



MACPro Health Homes State Plan Amendment Introductory State User Guide

Reflects MACPro Environment as of 05/02/2016

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Welcome to the Introductory State User Guide for MACPro Health Homes State Plan Amendment

This Introductory State User Guide for MACPro State Users describes the steps state users will follow to create, review, and submit a Health Homes State Plan Amendment (SPA). Please contact the Help Desk if you have questions outside the scope of this document.

Assistance with the MACPro system is available through the MACPro Help Desk, Monday through Friday, 8:00 am-6:00 pm Eastern Standard Time. For questions regarding the *use of MACPro*, contact the MACPro Help Desk at MACPro_HelpDesk@cms.hhs.gov or call 301-547-4688.

What is MACPro?

MACPro is a web-based system for the submission, review, disposition, and management support of Medicaid and CHIP initiatives, Quality Measures Reporting, State Plan Amendments (SPA), Waivers, Demonstrations and Advance Planning Documents. MACPro replaces CARTS for Adult and Child Core Set reporting and is the new system for Health Homes Core Set reporting. System for reporting under the “Adult Medicaid Quality: Improving Maternal and Infant Health Outcomes in Medicaid and CHIP” grant.

MACPro is being implemented to improve the state reporting and federal review processes, federal program management, and transparency. It also supports data-driven decision making for Medicaid and CHIP programs through online access to data and information.

Overview - Create, Review, and Submit Health Homes SPA Workflow

High level steps for creating, reviewing, and submitting a Health Homes SPA submission package are listed below.

- **State System Administrator** creates a State Profile at initial setup. After this is complete, the profile may be updated to reflect changes.
- **State Editor (SE)** builds a submission package and sends it to the State Point of Contact (SPOC) for review.
- **State Point of Contact (SPOC)** reviews, edits, and submits submission package to the State Director.
- **State Director (SDIR)** conducts final review, certifies submission package, and returns package to State Point of Contact for submission to CMS.

**** Please note: This is specific to MACPro Health Home SPA users. Please refer to the Quality Measures training and support materials to reference role functionality for Quality Measure authorities.*

**** Please note: Usernames seen in images throughout this document are roles used only for training purposes. The name found in the top right hand corner of your MACPro account will appear as your first and last name, not as your MACPro role.*

Browser information for MACPro

Browser	Comments
Microsoft Internet Explorer 11, 10, 9, and 8	Microsoft Internet Explorer 10, 9, and 8 are depreciated and will not be supported in a future release of MACPro. Microsoft Internet Explorer 11 is supported on Windows 8.x tablet.
Mozilla Firefox	Mozilla Firefox updates automatically. MACPro supports the most recent stable version of Mozilla Firefox.
Google Chrome	Google Chrome updates automatically. MACPro supports the most recent stable version of Google Chrome.
Apple Safari	Safari is only supported on Mac operating systems.

Official Submissions vs. Draft Submissions

Users submit official submissions or draft submissions, described below.

Official Submissions

CMS suggests initially submitting simple program amendments or new programs that are similar to existing programs as official submission packages.

- Official submissions start the 90 day policy clock upon submission to CMS for review and disposition.
- CMS may review and view package.
- CMS may approve, disapprove, request additional information (RAI), or submit a clarification for the official submission package.
- The State may allow CMS to view the submission package informally prior to official submission.

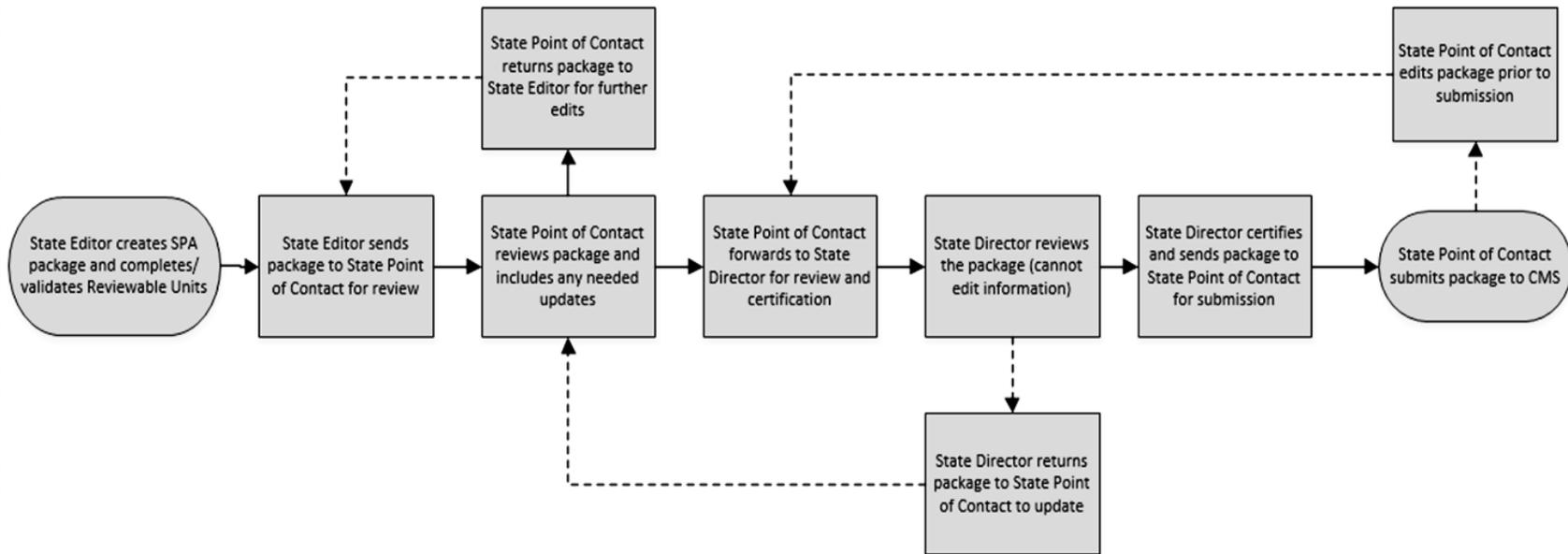
Draft Submissions

CMS suggests submitting complex programs or new Health Home models and new targeted amendments as draft submission packages.

- Drafts submitted to CMS do not start the 90 Day Policy Clock.
- States may allow CMS to view the submission package informally prior to official submission
- CMS may review, but cannot approve, disapprove, implement an RAI, or request clarification for the draft submission package.
- When CMS returns the package to the State they may provide feedback in the correspondence log or offline.
- If the state chooses not to edit the returned draft package, it may be closed and converted to an official package for submission to CMS starting the 90 Day Policy Clock.
- If the state chooses to edit the returned submission package, the state must re-submit the draft to CMS as a draft submission package for re-review prior to closing the draft submission and converting to an official submission package.
- Closed draft submissions cannot be edited.
- Official submissions that were converted from drafts cannot be edited with the exception of the SPA ID and proposed effective date prior to submission to CMS

Points in the submission package process that differ between Draft and Official are indicated by red text throughout this guide.

Figure 1: High Level Workflow- Official SPA Submission State Workflow



- First, the State Editor creates the SPA submission package and completes/validates the reviewable units.
- Then, the State Editor sends the package to the State Point of Contact or SPOC for review.
- The State Point of Contact reviews the package and includes any needed updates.
- The State Point of Contact may return the package to the state editor for further edits, if needed.
- If not, the State Point of Contact forwards to the State Director for review and certification.
- The State Director then reviews the package, but they cannot edit the information. If edits are needed, the State Director may return the package to the State Point of Contact.
- Assuming the State Director certifies, the package is sent to the State Point of Contact for submission to CMS.
- The State Point of Contact then can submit the package; however, if they notice changes are needed, they may select to edit the package and resend it for certification by the State Director.

Figure 2: MACPro SPA State User Roles

Role	Actions
State Editor (SE)	<ul style="list-style-type: none"> • Responsible for creating SPA submission packages
State Point of Contact (SPOC)	<ul style="list-style-type: none"> • Responsible for reviewing and submitting the SPA submission package to CMS • Responds to Requests for Additional Information (RAIs) from CMS • Documents and reviews Correspondence Log
State Director (State Director)	<ul style="list-style-type: none"> • Reviews and certifies SPA submission packages
State System Administrator (SSA)	<ul style="list-style-type: none"> • Creates/maintains State Profile

**** Please note: This is specific to MACPro Health Home SPA users. Please refer to the Quality Measures training and support materials to reference role functionality for Quality Measure authorities.*

Figure 3: Official SPA Submission: CMS Approval Workflow

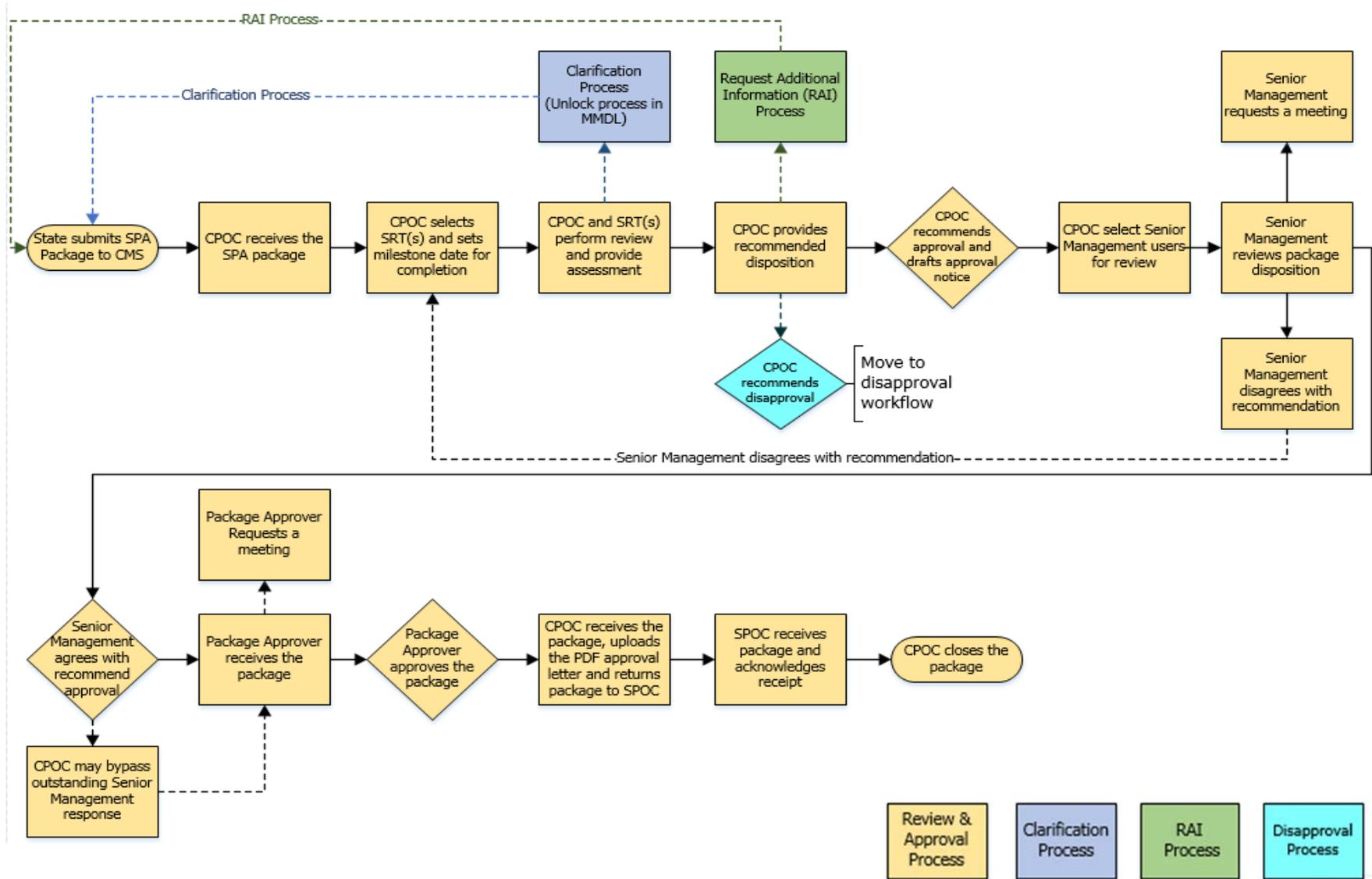


Figure 4: Clarification Process

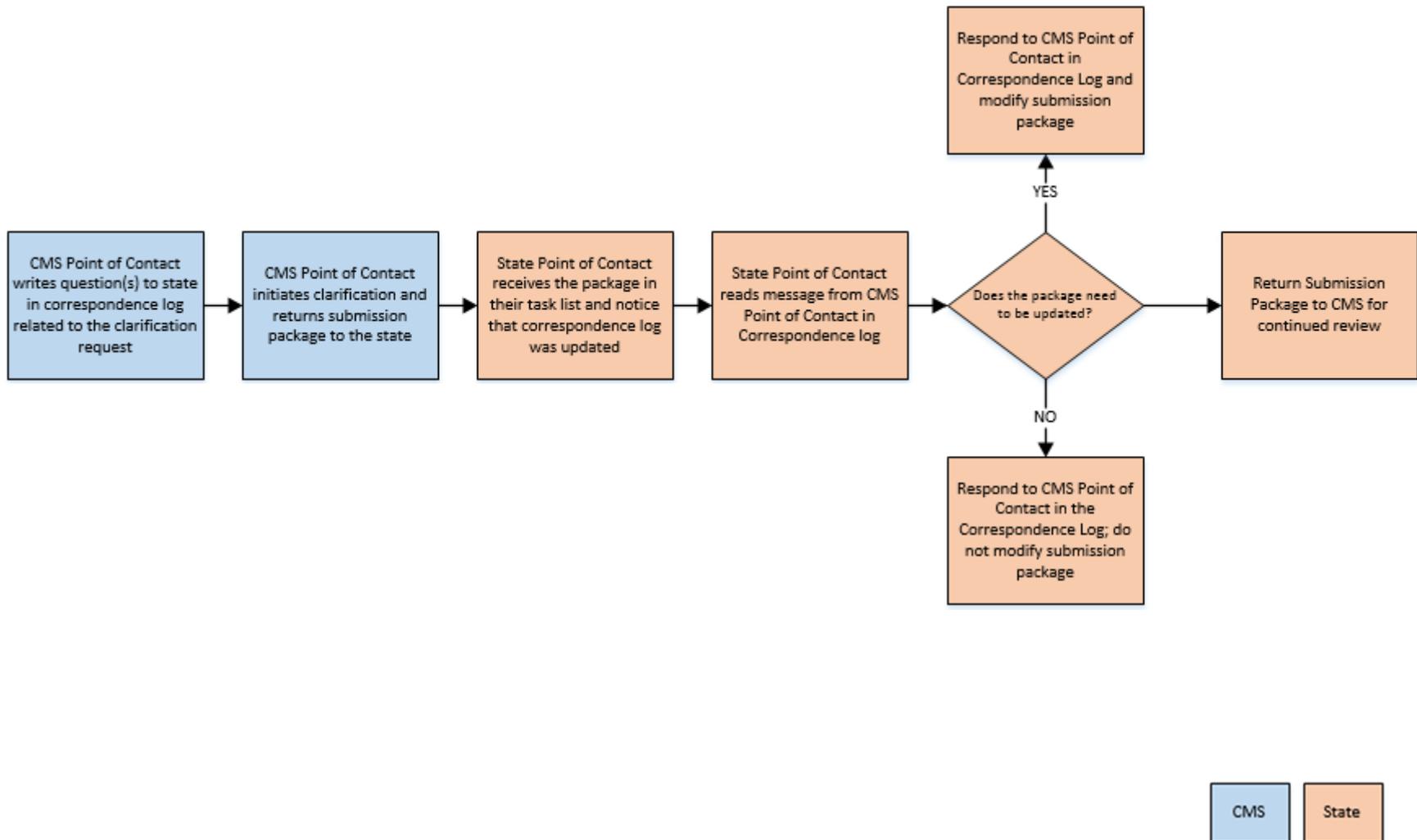
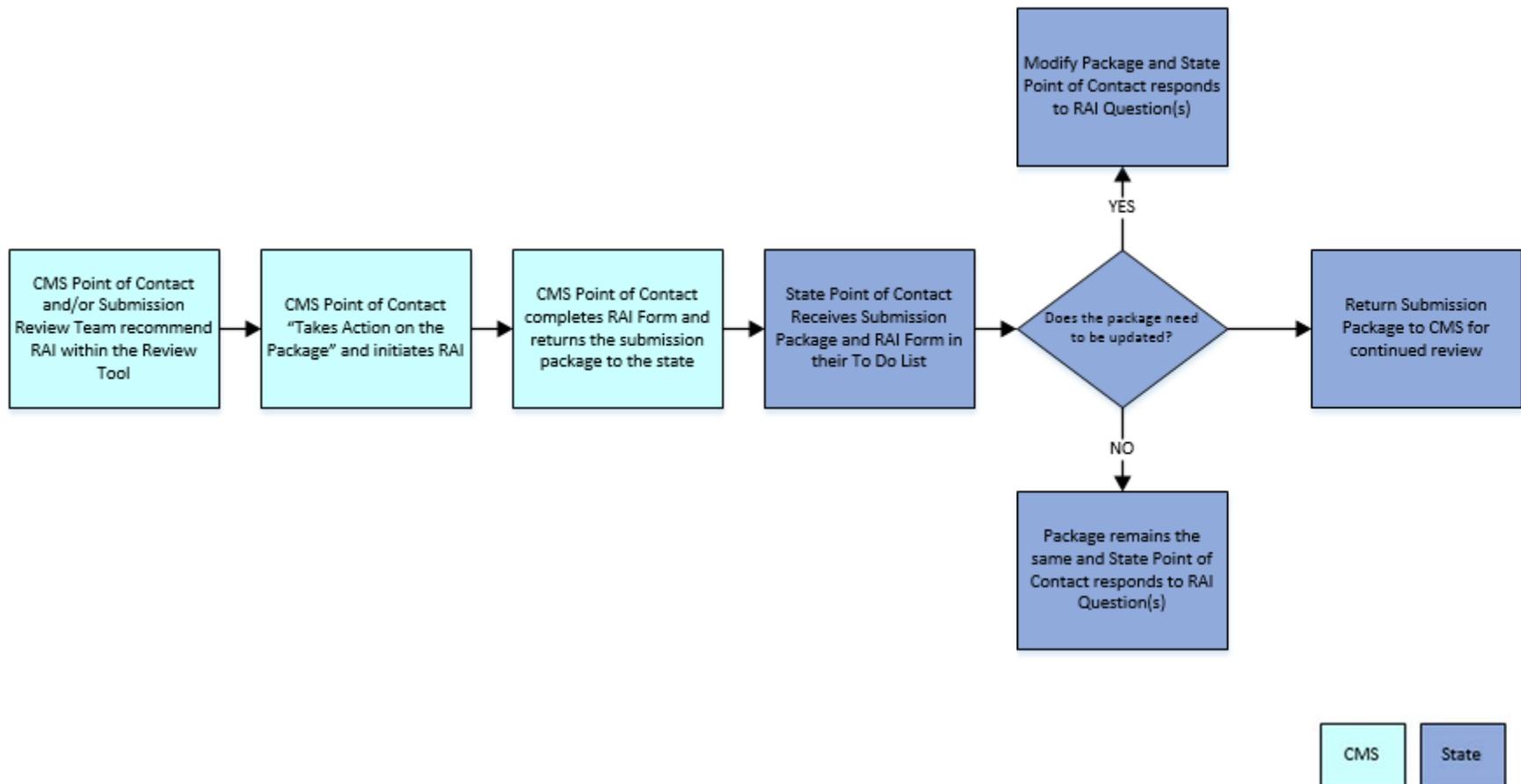
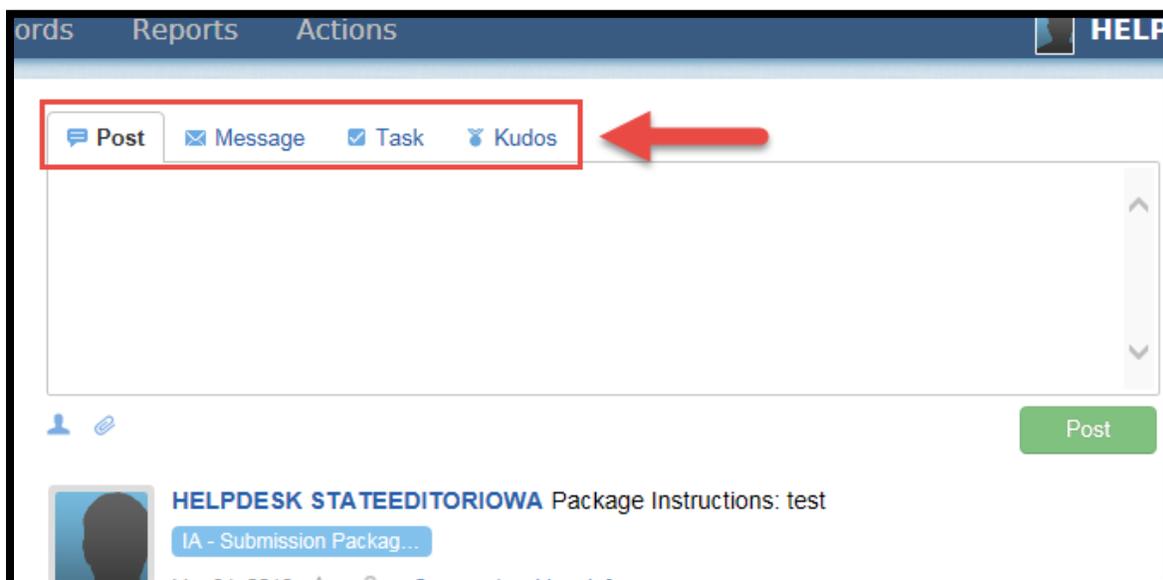
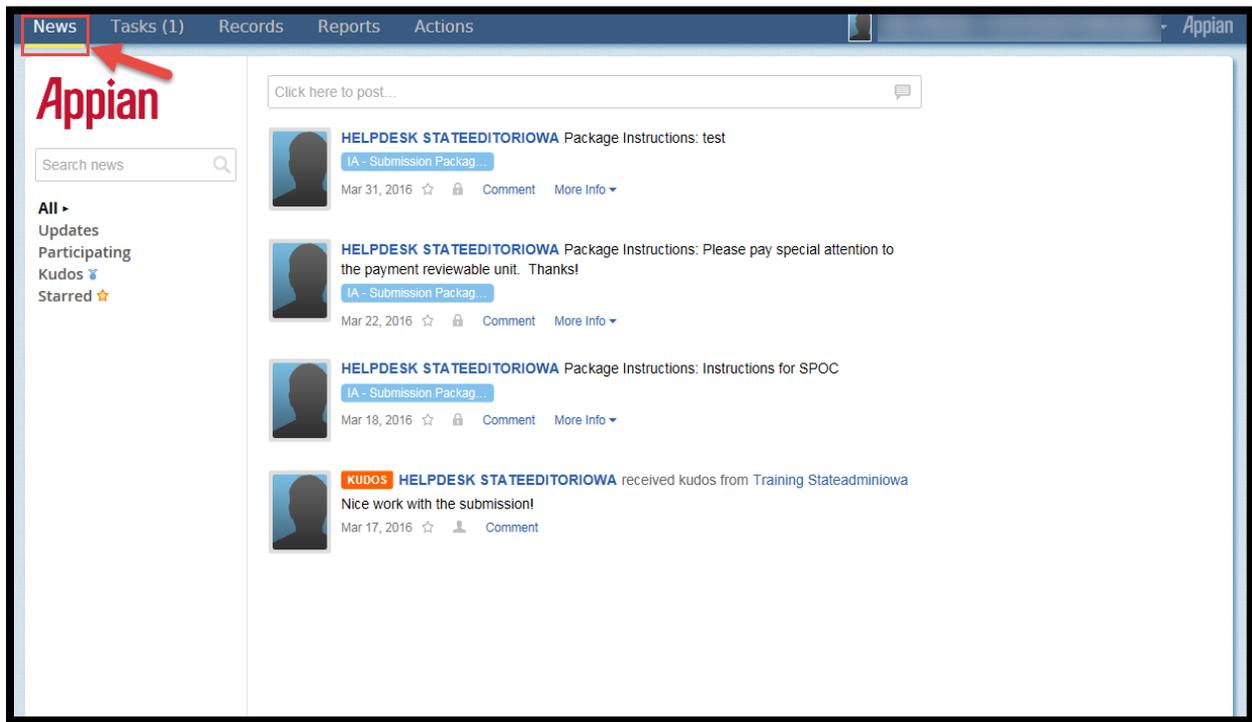


