

# OFFICE OF HIV RYAN WHITE PART B AND AIDS DRUG ASSISTANCE PROGRAM COMPREHENSIVE SITE VISIT CHECKLIST

## DOCUMENT REQUEST LIST

### ADMINISTRATIVE DOCUMENTS

Documents to be provided by the Subrecipient at least two weeks prior to the site visit (relevant to Ryan White HIV/AIDS Program Part B subgrants including ADAP):

#### *Subrecipient Provided Documents:*

- Proof of the following policies
  - Personnel policies and procedures, including recruitment/retention processes
  - Employee Code of Ethics or Standards of Conduct
  - Conflict of Interest policy
  - Policy showing prohibition of signing bonuses, kickbacks, and referral bonuses
  - Client Confidentiality requirements
  - Fraud, Waste, and Mismanagement policy
  - Written Drug Free Workplace Policy
  - Equal Employment Opportunity and/or Affirmative Action Policy
  - Written Sexual and Unlawful Harassment Policy
  - HIPAA Policy
  - Policy discouraging hiring person with criminal record relating to, or who is currently being investigated for healthcare fraud
  - Informal complaints and formal grievances that include, at a minimum, the following:
    - Non-binding procedure for resolving conflicts
    - Separate processes for informal complaints and formal grievances
    - Reasonable timeline for addressing complaints and grievances
    - Description of types of grievances and individuals covered
    - Meeting between the grievant and the Executive Director, or a board
    - Written subrecipient response to the grievant or the grievant's care
    - Policies and procedures that specifically address client and/or staff grievances and complaints
  - Written policy regarding workplace violence
  - Written whistle-blower policy
  - Policy to prohibit lobbying by staff whose salaries are covered in whole or in part by federal funds

- Personnel records of RWHAP Part B funded staff, consisting of at least the following:
  - Job descriptions for all RWHAP Part B and ADAP funded staff (include percentage of FTE paid for by RWHAP Part B)
- Evidence of performance evaluations conducted for staff
- Evidence of trainings in which staff participated
- Resumes and professional licenses
- Proof of excessive or significant staff turnover rate
- Documentation showing the below is conspicuously displayed:
  - Equal Opportunity Employment
  - Worker's Compensation
  - Family Leave Act
  - Other state and federal mandates if applicable
- Access to Care documentation including:
  - Consumer Committee's membership and meeting attendance (If applicable)
  - Client satisfaction survey tools and the most recent results
  - Mechanisms for obtaining client input
  - Policy ensuring that ability to pay does not act as barrier to receiving services
  - Files showing eligibility determination and clinical processes
  - Showing that facility is ADA compliant and accessible by public transportation
  - Documenting activities for promotion of HIV services to low-income individuals
- Administrative fiscal documentation including:
  - Payor of Last Resort documentation including:
    - Policy documentation
    - Documentation of third-party payment training If applicable
    - Documentation showing that those eligible for Veteran's Affairs (VA) and Indian Health Services (IHS) benefits are exempt from policy
  - Most recent copy of audit performed by outside agency
  - Reports showing accountabilities for all funds in accordance with federal and RWHAP requirements
  - Documentation on bylaw and board policies and documentation on any board members violating ethics and conduct standards
  - Documented policies and procedures for 45 CFR Part 75
    - Proof of submission of timely reports
    - Copies of timely reports
  - Federal monitoring reports such as RSR

## PROGRAM DOCUMENTS

Documents to be provided by the Subrecipient at least two weeks prior to the site visit (relevant to Ryan White HIV/AIDS Program Part B subgrants including ADAP):

### *Subrecipient Provided Documents:*

- Randomly selected client files for the below services. Number of clients to be determined by Office of HIV (OoH) and communicated to provider ahead of site visit.
- Emergency Financial Assistance
  - Proof that EFA only provided for limited periods of time
  - Funds are allocated, tracked, and reported by type of assistance
  - Assistance is provided for only the following services:
    - Utilities
    - Housing
    - Food (Including groceries and food vouchers)
    - Transportation
    - Medication
  - Payments made through voucher program or short-term payments to service entity
    - No direct payments to client
- Health Education/Risk Reduction
  - Information about available medical and psychosocial support services
  - Education on methods of HIV transmission and how to reduce risk
  - Counseling on how to improve health status and reduce transmission risk
- Health Insurance Premium & Cost Sharing Assistance Program(HIP-CS)
  - Documentation for the following
    - Annual cost-effectiveness analysis addressing noted criteria
    - Funds were not used to cover costs associated with the creation, capitalization, or administration of liability risk pools or Social Security costs such as proof of payments made for monthly premiums for health insurance coverage
    - Policies and procedures for process of informing, educating, and enrolling people in healthcare and documenting pursuit of those efforts
    - Ensure funds pay only for in-network outpatient services
    - Coordinating with Centers for Medicare & Medicaid Services, including entering into appropriate agreements, to ensure that funds are appropriately included TrOOP or donut hole costs if appropriate
- Health Insurance to Provide Medication (HIP-Rx)
  - Documentation showing referral timeframe
  - Policy and procedure for enrolling clients into the correct ADAP service
  - Documentation demonstrating that funds were not used to cover costs associated with the creation, capitalization, or administration of liability risk pools or Social Security costs
  - Policies and procedures outlining processes for information, educating, and enrolling people into healthcare and documenting efforts to do so
  - Policy and procedure for payment timeframe on premiums and copays

