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## **H13.0 Annual HIPAA Training Acknowledgement**

Instructions for accessing the HIPAA training power point presentation:

1. Go to our website at [www.nytps.com](http://www.nytps.com) and login if you have a username/password.  
If you do not, you can use the following settings:  
e-mail: [therapy@nytps.com](mailto:therapy@nytps.com) password: pjstaff
2. Carefully review the presentation and return the signed Acknowledgement to the Compliance Coordinator as soon as possible.
3. Instructions to access the Compliance glossary are included in this packet.

Any questions, please contact: Compliance Coordinator 631-473-4284.

## **H13.0 Annual HIPAA Training Acknowledgement**

### **Acknowledgement of the Annual HIPAA Training for New York Therapy Placement Services, Inc.**

I, \_\_\_\_\_, acknowledge that I have viewed and understand the New York Therapy Placement Services, Inc. power point instruction regarding HIPAA (Health Insurance Portability and Accountability Act of 1996) law.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_