Figure 5: RAI Process

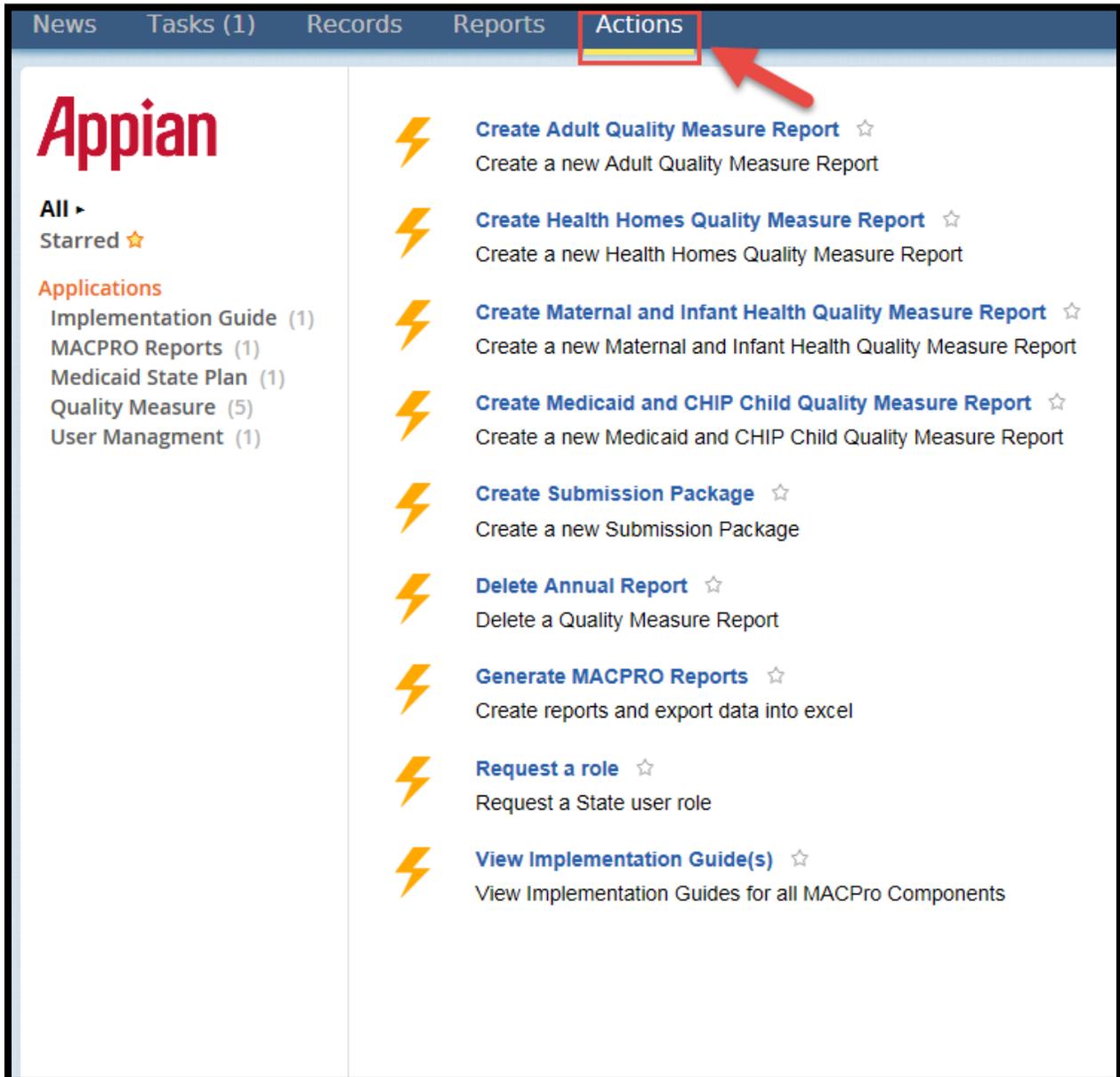


MACPro Home Page

1. When you first log in to MACPro you are taken to your **News**page. The News page is a location that provides general status updates on packages and can be used for informal communication about packages between different MACPro users. This page operates similarly to a social media platform. You can write a post for your team, send a message to an individual, send a task to an individual, or recognize someone by providing them "kudos" from the text box located at the top of the page. Additionally, activities related to packages you are working with or are following are listed for your reference.



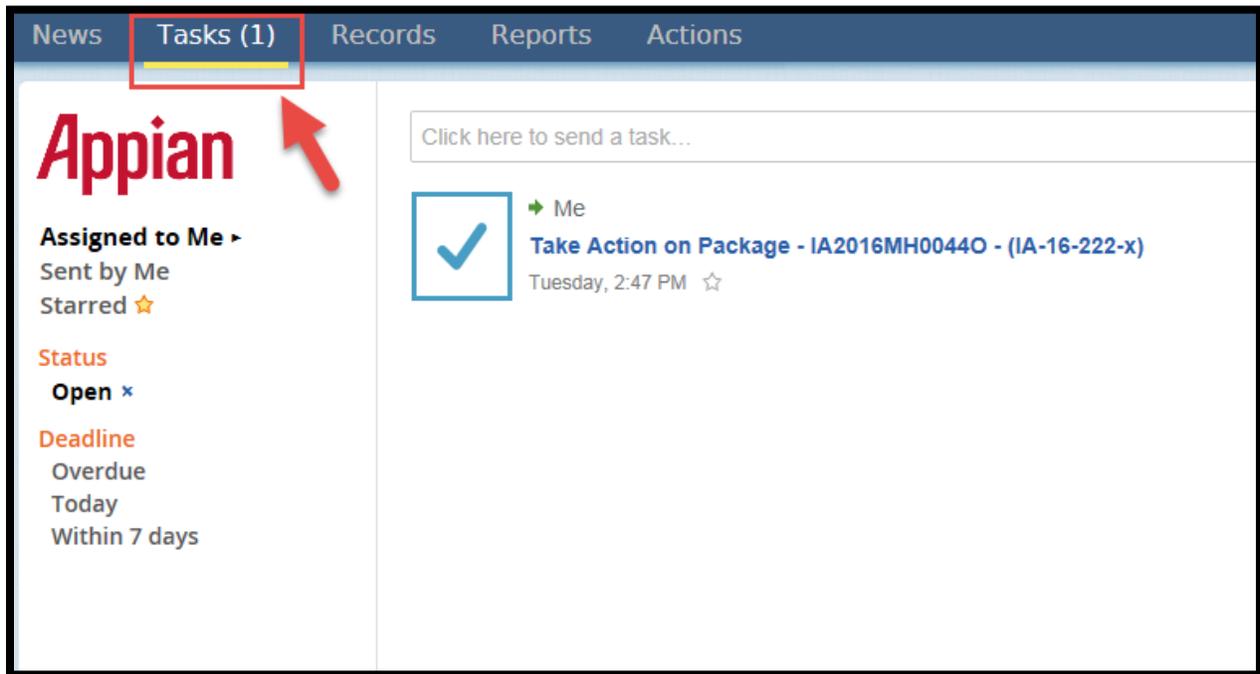
2. The **Actions** tab is for initiating new actions such as creating a submission package.



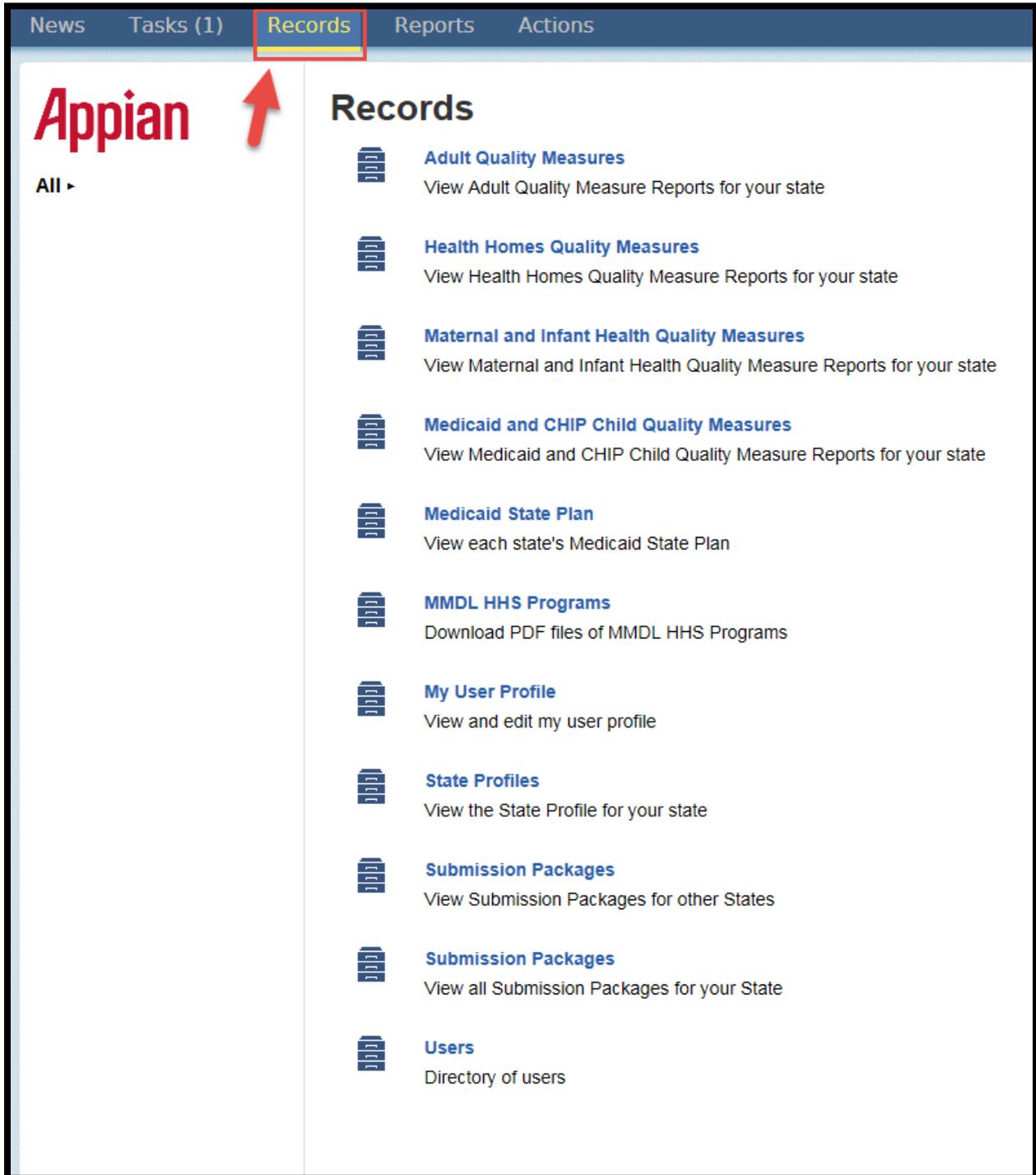
The screenshot displays the Appian user interface. At the top, a dark blue navigation bar contains the following tabs: News, Tasks (1), Records, Reports, and **Actions**. The 'Actions' tab is highlighted with a red box and a red arrow pointing to it from the right. Below the navigation bar, the left sidebar features the Appian logo, followed by 'All >' and 'Starred ☆'. Under the 'Applications' section, there are links for 'Implementation Guide (1)', 'MACPRO Reports (1)', 'Medicaid State Plan (1)', 'Quality Measure (5)', and 'User Managment (1)'. The main content area on the right lists ten actions, each preceded by a yellow lightning bolt icon and followed by a star icon:

- Create Adult Quality Measure Report** ☆
Create a new Adult Quality Measure Report
- Create Health Homes Quality Measure Report** ☆
Create a new Health Homes Quality Measure Report
- Create Maternal and Infant Health Quality Measure Report** ☆
Create a new Maternal and Infant Health Quality Measure Report
- Create Medicaid and CHIP Child Quality Measure Report** ☆
Create a new Medicaid and CHIP Child Quality Measure Report
- Create Submission Package** ☆
Create a new Submission Package
- Delete Annual Report** ☆
Delete a Quality Measure Report
- Generate MACPRO Reports** ☆
Create reports and export data into excel
- Request a role** ☆
Request a State user role
- View Implementation Guide(s)** ☆
View Implementation Guides for all MACPro Components

3. The **Tasks** tab is where specific actions as part of the workflow will populate for you to work on. Tasks are activities that are needed to keep the package moving through the workflow, such as reviewing or responding to an RAI request.



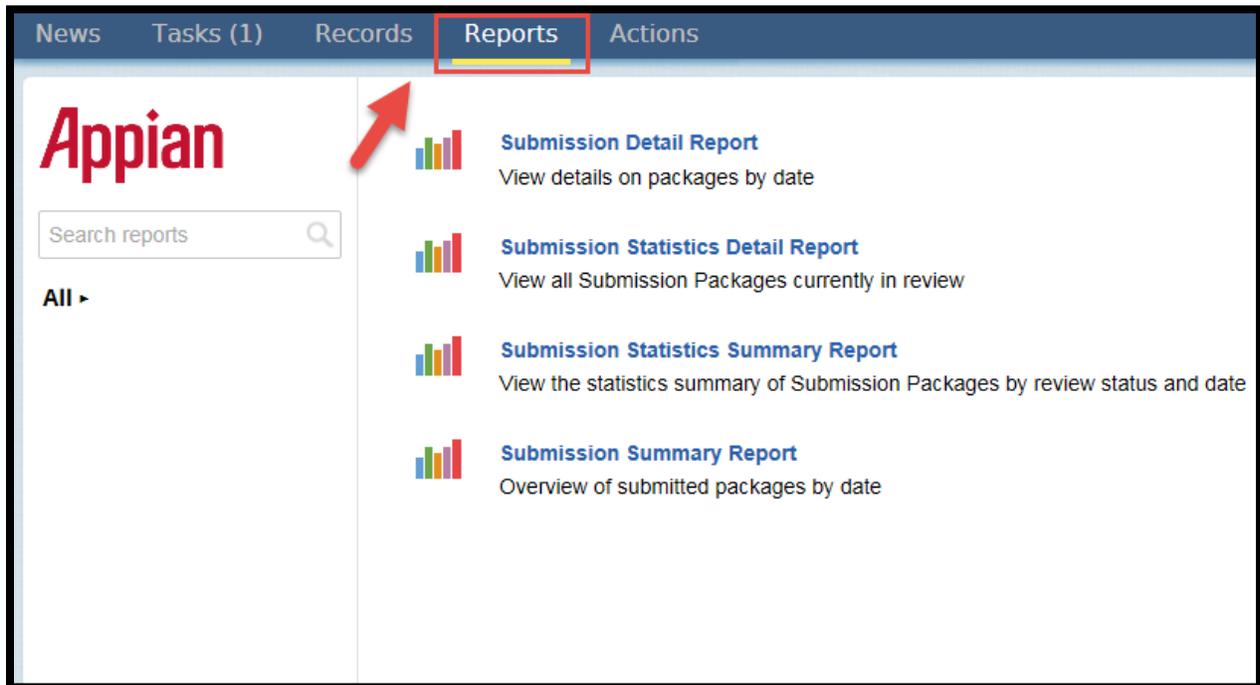
4. The **Records** tab is where you can go to reference submission packages that are complete or in progress.



The screenshot displays the Appian user interface. At the top, a navigation bar contains the following tabs: News, Tasks (1), Records, Reports, and Actions. The 'Records' tab is highlighted with a red box and a red arrow pointing to it. Below the navigation bar, the 'Appian' logo is visible on the left, followed by 'All >'. The main content area is titled 'Records' and lists several categories, each with a folder icon and a description:

- Adult Quality Measures**: View Adult Quality Measure Reports for your state
- Health Homes Quality Measures**: View Health Homes Quality Measure Reports for your state
- Maternal and Infant Health Quality Measures**: View Maternal and Infant Health Quality Measure Reports for your state
- Medicaid and CHIP Child Quality Measures**: View Medicaid and CHIP Child Quality Measure Reports for your state
- Medicaid State Plan**: View each state's Medicaid State Plan
- MMDL HHS Programs**: Download PDF files of MMDL HHS Programs
- My User Profile**: View and edit my user profile
- State Profiles**: View the State Profile for your state
- Submission Packages**: View Submission Packages for other States
- Submission Packages**: View all Submission Packages for your State
- Users**: Directory of users

5. The **Reports** tab can be used for tracking different activities within MACPro. We will explore each tab in further detail throughout this training.



Step 1: State System Administrator - Create State Profile

Please Note: The State System Administrator will only need to create a state profile once.

