

# Complete Healthcare Compliance Manual Resource: Sample Provider-based Requirements Compliance Assessment Tool

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Department Name				
Department Physical Address/Location (include suite #)	Street (include Suite #)	City	State	Zip
Assessment Done by	Date	Proximity Designation	On Campus ___ Off Campus	

*For the purpose of this assessment, the terms 'Provider-Based' and 'Facility-Based' are synonymous terms – meaning that this is a HOSPITAL dept*

Dept Information			
Facility this Department is Provider-Based to	<i>(List hospital names here for reference if necessary)</i>		
		This is the "facility", "hospital" and/or "main hospital" that the questions throughout the rest of this assessment refer to.	Consider: Is this the most logical hospital affiliation for this department, based on location, etc.?
Dept hours of operation:			

Supervisor		
Manager		
Director		
Admin / Exec Director		
Operational Owner		
Cost Center(s)	<b>Number</b>	<b>Name</b>
Epic Dept #(s) w/Dept Name		
Facility under which patients are registered		
Physician Supervision Requirement Met By (be as specific as possible)	<b>(Ex: in-clinic physician, PA or ARNP; hospitalist; provider within same bldg; etc.)</b>	

Notes

## Checklist A, Requirements for Meeting Provider-Based Status – Use for All Locations (On-Campus and Off-Campus)

§413.65 Reference	Regulatory Requirement	Question	Y / N	Documentation / Notes	Met	Not Met
(d)(1)	<b>1. Licensing / Credentialing</b>	1. Is the site listed on the hospital's Dept of Health Application?				
		2. Is this site listed on the Medicare 855A?				
(d)(2)(i)	<b>2. Clinical Services Integration</b>	1. Is the Medical Staff privileged at the main hospital?				
(d)(2)(ii)		2. Is monitoring and oversight of the dept the same as for other hospital depts? (ex: exec leadership, inf control, quality, etc.)				
(d)(2)(iii)		3. Does the dept Medical Director have a reporting relationship to the Chief Medical Officer of the main hospital?				
(d)(2)(iv)		4. Does the Medical Staff Committee of the main hospital oversee the medical activities of the dept?				

(d)(2)(v)		5. Do the medical records identify the patient as being a patient in the main hospital ?			
(d)(2)(vi)		6. Do the clinic patients have access to the full range of services at the main hospital?			
(d)(3)	<b>3. Financial Integration</b>	1. Are the dept costs included on the hospital cost report?			
(d)(3)		2. Are the income and expenses of the dept shared with the main hospital?			
(d)(3)		3. Is the dept on the trial balance of the main hospital?			
State Operations Manual § 2026A and CMS rulings not in manual form	<b>4. Building/Space Integration (Provide detailed information for each 'Yes' answer in the Notes section)</b>	1. Is the entrance to the dept shared with any other dept/clinic/service?			
		2. Does the dept share waiting room space with any other dept/clinic/service?			
		3. Does the dept share office or front desk space with any other dept/clinic/service at any time day or night? If yes, provide detailed information in notes.			
		4. Does the dept share staff with any other dept, including registration staff?			

(d)(4)	<b>5. Public Awareness / How the Dept is Held Out to the Public as a Dept of the Main Hospital</b>	1. Does the dept signage indicate the name of the hospital?			
(d)(4)		2. Take a photo of the clinic sign(s), including sign on outside of building, sign on door, etc.			
(d)(4)		3. Do the dept registration documents reference the name of the hospital?			
(d)(4)		4. Locate the department/location on the internet (external organizational website). document the naming and description information provided.			
(d)(4)		5. If you were a patient, would it be obvious to you that this location is part of the main hospital?			

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