

Group Name:		Group Tax ID:	
Site Address:		City/State/Zip:	
Date of Visit:		Auditor Name:	
Type of Audit:	<input type="checkbox"/> Initial/Recred	<input type="checkbox"/> CAP Follow-up	<input type="checkbox"/> Complaint Follow-up <input type="checkbox"/> Other
Final Score:	Pass: <input type="checkbox"/> Yes <input type="checkbox"/> No	CAP Indicated: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Component Reviewed	Yes	No	N/A
	A	B	C
Physical Accessibility and Appearance			
Adequate space			
Handicapped accessible			
Office space well-maintained without obvious need for repair			
Reception Area			
Well-lit waiting rooms			
Posted office hours			
Posting of Agency's statewide consumer call center telephone number including hours of operation			
Consumer Assistance Notice (Sub Section 641.511 (11), F.S.de qi			
Prominently displayed Consumer Assistance Notice in waiting room/reception area			
Includes addresses and toll-free telephone numbers of the Agency for Health Care Administration, the Subscriber Assistance Program, and the Department of Financial Services			
Clearly states that the address and toll-free telephone number of the HMO grievance department shall be provided upon request			
Patient's Bill of Rights and Responsibilities			
Summary of Patient's Bill of Rights posted in waiting room/reception area			
Provider has <i>complete copy</i> of Patient's Bill of Rights available upon request			
Staffing and Policies and Procedures			
Appropriately trained and licensed staff			
Multi-lingual physician and/or staff			
General office polices present and up-to-date including Confidentiality policy. (Practitioners shall have a policy to ensure the confidentiality of medical records in accordance with 42 CFR, Part 431, Subpart F. This policy shall also include confidentiality of a minor's consultation, examination, and treatment for a sexually transmissible disease in accordance with section 384.30(2), F.S). Shall have a policy to ensure compliance with the privacy and security provisions of the Health Insurance Portability and Accountability Act (HIPAA)			
Policies on medication storage, dispensing and administration			
CLIA license and standards for offices providing lab services			

Component Reviewed	Yes	No	N/A
Back Office			
Emergency equipment available			
Medications and drug samples in secure location			
Medical Records (Paper Charts)			
Secure/confidential filing system			
Records easily located with legible file markers			
Records organized and fastened in folder			
Appointments for PCP/OB/GYN			
Routine Well Care visit within 4 weeks			
Routine Sick Patient Care within 1 week			
Urgent care within 24 hours			
24-hour emergency coverage			
Type of After-Hours Coverage: Direct transfer to Nurse Triage Phone message w/ exchange number Phone message w/ Nurse Triage number Phone message directing to ER Other; please specify:			

Additional Comments:**Site Visit Scoring Instructions:**

- Add column A (items identified as YES); Add column B (items identified as NO)
- Add total of the A column to the total of the B column to obtain the Grand Total
- Divide the total of the A column by the Grand Total and obtain percentage.
- Percentage will equal your score, document score at the top of page one.
- Note: Column C (items identified as NA) does not apply to Grand Total.

Electronic Medical Records - Informational Only – Not Scored	Yes	No	N/A
Does the practice use an Electronic Health Record System			
Name of EHR Software Program:			
Physician(s) participating in either Medicaid or Medicare Meaningful Use Program			
Have you attested to Meaningful Use (MU)			
Are you participating in a Health Information Exchange			
Are you using a Direct Messaging Service			

 Reviewer Signature

 Date

 Office Staff Signature

 Date