



N-TEGRITY SOLUTIONS
GROUP

CheckPointSM Audit Services

HIPAA Solutions
Privacy · Security · Transactions & Code Sets
National Provider Identification

How effective are your current compliance efforts?

Are there deficiencies that need to be addressed?

Maintaining HIPAA compliance - You have invested a great deal of time and money to meet the HIPAA compliance deadlines for privacy, security, transactions and code sets and most recently NPI. However, compliance is not a one-time event; it's an on-going process. HIPAA regulations make it clear that your compliance programs must continue to monitor and respond to requirements.* CheckPointSM is a service designed by N-Tegrity Solutions Group to provide on-going support for your HIPAA compliance.

Has an organizational change created a new compliance need?

Based on the successful JumpStartSM methodology.

CheckPointSM provides an objective view of your readiness against HIPAA regulations regarding Privacy, Security, TCS and National Provider Identifier.

CheckPointSM features:

- Onsite Walk-through—One of our most senior experts will come to your location and provide a comprehensive evaluation.
- Regulation Survey—N-Tegrity's comprehensive survey will review your position on each component of the HIPAA regulations.
- Compliance Audit Report—N-Tegrity's documentation will accurately demonstrate where your compliance program stands.

Call N-Tegrity Solutions Group 816.463.4736 today.

www.n-tegritysolutions.com

In The News

1st Corrective Action Plan issued to home health care company

Providence Health and Services of Seattle have paid \$100,000 and are now working under an HHS Corrective Action Plan because of Privacy and Security violations. The agreement calls for Providence to adopt strong Policies and Procedures for protection of information, use encryption and other techniques to prevent unauthorized access to data, train employees in security procedures, audit compliance of it managers and employees and submit reports to HHS **for three years.**

Don't let something like this happen to your organization. Make sure all members of the workforce are in the "know" where HIPAA is concerned!

Are your privacy and security officials prepared to respond to a complaint against your organization?

*Refer to Privacy and Security citations CFR 164.530, CFR 164.308(a)(1)(ii)(A) and CFR 164.308(a)(8)