SALT LAKE COUNTY
AGING & ADULT SERVICES

Emergency Response System and
Medication Reminder System Contracts

Provider QA Review/Audit Preparation Checklist

This form is designed to help Providers prepare for a QA Review/Audit by Salt Lake County Aging & Adult Services. Please refer to your current contract and to the CCTP Provider Training Documents for additional information about each item listed.

During a QA Review/Audit, Providers will be expected to provide documentation that demonstrates that each of the below listed items has occurred. Examples include: copies of training attendance rolls which show employee completion of training requirements; copies of billing records and/or invoices; copies of current licensure; copies of case notes; copies of employee timesheets; etc.

1. Business and staff maintain current licensure: Notes:	☐ Yes ☐ No
2. Business maintains appropriate insurance policies: Notes:	☐ Yes ☐ No
3. Appropriate assurances are in place for any subcontractor: Notes:	☐ Yes ☐ No ☐ N/A
4. Business has completed I-9's for all employees: Notes:	☐ Yes ☐ No
5. Business has developed all required Policies/Process, and employees have been trained on required policies/processes: Notes:	☐ Yes ☐ No
6. Business maintains all records for six (6) years: Notes:	☐ Yes ☐ No

7. Business communicated changes, issues, etc. appropriately with Case Managers and Clients: Notes:	☐ Yes ☐ No ☐ N/A
8. Billing is appropriate and submitted in a timely manner, accurate, and service provision matches billing and timesheets, etc.: Notes:	☐ Yes ☐ No
9. Progress notes and case documentation is appropriate (documentation of work provided, issues, etc.): Notes:	☐ Yes ☐ No
10. Service Provision is appropriate (current Service Authorization(s) on file matches the provision of service(s), etc.): Notes:	☐ Yes ☐ No
11. Business provides appropriate warranty coverage: Notes:	☐ Yes ☐ No ☐ N/A
12. Business provides appropriate training to client regarding device(s): Notes:	☐ Yes ☐ No ☐ N/A