



## POLICIES AND PROCEDURES

<b>MANUAL:</b> Administrative: <input type="checkbox"/>	<b>TITLE:</b> Vendor Audit Process	<b>POLICY #</b>  C 5.0	Page 1 of 4												
<b>APPROVALS</b> 1. <b><u>Martin Kleinman</u></b> Governance 2. <b><u>Bridget Gallagher</u></b> Vice-President 3. <b><u>Alla Goldin</u></b> Vice-president	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Dates</th> <th style="text-align: center; border-bottom: 1px solid black;">Effective</th> <th style="text-align: center; border-bottom: 1px solid black;">Reviewed</th> <th style="text-align: center; border-bottom: 1px solid black;">Revised</th> </tr> </thead> <tbody> <tr> <td></td> <td style="text-align: center;"><u>03/08/2011</u></td> <td style="text-align: center;"><u>04/10/2024</u></td> <td style="text-align: center;"><u>10/18/2022</u></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><u>10/22/2025</u></td> <td></td> </tr> </tbody> </table>			Dates	Effective	Reviewed	Revised		<u>03/08/2011</u>	<u>04/10/2024</u>	<u>10/18/2022</u>			<u>10/22/2025</u>	
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### STATEMENT OF POLICY

All contracted Vendor Agencies must comply with all pre-employment and annual follow-up requirements set forth by the Department of Health.

### PROCEDURE

1. An audit is conducted at least annually on all vendors that Americare CSS has a current contract with.
2. Compliance Department will contact the vendor to schedule a date for an audit.
3. 1 week prior to the scheduled date of the audit, Compliance Department will request a copy of the following documents:
  - a. Agency License of Operation
  - b. Liability Insurance policy: Must be current and have Americare CSS name as a certificate holder.
  - c. Workers' Compensation
  - d. On-call Policy: to ensure that agency contact for services are available to patients and personnel twenty-four (24) hours a day, year round
  - e. Contact information for Administrator, DPS and Compliance Officer
  - f. Written policies on Electronic Visit Verification (EVV)
4. 1 week prior to the scheduled date of the audit, Compliance Department will review a complete Americare CSS patient roster from the Vendor agency. List will include patient name and the name of the provider that is providing the services to that patient.
5. On the day of the scheduled audit date, Compliance Department will randomly select 10% of provider's personnel records (or minimum of 10 files) for review and inform the vendor what files will be reviewed at the time of the audit

6. Auditor will complete Vendor Audit Tool: Ensuring Documentation Compliance.

a. Hiring

- i. Application: Employment Application that includes Home Health Aide personal information, previous work history, and reference information should be kept in file.
- ii. Social Security Number: Copy of SS card kept on file \
- iii. Work eligibility based on status: -USA citizen/USA Resident/Alien Resident with work authorization. -Verify and document expiration dates if applicable.
- iv. Immigration Form (I-9): -Verify that all documents are listed in the appropriate columns. -Documents listed must be kept on file. Copy must include stamp "Original Documents seen" -Form must be signed and dated by both, the HHA and the HR representative
- v. 2 Verified References: -References must be obtained from the previous place of employment. -Verification of reference must be done by mail or fax. If there is no previous work history, a reference from a clergyman, doctor or other professional may be accepted with verification.
- vi. Exclusion Databases (OIG, OMIG, EPLS): Evidence that exclusion/sanctions are done prior to hiring and monthly thereafter.
- vii. Criminal Background Check: -For all aides hired after April 1<sup>st</sup> 2005, criminal background checks are required. Criminal background checks must be sent on date of hire or soon after that. Home health aides and personal care aides who are compliant with all other requirements of employment may begin work as provisional employees before the agency receives the results of the CHRC. However, the agency is required to provide more stringent supervision of the provisional employee than the usual paraprofessional supervision.
- viii. Provisional Home Health Aide Supervisions: While the CHRC results are pending, all Home Health aides require weekly supervisions
  1. Initial supervision must be conducted by a licensed health care professional or a senior home health aide.
  2. Subsequent home visits will be made on alternate weeks, by an LPN or by another employee who has been working at the agency for at least one year.
  3. In the weeks between home visits, telephonic supervisions will be done by employees who have been working at the agency for at least one year.

4. In the event, the provisional employee is not assigned to any patient on a given week, no supervision can be done, and the record will be kept indicating the reason.
  5. If any name comes back with disqualifying criminal backgrounds, the individual be removed from the case immediately.
  6. If no CHRC response is received within 60 days, the Department of Health will be notified. The provisional employee may continue to work but weekly CHRC supervisions will be continued.
  7. The Human Resources Department will follow up regularly with the Department of Health when results are delayed.
  8. All CHRC Supervisory Visits will be kept on file to ensure compliance with the regulation.
- ix. Certificate of HHA training: -All home health aides must have a certificate issued by DOH or DOE approved school or training program -All credentials must be verified in the HCR database. This must be done prior to placing the Home Health Aide on the case.

b. Medical

- i. Pre-employment physical examination, annual examination and PPD/or tuberculosis screening are required for continued employment.
- ii. Pre-employment physical:
  1. Must be completed recently within six (6) months
  2. All pre- employment physical lab results must have attached lab results.
    - a. Rubella Titer
    - b. Rubeola Titer
    - c. Hep B vaccine immunization
      - i. Hepatitis B vaccine or declination statement must be kept on file
    - d. Drug Screen: must include certification by a clinician that provider is cleared of all limitations, specifically alcohol and drugs.
  3. Must be signed and stamped by MD
- iii. Annual Mantoux /PPD / Chest x-ray:
- iv. QuantiFERON/PPD is required (pre-employment)
- v. Providers with a history of positive PPD require Chest X-Ray results to be attached to all physical examinations.
- vi. Annual TB/health assessment questionnaire:

1. Providers must complete an annual Tuberculosis (TB) questionnaire annually

c. Compliance

- i. Competency Evaluation: -Home Health Aides who have successfully completed orientation are required to pass the initial competency evaluation prior to work assignment. -Competency evaluation is conducted by a registered nurse. -Required to be completed annually thereafter.
- ii. HIV Confidentiality: Home Health Aides must sign and date HIV Confidentiality form. (Initially and annually)
- iii. Annual Eval by Direct Nurse: Mandatory annual evaluation of the home health aide conducted by a nurse.
- iv. Annual Administrative Employee Performance Evaluation: Mandatory annual employee evaluation of the home health aide performance
- v. Orientation: Home Health Aide must successfully complete Orientation to disaster plan, Infection control, Standard Precautions, and TB, proficiency in the Electronic Visit Verification System prior to being placed on a case.
- vi. Emergency Preparedness: Home Health Aide must successfully complete orientation to agency's emergency preparedness plan upon hire and yearly after that
- vii. 12 Hours of In-Service: -All home health aides must complete at least 12 hours of in-service education annually. -Psychiatric training must be included in the annual education to accommodate a special population served by Americare CSS.
- viii. EVV Compliance: Prior to placing an aide on the case, vendor will ensure all pre-employment and annual compliance of the paraprofessional staff as well as EVV training.
- ix. Annual Compliance Training and Orientation

7. Vendor will receive an audit report within 1 week following the audit. If applicable, the report will list all identified issues broken down by the paraprofessional staff

- a. A plan of correction will be requested from the vendor with a set time frame to submit and correct the deficiency.
- b. Vendor will be placed on hold for future referrals until they are reaudited within 3 months to ensure that deficiency is corrected.
- c. If a deficiency is not resolved, vendor contract will be terminated.
- d. Vendors that are found to have 100% compliance for at least 2 consecutive years will be audited every 2 years.