, date of birth, medical history, diagnosis, treatment, provider identification and treatment information, financial responsibility and payment information. Trovagene creates, through its testing services, information to be used by a physician in the diagnosis of disease or condition or in the treatment of a disease or condition.

**IV. Protection of PHI**

Access to PHI is restricted to only those employees of Trovagene who need it in order to provide services to clients and patients. We maintain physical, technical and administrative safeguards to protect PHI against unauthorized use and disclosure. We have a Privacy Officer who is responsible for developing, educating Trovagene personnel about, and overseeing the implementation and enforcement of policies and procedures designed to safeguard PHI against inappropriate use and disclosure consistent with the applicable law.

**V. Standard Uses and Disclosures of PHI**

In the course of providing laboratory services, Trovagene uses PHI internally and discloses it to health care providers (doctors requesting services, laboratory personnel involved in ordering services and other caregivers), insurers, third party administrators, plan sponsors and other payors (employers, health care provider organizations and others who may be responsible for paying for or administering your health benefits); vendors, consultants, government authorities; and their respective agents. Trovagene is required by law to keep PHI confidential. Some examples of what we do with the information we collect and the reasons it might be disclosed to third parties are described below. We may use or disclose PHI with or without your consent to provide health care services.

Examples of these uses and disclosures include:

* Treatment – the fulfillment of requests by physicians to perform laboratory testing services is considered the provision of treatment.
* Payment – Trovagene uses and discloses PHI to obtain reimbursement for testing services. Examples of these payment activities include: billing, collections activities, determination of eligibility and obtaining authorization for services. We may use or disclose PHI in connection with payment activities with or without your consent.
* Health care operations – Trovagene uses and discloses PHI for our health care operations, which include internal administration and planning and various activities that improve the quality and cost effectiveness of the services provided.

Other Activities Permitted or Required by Law- We may use or disclose PHI for other important activities permitted or required by law, with or without your authorization. These include:

Required by Law

We may use or disclose PHI to the extent such use or disclosure is required by law, and it complies with and is limited to the requirements of that law. We use and disclose PHI for certain law enforcement purposes and in response to official subpoenas, court orders, discovery requests and other legal process. In addition, we use and disclose PHI in connection with health oversight activities (e.g., government audits of our compliance with certain laws and regulations; oversight of government-funded health benefits programs) and for public health activities such as disclosures to a public health authority to report, prevent or control disease, injury, or disability.

Research

We use and disclose PHI in connection with research performed by Trovagene and by researchers outside Trovagene. This research generally is subject to the oversight of an Institutional Review Board. In most cases, while PHI may be used to help prepare a research project or to contact you to ask whether you want to participate in a study, it will not be further disclosed for research without your authorization. Sometimes, however, where permitted under federal law and institutional policy, and approved by an Institutional Review Board or a privacy board, PHI may be used or disclosed. In addition, PHI may be used or disclosed to compile “limited or de-identified data sets” that do not include your name, address, social security number or other direct identifiers. These data sets may, in turn, be used for research purposes.

Family and Friends

Under certain circumstances, we may disclose PHI to family members, other relatives, or close personal friends or others that you identify to the extent it is directly relevant to their involvement with your care or payment related to your care.

**Personal Representative**

We may disclose PHI to your personal representative, as established under applicable law, or to an administrator, executor, or other authorized individual associated with your estate.

Deceased Patients

We may release PHI to a medical examiner or coroner to identify a deceased individual or to identify the cause of death. If necessary, we also may release information in order for funeral directors to perform their jobs.

Organ and Tissue Donation

We may release your PHI to organizations that handle organ, eye or tissue procurement or transplantation, including organ donation banks, as necessary to facilitate organ or tissue donation and transplantation if you are an organ donor.

Military

We may disclose your PHI if you are a member of U.S. or foreign military forces (including veterans) and if required by the appropriate authorities.

National Security

We may disclose your PHI to federal officials for intelligence and national security activities authorized by law. We also may disclose your PHI to federal and national security activities authorized by law. We also may disclose your PHI to federal officials in order to protect the President, other officials or foreign heads of state, or to conduct investigations.

Correctional Institution

We may disclose your PHI to correctional institutions or law enforcement officials if you are an inmate or under the custody of a law enforcement official. Disclosure for these purposes would be necessary: (a) for the institution to provide health care services to you, (b) for the safety and security of the institution, and/or (c) to protect your health and safety or the health and safety of other individuals.

Workers’ Compensation

We may release your PHI for workers’ compensation and similar programs.

Business Associates

We may disclose PHI to business associates that are third parties who contract with us to provide certain services for us such as quality and compliance reviews and audits. Business Associates are required to sign contracts stating they will appropriately safeguard your PHI and comply with HIPAA obligations.

De-Identified Data

We may use or share your PHI once it has been “de-identified.”  PHI is considered de-identified when it has been processed in such a way that it can no longer personally identify you.

Limited Data Sets

We may also use a “limited data set” that does not contain any information that can directly identify you.  This limited data set may only be used for the purposes of research, public health matters or health care operations.  For example, a limited data set may include your city, county and zip code, but not your name or street address.

State Law

Our use and disclosure of PHI must comply not only with federal privacy regulations but also with applicable California law. We will be bound by whatever law is more stringent and provides more protection for your privacy.

