



COMPLIANCE NEWSLETTER

Heritage Provider Network *Volume 9, Issue 2*

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Conflict of Interest

It is the purpose of Heritage Provider Network (HPN) and its affiliated Medical Groups to ensure employees, Senior Management, and the Board of Directors act honestly and ethically, and avoid potential and actual Conflicts of Interests (COI).

A COI occurs when an employee, a supervisor or senior level management exploits professional or official capacity in some way for personal gain, in terms of money or other material advantage, at the expense of the employer or organization.

It is the employee's obligations to ensure that he or she remains free of COI in the performance of his or her responsibilities at HPN.

Conflicts of interest may include but are not limited to using one's position in the organization to receive a benefit, a payment or gift (including entertainment) or to refer business to or improperly benefit a friend or relative.

If the employee has any question about whether an activity might constitute a COI, the employee should consult with their Compliance Officer.

CMP-GN-010: Conflict of Interest

HPN Compliance Training Website

To access Compliance & OSHA Training, Compliance Plan, Code of Conduct, Compliance Policies & Procedures, and archived Compliance Newsletters, please visit:

<https://www.hpnaco.com/Compliance>

Heritage Provider Network's Group Compliance Officers

ADOC/LMG/RMG	Jeff Baron	jbaron@regalmed.com
BFMC/CCPN	Melissa Winters	mwinters@bfmc.com
DOHC/AZPC	Ryan Galli	ryan.galli@mydohc.com
HDMG	Thomas Viall	tviall@hdmg.net
HSMG	Sherry Connelly	slconnelly@sierramedicalgroup.com
HVVMG	Denise Rock	drock@hvvmg.com

Corporate Compliance Officer: Margaret Ngo-Lee
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September 2022

Processing Requests for Release of Medical Records

- ▶ An authorization from the patient and/or authorized person for the release of medical information from Heritage Provider Network and its Affiliated Medical Groups shall be valid if it is in accordance with CMP-PV-009: Release of Medical Information.
- ▶ Log-in all incoming requests for medical records in appropriate log- in electronic media.
- ▶ All requests for medical information are to be processed as soon as possible after receipt and in all cases must be answered in accordance with specific timeframes required by law.
- ▶ Any attorney, copy service requests, or subpoenas are directed to the appropriate management personnel for processing.
- ▶ Pull all charts (paper/electronic) for copying, verifying validity and appropriateness of requests.
- ▶ Review medical records to assure that record is complete, and checking to see that no confidential information is inadvertently released without proper authorization.
- ▶ Log-in all copies of medical records received. These copies are to be date stamped, scanned, and stored immediately in the electronic medical record.
- ▶ Consult with your group Compliance Officer for any Requests for Release of Medical Records without a Patient Authorization.

CMP-PV-009: Release of Medical Information.

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 CMP-GN-006 *Whistleblower Protection* policy.