

## NJ HCSF/Medicaid Certified Document Request List

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

\* Denotes CHAP Home Care NJ Medicaid specific standards

Standard	Items	Comments	Requested	Provided
	<b>General Documents</b>			
NA	Unduplicated Admissions-Clients Served (C)	New patients for the past 12 months (or less if in business less than a year)		
NA	List of Active Clients	Include date services initiated and the type of services provided		
NA	List of Discharged Clients	Past 30 - 60 days		
NA	List of Scheduled Visits	Report of current schedule		
NA	List of Personnel Active/Term Direct	Include DOH, Title/Discipline		
NJIP.1, NJMG.1 *PDIII.1h	List of Contract Staff			
*PDIII.2a	All Contracts	Includes service contracts		
NJCC.1	Sample Admission Packet			
NA	Start of the Billing Week	Information only -not a document (IE: Week starts on Sun or Monday per agency policy)		
NJMG.2.1	State, business license	As applicable		
NJCC.2.2 *PDI.5b, PDII.1a	Scope of services			
	<b>Quality Documents</b>			
NJAC.4, NJMG.1.4	Complaint and on-call logs	Include daily reports from answering service		
NJMG.2	Recent survey from state or federal agency since the last comprehensive visit	Since last comprehensive visit		
	<b>Policies and Procedures</b>			

Standard	Items	Comments	Requested	Provided
NJAC.7, NJAC.5, NJAC.6, NJAC.7, NJIP.4, NJMG.3 *PDI.5b, PDII.2a, PDII.5c	Operational Policies	As applicable per State (HCSF for Medicaid Certified agencies		
NJHR.2	Personnel Policies			
NJIP.1, NJIP.5	Infection Control/Exposure Control Policies	Includes hand washing and bag technique policy.		
	<b>Financial Documents</b>			
NJMG.2	Insurance Coverage			
	<b>Operational Documents</b>			
NJMG.3.6	Organizational Chart			
NJPS.4	Job descriptions	As applicable per State (HCSF for Medicaid Certified agencies		
*PDIII.1h- 1h1a	HHA Training Program	As applicable per State (HCSF for Medicaid Certified agencies		
NJEP.1	Emergency Preparedness Plan			
NJHR.2, NJHR.4 *PDIII.1h1b, PDIII.1i	Clinical Competency Documentation	As applicable per State (HCSF for Medicaid Certified agencies		
*PDIII.1h	Annual minimum required In-service education provided	As applicable per State (HCSF for Medicaid Certified agencies only)		