PROVIDER MONITORING CHECKLIST

Home & Community-Based Services for the Elderly and Disabled

General Information

Required Insurances for review

- ☐ Commercial General Liability
- ☐ Sexual Abuse and Molestation Liability
- ☐ Worker's Compensation (proof of coverage certificate or statement)
- ☐ Employers Liability
- ☐ Privacy & Security Liability (Cyber Liability)
- ☐ Unemployment Taxes
- ☐ Property and theft coverage
- ☐ No-Fault Vehicle (agency-owned vehicles)
- ☐ Fidelity Bonding (for persons handling cash)

Recommended Insurance

- ☐ Malpractice/Liability
- ☐ Professional/Liability

Program Specifications

Participant Records (Participant list attached)

- ☐ Current MI Choice Assessment/Reassessments (Vendor View)
- ☐ Initial Service Order/adjustment (Vendor View)
- ☐ Progress Notes (Flow Sheets with notes) (Chart)
- ☐ Signed Release of Information form (Chart)
- ☐ Rights & Responsibilities form (Chart)
- ☐ Incident/Accident Report (if applicable) (Chart)
- ☐ Termination record (if applicable)

Policies and Procedures

- ☐ Participant Confidentiality
- ☐ Participant Appeals/Grievances
- ☐ Participant Feedback/Evaluation
- ☐ Participant's Rights and Responsibility form
- ☐ Electronic Visit Verification
- ☐ Reporting suspected abuse, neglect, exploitation or other critical incidents
- ☐ Participant's health, welfare and safeguards
- ☐ Emergencies in participant's home
- ☐ Administration of Medication (Prescription and OTC)
- ☐ Personnel
- ☐ Recruitment, training, and supervision
- ☐ Date of last revision of policy manual
- ☐ Volunteers (if applicable)

Staffing (Please submit 3 Employee Files)

Paid Staff Employee or Volunteer Files

- ☐ Reference Checks (2)
- ☐ TB Test results (card) or Waiver
- ☐ Copy of certification/license/registration of professional employees
- ☐ Copy of valid driver's license and automobile insurance or Waiver
- ☐ Criminal Background check completed by the State of Michigan (ICHAT or MI Workforce Background Check) & OTIS check
- ☐ Michigan Public Sex Offender Registry and National Sex Offender Registry
- ☐ On-site Supervisory Visits/Observations Documentation (Chart)
- ☐ Job descriptions and yearly performance evaluations
- ☐ Premium Pay

Orientation Program

- ☐ Copy of training program or outline of orientation

Private Duty Nursing

- ☐ Current Licenses
- ☐ LPN's supervised by RN's
- ☐ Written procedures for administering medications

Personal Care Aides, Homemakers, Respite Workers

- ☐ Typical Tasks
- ☐ Certification Documentation
- ☐ In-service training 2 times per year, including length of training
- ☐ Annual in-service training plan (for review)
- ☐ Training topics covered in last 12 months
- ☐ Any additional training courses offered
- ☐ RN supervisory visits include: Name & title of supervisor, person supervised and location of on-site supervision (participant ID only, no name)
- ☐ Policy on dispensing of nonprescription medications
- ☐ Procedure governing the dispensing or administration or prescription medications

Service Coordination

- ☐ Procedure for notifying Support Coordinators of participant changes
- ☐ Policy/Procedure for notifying Support Coordinators of discontinuing services
- ☐ Policy/Procedure for notifying Support Coordinators of participant appointments
- ☐ Policy/Procedure for notifying Support Coordinators when paid staff fails to show up

Other

- ☐ MI Choice Provider Monitoring Tool (highlighted areas only)
- ☐ Services available to public—Private Pay Rate same
- ☐ Technical assistance or training needed
- ☐ Agency services publicized
- ☐ Any problems encountered in past 12 months

Billing

☐ Participant timesheets (refer to participant list attached)

- Date of Service
- Hours worked
- Tasks Completed
- Caregiver Signature & Date
- Participant Signature & Date

Electronic Visit Verification (EVV)

☐ EVV Policy & Procedure

Comments:

Items requiring a copy will NOT be shared with outside agencies but may be reviewed by the State Waiver Review Agents when our contract records are audited.

In accordance with the additional legislation regarding HIPAA/HITECH/OMNIBUS 2013, we will also sign documents indicating that you have allowed CareWell Services SW access to client/participant documents.