



Document Request List

Note: This is a guideline. Additional information may be requested depending on the Scope of Services (discipline/services provided).

Requested	ITEMS	HH	HOS	ITN	COMMENTS	Provided
	Service Specific					
	Unduplicated Admissions/Clients Served	*	*	*	New patients for the past 12 months	
	List of Active Patients	*	*	*	Include Admit Date, Diagnoses, Clinical Disciplines	
	List of Discharged Patients	*	*	*	Past 30 - 60 days	
	List of Scheduled Visits	*	*	*		
	List of Personnel - Active/Terminated	*	*	*	Include Date of Hire, Title/Discipline	
	List of Contract Staff	*	*	*		
	All Contracts	*	*	*	Include Interpreter	
	Sample Admission Packet	*	*	*		
	Copy of Bag Technique Policy	*	*	*		
	Copy of Handwashing Policy	*	*	*		
	Billing Week	*	*	*		
	Quality Documents					
	QAPI Meeting Minutes	*	*	*		
	Patient Experience Surveys	*	*	*		
	Performance Improvement Projects	*	*	*		
	CMS Outcome Reports/Adverse Events/OASIS Error Summary	*				
	Hospice-Level Quality Measure Report/ Hospice-Patient Stay Level Quality Measure Report/PEPPER		*			
	Clinical Record Audits	*	*	*		
	Quality Indicator Tracking Data	*	*	*		
	Complaint and On-call logs	*	*	*		

Requested	ITEMS	HH	HOS	ITN	COMMENTS	Provided
	Recent Survey Results (State/AO)	*	*	*	As Applicable, since last Comprehensive Visit	
	Recent Annual Program Evaluation		*	*		
	Policies and Procedures					
	Clinical Policy Manual	*	*	*	Service Specific	
	Operational Policy Manual	*	*	*		
	Personnel Policy Manual	*	*	*		
	Administrative Policy Manual	*	*	*		
	Infection Control/Exposure Policies	*	*	*		
	Governance Documents					
	List of Governing Body members and positions	*	*	*	As Applicable	
	Annual Conflicts of Interest of Statements		*	*		
	Bylaws/Articles of Incorporation	*	*	*		
	Strategic Plan	*	*	*		
	Governing Body meeting minutes	*	*	*		
	State and/or Business License(s)	*	*	*	As Applicable	
	Current CMS 855-A	*	*	*	For Deemed Status	
	PAC members and meeting minutes	*	*	*	As Applicable, per State Requirements	
	Financial Documents					
	Capital Expenditure Plan	*	*	*		
	Operational Budget	*	*	*		
	Insurance Coverage/Surety Bond	*	*	*		
	Last Financial Statement Review (External)	*	*	*		
	Hospice Volunteer Hour Tracking		*			
	Hospice Cost Savings		*			
	Operational Documents					
	Organizational Chart	*	*	*		
	Job Descriptions	*	*	*		
	Aide Training Program	*	*		As Applicable	
	CLIA Certificate(s)	*	*	*	As Applicable	
	Emergency Preparedness Plan	*	*	*		
	Orientation Program	*	*	*		
	Clinical Competency Documentation	*	*	*		
	Annual In-service Education Provided	*	*	*		

Requested	ITEMS	HH	HOS	ITN	COMMENTS	Provided
	Bereavement Records		*			
	IPU Operations Documents				As Applicable	
	State Fire Inspection Report		*			
	Most Recent Engineering/Building Report		*			
	Mock Fire Drill		*			