# COMPLIANCE NEWSLETTER
## Heritage Provider Network — *Volume 7, Issue 1*

## Heritage Compliance Plan
### Standards/Code of Conduct

The Heritage Compliance Plan (Standards/Code of Conduct) articulates our commitment to comply with all applicable regulations and states our values and expectations. The Heritage Compliance Plan is our resource of how to behave ethically. Any questions can be answered by your Compliance Officer and/or Human Resources.

### Examples of Non-Compliance

"My friend is one of our members, and I am concerned about her health. Even though she is not on my case load, I look at her medical records periodically to make sure she is doing okay."

Accessing a medical record when it is **not related to your job** is both *unethical and illegal*.

Knowingly entering inaccurate information in a record to ensure compensation is **fraud** and is a crime under the Federal False Claims Act.

"A patient needed a doctor's office visit on Dec. 29. He stated his insurance would not be effective until Jan. 1. My co-worker wanted to help the patient and changed the date of service in the medical record to Jan. 2 to ensure the patient's insurance covers the visit."

If you know or suspect non-compliance or fraud is occurring, you must *report it immediately*.

## Reasonable Safeguards
*Ryan Galli, CHC, DOHC Compliance Officer*

It is our responsibility under the HIPAA Privacy Rules to limit the disclosure of protected health information (PHI) and only use or share PHI when it is related to our job duties.

It is possible, however, that PHI may be incidentally disclosed to others not involved in the patient's care in the course of our duties. This is acceptable as long as we have reasonable safeguards in place to minimalize the disclosure.

### Reasonable safeguards include:

- Closing doors or drawing privacy curtains/screens.
- Conducting discussions so that others may not overhear.
- Not leaving PHI where others can see or access them (conference rooms, exposed in mail boxes, printers, etc.)
- Keeping medical test results private.
- Not sharing/allowing PHI to be viewable in public areas.
- Not sharing passwords and not leaving them somewhere accessible/visible.
- Locking your computer screen prior to leaving work area.
- Disposing of paper containing PHI properly.

For more information, refer to the Heritage Compliance Plan, contact your Compliance Officer or visit: www.hhs.gov/hipaa/for-professionals/privacy/guidance/incidental-uses-and-disclosures

The Compliance Program, including the Code of Conduct, may be reviewed at: www.hpnaco.com/compliance/

## REPORT! ▶▶▶

**FRAUD, WASTE, ABUSE & NON-COMPLIANCE**

- Reports are kept confidential to the extent possible and may be made anonymously.
- Report without fear of reprisal or any other penalty, including retaliation or intimidation.
- Reports may be made 24/7, to your Compliance Officer through the Compliance Confidential Hotline, by email, or by mail.

Refer to HPN's *CP-017 Whistleblower Protection* policy for additional information.

**Corporate Compliance Officer**: Ralph Oyaga | royaga@heritagemed.com

Hotline: 855-625-7894 | 39115 Trade Center Drive, Palmdale CA 93551

### Heritage Provider Network's Group Compliance Officers

| | | |
|---|---|---|
| **ADOC/LMG/RMG** | Jeff Baron | jbaron@regalmed.com |
| **AZPC** | Kelly Karaniuk | kelly.karaniuk@azprioritycare.com |
| **BFMC/CCPN** | Debbie Zamora | dzamora@bfmc.com |
| **DOHC** | Ryan Galli | ryan.galli@mydohc.com |
| **HCP** | Monique Phillips | mphillips@hcpipa.com |
| **HDMG** | Kathy Litel | kslitel@hdmg.net |
| **HSMG** | Sherry Connelly | slconnelly@sierramedicalgroup.com |
| | | ylopez@hvvmg.com |