



HCCP

Healthcare Compliance Certification Professionals



SKILLED
NURSING
FACILITIES



CHAP



PALLIATIVE
CARE



HOSPICE



Who We Are

- Veteran-Owned, Minority Business (Maryland)
- Led by former Federal, Corp. & NIH Executives
- Trusted partner to healthcare leaders and caregivers.

Our Mission

- To protect providers' license, revenue, and reputation by making hospice, palliative care, skilled nursing and home health care organizations Medicare-defensible, HIPAA-compliant, and CMS audit-ready and look for signs of Fraud, Waste & Abuse.

What We Do

Healthcare Compliance Certification Professionals (HCCP) helps hospice, palliative care, skilled nursing and home health providers remain:

- Medicare-Certified – meeting every CMS Condition of Participation (observing for FWA)
- HIPAA-Compliant – protecting patient data and avoiding breaches
- Audit-Ready – prepared for CMS, OCR, and PPEO surveys

Protect Healthcare providers license, revenue, and reputation with:

- Expert-led compliance programs
- Defensible audit defense strategies
- Strategic oversight to safeguard Medicare funding

FWA Response & Action

Immediate Response

- Conduct a focused internal audit to confirm and document the FWA issue.
- Secure evidence and isolate affected claims or documentation to prevent further exposure.

Member / Provider Action

- Notify leadership & Association of the findings with a corrective action plan.
- Provide targeted training to staff responsible for errors or risk exposure.
- Support billing corrections, claim withdrawals, or self-disclosures when required.

Association / Partner Action

- Share de-identified trends and risk alerts with hospice and home health associations.
- Collaborate on provider education sessions to prevent repeat FWA across members.
- Reinforce the industry's credibility by showing proactive compliance defense.



Wall of Shame

Compliance Failures Are Public & Permanent

Who Tracks You & The Negative Results:

- Reported on the HHS HIPAA Breach Portal (“Wall of Shame”).
- Investigated through CMS Program Integrity Audits & UPIC contractors.
- Escalated to DOJ Strike Force, OCR, and State Surveyors.
- Your organization is flagged, tracked, and monitored.
- You are subject to repeat, unannounced audits — without notice.

Examples of Breaches:

- Missing or incomplete Security Risk Assessment (SRA).
- Untrained staff or improper PHI access.
- Weak security controls or outdated software.
- Ransomware incidents and data breaches.
- Improper billing combined with HIPAA violations = funding freeze.

Requirements: Solutions

“Compliance & Operational Domains”

Provider Priorities	HCCP
Regulatory Compliance Statistics: - SRAs – 80%+ of entities fail HIPAA risk assessments - Policies – 69% say they’re more breach-prone than others - AI – 94% see AI as core; 86% already using it	Independent HIPAA SRAs, CMS CoP gap analysis, and audit-ready documentation Policy/procedure development aligned with NIST, HIPAA, CMS, OCR — with FWA safeguards, powered by AI & best practices.
Survey & Audit Readiness Statistics: 60%+ of providers cited CoP gaps in recent CMS surveys 45% failed to produce complete survey binders on demand 30% received deficiency citations requiring corrective action	Mock surveys, PPEO survey binders, FWA oversight, and audit-ready documentation. Rapid deficiency response with corrective action plans that protect compliance and align with associations
Revenue Protection Statistics: 1 in 3 providers face clawbacks from billing/coding errors \$3.5B+ lost annually to preventable claim denials 40% lack defensible documentation to withstand audits	Billing & coding compliance reviews with defensible documentation. Clawback prevention that protects revenue and withstands audits
Risk & Security Statistics: 80%+ of entities fail HIPAA risk assessments 60% of breaches traced to inadequate security controls \$9.48M average cost of a healthcare data breach in 2023	Cybersecurity and breach defense powered by HIPAA security controls. Incident response planning that protects data and ensures resilience.

Requirements: Solutions

“Surveyor Focus Areas”

Provider Priorities	HCCP
• Education & Training Statistics: ▪ 72% of staff need ongoing compliance training & refreshers ▪ Annual refreshers cut policy violations by 33% ▪ 50% of leaders cite workforce gaps as top audit risk	Role-based compliance training with annual refreshers. Tabletop exercises and leadership coaching that build lasting readiness.
• Operational Efficiency Statistics: ▪ 55% lack standardized compliance playbooks across sites ▪ Dashboards double leadership visibility into audit prep ▪ Automated trackers cut deficiency response times by 40%	Executive dashboards and compliance trackers. Customized playbooks that align staff and drive accountability.
• Reputation Defense Statistics: ▪ CMS/OCR penalties average \$1.3M per enforcement action ▪ HIPAA breach listings damage public trust for 67% of providers ▪ Providers with audit-ready documentation are 2x more trusted	Protects against CMS/OCR penalties, HIPAA breach listings, and survey citations. Safeguards revenue, reputation, and public trust.