- Housing Services
  - Compliance with contract and program requirements
  - Services provided, including the number of clients served, duration of housing services, type of housing provided, and housing referral services
  - Documentation showing case managers and other professionals that provide services are knowledgeable of local, state, and federal housing programs
  - Documentation showing clients receive assistance in maintaining/obtaining permanent housing
  - Housing services are essential to maintaining or accessing outpatient/ambulatory services and treatment
  - Mechanisms to allow newly identified clients access to housing services
  - Policies and procedures to provide individualized written housing plan
  - Documentation and assurance that no RWHAP funds are used to provide direct payments to clients for rent or mortgage
  - Housing plans for clients
- Medical Case Management
  - Credentials and training for medical and healthcare staff
  - Process for initial assessment of service needs
  - Development of a comprehensive, individualized care plan
  - Documentation showing services through referrals required to implement the plan
  - Policy for monitoring client to assess efficacy of the plan
  - Documentation showing periodic re-evaluation and adaptation of plans at least every six months
- Medical Nutrition Therapy
  - Licensing for dietitians providing services
  - Referral by licensed medical provider for clients
  - Existence of a detailed nutritional treatment plan for each eligible client
  - Documentation showing services provided, number of clients served, quantity of nutritional supplements and food provided to clients
- Medical Transportation
  - Documentation showing the following
    - Reimbursement methods that do not involve cash payments to recipient
    - Mileage reimbursement that does not exceed federal reimbursement rate
    - Volunteer drivers have appropriate insurance and liability coverage
    - Collection and maintenance data showing funds are only used for transportation designed to help eligible individuals remain in medical care enabling them to access medical and supportive care
    - Prior approval before purchasing or leasing a vehicle
    - Transportation services are only used to enable an eligible individual to access HIV-related health and support services
    - Contract or local procurement mechanism with a provider of transportation services

- Voucher or token system that allows for tracking distribution of services provided
- Mental Health Services
  - Documentation and licensing for mental health professionals
  - Treatment plans for all clients that include the following:
    - Diagnosis
    - Treatment modality (group or individual)
    - State date of services
    - Recommended number of sessions
    - Date of reassessment
    - Projected treatment end date
    - Recommendations for follow up
    - Signature of the mental health professional rendering service
    - Proof services are allowable under RWHAP guidelines and contract requirements
    - Services provided are consistent with treatment plan
- Non-Medical Case Management
  - Services provided directly to Consumers delivered by trained professionals
  - Initial assessment of service need
  - Policies and procedures for providing benefits/entitlement counseling and referral services
  - Policies and procedures for assisting client in obtaining access to public and private programs, healthcare, and supportive services
- Other Professional Services (Legal Services)
  - Documentation showing legal services provided
  - Documentation showing what legal services cannot be provided with Ryan White funding
  - Credentials and licensing for professionals providing services
  - Policies and procedures showing services provided are for with a positive HIV status
- Other Professional Services (Tax Preparation)
  - Funds are used only for allowable professional services for RW eligible clients only
- Outpatient/Ambulatory Health Services (Cabenuva Only)
  - Credentialing and licensing for professionals providing services
  - Documentation showing care is provided only in an outpatient medical setting
  - Part B funds are only used for administration of Cabenuva
  - Prescription and management of medication therapy (Cabenuva)
  - Patient records showing eligibility and treatment adherence
  - FDA certification under Clinical Laboratory Improvement Amendments Program
  - Services are consistent with HHS Clinical Guidelines for Treatment for HIV

