

**Audit Review Period:**

**Scope:** Participants enrolled during the audit review period.

**Instructions:**

- Respond to the relevant questions in the Root Cause Analysis:
  - \* Columns A through C will be filled out by the Audit Lead.
  - \* Columns D and E must be filled out for all Root Cause Analyses and include details relating to the investigation.
  - \* Columns F and G should be filled out if they are easily known (i.e., the root cause is based off of a disclosed issue (full investigation was already done) or the scope is easily determined based off of the cause/ type of issue identified). If the scope is not easily known, enter NA in these columns.
  - \* Only complete columns H through M if the condition relates to a disclosed issue for which correction was already initiated/completed. If the condition was first discovered on audit, the organization may enter NA in those columns.

**Root Cause Analysis Due Date:**

<b>Date Identified (MM/DD/YY) (Completed By The CMS Audit Lead)</b>	<b>Brief Description Of Issue (Completed By The CMS Audit Lead)</b>	<b>Condition Language (Completed By The CMS Audit Lead)</b>
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**Detailed Description of the Issue**

**(Explain what happened)**  
**(Remaining fields to be Completed by PACE Organization)**

**Root Cause Analysis for the Issue**  
**(Explain why it happened)**

<b>Methodology - Describe the process that was undertaken to determine the # of individuals (e.g. participants) impacted</b>	<b># of Individuals Impacted</b>	<b>Action Taken to Resolve System/ Operational Issues</b>	<b>Date System/ Operational Remediation Initiated (MM/DD/YY)</b>	<b>Date System/ Operational Remediation Completed (MM/DD/YY)</b>
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Actions Taken to Resolve Negatively Impacted Individuals Including Outreach Description and Status	Date Individual Outreach and Remediation Initiated (MM/DD/YY)	Date Individual Outreach and Remediation Completed (MM/DD/YY)
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