Develop strategic playbooks, built in lockstep with Associations, to combat FWA, harden compliance, and protect revenue.

Our Approach Works

Immediate Response

- Proven, repeatable methodology removes guesswork and ensures audit readiness.
- Led by former Federal CIOs, CISOs, & strategists with direct CMS & HIPAA expertise.
- Concierge-level support — no juniors, no templates, no outsourcing.
- Defensible compliance packages engineered to withstand CMS, OCR, & OIG scrutiny.
- AI-enhanced tools and documentation for federal, state, and Medicare requirements.
- Seamless IT/partner integration — fully compatible with your MSPs and vendors.

CMS PPEO: HCCP Support Matrix

Focus Area	Requirements	HCCP
Eligibility & Enrollment	PECOS enrollment current; CMS-855 updated; NPI/PTAN validated; state license and accreditor certs current.	Verify PECOS & CMS-855 data, cross-check licenses; create enrollment compliance binder; monitor expirations.
CoPs Compliance	Written P&Ps, dated & signed; evidence of implementation; governing body oversight; annual eval.	Review & update P&Ps; conduct staff CoP training; prep governing body minutes templates; audit annual eval evidence.
Clinical Documentation	Complete, legible, signed; timely assessments; valid MD/NP orders; visit notes match POC; med reconciliation; timely NOEs.	Chart audits & mock surveys; develop documentation checklists; validate NOE/NOTR timeliness; physician order compliance reviews.
Plan of Care (POC)	Patient-specific; reviewed every 15/60 days; IDG meeting minutes; measurable goals tied to needs.	Audit POCs for compliance; create IDG documentation templates; train staff on measurable goals & review cycles.
QAPI	Written plan; PIPs in place; data trending/reporting (falls, meds, infections); action plans.	Build QAPI dashboards; coach on selecting PIPs; prepare governing body approval documentation; test data tracking tools.
Patient Rights & Grievances	Rights posted/admission packet; grievance policy accessible; grievance log with resolutions; no retaliation evidence.	Develop grievance tracking log; audit admission packets; post policy templates; run staff training on non-retaliation.
Staffing & Training	Personnel files with credentials, background/OIG checks; annual competencies; orientation on CoPs/HIPAA/IPC; in-service training; CPR current.	Personnel file audits; build training tracker; deliver in-service education; create competency tools; verify OIG exclusion monitoring.
Infection Control & Safety	Written IPC program; hand hygiene audits; PPE use; cleaning logs; annual emergency drills.	Draft/update IPC program; run mock infection audits; provide PPE usage training; document cleaning logs; conduct tabletop emergency drill.
Billing & Claims Integrity	Signed MD orders; visit notes match billing; F2F timely; internal billing audits; correct level of care billed.	Perform billing compliance audit; reconcile documentation vs. claims; train billing staff on coding accuracy; create audit-ready billing logs.
Governance & Oversight	Board minutes/resolutions; compliance officer assigned; hotline functional; annual compliance training; corrective actions tracked.	Draft board resolution templates; act as interim compliance officer (vCCO); provide compliance hotline setup; conduct staff compliance training; monitor corrective action plans.

Audit Ready. Medicare Defensible.

Focus Areas

- **Security Risk Assessment & Gap Analysis**
Identify HIPAA, CMS, & infrastructure vulnerabilities across administrative, technical, and physical safeguards.
- **Audit-Ready Compliance Framework**
Align with CMS, OCR, and HIPAA requirements through fully documented, defensible compliance frameworks.
- **Zero Trust Architecture Design**
Implement layered access controls and breach-containment strategies tailored for healthcare settings.
- **AI-Driven Threat Defense**
Leverage Artificial Intelligence to detect risks, enforce controls, and protect patient data in real-time.
- **Remediation & Regulatory Risk Mitigation**
Close compliance gaps quickly and reduce audit risk, financial penalties, and certification threats.

Packages

- **Gold Package – Certification Readiness**

Baseline Security Risk Assessment (SRA), HIPAA/CMS Condition of Participation (CoP) gap analysis, and vulnerability scan - Delivers a compliance snapshot, risk register, and 90-day roadmap.

