



## Heritage Provider Network & Affiliated Medical Groups

### FDR Compliance Attestation Letter

Dear Provider,

Thank you for your continued commitment in ensuring the highest quality of care is provided to our common patients; including ensuring that we remain compliant with all laws, regulations, and Health Plan requirements.

Heritage Sierra Medical Group requires that all contracted providers complete the Heritage Provider Network (HPN) Compliance Trainings and attest to the compliance requirements outlined in the attached FDR Compliance Attestation. Please return this form to Network Management at 661-579-1500 or [SMGNetworkMgmt@sierramedicalgroup.com](mailto:SMGNetworkMgmt@sierramedicalgroup.com) no later than **thirty (30) days** from the date of this notice: **04/19/2023**.

If you have already taken equivalent trainings during the 2023 calendar year, please indicate as such on the attestation along with the dates completed. Please retain evidence of training materials and certificates of completion or sign-in sheets, as we may ask you to show evidence of trainings during an audit.

If you are attesting for multiple providers at your facility, please include a roster of those providers (including NPI numbers). **If you do not provide a roster, a separate 2023 FDR Attestation form will be required from every provider at your facility.**

In addition, it is a requirement that all of our contracted providers check their employees against the Office of Inspector General (OIG) and General Services Administration (GSA) exclusion lists, prior to hire and monthly thereafter. Please retain evidence of exclusion screenings as we may ask for this evidence during an audit.

To access our Standards of Conduct, compliance training modules, policies and procedures, and other resources, please login or register by following the instructions below:

1. Access the HPN Compliance site by going to: <https://www.hpnaco.com/compliance>
2. Login using the user information created during registration (uncheck the box “I am a Heritage or its affiliated medical groups’ employee”)
3. If you do not have an account, click on “Register” at the top of the page. Complete the registration information with the following:
  - a. Registration Name: Full Name\_FDR Name\_Group Name (Example: John Smith\_USC\_HPNC)
  - b. Email
  - c. Password: **quality**
  - d. A registration verification will be sent to the user’s email account.
  - e. Click the “Activate Account” button within the email.

If you have any questions, please contact Network Management at (661) 945-9411.

Sincerely,

Brittany Duncan  
Network Manager



## Heritage Provider Network & Affiliated Medical Groups

### First Tier, Downstream, or Related Entity (FDR) Compliance Attestation

FDR Name: \_\_\_\_\_ FDR Address: \_\_\_\_\_

[ ] Attached, please find a roster of our staff members or contracted individuals, for whom we are attesting. Please include names, license numbers, and NPI numbers as applicable.

In recognition of FDR's status and role as a covered entity, contracted with Heritage Provider Network and its Affiliated Medical Groups (HPN), FDR attests to the following statements:

FDR has received HPN's Compliance Plan, which includes the Code of Conduct. HPN's Compliance Plan may be accessed on each HPN Medical Group's website or at <https://www.hpnaco.com/compliance/site/login>.

FDR has in place an effective compliance program, meeting CMS/Health Plan standards to detect, prevent, and correct instances of Fraud, Waste, and Abuse (FWA), other non-compliance, or Health Insurance Portability and Accountability Act (HIPAA) Privacy or Security issues;

FDR screens all employees, officers, and vendors against the OIG/GSA exclusions lists and, if applicable, Medicaid and/or Medi-Cal exclusion lists prior to hire/contract, and monthly thereafter;

FDR and all staff engaged with treatment, administration, or support of CMS/Health Plan members, have completed all the required initial new hire and/or annual HPN trainings (or equivalent as required by 42 CFR 422.503 and 423.504) as follows:

- a. FDR and staff have completed Fraud, Waste, and Abuse (including False Claims Act) training on (or before): \_\_\_\_\_/2023.
- b. FDR and staff have completed Code of Conduct/General Compliance training on (or before): \_\_\_\_\_/2023.
- c. FDR and staff have completed HIPAA and Cyber Security training on (or before): \_\_\_\_\_/2023.
- d. FDR and staff have completed Model of Care (MOC) training on (or before): \_\_\_\_\_/2023. (only applicable to persons directly involved with patient care).
- e. FDR and staff have completed Cultural and Linguistics training on (or before): \_\_\_\_\_/2023.

FDR agrees to notify HPN's Compliance Officer immediately upon discovery of any FWA, non-compliance, or suspected violation of the HIPAA, HITECH Act, Medicare Advantage, CMS regulations, or any other statute, regulation, and/or policy and procedure; and may do so by calling the Corporate Compliance Hotline at 855-625-7894 or emailing [corporatecompliance@heritagemed.com](mailto:corporatecompliance@heritagemed.com).

FDR agrees to immediately disclose to HPN's Compliance Officer any actual or potential conflicts of interests, as outlined in HPN's Code of Conduct, should any arise.

FDR agrees to inform HPN if FDR utilizes offshore vendors to support any work performed under the FDR's contract with HPN by emailing [corporatecompliance@heritagemed.com](mailto:corporatecompliance@heritagemed.com).

FDR agrees to contact HPN's Compliance Officer or Provider Relations when a staff member is no longer employed with FDR to ensure logon access to HPN networks/systems is appropriately disabled.

FDR understands that any privacy incident involving any Medi-Cal or Medicaid patient requires notice to HPN and the California Department of Health Services within 1 business day from discovery.

FDR understands that, upon HPN's request, it agrees to provide HPN's Compliance Officer with documentation to substantiate its screening, training, and/or compliance and privacy program activities.

I have completed the above and certify it as true and accurate, as of today, \_\_\_\_/\_\_\_\_/\_\_\_\_.

Signature: \_\_\_\_\_