### We simplify Compliance so you can confidently focus on your business

#### The Guard

### Everything you need in one place

- ✓ Compliance Coach™ Support
- ✓ All 6 required audits (Privacy, Administrative, & Security Risk Assessments)
- ✓ Gap Identification
- ✓ Remediation Planning
- ✓ Tailored Policies & Procedures
- Employee Training & Documentation Attestation (HIPAA, FWA, PCI)
- ✓ Document and Version Control
- ✓ Incident Management
- ✓ Business Associate Management
- ✓ Seal of Compliance™
- ✓ Audit Response Program™



#### Protection

- ✓ Privacy for Patients' PHI
- ✓ Secure your practice/office
- ✓ Maintain your Reputation
- ✓ Mitigate litigations and fines

### Increase client engagement

- ✓ Differentiate your practice/business
- ✓ Improve quality of care
- ✓ Standardize your operations

### Increase your profits

- ✓ Improved operational effectiveness
- ✓ Acquire & retain patients/clients

### Achieve, Illustrate and Maintain Your Compliance

# Compliance with Confidence

- ✓ NO client has ever failed a HIPAA audit
- Seal of Compliance
- ✓ Audit Response Program™ defends you

### Created by HIPAA Auditors

- Designed for the end user
- ✓ Administrator & employee access

#### **Total HIPAA Solution**

- ✓ Simple & Efficient
- ✓ Assigned Compliance Coach™ support & ongoing guidance

✓ Protecting your business and Compliance Officer from liability & non-compliant vendors

### **HIPAA Lite\***



\*Missing pieces of compliance will result in partial compliance and may lead to fines, civil penalties.

## HIPAA Done Right<sup>TM</sup>



\*\$0 in fines and No Client has ever failed an OCR/CMS audit with Compliancy Group's Total Solution, The Guard.

## **HIPAA Compliance Checklist**

The following are identified by HHS OCR as elements of an effective compliance program. Please check off as applicable to self-evaluate your practice or organization.

Have	you conducted the following six (6) required	l an	nual Audits/Assessments?
	Security Risk Assessment Privacy Standards Audit (Not required for BAs) HITECH Subtitle D Privacy Audit		Security Standards Audit Asset and Device Audit Physical Site Audit
	you identified all gaps uncovered in the aud Have you documented all deficiencies?	ts a	bove?
Have	e you created remediation plans to address deficiencies found in all six (6) Audits?  Are these remediation plans fully documented in writing?  Do you update and review these remediation plans annually?  Are annually documented remediation plans retained in your records for six (6) years?		
Have	ve all staff members undergone annual HIPAA training?  Do you have documentation of their training?		
	Is there a staff member designated as the HIPAA Compliance, Privacy, and/or Security Officer?		
	ou have Policies and Procedures relevant to t ch Notification Rules?	ne a	innual HIPAA Privacy, Security, and
	Have all staff members read and legally attested to the Policies and Procedures?  Do you have documentation of their legal attestation?  Do you have documentation for annual reviews of your Policies and Procedures?		
Have	you identified all of your vendors and Busine	ess i	Associates?
	Do you have Business Associate Agreements in place with all Business Associates?  Have you performed due diligence on your Business Associates to assess their HIPAA compliance.  Are you tracking and reviewing your Business Associate Agreements annually?  Do you have Confidentiality Agreements with non-Business Associate vendors?		
Do y	ou have a defined process for incidents or bre	ach	ies?
	Do you have the ability to track and manage the investigations of all incidents?  Are you able to provide the required reporting of minor or meaningful breaches or incidents?  Do your staff members have the ability to anonymously report an incident?		

\* AUDIT TIP: If audited, you must provide all documentation for the past six (6) years to auditors.

Need help completing your Checklist? Schedule your HIPAA consultation today at 855-85-HIPAA or info@compliancygroup.com

This checklist is composed of general questions about the measures your organization should have in place to state that you are HIPAA compliant, and does not qualify as legal advice. Successfully completing this checklist **does not** certify that you or your organization are HIPAA compliant.