1.1 State System Administrator logs into MACPro.

1.2 Select the "Actions" tab from the upper tool bar. Then select "Create State Profile".



1.3 Enter in the information for your state.

1.4 Then scroll to the bottom and select the green button labeled "Save State Profile".



1.5 You may at any time update your State's profile information. To do so, proceed to the "Records" tab. And then select "State Profiles".

The screenshot shows the CMS.gov interface. At the top, there is a navigation bar with tabs for "News", "Tasks (1)", "Records", "Reports", and "Actions". The "Records" tab is highlighted with a red box. Below the navigation bar, the CMS.gov logo and "Centers for Medicare & Medicaid Services" are visible on the left. The main content area is titled "Records" and lists several categories, each with a folder icon and a description. The "State Profiles" category is highlighted with a red box, and a red arrow points to it from the right. The categories listed are: Adult Quality Measures, CHIPRA Quality Measures, Health Homes Quality Measures, MACPro State Users, Medicaid State Plan, State Profiles, Submission Packages (for your State), Submission Packages (for other States), and Users.

News Tasks (1) **Records** Reports Actions

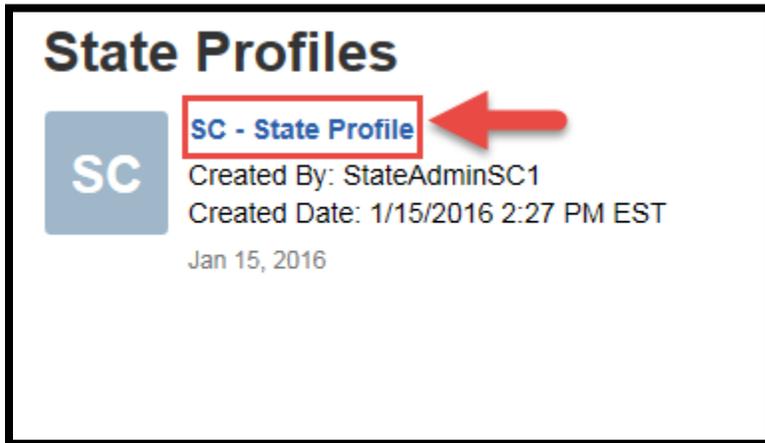
CMS.gov
Centers for Medicare & Medicaid Services

All ▾

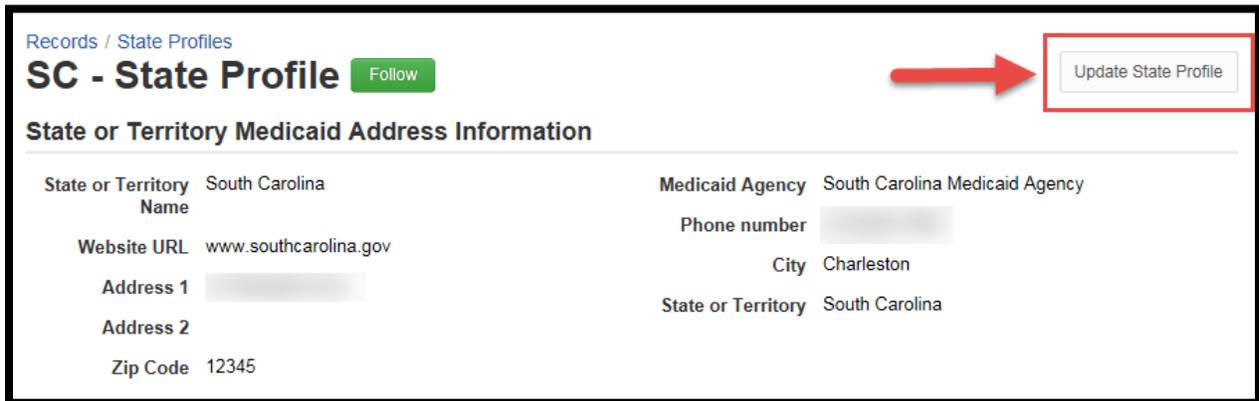
Records

-  **Adult Quality Measures**
View Adult Quality Measure Reports for your state
-  **CHIPRA Quality Measures**
View CHIPRA Quality Measure Reports for your state
-  **Health Homes Quality Measures**
View Health Homes Quality Measure Reports for your state
-  **MACPro State Users**
MACPro User Profiles - State Users
-  **Medicaid State Plan**
View each state's Medicaid State Plan
-  **State Profiles** ←
View the State Profile for your state
-  **Submission Packages**
View all Submission Packages for your State
-  **Submission Packages**
View Submission Packages for other States
-  **Users**
Directory of users

1.6 Next select your state profile by clicking on the blue link.



1.7 Select the "Update State Profile" Button in the upper right hand corner.



1.8 After selecting this button, you may proceed to enter information and then select "Save State Profile".

Step 2: State Editor - Create Submission Package and Complete Submission Reviewable Units

2.1 State Editor logs into MACPro.

2.2 Select the “Actions” tab from the upper tool bar. Then select “Create Submission Package”.

The screenshot displays the CMS.gov MACPro interface. At the top, a navigation bar contains tabs for News, Tasks (10), Records, Reports, and Actions. The 'Actions' tab is highlighted with a red box. On the left side, the CMS.gov logo and navigation menu are visible, including sections for 'All', 'Starred', and 'Applications'. The main content area lists several actions, each with a lightning bolt icon and a star icon. The 'Create Submission Package' action is highlighted with a red box, and a red arrow points to it from the right. The other actions listed are 'Create Adult Quality Measure Report', 'Create Health Homes Quality Measure Report', 'Create Medicaid and CHIP Child Quality Measure Report', 'Tick Clock by One Day', and 'View Implementation Guide(s)'.

Action	Description
Create Adult Quality Measure Report	Create a new Adult Quality Measure Report
Create Health Homes Quality Measure Report	Create a new Health Homes Quality Measure Report
Create Medicaid and CHIP Child Quality Measure Report	Create a new Medicaid and CHIP Child Quality Measure Report
Create Submission Package	Create a new Submission Package
Tick Clock by One Day	A testing tool used to move the system's internal clock forward by one day
View Implementation Guide(s)	View Implementation Guides for all MACPro Components

2.3 SUBMISSION - Summary: You will be directed to the “Submission-Summary” page. At the top of the page there is a timeline that indicates that you have “Not Started” this Reviewable Unit. Select the “View all Responses” button on the right side of the page to begin entering information.

Submission - Summary
 MEDICAID - - - -
 CMS-10434 OMB 0938-1188

Timeline: Not Started (highlighted), In Progress, Complete

Package Header

Package ID	N/A	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

View All Responses (button highlighted with a red box and arrow)

2.4 The State Information and Submission Component Sections are pre-filled based on what was populated into your State Profile and based on what is available to MACPro at this time.

State Information

State/Territory Name: South Carolina
 Medicaid Agency Name: South Carolina Medicaid Agency

Submission Component

State Plan Amendment
 Medicaid
 CHIP

2.5 Next, fill out information for the Submission Type Section, Key Contacts Section, and the SPA ID and Effective Date Section. The system automatically fills the submission type as “Draft Submission Package”, however you may switch your submission type to Official. **Please note: The SPA ID and Effective Date Section will only appear if you select “Official Submission Package” under the Submission Type Section. You must enter a Key Contact in order to fully complete this Reviewable Unit. An Official/Draft submission can be changed up until it is initially submitted to CMS. Once submitted, you may not change the submission type. If you submitted a draft, you will have to officially convert the draft.**

Submission Type +/-

Official Submission Package 
 Draft Submission Package

Yes
 No **Allow this official package to be viewable by other states? *** 

Key Contacts +/-

Name	Title	Phone Number	Email Address	
No items available				

[+ Add a Key Contact](#) 

SPA ID and Effective Date +/-

SPA ID* 

Note: SPA ID format must be SS-YY-NNN-x, with last letter(x) being optional to specific SPA types. SS - State, YY - Year and NNN - Sequence number for the current year.

Proposed Effective Date

Please complete Submission - Medicaid State Plan and then return to this section to enter the proposed effective dates for the reviewable units.

2.6 The next sections are the Executive Summary, Dependency Description Section and the Disaster-Related Submission Section. The Executive Summary and Disaster-Related Submission Sections are mandatory, while the Dependency Description Section is an optional section.

The Dependency Description section may be used in a situation when the SPA you are submitting has a connection to another SPA that is either also being submitted or has already been submitted. Indicating the connection in this section assists CMS in ensuring that both are reviewed together.

Executive Summary

+/-

Summary Description Including Goals and Objectives *

^
v

Character count: 0/4000

Dependency Description

+/-

Description of any dependencies between this submission package and any other submission package undergoing review

^
v

Character count: 0/4000

Disaster-Related Submission

+/-

This submission is related to a disaster *

Yes

No

2.7 The final sections are the Federal Budget Impact and Statute/Regulation Citation Section and the Governor’s Office Review Section. Please note: The “Federal Fiscal Year” Column in the Federal Budget Impact table will automatically populate the first cell in the “Second” row.

Federal Budget Impact and Statute/Regulation Citation +/-

Federal Budget Impact

	Federal Fiscal Year	Amount
First		
Second		

Federal Statute / Regulation Citation *

Character count: 0/255

Governor's Office Review +/-

No comment
 Comments received
 No response within 45 days
 Other

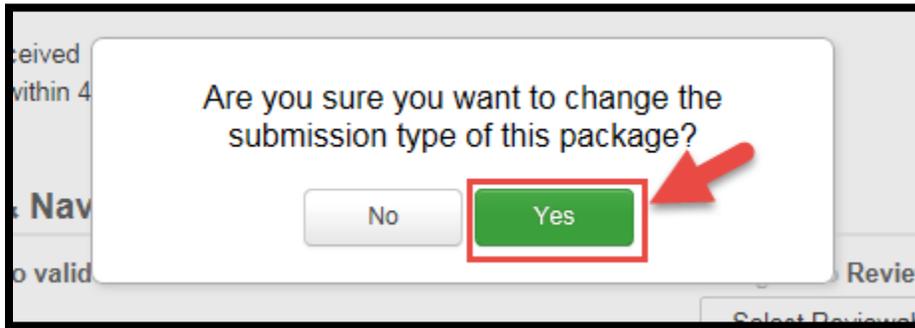
2.8 At this point be sure to save the reviewable unit using the “Save Reviewable Unit” button at the bottom of the screen.

Drafts and Official packages both can't be validated at this point. You have the ability to save, however you must come back to validate this unit after validating the Medicaid State Plan Reviewable Unit.

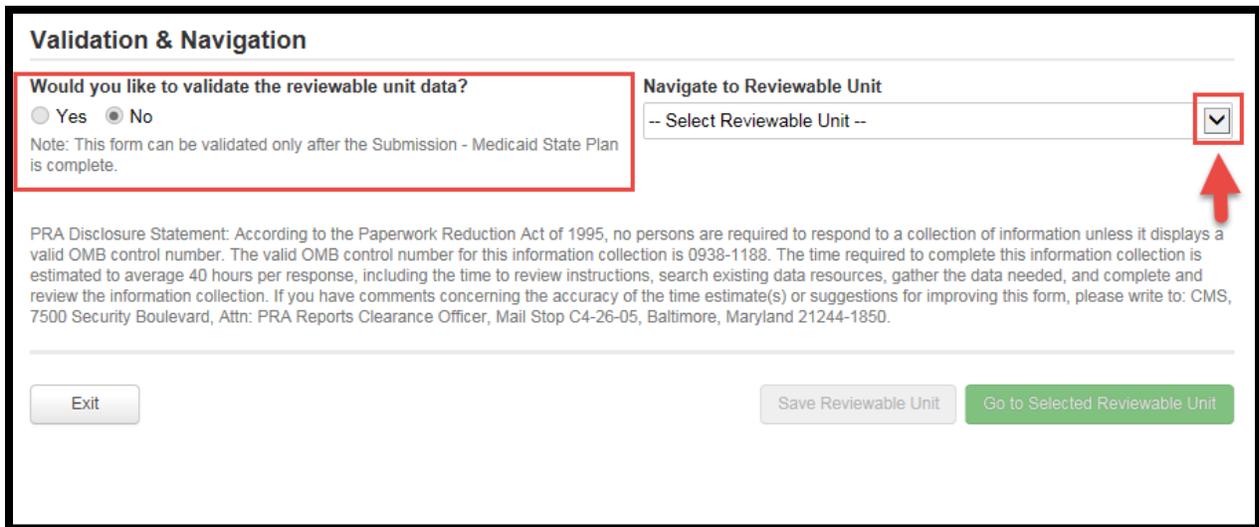
Save Reviewable Unit

Go to Selected Reviewable Unit

2.9 If you selected “Official Submission” as the submission type, upon saving the reviewable unit, you will receive a prompt. Select “Yes”. If you selected “Draft Submission” you will not receive this prompt.



2.10 You will not be able to validate this Reviewable Unit until you complete the Submission Medicaid-State Plan Reviewable Unit. As a reminder, all reviewable units must be in “Complete” status before submitting the package to the State Point of Contact. To move to the next unit (Submission-Medicaid State Plan), select the drop down menu under “Navigate to Reviewable Unit”.



Note about Validation: All reviewable units must be validated in order to move your submission package to the next stage. If there are incomplete fields or any information entered incorrectly, the system will not allow you validate. All validation errors will be pointed out by red script or red boxes. If you are unable to validate you must scroll back through the reviewable unit and check for the error.

2.11 Select "Submission-Medicaid State Plan" from the drop down menu under "Navigate to Reviewable Unit" and then select "Go to Select Reviewable Unit".

Navigate to Reviewable Unit

Submission - Medicaid State Plan

0 persons are required to respond to a collection of information unless it displays a notice that the collection of information is mandatory. If you do not agree with the collection of information, you may request a copy of the collection of information by writing to the Office of Management and Enterprise Services, Attention: Information Collection Review, 100 North State Street, 10th Floor, Baltimore, MD 21201. The time required to complete this information collection is 15 minutes, search existing data resources, gather the data needed, and complete and review the information. If you have any questions or suggestions for improving this form, please write to: CMS, 1100 Woodlawn Drive, Baltimore, MD 21205, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

2.12 **SUBMISSION - Medicaid State Plan:** Next, select the purpose of your submission package. This section is mandatory to fill out in order to complete the Health Homes Reviewable Units.

Submission - Medicaid State Plan

MEDICAID - Health Homes Program -- SC - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	SC2016MH0059D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

Submission - Medicaid State Plan

The submission includes the following

- Benefits
 - Health Homes Program
 - Create new Health Homes program
 - Amend existing Health Homes program
 - Terminate existing Health Homes program

2.13 If you are creating a New Health Homes program continue following these steps. If you are amending an existing Health Homes program, refer to the new feature to Health Homes SPA's in MACPro, [“Create an Amendment to an Existing Health Homes Program”](#) section. This question is dynamic, therefore when you select “Create new Health Homes program” another question will pop up. Fill in the answer accordingly.

Submission - Medicaid State Plan

The submission includes the following

- Benefits
 - Health Homes Program
 - Create new Health Homes program
 - Amend existing Health Homes program
 - Terminate existing Health Homes program
 - Copy from existing Health Homes program
 - Create new program from blank form



2.14 If you select “Create new program from blank form, a text box will appear requiring you to enter in the name of the Health Homes Program.

Submission - Medicaid State Plan

The submission includes the following

- Benefits
 - Health Homes Program
 - Create new Health Homes program
 - Amend existing Health Homes program
 - Terminate existing Health Homes program
 - Copy from existing Health Homes program
 - Create new program from blank form

* Name of Health Homes Program



2.15 If you select “Copy from existing Health Homes program” a drop down menu will also appear allowing you to select an existing program.

Submission - Medicaid State Plan

The submission includes the following

Benefits

Health Homes Program

Create new Health Homes program
 Amend existing Health Homes program
 Terminate existing Health Homes program

* Copy from existing Health Homes program
 Create new program from blank form

* Name of Health Homes Program

* -- Select Health Homes Program --

2.16 After selecting a program type, and entering the Name of the Health Homes program, select the “Save Reviewable Unit” button at the bottom of the screen.

2.17 Upon saving, the Reviewable Unit will automatically be validated. To move to the next unit, select “Submission-Public Comment” from the drop down menu and then select “Go to Selected Reviewable Unit”. *You may also not go back and change the program type after saving the Submission-Medicaid State Plan unit.*

Navigate to Reviewable Unit

Submission - Public Comment

95, no persons are required to respond to a collection of information unless it displays a notice that the collection is 0938-1188. The time required to complete this information collection is 15 minutes. For more information on the collection, search existing data resources, gather the data needed, and complete and verify the time estimate(s) or suggestions for improving this form, please write to: CMS, 1-26-05, Baltimore, Maryland 21244-1850.

2.18 SUBMISSION - Public Comment: The next unit is the Submission-Public Comment Reviewable Unit. You must indicate an answer to the question. Please note that the “Public notice was not required, but comment was solicited” option is dynamic and will prompt you with a second question or the opportunity to upload public notice info.

Submission - Public Comment
MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	SC2016MH00600	SPA ID	SC-16-100-x
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

Name of Health Homes Program

Indicate whether public comment was solicited with respect to this submission.*

- Public notice was not required and comment was not solicited
- Public notice was not required, but comment was solicited
- Public notice was required and comment was solicited

2.19 Next, select “Yes” to validate this Reviewable Unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?

Yes No

Note: If validation fails, errors will appear in red above.

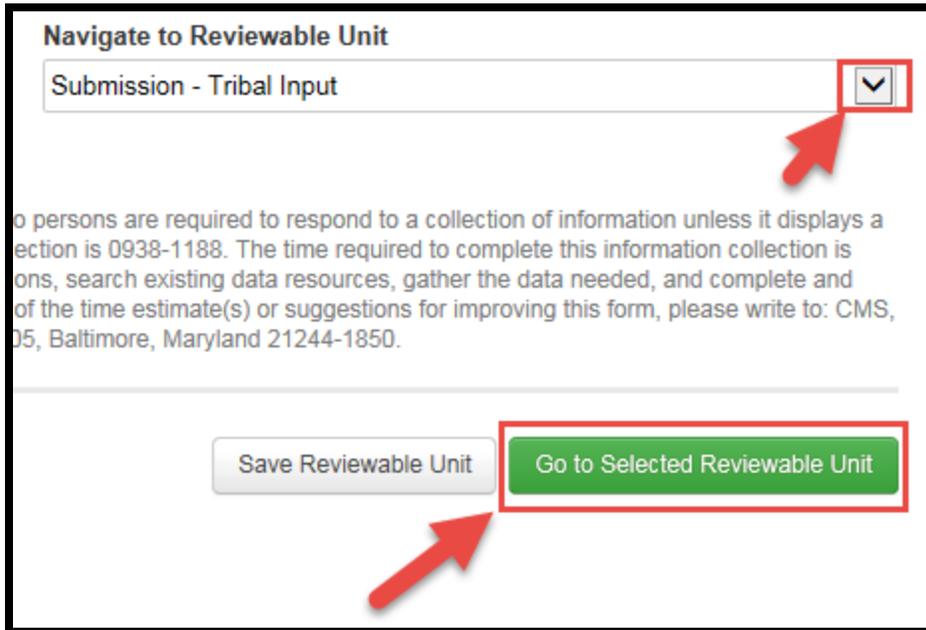
Navigate to Reviewable Unit

-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

2.20 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.



2.21 **SUBMISSION - Tribal Input:** The next Reviewable Unit is Submission-Tribal Input. You must indicate whether “Yes” or “No” to the question. The “Yes” option for this question is dynamic and will prompt you to answer more questions, enter in further information or the opportunity to upload tribal notifications.



2.22 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data? Yes No

Note: If validation fails, errors will appear in red above.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

2.23 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Submission - SAMHSA Consultation

no persons are required to respond to a collection of information unless it displays a collection is 0938-1188. The time required to complete this information collection is tions, search existing data resources, gather the data needed, and complete and y of the time estimate(s) or suggestions for improving this form, please write to: CMS, -05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

2.24 SUBMISSION- SAMHSA Consultation: The next Reviewable Unit is the Submission- SAMHSA Consultation unit. Check the checkbox as indicated in the screenshot. This box must be checked in order to save the unit, and to put the unit in “Complete” status.

Submission - SAMHSA Consultation
MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	SC2016MH00600	SPA ID	SC-16-100-x
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

Name of Health Homes Program

The State provides assurance that it has consulted and coordinated with the Substance Abuse and Mental Health Services Administration (SAMHSA) in addressing issues regarding the prevention and treatment of mental illness and substance abuse among eligible individuals with chronic conditions.

