



# Target Coding

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## HIPAA Compliance: Comprehensive Program

### Program Key Elements:

- Security risk analysis with comprehensive assistance.
- Cloud-based portal for all HIPAA policies and procedures.
- 18 compliance training videos for clinical and administrative staff members.
- HIPAA compliance testing with certificates of completion.
- Administrator training reports.
- Business associate tracking.
- HIPAA Notice and Business Associate Agreement templates.
- Medicare compliance manual with policies and procedures (limited time).
- HIPAA updates, articles, links and related reference material.
- SRA measure approved for MIPS security risk management.
- \$100,000 of cyber liability protection
- 12 months of HIPAA technical support.
- **Fee (for 10 employees or less per entity): Call for cost**

**Client Information:** Name: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Tel. #: \_\_\_\_\_ Email: \_\_\_\_\_

**Credit Card Charges:** Client authorizes Target Coding to charge the below credit card 3 monthly consecutive payments of \$\_\_ beginning with the date below for the services set forth in this agreement. Client has 3 days to cancel agreement without penalty. After 3 business days, client is responsible to pay Target Coding for all 3 payments of \$\_\_.

**Payment Method:**    **Visa**    **MasterCard**    **AMEX**

**Credit Card Number:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Cardholder Name:** \_\_\_\_\_ **Sec. Code:** \_\_\_\_\_

**Credit Card Billing Address & Zip Code if different than above:** \_\_\_\_\_

**THE BELOW PARTIES HAVE EXECUTED THIS AGREEMENT FOR THE WRITTEN ABOVE.**

*Dr. Marty Kotlar*

\_\_\_\_\_  
Target Coding Representative Signature

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date