

**Acknowledgment of
Review of Clinical Practice Guidelines**

March 5, 2014

From: Heritage Provider Network, Inc.

To: Dr. Anthony Dulgeroff

The following Clinical Practice Guidelines have been reviewed, and I have made the following determination(s):

| <i>Clinical Practice Guideline</i> | <i>Approved for use</i> | | <i>Modifications / Comments</i> |
|------------------------------------|-------------------------|-----------|---------------------------------|
| | <i>Yes</i> | <i>No</i> | |
| Diabetes Care – 2013 | X | | |
| Diabetes Supplemental - 2013 | X | | |
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I hereby send this letter of acknowledgement of my review and approval for use.

Sincerely, Skrawchuk for



Dr. Anthony Dulgeroff
High Desert Medical Group