

# Healthcare Compliance Confirmation

Date: [Insert Date]

[Employee Name]

[Employee Address]

[City, State, Zip Code]

Dear [Employee Name],

We are pleased to confirm your compliance with our healthcare policies as part of your onboarding process at [Company Name]. Your commitment to upholding our compliance standards is essential in maintaining the integrity of our healthcare services.

Please review the following compliance areas that you have acknowledged:

- Health Insurance Portability and Accountability Act (HIPAA) Training
- Ethics and Compliance Training
- Workplace Safety and Infection Control
- Confidentiality Agreements

By signing below, you confirm that you have received, read, and understood the compliance training materials and are committed to adhering to all policies.

Thank you for your dedication to our mission and values.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Contact Information]

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

Date: \_\_\_\_\_