- **Platinum Package – Remediation & Compliance Execution**

Full remediation of HIPAA and CMS findings. Includes policy updates, enhanced SRA, CoP alignment, training review and audit-ready documentation.

- **Diamond Package – Audit Defense & Certification Protection**

End-to-end audit defense. Includes everything in Gold & Platinum plus breach simulations, live audit response, Internal IT and Managed Service Provider (MSP) coordination, and 24/7 compliance support.

- **Concierge Oversight – Executive Compliance Leadership**

Embedded virtual Chief Information Security Officer (vCISO) and virtual Chief Compliance Officer (vCCO) leadership. Includes oversight of audits, executive board reporting, certification tracking, breach response, and long-term strategic compliance planning.

Packages and pricing can be tailored to meet the specific requirements of each provider.

Differentiators

- **Executive Leadership with Federal, NIH & Healthcare Expertise**

HCCP is led by a team of former federal CIOs, CISOs, and healthcare strategists with deep experience inside HHS, CMS, NIH, and other regulatory agencies. We've worked within the bureaucracy—we understand how decisions are made, how audits unfold, and how to protect your certification from the inside out.

- **Concierge-Level Compliance Support**

No junior handoffs. No generic templates. Every engagement is senior-led, hands-on, and tailored to your Medicare certification, HIPAA compliance, and audit readiness needs.

- **Medicare-Ready & Defensible Outcomes**

Our programs are built to survive CMS surveys, OCR investigations, and board scrutiny. Every policy, risk assessment, and roadmap is audit-ready and regulator-aligned.

- **AI-Enhanced Risk & Documentation Tools**

We use artificial intelligence to accelerate gap analysis, strengthen documentation, and maintain continuous readiness in a shifting compliance landscape.



Trusted Agent

We work with healthcare organizations — from hospitals, hospice, palliative care, and skilled nursing providers — to strengthen compliance, protect funding, and pass audits.

- ✔ Security Risk Assessments aligned with HIPAA, CMS, and OCR requirements.
- ✔ Audit readiness and defense for Medicare certification and federal reviews.
- ✔ Successful outcomes in OCR investigations, CMS surveys, and third-party audits.
- ✔ Cybersecurity and compliance strategies engineered to withstand federal scrutiny.

Supported Healthcare Providers: Navvis Healthcare | Union Health Service | Advis
(Additional provider names withheld to maintain HIPAA confidentiality.)

“When certification and compliance are on the line, providers trust HCCP to deliver defensible outcomes.”

Guarantee

- **We guarantee** you will pass your CMS, HIPAA, and Security Risk Assessment (SRA) audits — with your full participation.
- **We focus on** HIPAA/OCR, CMS non-clinical CoPs, Emergency Preparedness, and audit readiness — coordinating clinical survey items with licensed partners.
- **If discrepancies arise**, we remediate immediately to ensure your compliance package is defensible, regulator-aligned, and able to withstand federal scrutiny.
- **All engagements are** senior-led, ensuring experienced oversight, transparency, and long-term protection of your certification. **No Third-Party or Off-Shore Consultants.**

Transparency. Collaboration. Executive Oversight.

Defensible

- HCCP serves as a trusted compliance and certification partner for Skilled Nursing Facilities, Palliative Care Programs, and Hospices.
- By integrating Medicare certification expertise, regulatory compliance, and cybersecurity readiness, we ensure providers remain Medicare-certified, HIPAA-compliant, and fully audit-ready.
- Our executive-level approach reduces organizational risk, safeguards reimbursement, and empowers leadership to focus on delivering quality care.

Audit-Ready. Defensible. Guaranteed.