2.25 Upon checking this box, you must enter a “Date of Consultation”.

The State provides assurance that it has consulted and coordinated with the Substance Abuse and Mental Health Services Administration (SAMHSA) in addressing issues regarding the prevention and treatment of mental illness and substance abuse among eligible individuals with chronic conditions.

Date of consultation

M/d/yyyy

[+Add Date of Consultation](#)

2.26 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data? Yes No

Note: If validation fails, errors will appear in red above.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

2.27 This completes the Submissions Reviewable Units. The next section of the package is the Health Homes Reviewable Units. To proceed to the Health Homes Reviewable Units, select the “Health Homes Intro” unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Health Homes Intro

no persons are required to respond to a collection of information unless it displays a collection is 0938-1188. The time required to complete this information collection is ions, search existing data resources, gather the data needed, and complete and of the time estimate(s) or suggestions for improving this form, please write to: CMS, 05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.2 In the General Assurances section, all assurances must be checked in their respective checkboxes in order for this unit to be validated and in “Complete” status.

General Assurances +/-

- The state provides assurance that eligible individuals will be given a free choice of Health Homes providers.
- The states provides assurance that it will not prevent individuals who are dually eligible for Medicare and Medicaid from receiving Health Homes services.
- The state provides assurance that there will be no age restrictions and that Health Homes services will be made available to all individuals who meet the eligibility criteria.
- The state provides assurance that hospitals participating under the state plan or a waiver of such plan will be instructed to establish procedures for referring eligible individuals with chronic conditions who seek or need treatment in a hospital emergency department to designated Health Homes providers.
- The state provides assurance that FMAP for Health Homes services shall be 90% for the first eight fiscal quarters from the effective date of the SPA. After the first eight quarters, expenditures will be claimed at the regular matching rate.
- The state provides assurance that it will have the systems in place so that only one 8-quarter period of enhanced FMAP for each health homes enrollee will be claimed.
- The state provides assurance that there will be no duplication of services and payment for similar services provided under other Medicaid authorities.

3.3 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

3.4 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

The screenshot shows a web interface with a section titled "Navigate to Reviewable Unit". Below the title is a dropdown menu containing the text "Health Homes Population and Enrollment Criteria". A red box highlights the dropdown arrow icon, with a red arrow pointing to it from the right. Below the dropdown menu is a paragraph of text: "to persons are required to respond to a collection of information unless it displays a lection is 0938-1188. The time required to complete this information collection is ions, search existing data resources, gather the data needed, and complete and of the time estimate(s) or suggestions for improving this form, please write to: CMS, 05, Baltimore, Maryland 21244-1850." Below the text is a horizontal line. At the bottom of the interface are two buttons: a grey button labeled "Save Reviewable Unit" and a green button labeled "Go to Selected Reviewable Unit". A red box highlights the green button, with a red arrow pointing to it from the left.

3.5 HEALTH HOMES- Population and Enrollment Criteria: The next Reviewable Unit is the Population and Enrollment Criteria unit. After selecting the “View All Response” button in the top right corner of the screen, you must select answers for all three sections shown below. The option “Categorically Needy (Mandatory and Options for Coverage) Eligibility Groups” is prefilled out. Please note that the options for these sections are dynamic and will prompt you to answer further questions.

View Implementation Guide

View All Responses

Categories of Individuals and Populations Provided Health Homes Services +/-

The state will make Health Homes services available to the following categories of Medicaid participants

Categorically Needy (Mandatory and Options for Coverage) Eligibility Groups

Medically Needy Eligibility Groups

Population Criteria +/-

The state elects to offer Health Homes services to individuals with

Two or more chronic conditions

One chronic condition and the risk of developing another

One serious and persistent mental health condition

Enrollment of Participants +/-

Participation in a Health Homes is voluntary. Indicate the method the state will use to enroll eligible Medicaid individuals into a Health Home *

Opt-In to Health Homes provider

Referral and assignment to Health Homes provider with opt-out

Other (describe)

3.6 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?

Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit

-- Select Reviewable Unit --

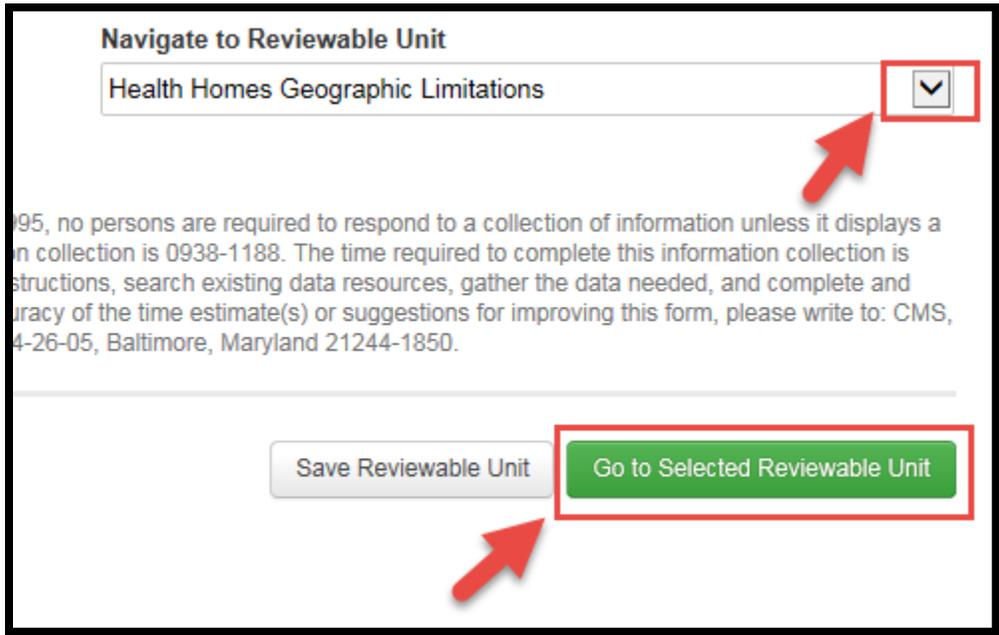
PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit

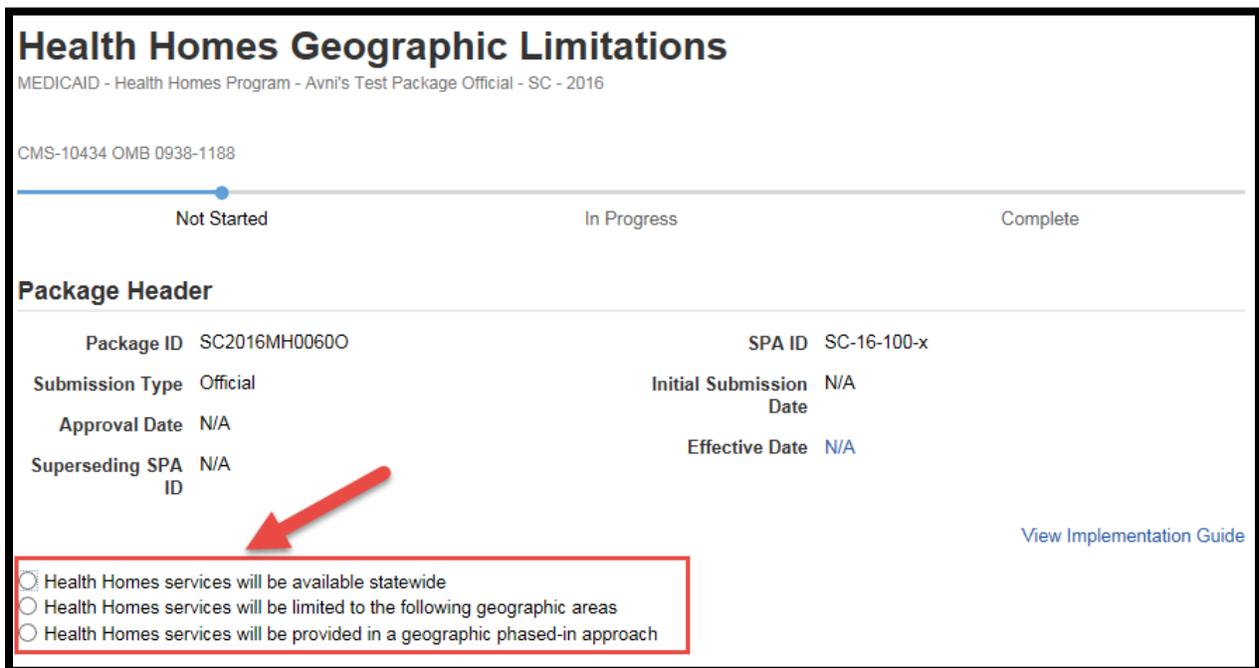
Save Reviewable Unit

Go to Selected Reviewable Unit

3.7 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.



3.8 **HEALTH HOMES - Geographic Limitations:** The next Reviewable Unit is the Geographic Limitations unit. You are required to choose an option regarding the availability of your State’s Health Home Services. These options are dynamic and may prompt you to enter more information.



3.9 If you select Option 3, “Health Homes services will be provided in a geographic phased-in approach” you will be prompted to add a phase.

Health Homes services will be available statewide
 Health Homes services will be limited to the following geographic areas
 Health Homes services will be provided in a geographic phased-in approach

Title of phase	Geographic Area	Implementation Date
No items available		

You must enter at least one phase



3.10 After selecting “Add Phase” you can enter information into the phase.

Geographic Limitations - Add or Edit Phase

CMS-10434 OMB 0938-1188

Title of phase Implementation Date *
 Phase 1

Phase-in will be done by the following geographic area *

By county
 By region
 By city/municipality
 Other geographic area

Health Homes services are now available state-wide *

Yes
 No

Enter any additional narrative necessary to fully describe this phase

Character count: 0/4000

Saved Documents

- Maximum file size : 2MB
- Valid file extensions: pdf, ppt, doc, docx, xlsx, xls, pptx

<input type="checkbox"/>	Name	Date Created	Type
No items available			

3.11 Once information is entered, select “Save Phase”.



3.12 After the phase is saved, you will be returned to the Reviewable Unit. In the table, you will be able to see the phase that was just saved.

A screenshot of a web form. At the top, there are three radio button options: "Health Homes services will be available statewide", "Health Homes services will be limited to the following geographic areas", and "Health Homes services will be provided in a geographic phased-in approach". Below these is a table with three columns: "Title of phase", "Geographic Area", and "Implementation Date". The table contains one row with the values "Phase 1", "Other geographic area", and "3/29/2016". An "Add Phase" button is located at the bottom right of the table area.

Title of phase	Geographic Area	Implementation Date
Phase 1	Other geographic area	3/29/2016

3.13 Once you have all information entered, select “Yes” to validate this Reviewable Unit and then select “Save Reviewable Unit”.

A screenshot of the "Validation & Navigation" section of a form. It contains a question "Would you like to validate the reviewable unit data?" with "Yes" and "No" radio button options. The "Yes" option is selected and highlighted with a red box. A red arrow points to the "Yes" option. To the right is a dropdown menu labeled "Navigate to Reviewable Unit" with the text "-- Select Reviewable Unit --". Below this is a note: "Note: If validation fails, errors will appear in red above." A PRA Disclosure Statement is also present. At the bottom, there are three buttons: "Exit", "Save Reviewable Unit" (highlighted with a red box and a red arrow pointing to it), and "Go to Selected Reviewable Unit".

Validation & Navigation

Would you like to validate the reviewable unit data? Yes No

Navigate to Reviewable Unit
-- Select Reviewable Unit --

Note: If validation fails, errors will appear in red above.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit

3.14 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Health Homes Services

to persons are required to respond to a collection of information unless it displays a
lection is 0938-1188. The time required to complete this information collection is
ions, search existing data resources, gather the data needed, and complete and
of the time estimate(s) or suggestions for improving this form, please write to: CMS,
05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.15 **HEALTH HOMES - Services:** The next Reviewable Unit is the Health Homes Services Unit. After selecting the “View All Responses” button in the top right corner, you are required to fill out the definitions for each service, the description of how Health Information Technology will be used, and to check one or more provider type. Please note that the provider types are dynamic and will prompt you to enter a description once checked.

View All Responses

Service Definitions

Provide the state's definitions of the following Health Homes services and the specific activities performed under each service

Comprehensive Care Management

Definition*

Character count: 0/4000

Describe how Health Information Technology will be used to link this service in a comprehensive approach across the care continuum*

Character count: 0/4000

Scope of service

The service can be provided by the following provider types
Must check one or more

- Behavioral Health Professionals or Specialists
- Nurse Practitioner
- Nurse Care Coordinators
- Nurses

3.16 After filling in the above information, you are required to fill out the Health Homes Patient Flow section and upload a supporting document.

Health Homes Patient Flow +/-

Describe the patient flow through the state's Health Homes system. Submit with the state plan amendment flow-charts of the typical process a Health Homes individual would encounter *

Character count: 0/4000

Saved Documents

- Maximum file size : 2MB
- Valid file extensions: pdf, ppt, doc, docx, xlsx, xls, pptx

<input type="checkbox"/>	Name	Date Created	Type
No items available			

A document is required

Detailed description: This screenshot shows a web form titled "Health Homes Patient Flow". At the top, there is a red arrow pointing to the title. Below the title is a text area with a red border containing the instruction: "Describe the patient flow through the state's Health Homes system. Submit with the state plan amendment flow-charts of the typical process a Health Homes individual would encounter *". Below the text area is a character count "0/4000". Underneath is a section for "Saved Documents" with a list of file size and extension rules. A table below shows no saved documents. At the bottom, a red box highlights a "A document is required" error message above a file input field with a "Browse..." button. A red arrow points to this button. To the right are "Delete Document" and "Save Documents" buttons.

3.17 To upload a document, first select the "Browse" button. Select your document(s) and then select the "Save Documents" button.

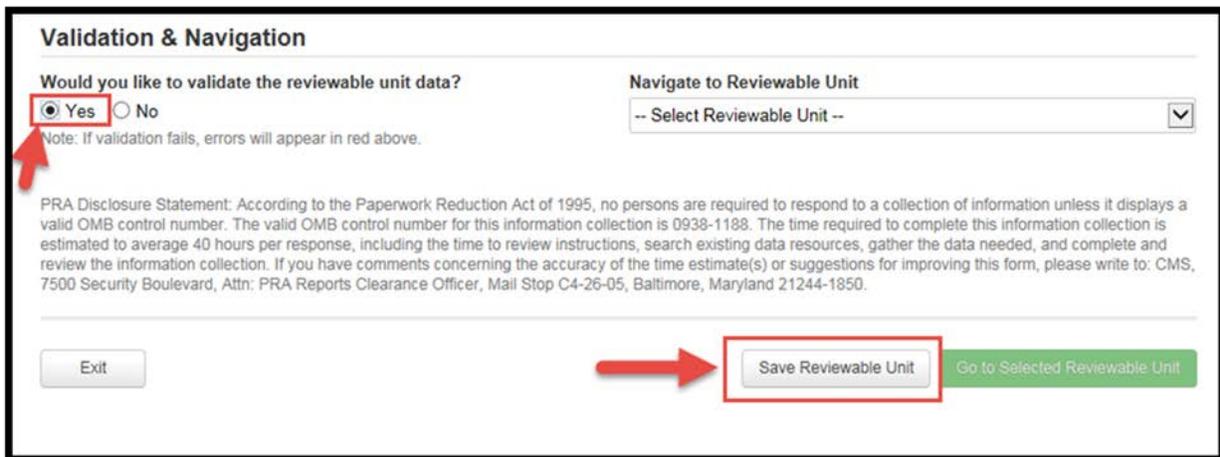
DummyDoc.docx (10.96 KB) v

Detailed description: This screenshot shows the document upload interface. At the top, a document name "DummyDoc.docx (10.96 KB)" is displayed with a dropdown arrow. Below it is a file input field with a "Browse..." button. A red box highlights the "Browse..." button, with a red arrow pointing to it. To the right are "Delete Document" and "Save Documents" buttons. A red box highlights the "Save Documents" button, with a red arrow pointing to it.

3.18 Once you select the “Save Documents” button, you will be redirected to the “Document(s) Save in Progress” screen. Before attempting to navigate away from this screen you must select the green “Refresh” button on the page. If you navigate away before selecting the button your documents will not save. Wait a few seconds and select the “Refresh” button to fully save your documents.



3.19 Once you have all information entered and documents uploaded, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.



3.20 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Health Homes Providers

no persons are required to respond to a collection of information unless it displays a
lection is 0938-1188. The time required to complete this information collection is
ions, search existing data resources, gather the data needed, and complete and
of the time estimate(s) or suggestions for improving this form, please write to: CMS,
05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.21 HEALTH HOMES - Providers: The next Reviewable Unit is the Health Homes Providers Unit. After selecting the “View All Responses” button in the top right corner, you are required to fill out each section of this unit. You may also upload documents at the end of this section. Please note that the provider types are dynamic and will prompt you to answer an additional question or enter in a description.

View All Responses

Types of Health Homes Providers +/-

- Designated Providers
- Teams of Health Care Professionals
- Health Teams

Provider Infrastructure +/-

Describe the infrastructure of provider arrangements for Health Home Services *

Character count: 0/4000

Supports for Health Homes Providers +/-

Describe the methods by which the state will support providers of Health Homes services in addressing the following components

1. Provide quality-driven, cost-effective, culturally appropriate, and person- and family- centered Health Homes services
2. Coordinate and provide access to high quality health care services informed by evidence-based clinical practice guidelines
3. Coordinate and provide access to preventive and health promotion services, including prevention of mental illness and substance use disorders
4. Coordinate and provide access to mental health and substance abuse services
5. Coordinate and provide access to comprehensive care management, care coordination, and transitional care across settings. Transitional care includes appropriate follow-up from inpatient to other settings, such as participation in discharge planning and facilitating transfer from a pediatric to an adult system of health care
6. Coordinate and provide access to chronic disease management, including self-management support to individuals and their families
7. Coordinate and provide access to individual and family supports, including referral to community, social support, and recovery services
8. Coordinate and provide access to long-term care supports and services
9. Develop a person-centered care plan for each individual that coordinates and integrates all of his or her clinical and non-clinical health-care related needs and services
10. Demonstrate a capacity to use health information technology to link services, facilitate communication among team members and between the health team and individual and family caregivers, and provide feedback to practices, as feasible and appropriate
11. Establish a continuous quality improvement program, and collect and report on data that permits an evaluation of increased coordination of care and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level

Description *

Character count: 0/4000

Other Health Homes Provider Standards +/-

The state's requirements and expectations for Health Homes providers are as follows *

Character count: 0/4000

3.22 Once you have all information entered and documents uploaded, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

3.23 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Health Homes Service Delivery Systems

No persons are required to respond to a collection of information unless it displays a valid OMB control number. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.24 HEALTH HOMES - Service Delivery Systems: The next Reviewable Unit is the Health Homes Service Delivery Systems unit. You are required to indicate which Delivery Systems will be used for your state. Please note some of these fields are dynamic and may prompt you to enter in more information.

