## **COTTONWOOD CDDO**

## Attachment 3 Documentation Requirements for Affiliation

Revised: 12/29/2023

Below is a listing of required documentation for Affiliates of Cottonwood, Inc. CDDO. (To be provided as indicated and updated by Affiliate not less frequently than annually and within 30 days of any material change.)

| Service Type  | Documentation Required   | Submission<br>Timeline   |
|---|--|--|
| Day, Residential, TCM,<br>Specialized Medical<br>Care   | Copies of applicable licenses for Douglas/Jefferson Counties   | Prior to Affiliation   |
| Day, Residential, PCS   | Certificate of HCBS Final Rule Compliance  | Prior to Affiliation   |
| All Services  | Certificate of Corporation in good standing with the Kansas Secretary of State   | Prior to Affiliation   |
| All Services  | Signed Affiliation Agreement including attachments 1, 2, 3   | Prior to Affiliation   |
| All Services  | Business Plan (including an executive summary, market analysis, company description, organization and management, services provided, capacity methodology, statement of your designated Fiscal Year and financial projections)   | Prior to Affiliation   |
| All Services  | Provider's organizational chart (TCM services should be independent from direct service provision and its supervision)   | Prior to Affiliation and annually thereafter                                       |
| Not for Profit organizations only   | By-Laws of the Governing Board and list of current board members   | Prior to Affiliation<br>and annually<br>thereafter for list<br>of Board<br>Members |
| Day, Residential, TCM,<br>Specialized Medical<br>Care, & Agency<br>Directed Personal Care<br>Services | Job descriptions for direct support staff, Targeted Case Manager, RN, and LPN  | Prior to Affiliation   |
| TCM   | Documentation of completed TCM assessment through KDADS  | Prior to Affiliation   |
| All Services  | Copy of consumer service agreement   | Prior to Affiliation   |
| All Services  | Three letters of reference / good standing (if currently affiliated with another CDDO, one of the letters must be from that CDDO stating you are an affiliated provider in good standing)  | Prior to Affiliation   |
| All Services  | Policies and procedures pertaining to compliance with the following Article 63 Regulations - 30-63-22. Individual Rights and Responsibilities 30-63-26 Staffing; Abilities; Staff Health & Training (except FMS) 30-63-28 Abuse; Neglect; Exploitation 30-63-29 Records  | Prior to Affiliation   |
| Day, Residential, TCM   | Policies and procedures pertaining to compliance with the following Article 63 Regulations - 30-63-21. Person-Centered Support Planning; Implementation 30-63-23. Medications; Restrictive Interventions; Behavioral Management Committee 30-63-24. Individual Health – (except TCM) 30-63-25. Nutrition Assistance – (except TCM) 30-63-27 Emergency Preparedness 30-63-30 Physical Facilities – (except TCM) 30-63-32 Case Management – (except Day & Residential) | Prior to Affiliation   |

| Day, Residential, &<br>Specialized Medical<br>Care | Policy and procedure on medication administration for conformance with KSA 65-1124 The Nurse Practice Act  | Prior to Affiliation                               |
|--|--|--|
| All Services                                       | Policy and procedure regarding the consumer grievance process for your agency, including access to the CDDO dispute resolution process   | Prior to Affiliation                               |
| All Services                                       | Policy and procedure regarding employee background checks in compliance with KDADS policy on background checks   | Prior to Affiliation                               |
| All Services                                       | Policy on continuity of service provision in event of emergency or natural disaster  | Prior to Affiliation                               |
| All Services                                       | Certificate of Insurance to include worker's compensation and liability which indicates Cottonwood Inc. as additional insured  | Prior to Affiliation<br>and annually<br>thereafter |
|  | <ol> <li>Worker's Compensation insurance as required by Kansas law with the following minimums: \$500,000 each accident/each employee, and \$500,000 each employee, occupational disease insurance.</li> <li>Automobile Liability insurance with following minimums: \$500,000/\$1,000,000 bodily injury limits, and \$1,000,000 property damage limits, or combined single limit of \$1,000,000.</li> <li>Comprehensive General Liability insurance with following minimums: \$1,000,000/\$2,000,000 bodily injury limits, and \$1,000,000 property damage limits, or combined single limit of \$2,000,000</li> <li>Professional Liability insurance (if not covered under General Liability) with the following minimums: \$1,000,000</li> </ol>   |  |
| All Services                                       | Independent Audit; Any CSP which receives \$750,000 in Federal funds must submit an independent auditor's report annually. Contractors receiving less than \$750,000 annually are required to submit: a Statement of Financial Position (Balance Sheet), Statement of Activities (Profit & Loss Statement) and a Statement of Cash Flows. Audits and/or financial statements must be submitted no later than nine (9) months following its respective fiscal year end. The independent auditor must:  Report any findings where contract funds were spent for non-allowable costs, in accordance with Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).  Monitor the requirements listed above and be completed within nine months from the close of the CSP's fiscal year. The audit must include any management letters provided by the independent auditor.  Mail or e-mail one (1) copy of the independent audit to the CDDO. | Prior to Affiliation<br>and annually<br>thereafter |