Programs of All-Inclusive Care for the Elderly (PACE)

Audit Survey



PACE Audit Survey

The following survey is voluntary and anonymous. After issuance of the final audit report, PACE Organizations (POs) will receive a weblink to the survey questions below. The survey is organized according to pre-audit, audit, and post-audit activities. CMS utilizes survey feedback to improve the audit process.

Pre-Audit Activities

1.	How ea	sy was it to	o follow CN	/IS' docume	entation and	d universe	submission	instruction	s?	
	1	2	3	4	5	6	7	8	9	10
	0	0	0	0	0	0	0	0	0	0
	Not Eas	y			Eas	ÿ				Very Easy
2.	Did you helpful?		formation	provided in	the follow	r-up call aft	er the audit	engageme	nt letter	
	O Yes O No									
3.	Do you	have any s	uggestions	to improve	the audit e	engagement	t letter follo	w-up call?		
4.	Was the	e Audit Lea	d available	to answer	questions p	prior to the	audit?			
	1	2	3	4	5	6	7	8	9	10
	0	0	0	0	0	0	0	0	0	0
	Not Ava	ilable			Avail	able			Alwa	ys Available

5.	How helpful w documentation					with pre-a	udit proces	ses such as	
	1 2	3	4	5	6	7	8	9	10
	0 0	0	0	0	0	0	0	0	0
	Not Helpful			Hel	pful			Ve	ery Helpful
6.	How many ho audit?	urs do you est	imate staff s	pent collect	ting, review	ving, and su	bmitting d	ata prior to	the
7.	Was the timef adequate?	rame for subm	itting docun	nentation ar	nd data duri	ing the pre-	audit porti	on of the au	ıdit
_	1 2	3	4	5	6	7	8	9	10
	0 0	0	0	0	0	0	0	0	0
	Not Adequate			Ade	equate			Very	/ Adequate
8.	Do you have a	ny additional	comments o	r suggestio	ns regarding	g the pre-au	ıdit process	5:	

Audit Activities

1. Did the audit team members request one or more Root Cause Analyses (RCAs)? If so, how well did the auditor(s) explain the purpose of the RCA(s) and how to complete them? Enter NA if no RCAs were requested for a particular element.

SDAG:

NA	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
	Needs In		Explained	d Adequate	Explained Very Well					
Provision	of Service	<u>es:</u>								
NA	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
	Needs Ir	nprovemen	ıt		Explaine	d Adequate	Explained Very Well			
Personne	<u>:</u>									
NA	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
	Needs In	nprovemen	t		Explained	d Adequate	Explained Very Well			
<u>Complian</u>	Compliance and Quality Improvement:									
NA	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
	Noodo In		Emploine	d A doquato			walained V	Zower MAZoll		

Needs Improvement

Explained Adequately

Explained Very Well

		nany hours f audit field						g, and sub	mitting da	ata from the		
		ne timefram h the subm	-		itting doc	umentatio	on and d	ata from th	e start of	audit fieldv	vork	
	1	2	3	4	5		6	7	8	9	10	
	0	0	0	0	0	(C	0	0	0	0	
	Not Ac	lequate				Adequate	2			Very	Adequat	
I. Did the audit team members request one or more Impact Analyses? If so, how well did the auditor(s) explain the purpose of the Impact Analyses and how to complete them? Enter NA if there no Impact Analyses were requested for a particular element.												
<u>5D</u> /	<u>AG:</u>											
	NA	1	2	3	4	5	6	7	8	9	10	
	0	0	0	0	0	0	0	0	0	0	0	
Needs Improvement						Explaine	d Adequa		Explained Very Wel			
		of Service		Э	4	F	C	7	8	0	10	
	NA O	1 0	2	3	4	5	6	7	0	9	10 O	
Needs Improvement						Explaine		Explained Very We				
Per	sonne	<u>l:</u>										
	NA	1	2	3	4	5	6	7	8	9	10	
	0	0	0	0	0	0	0	0	0	0	0	
Needs Improvement						Explained Adequately					Explained Very We	
2 01	<u>npliar</u>	ice and Qu	ality Imp	rovement	<u>:</u>							
	NA	1	2	3	4	5	6	7	8	9	10	
	0	0	0	0	0	0	0	0	0	0	0	
		Needs Im	provement			Explaine	d Adequa	tely		Explained	Very We	

5. In order to complete the requested Impact Analyses:

a. How many hours do you estimate it took to complete the requested Impact Analyses?

b. How may staff members do you estimate it took to complete the requested Impact Analyses?

- 6. During the exit conference, did your organization have a clear understanding of all issues of noncompliance being cited and why they were being cited?
 - O Yes
 - O No

If you responded No, which issues of non-compliance <u>were not</u> discussed prior to the exit conference (you may enter any numeric identifier of the issue of non-compliance cited in your audit report or provide a brief description of the issue)?

7. Do you have any additional comments or suggestions regarding the audit fieldwork process:

Post-Audit Activities

1. How easy was it to understand the Draft and Final Audit Reports? Very Easy Not Easy Easy

2. How many hours do you estimate staff spent collecting, reviewing, and submitting data following issuance of the Final Audit Report?

	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0
Not				Ade	equat			Very	Adequ
Adequa	te ave anv ado	ditional con	nments or s	e suggestions	s regarding	the post-a	udit proces	s:	
o you m				54555551011					

General Audit Questions

1. Please identify any areas or aspects of the audit process that you believe would benefit from increased transparency or communication.
2. Does the PO's parent organization operate any additional PACE organizations and/or PACE contracts?
O Yes
O No
If yes, please enter the names and contract numbers of the other PACE organizations.
PACE Organization Names/Contract Numbers:
2. How would you compare the audit of your DACE ergenization with the audits of other DOs encreted
3. How would you compare the audit of your PACE organization with the audits of other POs operated by the same parent organization? Enter NA if the PO's parent organization does not operate any other PACE organizations or if the PACE contracts do not compare audit experiences.

NA	1	2	3	4	5	6	7	8	9	10
0	0	0	0	0	0	0	0	0	0	0
	Very Di	fferent			Sim	ilar			Ve	ry Similar

4.	If you feel that your audit experience was different than other PACE organizations operated by the
	same parent organization, please explain how they were different:

5. If you feel that your audit experience was different than other PACE organizations operated by different parent organizations, please explain how they were different:

6. Are there any other ways you believe we can improve the overall audit process?

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1327. This information collection will allow CMS to conduct comprehensive reviews of PACE organizations to ensure compliance with regulatory requirements. The time required to complete this information collection is estimated at 780 per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is mandatory per CMS's authority under Section 1894 and 1934 of the Social Security Act and implementing regulations at 42 CFR § 460.190 and 460.194, which state that CMS, in conjunction with the State Administering Agency (SAA), audit PACE organizations (POs) annually for the first 3 contract years (during the trial period), and then on an ongoing basis following the trial period. Additionally, per § 460.200(a) PACE organizations are required to collect data, maintain records, and submit reports as required by CMS and the State administering agency. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.