

West Virginia Medicaid Aged and Disabled Waiver Program

PERSONNEL FILES MONITORING TOOL

AGENCY:			PROVIDER #:		
STAFF IDENTIFIER:			REVIEW PERIOD:		
PROFESSIONAL STAFF	Y	N	N/A	COMMENTS	Manual Reference
Is there proof of licensure?					501.7.1.2 501.7.3.2
Is FTE Case Manager to Member Ratio policy observed?			N/A		501.7.1.2
Are there signed confidentiality statements?					501.7.1.2 501.7.3.2
HOMEMAKER STAFF	Y	N	N/A	COMMENTS	
Proof of completed 32-hour training and/or certificate(s)?					501.7.8
Has employee been given copy of certificate(s)?					501.7.8
Is CPR current?					501.7.8H 501.7.9D
Is OSHA training current?					501.7.8H 501.7.9D
Is First Aid training current?					501.7.8H 501.7.9D
Is Abuse, Neglect, Exploitation training current?					501.7.8I 501.7.9D
Is Confidentiality laws and regulations (HIPAA) training current?					501.7.8J
Is there documentation of 8-hour annual in-service training?					501.7.9
Is there a signed confidentiality statement?					501.7.3.1
Evidence of background check on employee?					501.2.1

West Virginia Medicaid Aged and Disabled Waiver Program

Employee performance evaluation completed per agency policy?					Non-billable 501.7.4D
OFFICE STAFF	Y	N	N/A	COMMENTS	
Are there signed confidentiality statements?					501.7.1.2 501.7.3.1