**VI. Uses and Disclosures that Require Your Authorization**

We may not make the following uses or disclosures without your authorization:

Psychotherapy Notes

Covered entities must obtain authorization for any use or disclosure of psychotherapy notes except to carry out certain treatment, payment or health care operations.

Marketing

We must obtain your authorization for uses or disclosures of your PHI for marketing except if the communication is in the form of a face-to-face communication to you or we provide a promotional gift of nominal value.

Sale of PHI

We must obtain an authorization for any disclosure of PHI which involves a sale of your PHI under HIPAA.

Except as otherwise described in this Notice, we will not use or disclose your PHI without your written authorization. You have the right to revoke your authorization in writing at any time except to the extent that Trovagene has already taken action in reliance on your authorization.

**VII. Requesting Other Disclosures**

Trovagene may request your permission to use or disclose your PHI in ways not described above. Trovagene may only make such uses and disclosures upon receipt of a written authorization from you, which you are not obligated to provide. If you make a special authorization and later change your mind about this, you may send a letter to us to let us know that you would like to revoke the special authorization. In any communication with us, please provide your name, address, and a telephone number where we can reach you in case we need to contact you about your request.

**VIII. Your Rights with Respect to PHI**

* You have a right to ask us in writing to restrict use or disclosure of your PHI related to your treatment, related to your payment or related to routine health care operations. In addition, you may request PHI disclosure restrictions to family members, other relatives or close friends involved in your care. We are not required to agree to such a restriction, but if we do agree, we will honor our agreement except in case of an emergency. Any restriction we agree to is not effective to prevent uses or disclosures of PHI required by the Secretary of the Department of Health and Human Services to investigate or determine our compliance with federal privacy regulations adopted under the Health Insurance Portability and Accountability Act of 1996 or for certain activities permitted or required by law (see Section V above).
* Notwithstanding the above, in any instance where you or another individual, who is not your health plan, pays out-of-pocket and in full for any service or item that we provide to you, you have the right to request restrictions on the PHI we may disclose to your health plan related to those items and services. We will accommodate all such requests, unless required by law to make a disclosure.
* You may request, in writing, to receive confidential communications containing your PHI from us in ways or at locations that are outside our usual process. We will make reasonable efforts to accommodate such requests.
* You have a right to review and obtain a copy of existing PHI contained in medical and billing records about you maintained by Trovagene. You must make your request in writing and this right is limited to existing records that are maintained, collected, used or disseminated by Trovagene. This right does not apply to results of clinical testing – disclosure of such information directly to patients is specifically excluded by law; or to information we compile in reasonable anticipation of, or for use in, civil, criminal or administrative actions or proceedings. We may charge a fee for any copies you request.
* You have a right to request that we amend the records described above for as long as we maintain them. You must make the request in writing and give us a reason for the amendment. We may deny your request if: (i) we determine that we did not create the record, unless the originator of the PHI is no longer available to act on the requested amendment; or (ii) if we believe that the existing records are accurate and complete. Note that an amendment may take several forms; for example we may add an explanatory statement to a record rather than changing it.
* You have a right to receive an accounting of disclosures made by Trovagene to any third party in the six years prior to the date on which the accounting is requested. This right does not apply to certain disclosures, including, but not limited to, disclosures made for the purposes of treatment, payment or health care operations; disclosures made to you or to others involved in your care; disclosures made with your authorization; disclosures made for national security or intelligence purposes or to correctional institutions or law enforcement purposes; or disclosures made prior to April 14, 2003. You must make any request for an accounting in writing, and we may charge a fee to fill more than one request in any given year.

* We are required to notify you of any instance in which there has been a breach of your unsecured PHI.

**IX. Distribution and Updates of This Notice**

This notice is published on the Trovagene web site at www.trovagene.com and is made available in printed form upon request.

**X. Effective Date and Duration of This Notice**

This notice describes the privacy policy of Trovagene effective September 23, 2013. We may change the terms of this notice at any time. If we change this notice, we may make the new notice terms effective for all PHI that we maintain, including any information created or received prior to issuing the new notice. If we change this notice, we will post the new notice on our Internet site at [www.trovagene.com](http://www.trovagene.com).

**XI. Communication with Trovagene**

As a convenience, Trovagene may make available email addresses by which you can communicate with us regarding billing issues. Please be advised that email is not a secure means of communication, therefore Trovagene cannot guarantee the security of any information that you send to us prior to our receipt of it. This fact may also restrict our use of email in communicating any response to you – we will make every attempt to use alternate means of communicating anything that may be considered sensitive information.

**XII. Copy of Notice, Questions or Complaints**

If you would like a paper copy of this notice, have questions about it, or believe its terms or any Trovagene privacy or confidentiality policy has been violated with respect to information about you, please let us know immediately by contacting us at 1-888-391-7992 and requesting the Compliance Office. Please include your name, address, and a telephone number where we can contact you, and a brief description of the complaint. If you prefer, you may lodge an anonymous complaint at:

Compliance Office

Trovagene, Inc.

11055 Flintcote Avenue, Suite A,

San Diego, California 92121.

You also may contact the Secretary of the Department of Health and Human Services at:

The U.S. Department of Health and Human Services

200 Independence Avenue, S.W.

Washington, D.C. 20201

(202) 619-0257 Toll Free: 1-877-696-6775

Please provide as much information as possible so that the complaint can be properly investigated. Trovagene will not retaliate against a person who files a complaint with us or with the Secretary of the Department of Health and Human Services.