

# Initial CCW Matrix of Required Provider Policies and Documentation by Service



	Adult Day Services	Assisted Living Facility	Assistive Technology	Case Management Services	Companion Services	Environmental modifications	Homemaker	Home Delivered Meals	Home Health Aide	Non-Emergency Transportation	PERS (Personal Emergency Response System)	Personal Support Services	Respite Services	Skilled Nursing Services
<b>Background Screenings</b>														
<a href="#">Annual OIG List of Excluded Individuals/Entities</a> <i>(Monthly Checks for Principals)</i>	•	•	•	•	•	•	•	•	•	•	•	•	•	•
<a href="#">WY Department of Family Services, Central Registry Check</a>	•	•		•	•		•		•			•	•	•
National Criminal Background Screening based on Name & Social Security Number	•	•		•	•		•		•			•	•	•
<a href="#">US Department of Justice, National Sex Offender Website</a>	•	•		•	•		•		•			•	•	•
Qualifications <i>(Transcripts &amp; Resume)</i>				•										
<b>Professional Licenses &amp; Certificates</b>														
<a href="#">Wyoming Secretary of State Certificate of Good Standing</a>			<i>Assistive Technology Vendor &amp; Case Management Agency Only</i>	<i>Agency Only</i>		•				<i>Independent Carrier Only</i>	•			
Applicable building, electrical, plumbing, or contractor's license, as required by local and state regulations						•								
Authorized Dealer Demonstration <i>(FCC, UL, or other authority certificate)</i>			•								•			
Assisted Living Facility License <i>W.S. 35-2-901(a)(xxii)</i>		•											•	
Home Health Agency Facility License - <i>W.S. 35-2-901(a)(xxiii)</i>									•			•	•	•
Adult Day License	•													

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Nursing Facility License <i>W.S. 35-2-901(a)(xvi)</i>													•	
WY Department of Agriculture Agreement - CCW Appendix C - 3 <i>(Provider Qualifications)</i>								•						
Wyoming DOT Motor Carriers Agreement <i>W.S. 31-18-101(ii)</i>										•				
Wyoming Home Service Program, Title III-B								•		•				
<b>Policies &amp; Procedures</b>														
Incident Reporting <i>CCW Appendix G-1-b</i>	•	•		•	•	•	•		•	•		•	•	•
Internal Complaints Policy	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Community Access Policy		•												
Participant Rights Policy	•	•	<i>Case Management Agency &amp; Independent Provider Only</i>	•	•		•	•	•	•		•	•	•
Restraints Policy	•	•		•	•		•		•	•		•	•	•
Visitors Policy	•	•												
<b>Other Items</b>														
Residential Lease <i>42 CFR 441.301(c)(4)(vi)(A)</i>		•												