

20. Completed "Disclosure of Ownership and Control Interest Statement" (Form HCFA-1513).
21. A list of Medicare residents who requested "demand bills" in the last 6 months.
22. Completed Resident Account Questionnaire (Form furnished by the survey team).
23. List of employees hired since past survey with date of employment and position.
24. Policy and procedure for KBI checks.
25. Policy and Procedure manual(s) for reference as needed.
26. Emergency water plan.
27. CLIA waiver.
28. Improvement process/work done on any QI triggered areas.



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