Methodology

CMS / OCR / FWA Phases

Phase	HCCP Framework, Blueprint & Playbook
Discovery	Collect policies, procedures, and system documentation, and interview leadership and staff to establish operational realities. Define CMS, HIPAA, and NIST scope and baseline requirements. This phase sets the foundation for compliance readiness.
Engagement & Scoping	Work with leadership to define objectives, compliance priorities, and scope across clinical, billing, cyber, and governance domains. Assign executive owners and compliance champions to ensure accountability.
Gap Assessment	Benchmark operations against CMS CoPs, HIPAA, and industry standards. Identify deficiencies and risks, then prioritize them by severity and regulatory impact. Document gaps for remediation planning.
Validation & Testing	Conduct network penetration testing, security assessments, and chart audits. Run mock CMS surveys to confirm documentation and processes meet surveyor expectations. Validate evidence for defensibility.
Remediation & Corrective Action	Update deficient policies, implement technical and clinical fixes, and close compliance gaps. Track corrective actions with assigned owners, timelines, and measurable results.
Staffing & Competency	Audit personnel files for licenses, CPR, and OIG exclusion checks. Verify clinical competencies, orientation, and annual training. Align staffing records with CMS survey standards.
Training & Sustainment	Deliver compliance, HIPAA, and cybersecurity training. Conduct mock survey drills and incident simulations. Maintain readiness through annual refreshers and continuous updates.
Process Improvement & Monitoring	Use QAPI dashboards, audits, and trend data (e.g., infections, falls, billing errors) to drive improvements. Reassess risks quarterly and update controls. Ensure continuous survey readiness.
Governance & Oversight	Document board minutes, policy approvals, and compliance officer reporting. Monitor corrective actions to closure and ensure leadership oversight meets CMS PPEO expectations.
Emergency Preparedness & Business Continuity	All-hazards risk assessments, communication plans, and emergency drills are maintained and tested annually. Continuity planning is integrated with CMS survey standards and OCR security expectations to safeguard patient care and operations.
Fraud, Waste & Abuse Oversight	Conduct internal billing and claims integrity audits, validating services against physician orders, documentation, and medical necessity standards. Align policies with CMS, Stark, and Anti-Kickback rules, train staff on compliant billing, and implement compliance hotlines. Track corrective actions with defensible evidence to protect Medicare revenue.

Compliance

What Compliance Looks Like:

- ☒ Documented SRA.
- ☒ Enforced role-based access controls.
- ☒ Documented ongoing HIPAA training.
- ☒ Implement NIST-aligned technical safeguards.
- ☒ Maintain audit-ready logs and breach response documentation.

“You’re Either Audit-Ready — Or Audit-Exposed.”
“Protect Your License. Preserve Your Funding. Stay Off the Wall.”

Partnership

Association & HCCP Outcomes:

- Member value that retains & converts: co-branded Compliance Helpdesk, audit-readiness briefings, and HCCP checklists, policy/procedure drafting support, and operational playbooks—under partner-preferred terms.
- Non-dues growth without strain: sponsor-supported education structured for cost-offset and shared upside; HCCP delivers and assists with sponsor engagement.
- Membership growth: prospect→member pathway (preview access + member-preferred terms on HIPAA SRAs, checklists, and playbooks) that converts and strengthens renewals.
- Board-ready visibility: engagement dashboards (attendance, CE, Helpdesk utilization) that substantiate value and support sponsorships.

HCCP Mission: keep providers Medicare-certified, HIPAA-compliant, audit-ready, and fully defensible; reduce risk, protect reimbursement.

Risk

5-year Statistics:

- Associations: ~50% report membership growth; dues ~30–45% of revenue → non-dues decisive.
- SNFs: CMS-certified facilities down ~5% (2015→2024); serious deficiencies up (17%→28%).
- Hospice: Agency count up ~27% (2018→2022); continued expansion into 2025.
- HIPAA breaches (records exposed): 2020 ~29M; 2021 ~60M; 2022 ~57M; 2023 ~168M; 2024 ~275M.

Membership Up. Risk Up. Defensibility Pays.

HCCP Objectives

■ Protect Provider License, Revenue & Reputation

- Uphold fiduciary duty - shielding hospice, palliative, and skilled nursing providers from CMS, HIPAA, & OCR penalties
- Defend revenue streams with audit-ready, defensible compliance frameworks
- Safeguard licenses and public trust through proactive risk management

■ Defend Against the Existential Threat of Fraud, Waste & Abuse (FWA)

- Combat fraud, waste, and abuse with relentless billing integrity, internal audits & corrective actions that safeguard Medicare revenue and provider survival.

■ Medicare Defensibility & Compliance Oversight

- Independent HIPAA SRAs & CMS CoP gap analysis to expose vulnerabilities
- AI-driven risk detection, policy testing, & audit-ready documentation
- Executive dashboards delivering real-time oversight & rapid corrective action

■ Strategic Partnership for Audit Readiness & Regulatory Strength

- Co-develop playbooks with Associations & providers
- Defend against FWA, CMS/OCR penalties & clawbacks
- Drive audit readiness with executive oversight & bring more healthcare providers to the State and National Association



Healthcare
Compliance
Certification
Professionals

Contact

HCCP helps Healthcare providers protect their license, revenue, and reputation—through audit-ready compliance and expert-led certification support.

Leadership

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