Health Homes Service Delivery Systems
MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	SC2016MH00600	SPA ID	SC-16-100-x
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

Identify the service delivery system(s) that will be used for individuals receiving Health Homes services

- Fee for Service
- PCCM
- Risk Based Managed Care
- Other Service Delivery System

3.25 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

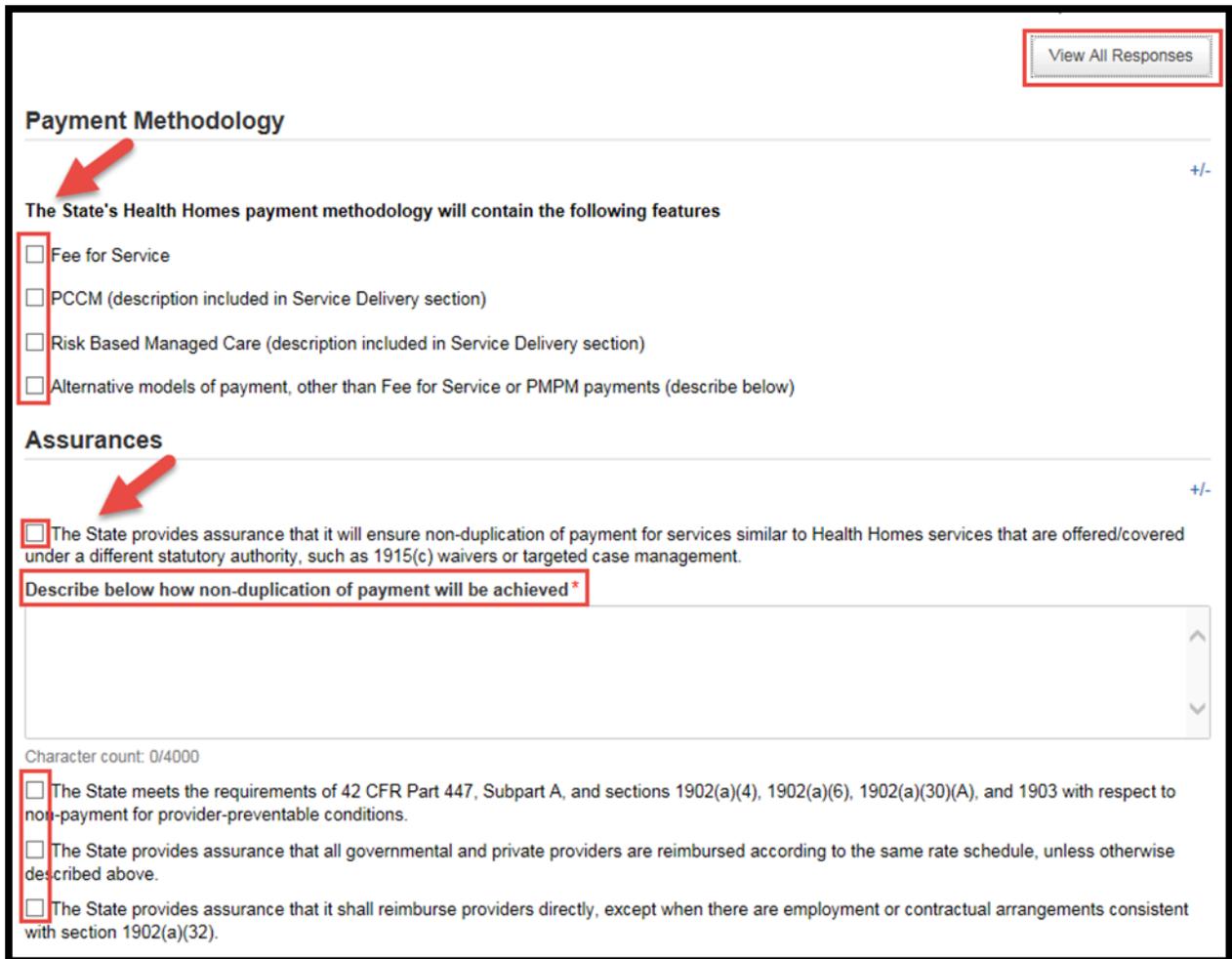
Exit **Save Reviewable Unit** Go to Selected Reviewable Unit

3.26 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

The screenshot shows a web form with the following elements:

- Title:** "Navigate to Reviewable Unit"
- Dropdown Menu:** A text box containing "Health Homes Payment Methodologies" with a dropdown arrow icon on the right. A red box highlights the arrow icon, and a red arrow points to it from the right.
- Text:** A paragraph of text below the dropdown menu, partially obscured, mentioning "no persons are required to respond to a collection of information unless it displays a collection is 0938-1188. The time required to complete this information collection is...".
- Buttons:** Two buttons are located at the bottom of the form:
 - A grey button labeled "Save Reviewable Unit". A red arrow points to it from the bottom left.
 - A green button labeled "Go to Selected Reviewable Unit". A red box highlights this button.

3.27 HEALTH HOMES- Payment Methodologies: The next Reviewable Unit is the Health Homes Payment Methodologies unit. After selecting the “View All Responses” button in the top right corner, you are required to fill out the Payment Methodology section and check all of the Assurances in the Assurance section. Please note that some of the options in the Payment Methodology section are dynamic and may prompt you to enter in more information. Selecting “Fee for Service” will cause two new sections to appear: Agency Rates and Rate Development.



View All Responses

Payment Methodology

+/-

The State's Health Homes payment methodology will contain the following features

- Fee for Service
- PCCM (description included in Service Delivery section)
- Risk Based Managed Care (description included in Service Delivery section)
- Alternative models of payment, other than Fee for Service or PMPM payments (describe below)

Assurances

+/-

- The State provides assurance that it will ensure non-duplication of payment for services similar to Health Homes services that are offered/covered under a different statutory authority, such as 1915(c) waivers or targeted case management.

Describe below how non-duplication of payment will be achieved *

Character count: 0/4000

- The State meets the requirements of 42 CFR Part 447, Subpart A, and sections 1902(a)(4), 1902(a)(6), 1902(a)(30)(A), and 1903 with respect to non-payment for provider-preventable conditions.
- The State provides assurance that all governmental and private providers are reimbursed according to the same rate schedule, unless otherwise described above.
- The State provides assurance that it shall reimburse providers directly, except when there are employment or contractual arrangements consistent with section 1902(a)(32).

3.28 Once you have all information entered, select “Yes” to validate this Reviewable Unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data? Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

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Exit Save Reviewable Unit Go to Selected Reviewable Unit

3.29 To go to the next Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Health Homes Monitoring, Quality Measurement and Evaluation

no persons are required to respond to a collection of information unless it displays a collection is 0938-1188. The time required to complete this information collection is tions, search existing data resources, gather the data needed, and complete and of the time estimate(s) or suggestions for improving this form, please write to: CMS, -05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.30 HEALTH HOMES - Monitoring, Quality Measurement and Evaluation: The next Reviewable Unit is the Health Homes Monitoring, Quality Measurement and Evaluation unit. You are required to enter descriptions for the “Monitoring” section and check the assurances for the “Quality Measurement and Evaluation” sections.

[View All Responses](#)

Monitoring

Describe the state's methodology for calculating cost saving (and report cost savings annually in Quality Measure Report). Include savings that result from improved coordination of care and chronic disease management achieved through the Health Homes Program, including data sources and measurement specifications, as well as any savings associated with dual eligibles, and if Medicare data was available to the state to utilize in arriving at its cost-savings estimates.*

Character count: 0/4000

Describe how the state will use health information technology in providing Health Homes services and to improve service delivery and coordination across the care continuum (including the use of wireless patient technology to improve coordination and management of care and patient adherence to recommendations made by their provider)*

Character count: 0/4000

Quality Measurement and Evaluation

- The state provides assurance that all Health Homes providers report to the state on all applicable quality measures as a condition of receiving payment from the state
- The state provides assurance that it will identify measureable goals for its Health Homes model and intervention and also identify quality measures related to each goal to measure its success in achieving the goals
- The state provides assurance that it will report to CMS information submitted by Health Homes providers to inform evaluations, as well as Reports to Congress as described in Section 2703(b) of the Affordable Care Act and as described by CMS
- The state provides assurance that it will track avoidable hospital readmissions and report annually in the Quality Measures report

[Go to HHQM Reports](#)

3.31 Once you have all information entered, select “Yes” to validate this Reviewable unit and then select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

3.32 At this point you have completed all of the Health Homes Reviewable Units. You must make the package eligible to be submitted to the State Point of Contact. To do so, you have to return to the Submission-Summary page and put this Reviewable Unit in complete status by entering the Proposed Effective Dates and validating the unit. To go to the next Submission-Summary Reviewable Unit, select the unit from the “Navigate to Reviewable Unit” drop down menu and then select “Go to Selected Reviewable Unit”.

As a reminder, if your submission package is in Draft, you will not need to enter proposed effective dates. This step will occur after it is converted from draft to official.

Navigate to Reviewable Unit

Submission - Summary

no persons are required to respond to a collection of information unless it displays a collection is 0938-1188. The time required to complete this information collection is ions, search existing data resources, gather the data needed, and complete and of the time estimate(s) or suggestions for improving this form, please write to: CMS, 05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

3.33 After entering the Proposed Effective Dates, the Validation “Yes” button will become active. Select “Yes” and then “Save Reviewable Unit”. At this point you may also change your submission type from Draft Submission Package to Official Submission Package if you choose to. If you do so, you must save the Reviewable Unit again.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

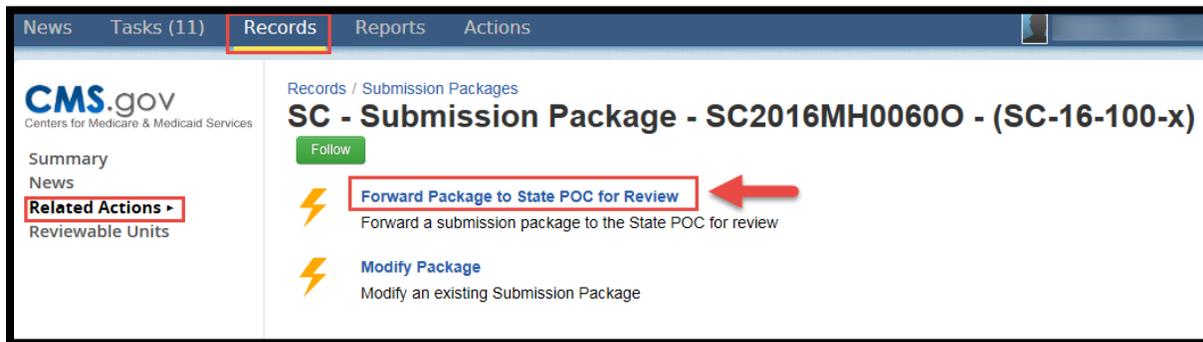
Exit Save Reviewable Unit Go to Selected Reviewable Unit

3.34 Next, select the “Exit” button in the bottom left corner of the page.

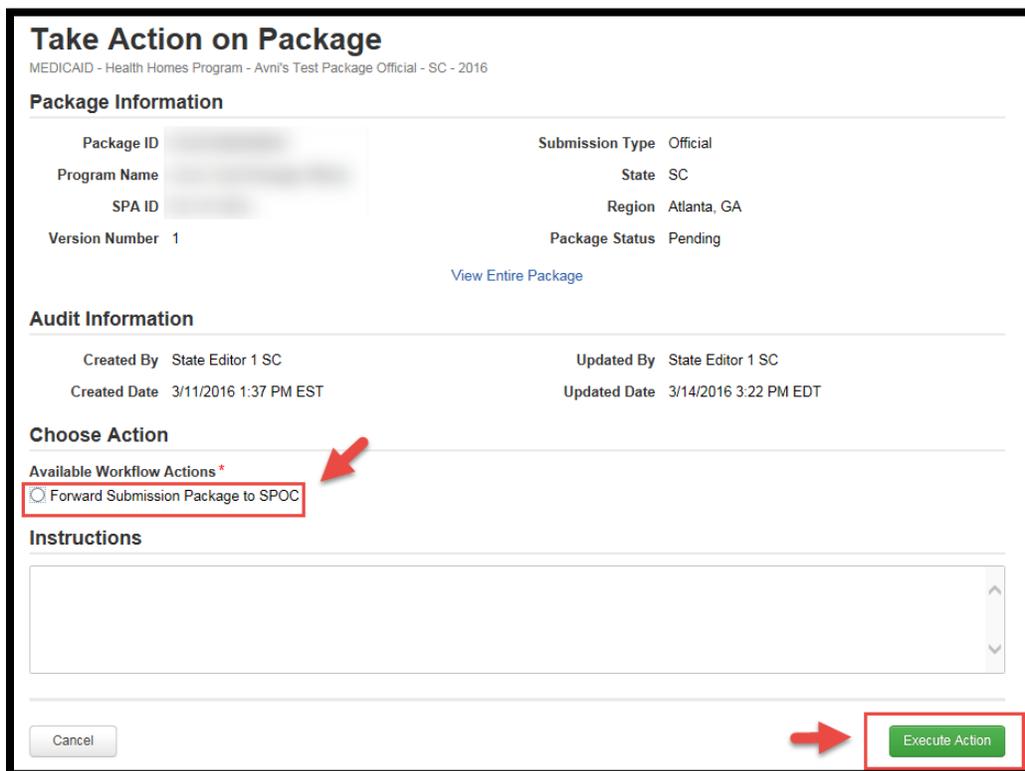
Exit Save Reviewable Unit Go to Selected Reviewable Unit

Step 4: State Editor - Submit Package to State Point of Contact

4.1 Once you select “Exit” as shown in Step 3.30, you will be redirected to the “Related Actions” screen under the “Records” tab. Select “Forward Package to State POC for Review”. *If you had navigated away from your package rather than selecting “Exit” and have just logged back into MACPro, go to the “Records” tab, then click “Submissions Packages” for your state, and then your submission package. Next, select “Related Actions” from the left panel. Proceed to forward the package to the State Point of Contact.*



4.2 On the next page, select workflow action “Forward Submission Package to SPOC” and then select the green “Execute Action” button. The instructions box is optional.



4.3 Select "Yes".

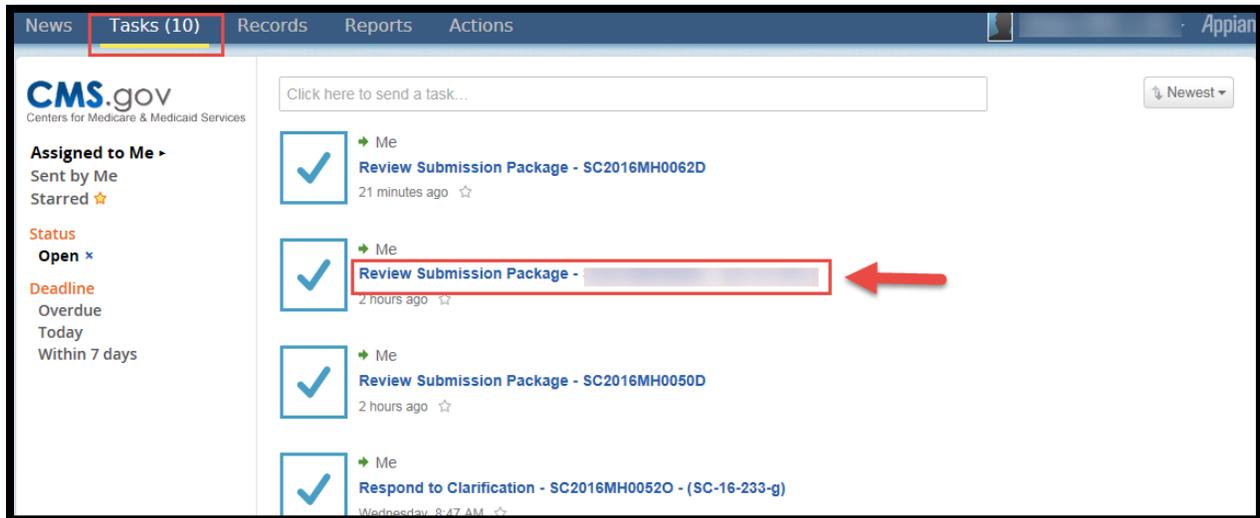


This ends the process for the State Editor to create and submit a submission package to the State Point of Contact.

Step 5: State Point of Contact Reviews Submission Package and Forwards package to State Director

5.1 State Point of Contact logs into MACPro.

5.2 Select the “Tasks” tab from the upper tool bar and then select the “Review Submission Package” task.



5.3 On the “Review Submission Page” screen you will see the package summary and all the Reviewable Units in “Complete” status. Select each Reviewable Unit via the blue links if you wish to review the package. If you wish to create a correspondence log first, please refer to the “[Create a Correspondence Log](#)” section under Additional Actions.

The Correspondence Log is the official record for the package. The Correspondence Log can be used as a communication tool, where CMS provides information to the state and the state can respond. The correspondence log may also be used as a record of communication where conversations and decisions are documented. Only the SPOC and the CMS Point of Contact can write in the correspondence log, but others may view the correspondence log in a package for reference.

Submission Form - Reviewable Units				
Reviewable Unit	Updated By	Updated Date	Status	
Submission - Summary	State Editor 1 SC	3/14/2016 3:22 PM EDT	✓	
Submission - Medicaid State Plan	State Editor 1 SC	3/11/2016 2:02 PM EST	✓	
Submission - Public Comment	State Editor 1 SC	3/11/2016 4:03 PM EST	✓	
Submission - Tribal Input	State Editor 1 SC	3/11/2016 4:13 PM EST	✓	
Submission - SAMHSA Consultation	State Editor 1 SC	3/11/2016 4:34 PM EST	✓	

Health Homes SPA - Reviewable Units				
Reviewable Unit	Proposed Effective Date	Updated By	Updated Date	Status
Health Homes Intro	3/15/2016	State Editor 1 SC	3/11/2016 5:06 PM EST	✓
Health Homes Population and Enrollment Criteria	3/15/2016	State Editor 1 SC	3/11/2016 5:38 PM EST	✓
Health Homes Geographic Limitations	3/15/2016	State Editor 1 SC	3/11/2016 5:46 PM EST	✓
Health Homes Services	3/15/2016	State Editor 1 SC	3/14/2016 11:54 AM EDT	✓
Health Homes Providers	3/15/2016	State Editor 1 SC	3/14/2016 12:18 PM EDT	✓
Health Homes Service Delivery Systems	3/15/2016	State Editor 1 SC	3/14/2016 2:34 PM EDT	✓
Health Homes Payment Methodologies	3/15/2016	State Editor 1 SC	3/14/2016 2:32 PM EDT	✓
Health Homes Monitoring, Quality Measurement and Evaluation	3/15/2016	State Editor 1 SC	3/14/2016 2:50 PM EDT	✓

1-8 of 8

[Take Action on Package](#)

5.4 For every unit you review, you must re-validate the unit by scrolling to the bottom of the unit page, selecting “Yes” to the validation question and then selecting “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit Save Reviewable Unit Go to Selected Reviewable Unit

5.5 To move to the next Reviewable unit, select a unit from the drop down menu under “Navigate to Reviewable Unit” and then select “Go to Selected Reviewable Unit”.

Navigate to Reviewable Unit

Submission - Summary

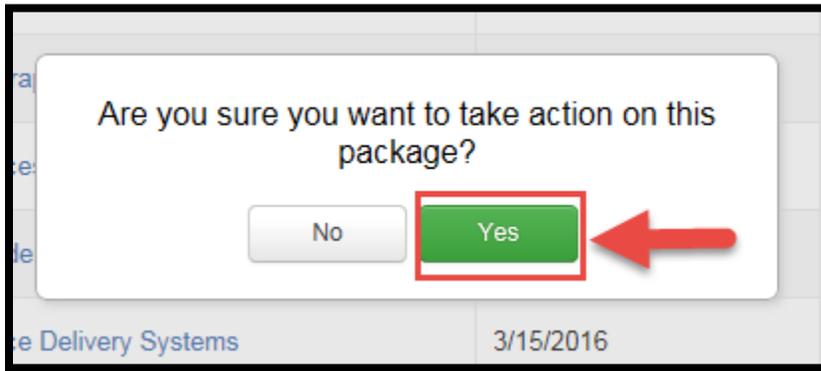
No persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Save Reviewable Unit Go to Selected Reviewable Unit

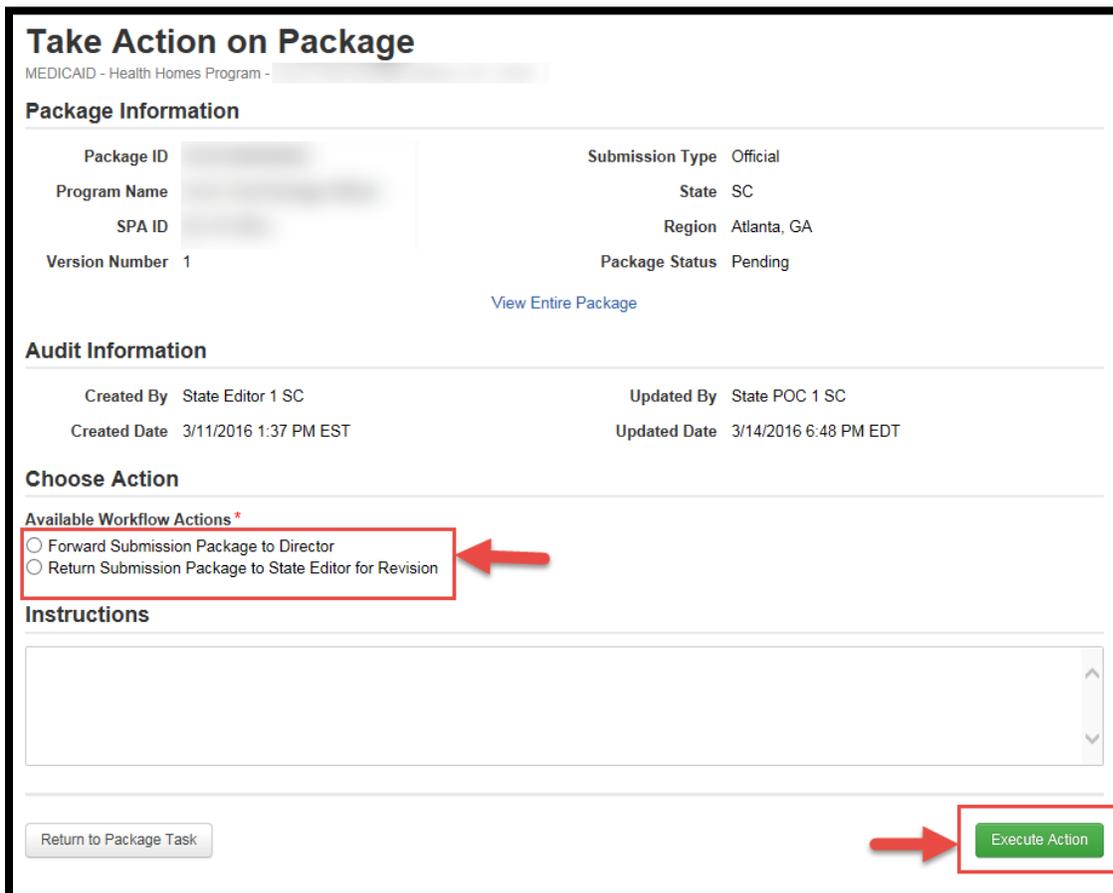
5.6 Once your review is complete, return to the package summary and scroll to the bottom of the page. Select the green button labeled “Take Action on Package”.