- Outreach Services: Retention-in-Care
  - Documentation showing process for identifying individuals who are unaware of their HIV status and how to enter care
  - Documentation showing process for identifying individuals who know their HIV status and helping them to enter or re-enter care
  - Documentation of any outreach targeted at communities whose residents have disproportionate risk of HIV infection
  - Documentation showing that funds are not being used for:
    - HIV Counseling and Testing
    - To support broad-scope awareness activities for general populations instead of specific populations at greater risk for HIV infection
    - To duplicate HIV prevention outreach efforts
- Psychosocial Support Services
  - Documentation confirming if the following support services are provided:
    - Bereavement counseling
    - Child abuse and neglect counseling
    - HIV support groups
    - Pastoral care/counseling
      - Available to all individuals regardless of belief affiliation
    - Nutrition counseling by non-registered dietitian
      - If supplements are provided by RWHAP funds
  - Credentialing and licensing for professionals providing services
  - Credentialing and licensing for outside organizations providing services
- Referral for Health Care & Support: Eligibility
  - Policies and procedures for initial assessment of eligibility
  - Documentation for all clients showing necessary eligibility documents such as:
    - Proof of Diagnosis
    - Proof of Residency
    - Proof of Income
  - Policies and procedures for annual and semi-annual reassessment of eligibility
  - Documentation regarding comprehensive, individualized care plan
  - Policies and procedures for referring clients to other agencies for medical and non-medical services Provided by other agencies
  - Policies and procedures for contacting clients who have fallen out of care
  - Policies and procedures for ensuring clients continue care and are contacting for necessary appointments for reassessment of eligibility
  - Credentialing, training, and licensing for all professionals providing services

## FISCAL DOCUMENTS

Documents to be provided by the Subrecipient at least two weeks prior to the site visit (relevant to Ryan White HIV/AIDS Program Part B subgrants including ADAP):

### *Subrecipient Provided Documents:*

- Subrecipient organizational chart, including fiscal positions that may reside outside RWHAP Part B itself but contribute to managing the fiscal functions of the program
- Fiscal policies and procedures in place within your organization
- Cost Principles protocol for determining allowable, allocable, and reasonable expenditures
- Purchasing and Procurement policies and procedures in place within your organization
- Records Management policies and procedures in place within your organization
- Fixed Asset policies and procedures in place within your organization (provide a copy of the current fixed assets register or inventory log)
- Marketing / Advertising / Promotional policies and procedures in place within your organization
- Travel policies and procedures in place within your organization
- Job descriptions for all RWHAP Part B Program funded staff
- Professional licenses for all RWHAP Part B Program funded staff
- Current chart of accounts
- Timeline flow chart that presents the process for subrecipient expenditure verification and payment
- Current and prior year aggregate subrecipient/subcontractor administrative costs
- Current and prior year RWHAP Part B budget for subrecipients
- Current and prior year subrecipient expenditure reports reflecting expenditures by budget line items (i.e., administration, salaries, fringe, supplies, travel, and indirect cost) and funding (i.e., administrative, planning and evaluation, clinical quality management, direct)
- Current subrecipient/subcontractor expenditures report by service category
- If the subrecipient received program income during the grant year provide a report(s) of revenue and expenses for the period
- Current RWHAP Part B contracts / subgrants for subrecipients
- Six months of invoices paid with RWHAP Part B funds and corresponding documentation from the recent year
- Most recent subrecipient fiscal monitoring visit reports with corrective action plans; if applicable
- Subrecipient's most recent and prior two years single audits
- Subrecipient's most recent and prior two years Federal Financial Report (FFR)
- Subrecipient's sample of payroll, time and effort reporting, and payroll allocations for staff on the RWHAP Part B grants (most recent two pay periods)
- Randomly sampled client charts/accounts that will indicate effort to determine the client's payer of last resort and client eligibility for RWHAP Part B services (may be the same charts used for the administrative review section).

## ADAP DOCUMENTS

Documents to be provided by the Subrecipient at least two weeks prior to the site visit (relevant to Ryan White HIV/AIDS Program Part B subgrants including ADAP):

### *Subrecipient Provided Documents:*

- ADAP policies and procedures
  - Referral Timeframe
  - Enrolling Clients
  - Informational and Educational Material for enrolling people in healthcare
- ADAP application for services and guidelines for completion
- Randomly selected active ADAP client records for clients receiving medication (only) assistance (if applicable) and ten randomly selected records for clients receiving ADAP insurance assistance (recipient) if applicable *Note: Reviewer may review inactive or closed records at their discretion.*
- ADAP staff training and orientation materials
- ADAP service standards

## CLINICAL QUALITY MANAGEMENT (CQM) DOCUMENTS

Documents to be provided by the Subrecipient at least two weeks prior to the site visit (relevant to Ryan White HIV/AIDS Program Part B subgrants including ADAP):

### *Subrecipient Provided Documents:*

- Current CQM plan(s) (If there is a separate ADAP and/or MAI CQM plan, please provide.)
- CQM duties/responsibilities
- Service utilization data used to determine the number of performance measures for each funded RWHAP service category
- Previous 12 months of CQM committee meeting minutes
- Documentation of current or most recent quality improvement project
- Subrecipient corrective action plans (if applicable to CQM)
- Documentation of self-monitoring for programmatic compliance quarterly
- Proof that subrecipient has copy of OoH Service Standards on file for relevant service categories
- Proof of request for technical assistance where applicable