

**Washington State Health Care Authority (HCA)**  
**UW School of Dentistry**  
**Medicaid Administration Claiming**  
**(MAC)**  
**Audit File Guide**

***UW School of Dentistry***

***Year:***

***Quarter:***

**UW School of Dentistry MAC Interpreter Service Interlocal or Interagency Agreement**

- Location of original signed UW School of Dentistry MAC Interpreter Services Interlocal or Interagency Agreement
- Copy of the UW School of Dentistry MAC Interpreter Services Interlocal or Interagency Agreement

**UW School of Dentistry MAC Program Manual**

- HCA Website Location of MAC Interpreter Services Program Manual
- Access to the HCA Website Location of MAC Interpreter Services Program Manual

**UW School of Dentistry MAC Interpreter Services Organization Chart**

- CEO/Administrator
- CFO and Business Manager
- Director over Interpreter Services
- MAC Interpreter Services Coordinator(s)
- MAC Interpreter Staff by Claiming Unit(s) if any

**UW School of Dentistry Interpreter Services Employee Documentation**

- Licenses and Interpreter Certification, Approval or Authorization Documents
- Program Administrative and Interpreter Staff List Documentation and Position Descriptions
- Salary and Benefit Information and Interpreter Service Logs, Service Hours, Other related Staff and Salary Information
- Signed Interpreter and Translator Professional Code of Conduct Forms
- Program Administrative and Interpreter Staff Background Check Documentation

**UW School of Dentistry MAC Interpreter Services Subcontractor Documentation**

- List of all Interpreter Services Subcontracts
- Location of all original signed Interpreter Services Subcontracts
- Copy of all Interpreter Services Subcontracts and sub-Subcontracts
- Licenses and Interpreter Certification, Approval or Authorization Documents
- Signed Interpreter and Translator Professional Code of Conduct Forms for all Subcontractor Interpreters providing services to patients or their official representatives
- Subcontractor Administrative and Interpreter Staff Background Check Documentation

**UW School of Dentistry Interpreter Services Medicaid Eligibility Rate (MER)**

- Quarterly MER Certification(s), Calculation Detail files and Back-up Information

**Copies: UW School of Dentistry MAC Interpreter Services Billing Documentation**

- Copies of signed Quarterly A-19 Invoice Voucher, Cost Summary for, and other Billing Workbook Worksheets for each quarter of the State Fiscal Year

- Subcontractor Invoices for services provided under the MAC Interpreter Services contract and Related Invoice Billing and Cost Detail Information/Reports
- Signed Annual Local Match Certification
- Detail of Claimed Costs
- Indirect Cost Rate Certification, Methodology Description and Back-up Documentation
- Certified Public Expenditure Funding Sources, Descriptions and Back-up Documentation

### **Other Contracts/Agreements**

- Consultant and/or Billing Agents Contract(s)
- Any other Interpreter Services related contracts

### **MAC Training Documents**

*For each Training Event:*

- MAC Training Rosters with date, location, names and signatures of participants, and names of trainers
- Copies of Training Materials used—includes consultant and PH-PHD materials
- Subcontractor MAC Training Documentation

### **MAC Monitoring Documents**

MAC Program Monitoring Reports

### **MAC Audit Reports**

State and/or Federal Audit Reports or Reviews that include findings for the MAC Interpreter Services program and any related documents and Corrective Action Plans.

**This UW School of Dentistry  
Medicaid Administrative Claiming  
Audit File Binder Organizes  
Documents and Materials for  
State Fiscal Year (SFY) XXXX**

# **Medicaid Administrative Claiming Interpreter Services Interlocal or Interagency Agreement**

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# **Medicaid Administrative Claiming Interpreter Services Program Manual**

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# **Interpreter Services Organization Chart**

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# **Employee Documentation**

**State License,  
Certification, Approval,  
Authorization Documents  
For Each Interpreter**

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# **Employee Documentation**

## **Staff Interpreter List and Position Descriptions**

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# **Employee Documentation**

**Interpreters' Salary and  
Benefit Information,  
Interpreter Services Logs  
and Hours, and Other Staff  
and Salary Information**

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# **Employee Documentation**

## **Signed Language Interpreter and Translator Professional Code of Conduct Forms**

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# **Employee Documentation**

## **Program Administrative and Interpreter Staff Background Check Information**

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# **Subcontractor Documentation**

## **List of Interpreter Services Subcontractors**

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# **Subcontractor Documentation**

**Location of all Original  
Signed Interpreter  
Services Subcontracts and  
Subcontractor  
Subcontracts with other  
Entities**

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# **Subcontractor Documentation**

**Copy of all Signed  
Interpreter Services  
Subcontracts and  
Subcontractor  
Subcontracts with other  
Entities**

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# **Subcontractor Documentation**

**For all Subcontractors:  
Licenses and Interpreter  
Staff Language  
Certification, Approval,  
and/or Authorization  
Documentation**

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# **Subcontractor Documentation**

**For all Subcontractors and  
their Interpreter Staff:  
Signed Interpreter and  
Translator Professional  
Code of Conduct Forms**

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**Contractor or  
Subcontractor  
Documentation**

**Contractor or  
Subcontractor Contracts  
with the WA State General  
Administration re:  
Telephone Interpreting  
Services**

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# **Subcontractor Documentation**

**For all Subcontractors and  
their Administrative and  
Interpreter Staff:  
Background Check  
Documentation**

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# **MER Files**

**Quarterly MER  
Certifications, Calculation  
Detail Files and Back-up  
Documentation and  
Information**

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# **Contractor Invoice Documentation**

**Copy of Signed Cost  
Summary, A19 Invoice  
and Other Billing  
Workbook Worksheets for  
each Claiming Quarter**

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# **Contractor Invoice Documentation**

## **Subcontractor Invoices and Related Invoice Billing and Cost Detail Information, Documentation and Reports**

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# **Contractor Invoice Documentation**

**Signed Certified Public  
Expenditure (CPE) Local  
Match Certification for the  
Quarter Billed**

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# **Contractor Invoice Documentation**

## **Detail of Claimed Costs**

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# **Contractor Invoice Documentation**

**Indirect Cost Rate  
Certification, Detail of the  
Calculation Process,  
Methodology Description  
and Back-up  
Documentation**

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# **Contractor Invoice Documentation**

# **Certified Public Expenditure (CPE) Local Match Funding Sources, Descriptions and Back-up Documentation**

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# **Other Contracts or Agreements**

# **Consultant or Billing Agent Contracts or Agreements**

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# **Other Contracts or Agreements**

## **Related to Interpreter Services**

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**Contractor  
Medicaid Administrative  
Claiming  
Training Rosters**

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**Contractor  
Medicaid Administrative  
Claiming  
Training Materials**

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# **Subcontractor Medicaid Administrative Claiming Training Rosters**

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# **Subcontractor Medicaid Administrative Claiming Training Materials**

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# **Medicaid Administrative Claiming Monitoring Reports**

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**Medicaid Administrative  
Claiming  
State-Federal Reviews,  
Audits, Corrective Action  
Plans**

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