Take Action on Package

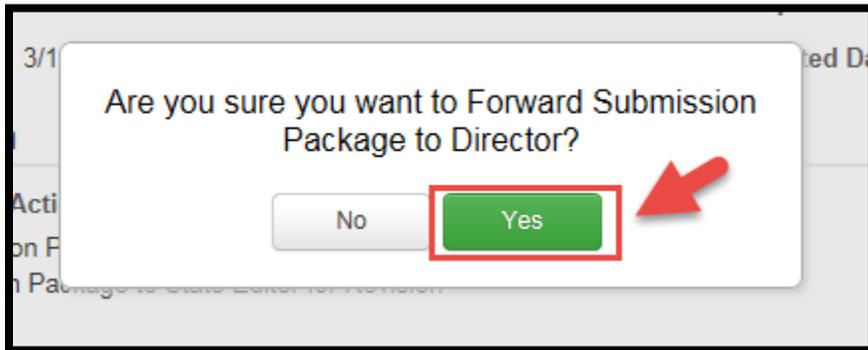
5.7 Select “Yes”.



5.8 You will be redirected to a “Take Action on this Package” screen. There are two available workflow options. If you wish to forward the package to the State Director, select “Forward Submission Package to Director”. If you wish to send the package back to the State Editor for further edits, select “Return Submission Package to State Editor for Revision”. If you choose to select “Forward Submission Package to Director” continue to follow these steps. If you wish to [“Return Submission Package to State Editor for Revision”](#) please refer to the Additional Actions section. The instructions box is optional. Once you have selected your Workflow Action, select the green “Execute Action” button.



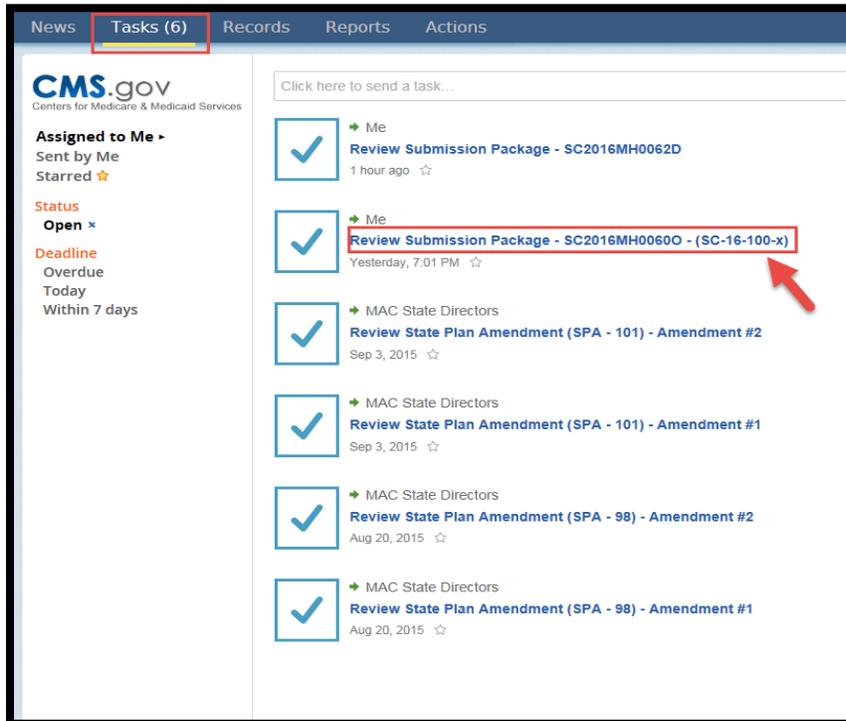
5.9 Select "Yes".



Step 6: State Director- Final Review, Certifying Submission Package and Forward to SPOC

6.1 State Director logs into MACPro.

6.2 Select the “Tasks” tab from the upper tool bar and then select the “Review Submission Package” task.



6.3 On the “Review Submission Page” screen you will see the package summary and all the Reviewable Units in “Complete” status. Select each Reviewable Unit via the blue links. Please note that you have a Read-Only view as State Director.

Submission Form - Reviewable Units				
Reviewable Unit	Updated By	Updated Date	Status	
Submission - Summary	State POC 1 SC	3/14/2016 6:45 PM EDT	✔	
Submission - Medicaid State Plan	State Editor 1 SC	3/11/2016 2:02 PM EST	✔	
Submission - Public Comment	State Editor 1 SC	3/11/2016 4:03 PM EST	✔	
Submission - Tribal Input	State Editor 1 SC	3/11/2016 4:13 PM EST	✔	
Submission - SAMHSA Consultation	State Editor 1 SC	3/11/2016 4:34 PM EST	✔	

Health Homes SPA - Reviewable Units				
Reviewable Unit	Proposed Effective Date	Updated By	Updated Date	Status
Health Homes Intro	3/15/2016	State Editor 1 SC	3/11/2016 5:06 PM EST	✔
Health Homes Population and Enrollment Criteria	3/15/2016	State POC 1 SC	3/14/2016 6:48 PM EDT	✔
Health Homes Geographic Limitations	3/15/2016	State Editor 1 SC	3/11/2016 5:46 PM EST	✔
Health Homes Services	3/15/2016	State Editor 1 SC	3/14/2016 11:54 AM EDT	✔
Health Homes Providers	3/15/2016	State Editor 1 SC	3/14/2016 12:18 PM EDT	✔
Health Homes Service Delivery Systems	3/15/2016	State Editor 1 SC	3/14/2016 2:34 PM EDT	✔
Health Homes Payment Methodologies	3/15/2016	State Editor 1 SC	3/14/2016 2:32 PM EDT	✔
Health Homes Monitoring, Quality Measurement and Evaluation	3/15/2016	State Editor 1 SC	3/14/2016 2:50 PM EDT	✔

1-8 of 8

Take Action on Package

6.4 Once you select a Reviewable Unit to review, if you wish to navigate to a different unit, select the blue link labeled “All Reviewable Units”. This will take you back to the Reviewable Units page where you can select a Reviewable Unit from the list of blue links.

Review Submission Package
MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

Package Information

Package ID	SC2016MH00600	Submission Type	Official
Program Name	Avni's Test Package Official	State	SC
SPA ID	SC-16-100-x	Region	Atlanta, GA
Version Number	1	Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State POC 1 SC
Created Date	3/11/2016 1:37 PM EST	Updated Date	3/14/2016 7:01 PM EDT

[← All Reviewable Units](#)

Health Homes Service Delivery Systems
MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016
CMS-10434 OMB 0938-1188

Not Started In Progress Complete

6.5 When you have completed your review, scroll to the bottom of the page and select the green button labeled “Take Action on Package”

Take Action on Package

6.6 Select “Yes”

Are you sure you want to take action on this package?

No Yes

Service Delivery Systems 3/15/2016

6.7 You will be redirected to a “Take Action on this Package” screen. There are two available workflow options. If you wish to certify and forward the package to the State POC, select “Certify and Forward Submission Package to State POC for Submission to CMS”. If you wish to send the package back to the State POC for further Revision, select “Return Submission Package to State POC for Revision”. If you choose to select “Certify and Forward Submission Package to State POC for Submission to CMS” continue to follow these steps. If you wish to [“Return Submission Package to State POC for Revision”](#) please refer to Additional Actions. The instructions box is optional. Once you have selected your Workflow Action, select the green “Execute Action” button.

Take Action on Package
 MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

Package Information

Package ID	SC2016MH00600	Submission Type	Official
Program Name	Avni's Test Package Official	State	SC
SPA ID	SC-16-100-x	Region	Atlanta, GA
Version Number	1	Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State POC 1 SC
Created Date	3/11/2016 1:37 PM EST	Updated Date	3/14/2016 7:01 PM EDT

Choose Action

Available Workflow Actions *

- Certify and Forward Submission Package to State POC for Submission to CMS
- Return Submission Package to State POC for Revision

Instructions

[Return to Package Task](#) [Execute Action](#)

6.8 Select “Yes”

State Editor 1 SC Updated By

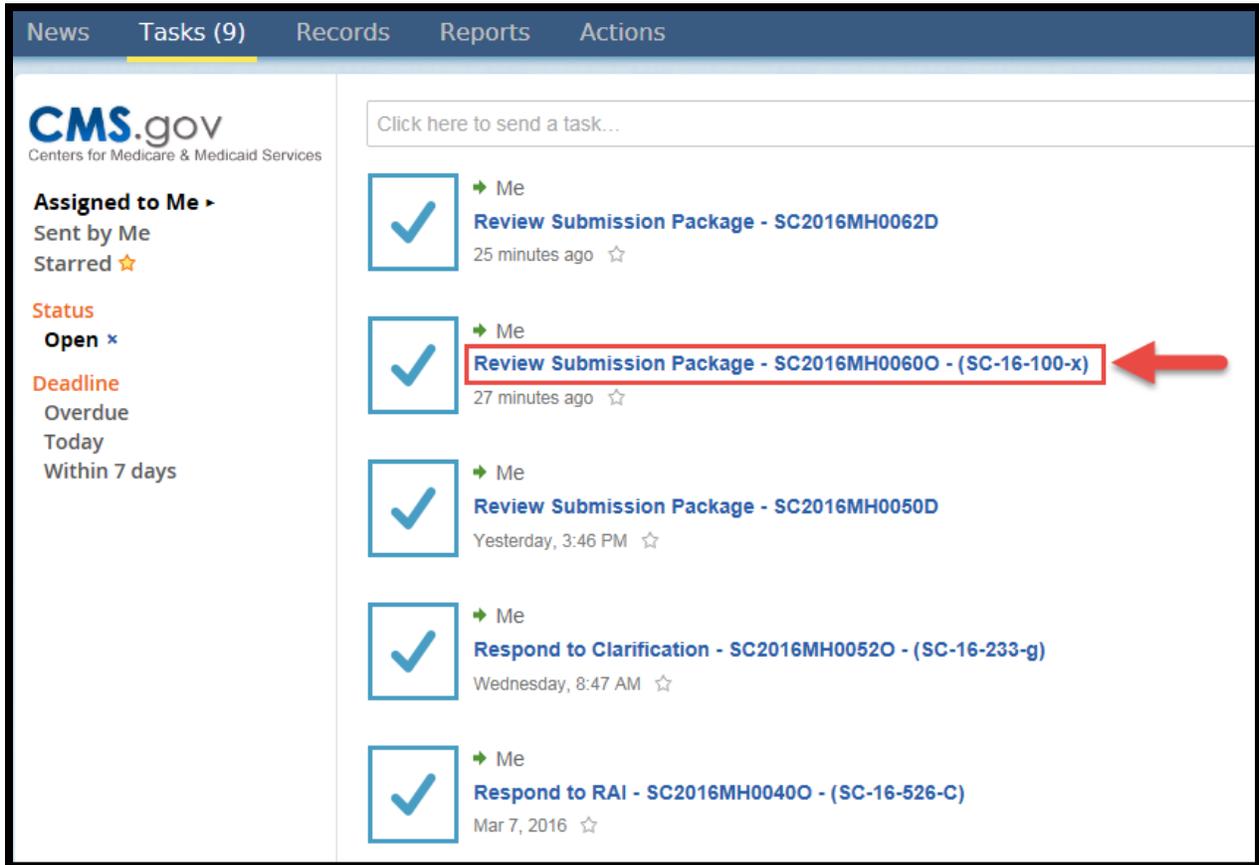
3/1 ed Date

Are you sure you want to Certify and Forward Submission Package to State POC for Submission to CMS?

Step 7: State Point of Contact- Submit Package to CMS

7.1 State Point of Contact logs into MACPro

7.2 Select the “Tasks” tab from the upper tool bar and then select the “Review Submission Package” task.

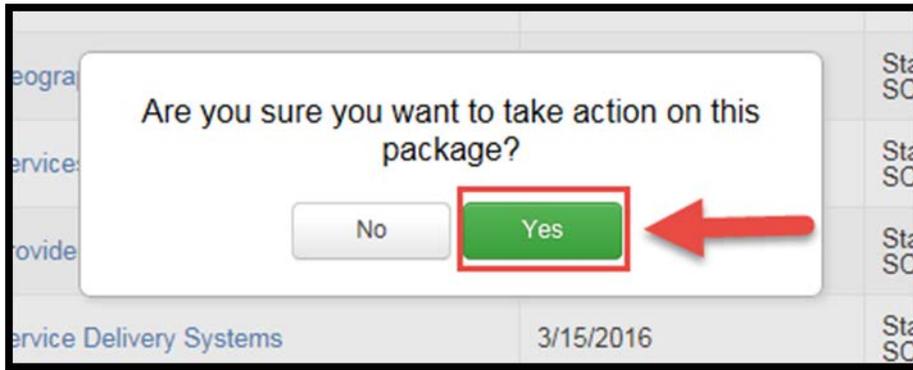


The screenshot shows the CMS.gov interface with the 'Tasks (9)' tab selected. The left sidebar contains navigation options: 'Assigned to Me', 'Sent by Me', 'Starred', 'Status' (Open), and 'Deadline' (Overdue Today, Within 7 days). The main content area displays a list of tasks, each with a checkmark icon, a green arrow pointing to 'Me', and a task title. The task 'Review Submission Package - SC2016MH00600 - (SC-16-100-x)' is highlighted with a red box and a red arrow pointing to it from the right. Other tasks include 'Review Submission Package - SC2016MH0062D', 'Review Submission Package - SC2016MH0050D', 'Respond to Clarification - SC2016MH0052O - (SC-16-233-g)', and 'Respond to RAI - SC2016MH00400 - (SC-16-526-C)'.

7.3 Scroll to the bottom of the screen and select the green button labeled “Take Action on Package”.



7.4 Select “Yes”



7.5 You will be redirected to a “Take Action on this Package” screen. There are two available workflow options. If you wish to submit the submission package to CMS, select “Submit the Submission Package to CMS”. If you wish to modify the package, select “Modify the Certified Submission Package”. If you choose to select “Submit the Submission Package to CMS” continue to follow these steps. If you wish to “Modify the Certified Submission Package” you will have to repeat the process of reviewing the package, forwarding the package to State Director for certification, and receiving the certified package to submit to CMS.

Take Action on Package

MEDICAID - Health Homes Program - Avni's Test Package Official - SC - 2016

Package Information

Package ID	SC2016MH00600	Submission Type	Official
Program Name	Avni's Test Package Official	State	SC
SPA ID	SC-16-100-x	Region	Atlanta, GA
Version Number	1	Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State Director SC 1 SC
Created Date	3/11/2016 1:37 PM EST	Updated Date	3/15/2016 4:34 PM EDT

Choose Action

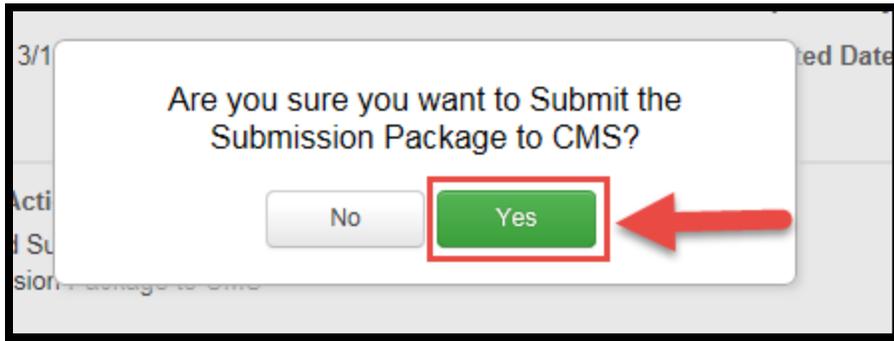
Available Workflow Actions *

- Modify the Certified Submission Package
- Submit the Submission Package to CMS

Instructions

[Return to Package Task](#) [Execute Action](#)

7.6 Select “Yes”. Once “Yes” is selected, you should also receive an email notification indicating you submitted your package to CMS.

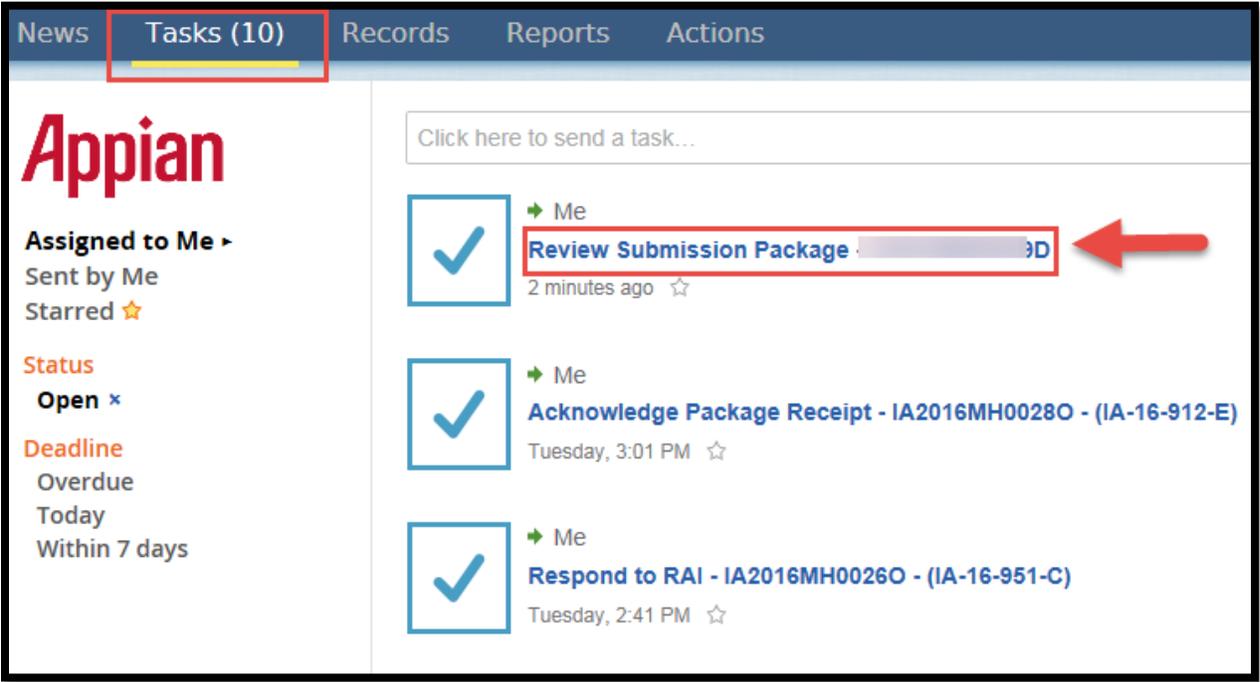


After CMS Submission

Closing a Draft Package

After CMS reviews the Draft Submission package, CMS will write their comments in the correspondence log, or the official record for the Draft Submission Package. They will then return the package to the state following their review.

1. Log in as State Point of Contact. The State Point of Contact is the only role that can close a Draft Package.
2. Navigate to the “Tasks” tab select the link to “Review Submission Package”



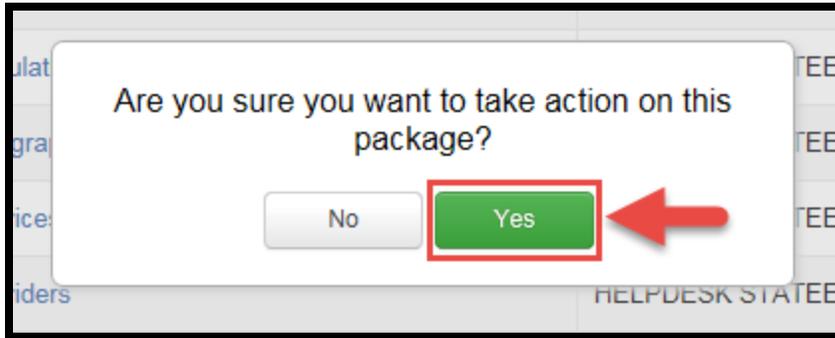
The screenshot shows the Appian interface with the 'Tasks (10)' tab selected. The task list includes:

- Review Submission Package (highlighted with a red box and a red arrow)
- Acknowledge Package Receipt - IA2016MH00280 - (IA-16-912-E)
- Respond to RAI - IA2016MH00260 - (IA-16-951-C)

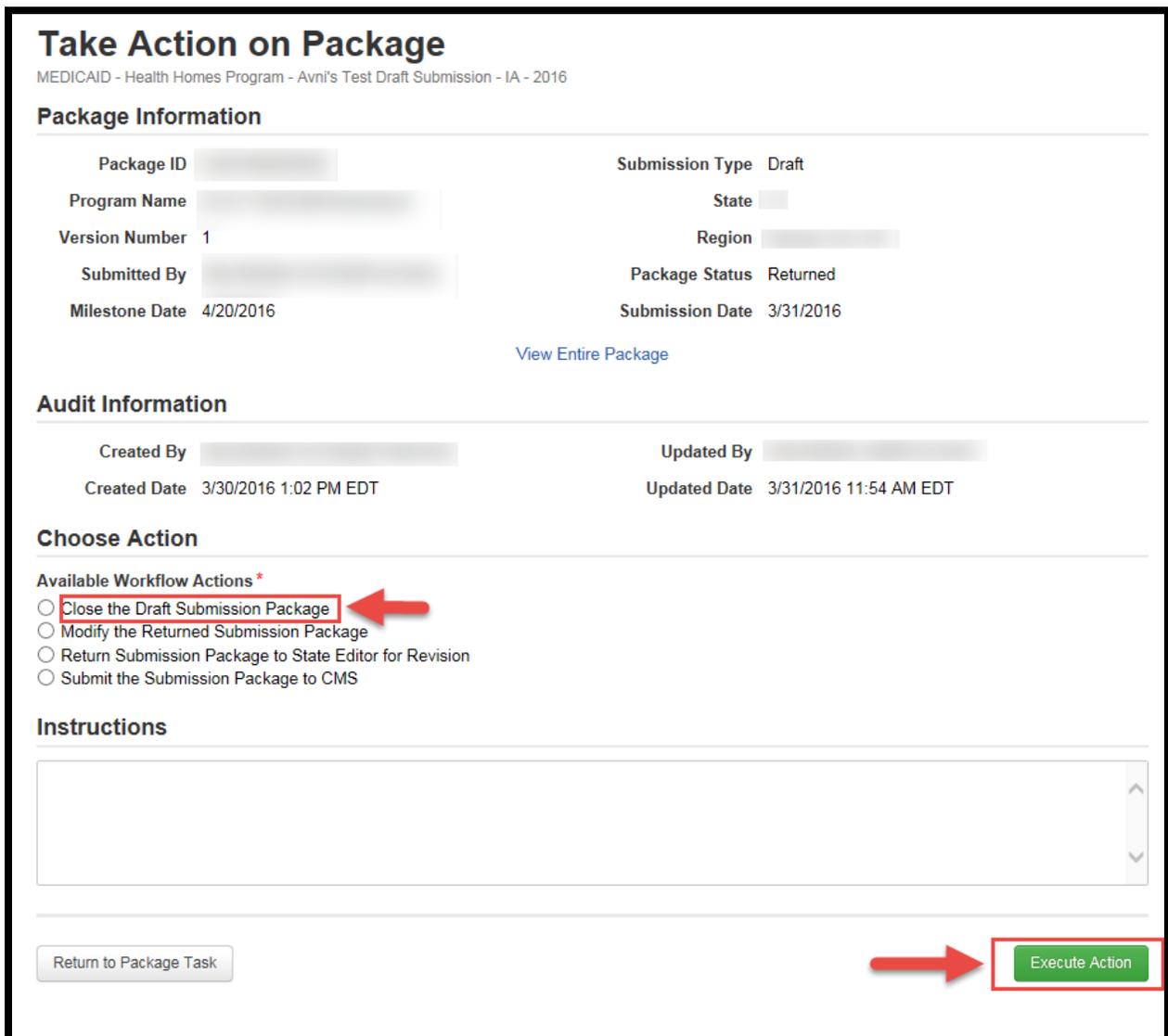
3. Select “Take Action on Package”.



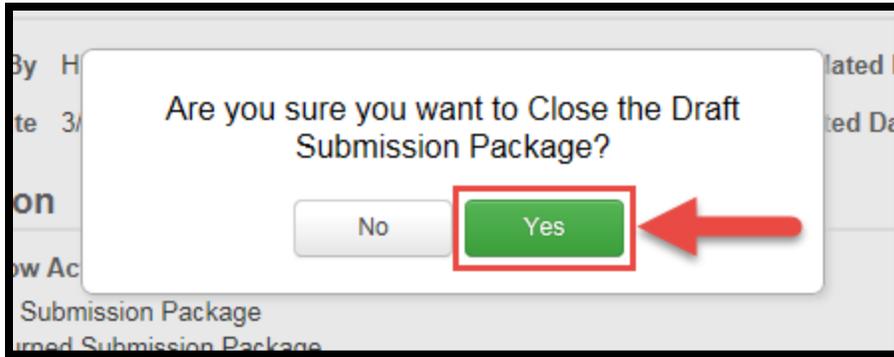
4. Select "Yes".



5. Select "Close Draft Submission Package" and then select "Execute Action"

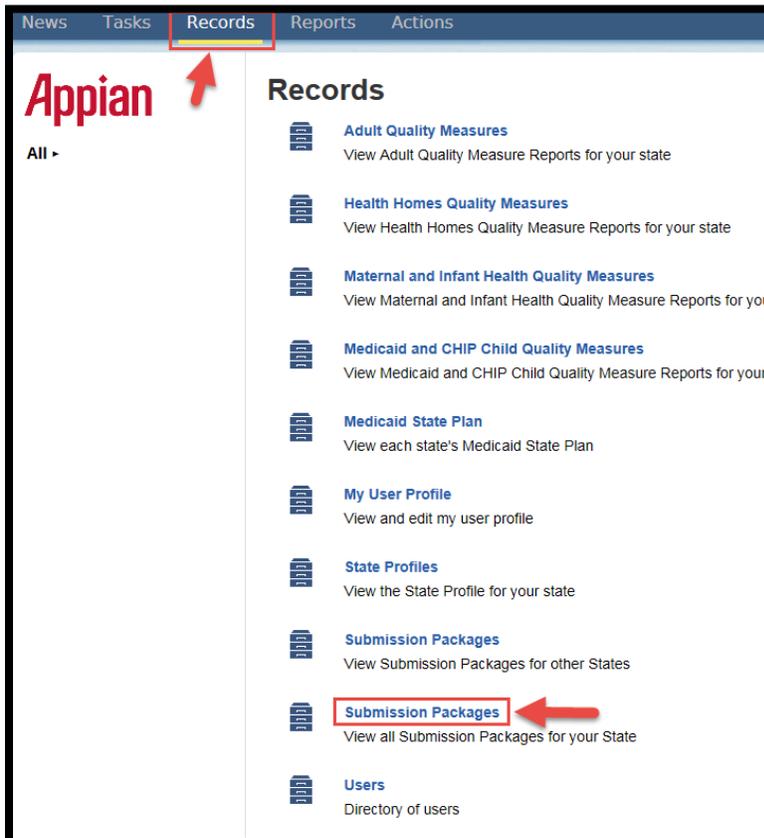


6. Select "Yes".



Converting a Draft Submission Package to an Official Submission Package

1. Log in as State Editor. State Editor is the only role that can convert a draft submission package to an official submission package.
2. Select the "Records" tab and then select "Submission Packages" for your state.



3. Select the submission package you wish to convert.

The screenshot shows the Appian interface with the 'Records' tab selected. The main content area displays a list of 'Submission Packages'. The first package, 'IA - Submission Package - IA2016MH0029D', is highlighted with a red rectangular box, and a red arrow points to it from the right. The package details for this entry are: Package Status: Closed, Creation Date: 3/30/2016 1:02 PM EDT, and 2 minutes ago. Other packages listed include 'IA - Submission Package - IA2016MH00280 - (IA-16-912-E)' (Approved, 3/26/2016 6:14 PM EDT) and 'IA - Submission Package - IA2016MH00260 - (IA-16-951-C)' (RAI, 3/25/2016 2:52 PM EDT). The left sidebar contains the Appian logo, a search bar, and filters for Package Creation Date, Package Status, and Program.

4. Select "Related Actions" from the left panel.

The screenshot shows the Appian interface with the 'Records' tab selected. The left sidebar is expanded to show the 'Summary' section, which includes 'News', 'Related Actions', and 'Reviewable Units'. The 'Related Actions' item is highlighted with a red rectangular box, and a red arrow points to it from the right. The main content area shows the details for the selected package, including the title 'IA - Su...', a 'Package I...', and fields for 'Packa...', 'Program N...', 'Version Nu...', and 'Submitt...

5. Select "Convert Draft Package to Official"

Records / Submission Packages

IA - Submission Package - IA2016MH0029D Follow

 **Convert Draft Package to Official** 

Convert the Draft Submission Package to Official Submission Package

6. Enter information for the SPA ID and Effective Date sections.

SPA ID and Effective Date

SPA ID* 

Note: SPA ID format must be SS-YY-NNN-x, with last letter(x) being optional to specific SPA types. SS - State, YY - Year and NNN - Sequence number for the current year.

SPA ID and Effective Date 

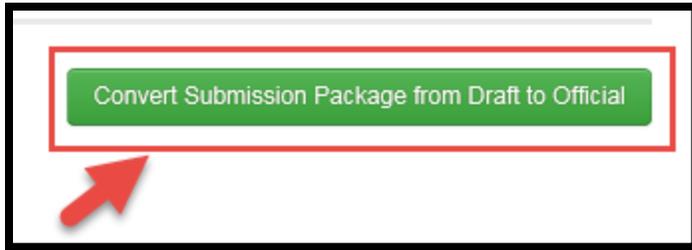
Do you want to enter the same effective date for all the Reviewable Units?

Yes

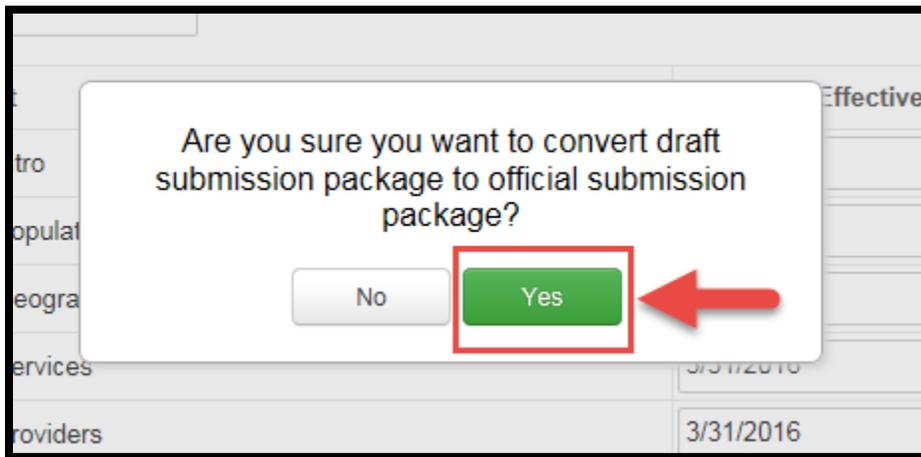
No

Reviewable Unit	Proposed Effective Date
Health Homes Intro	<input type="text" value="M/d/yyyy"/>
Health Homes Population and Enrollment Criteria	<input type="text" value="M/d/yyyy"/>
Health Homes Geographic Limitations	<input type="text" value="M/d/yyyy"/>
Health Homes Services	<input type="text" value="M/d/yyyy"/>
Health Homes Providers	<input type="text" value="M/d/yyyy"/>
Health Homes Service Delivery Systems	<input type="text" value="M/d/yyyy"/>
Health Homes Payment Methodologies	<input type="text" value="M/d/yyyy"/>
Health Homes Monitoring, Quality Measurement and Evaluation	<input type="text" value="M/d/yyyy"/>

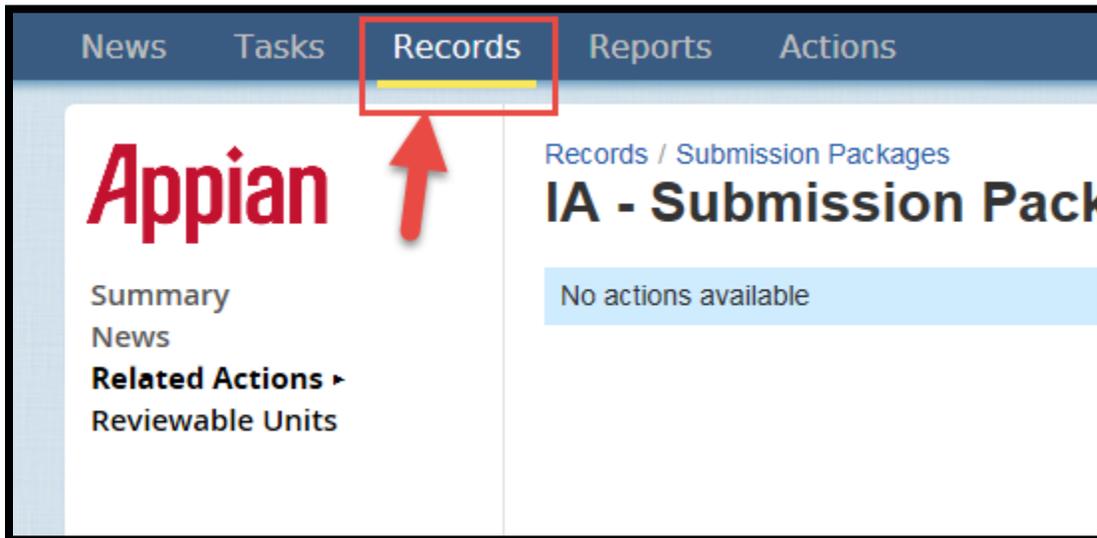
7. Select "Convert Submission Package from Draft to Official".



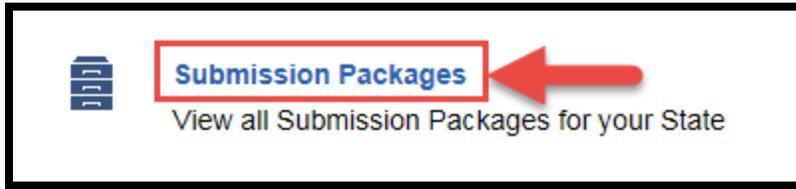
8. Select "Yes".



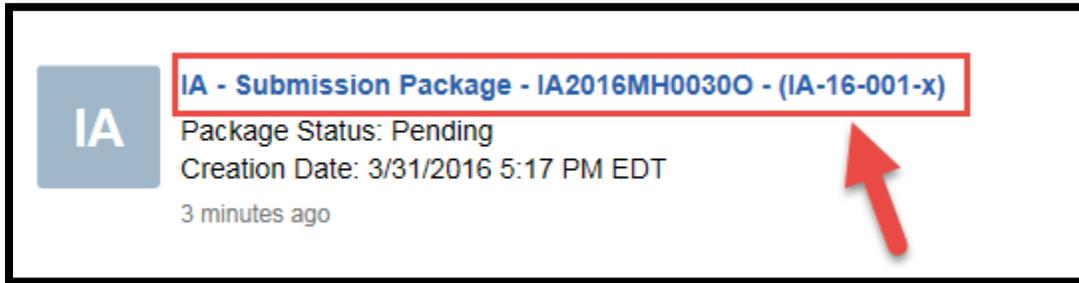
9. You will be redirected to the Records screen again. Select the "Records" tab from the upper tool bar.



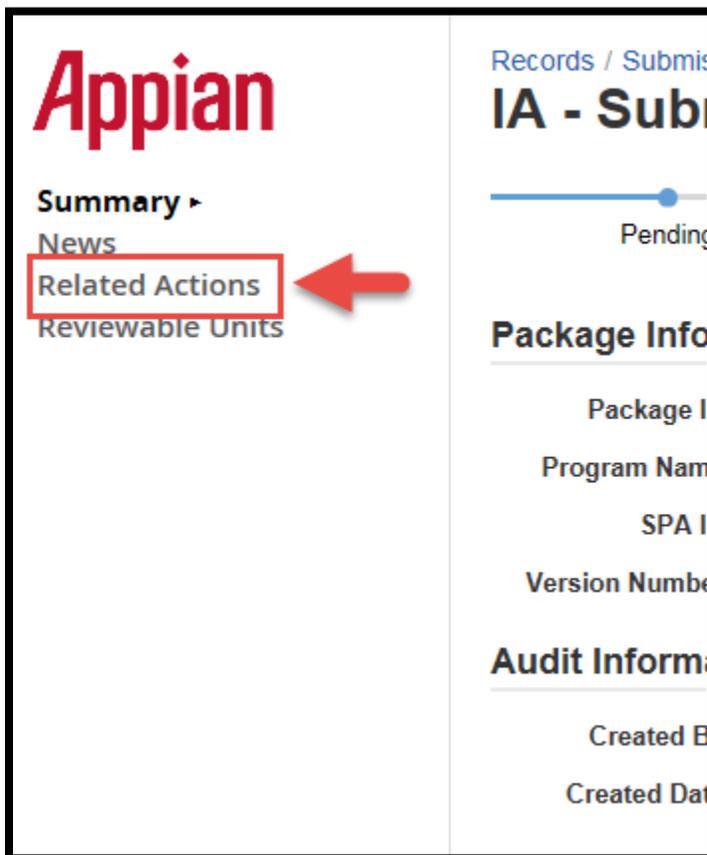
10. Select "Submission Packages" for your State.



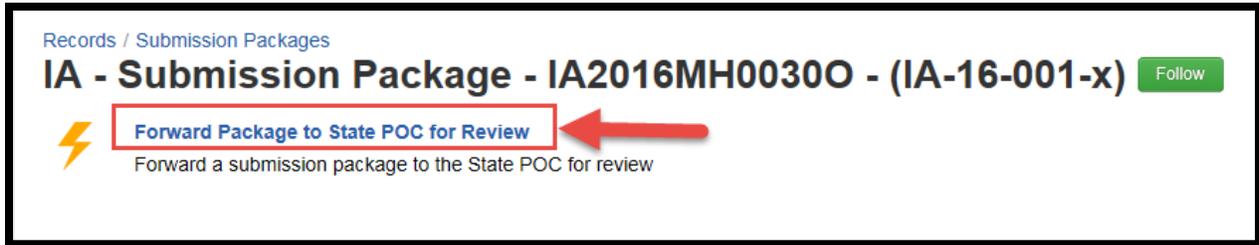
11. Select the new submission package ID that should end with an O and will also include the SPA ID.



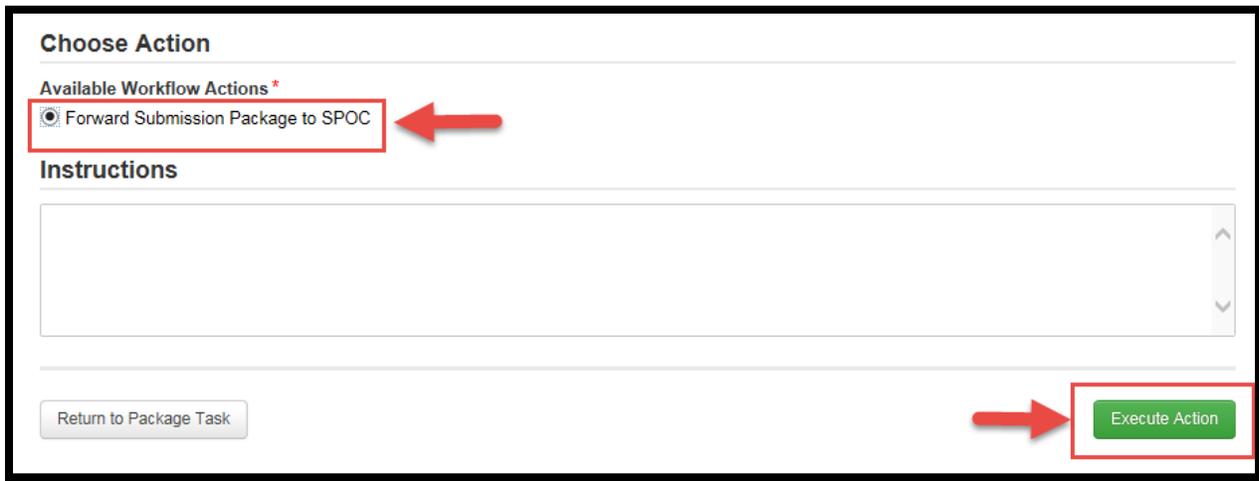
12. Select "Related Actions" from the left panel.



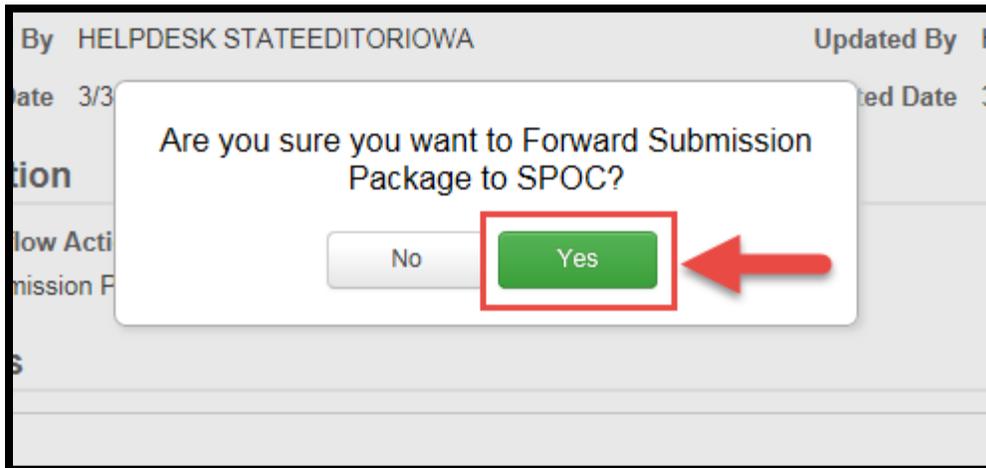
13. Select "Forward Package to State POC for Review".



14. Select "Forward Submission to SPOC" and then select "Execute Action".



15. Select "Yes".

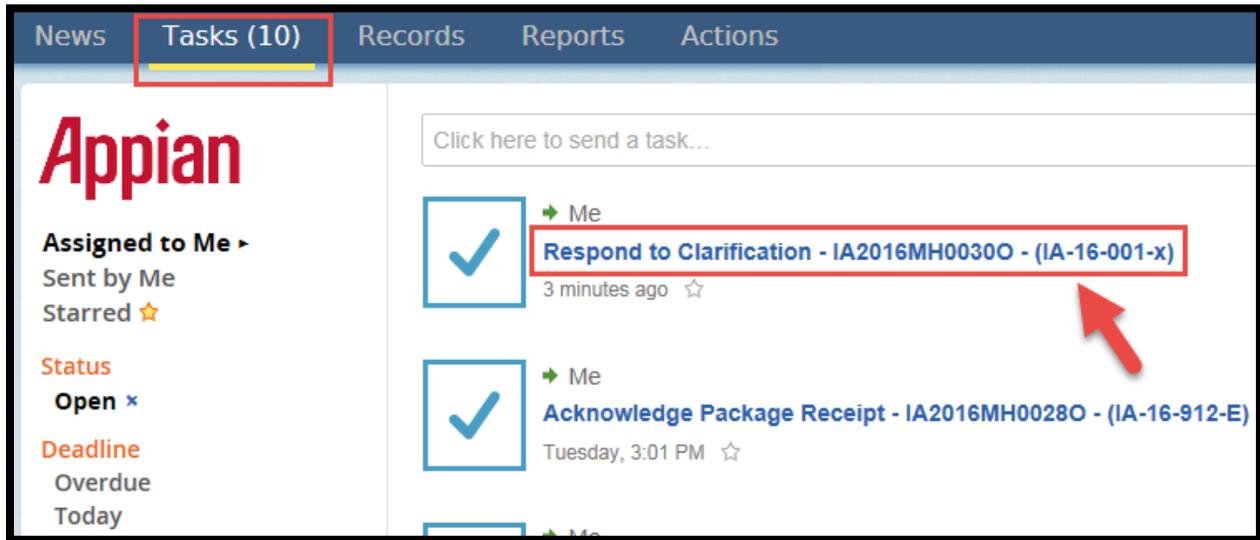


At this point, the SPOC will review the package, but does not have the ability to edit the package. The State Director will then certify the package, and the State Point of Contact will submit the OFFICIAL package to CMS. Once submitted it will start the policy clock and can be dispositioned by CMS.

Respond to a Clarification Request

When CMS submits a Clarification request, this sends the package back to the State and provides the State with an opportunity to respond to the request. This would be considered an “Unlock” in MMDL. If your state receives a Clarification request, the State Point of Contact who submitted the package will receive an email notification that the Clarification is in their Tasks.

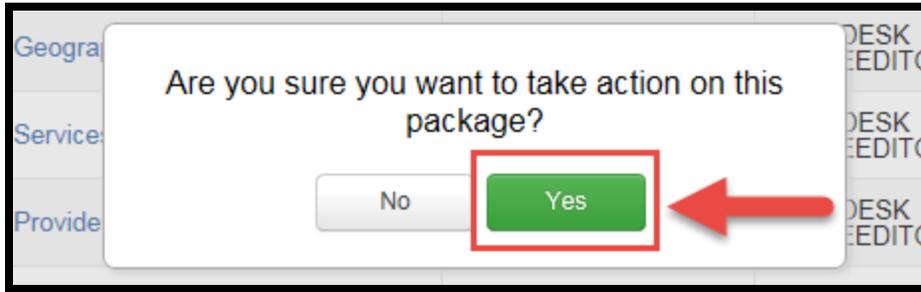
1. Log in as State Point of Contact.
2. Select the “Tasks” tab and then select your “Respond to Clarification” for your submission package.



3. The CMS Point of Contact may have added an entry to the Correspondence Log to indicate why the Clarification was initiated. It is suggested to go check the Correspondence log before responding to the clarification request.



4. Select "Yes".



5. Select "Submit the Submission Package to CMS" if there are no further edits needed and the correspondence log has been updated to reflect this. If further edits are needed you have the option to return the package to the State Editor for further revision or to modify the package as State Point of Contact.

Take Action on Package

MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Package Information

Package ID	IA2016MH00300	Submission Type	Official
Program Name	[Redacted]	State	[Redacted]
SPA ID	IA-16-001-x	Region	[Redacted]
Version Number	1	Package Status	Clarification
Submitted By	[Redacted]	Submission Date	4/1/2016
		Regulatory Clock	90 days remain
		Review Status	Clarification

[View Entire Package](#)

Audit Information

Created By	[Redacted]	Updated By	[Redacted]
Created Date	[Redacted]	Updated Date	[Redacted]

Choose Action

Available Workflow Actions *

- Return Submission Package to State Editor for Revision
- Submit the Submission Package to CMS
- Modify the Returned Submission Package

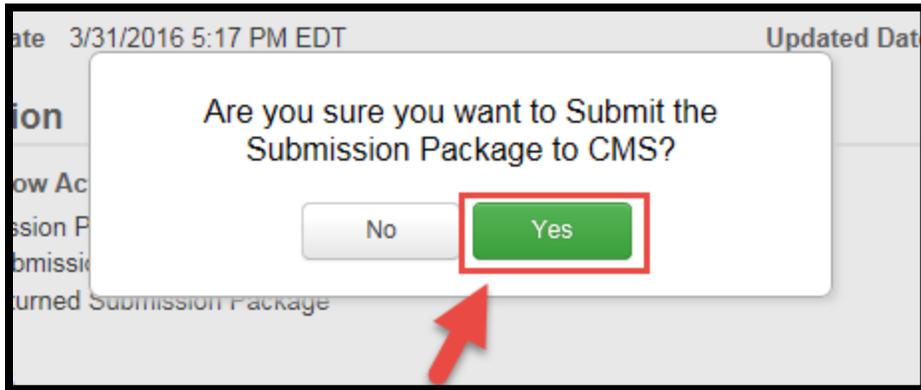
Instructions

[Return to Package Task](#) [Execute Action](#)

6. Select "Execute Action".



7. Select "Yes".



This will return the package to CMS for their continued review on the same policy clock as the original official submission. CMS will receive a notification letting them know that the package has been re-submitted.

Respond to Request for Additional Information (RAI)

RAI stops the 90 day clock and can only be used once per submission. The RAI includes an RAI form where CMS lists specific questions or direction within the form regarding how the package needs to be updated prior to an approval. Due to the addition of the RAI form, States will no longer receive an RAI letter.

1. Log in as State Point of Contact.

2. Select the "Tasks" tab and then select "Respond to RAI" for your submission package.

News **Tasks (10)** Records Reports Actions

Appian

Assigned to Me ▶
Sent by Me
Starred ☆

Click here to send a task...

✓ Me
Respond to RAI - IA2016MH00300 - (IA-16-001-x)
2 minutes ago ☆

3. Select "View/Respond to RAI".

View/Respond to RAI Take Action on Package

4. To respond to the question, select the Question ID.

Respond to RAI
MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Submission Package IA2016MH00300 Agency Name Iowa Medicaid Agency
Authority Medicaid State Plan Submission Date Apr 1, 2016
State IA

[View Entire Package](#)

All Questions
Click on a question ID to view details and respond to the question

Question ID ↑	Reference	CMS question to the State	State Response
1	Training Submission Package	Is everything in the Health Homes Delivery Systems RU complete?	

Submission Package was updated by the State in accordance with the response above

Yes
 No

[Return to Package Summary](#)

5. You have the option to answer the question in the text box. However if you need to reference a reviewable unit you may do so by right clicking the “View Entire Package”.

Respond to RAI

MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Submission Package	IA2016MH00300	Agency Name	Iowa Medicaid Agency
Authority	Medicaid State Plan	Submission Date	Apr 1, 2016
State	IA		

[View Entire Package](#) 

State RAI Response to CMS

Question Details

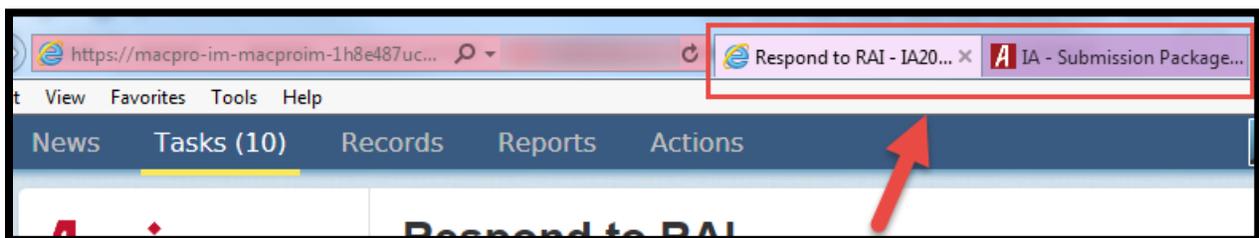
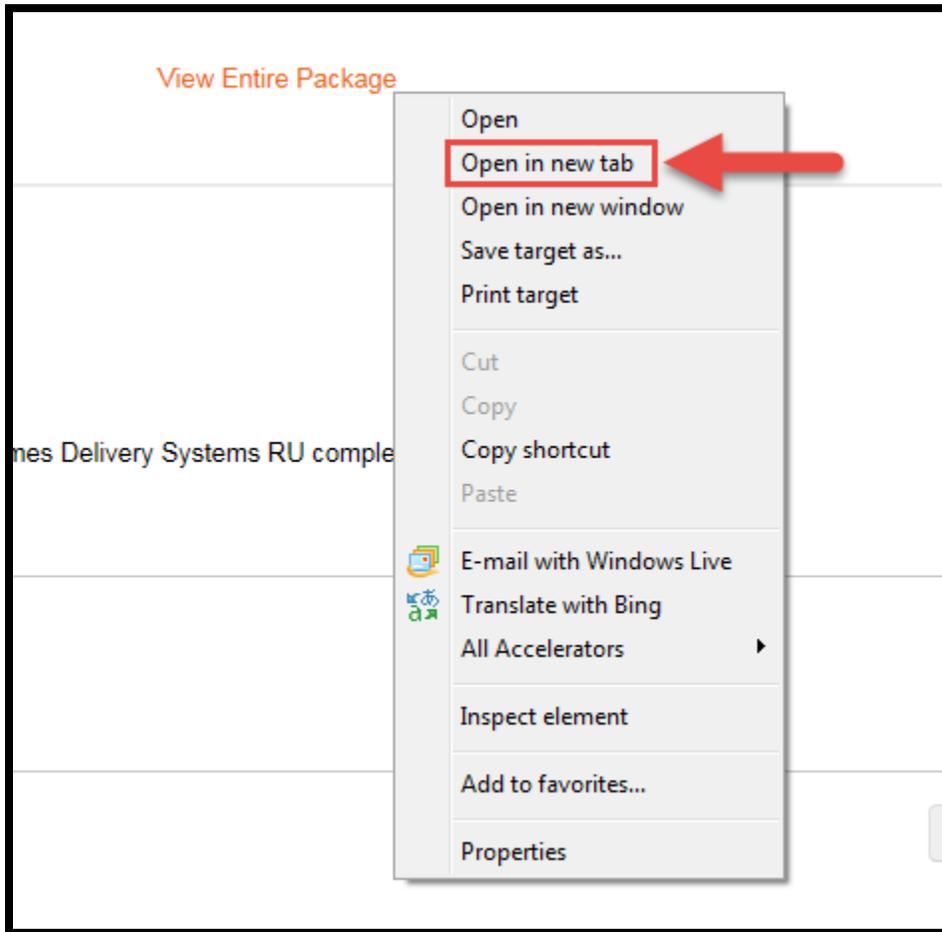
Question 1

Reference	Training Submission Package
CMS question to the State	Is everything in the Health Homes Delivery Systems RU complete?
Policy/Regulation	Delivery Systems

*** State Response**



6. Select “Open in New tab” from the menu. This will allow you to reference the reviewable units in a separate tab within the same browser. It is suggested that when you use multiple tabs in MACPro, you edit information in one tab, and use the other tab as a reference.



- Once you are done referencing your report, you can return to the tab with the Respond to RAI form. Enter information in the “State Response” text box and then select “Save Response”.

State RAI Response to CMS

Question Details

Question 1

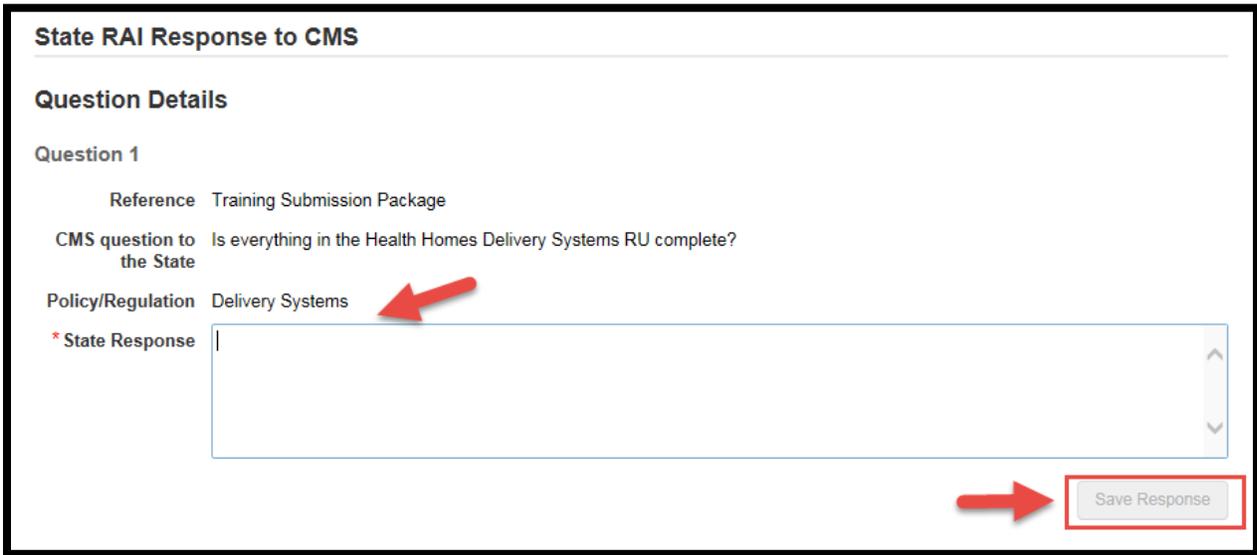
Reference Training Submission Package

CMS question to the State Is everything in the Health Homes Delivery Systems RU complete?

Policy/Regulation Delivery Systems

* State Response

Save Response



- Select “Yes” and then “Return to Package Summary”.

All Questions

Click on a question ID to view details and respond to the question

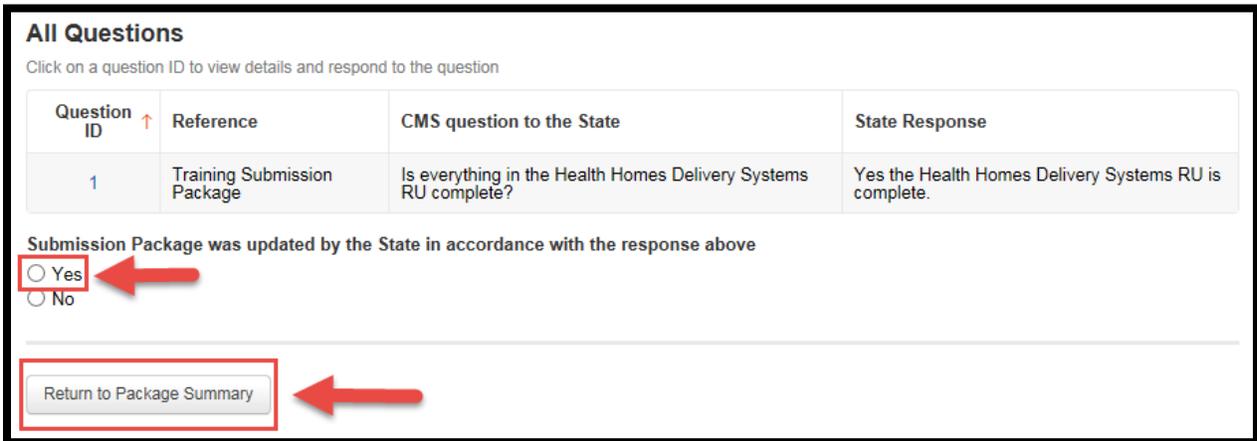
Question ID ↑	Reference	CMS question to the State	State Response
1	Training Submission Package	Is everything in the Health Homes Delivery Systems RU complete?	Yes the Health Homes Delivery Systems RU is complete.

Submission Package was updated by the State in accordance with the response above

Yes

No

Return to Package Summary



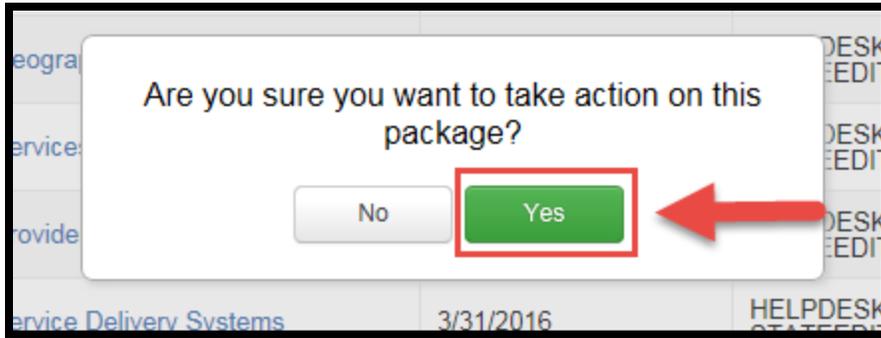
- Select “Take Action on Package”.

View/Respond to RAI

Take Action on Package



10. Select "Yes".



11. You now have the option to submit the response to CMS, return the package to the State Editor for further revision or modify the package. If you submit the response to CMS or to return the package to the State Editor, you should select “Execute Action” and then select “Yes”. If you choose to modify the package, continue to follow these steps. Select “Modify the Returned Submission Package” and then select “Execute Action”.

Take Action on Package

MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Package Information

Package ID	IA2016MH00300	Submission Type	Official
Program Name	[REDACTED]	State	[REDACTED]
SPA ID	IA-16-001-x	Region	[REDACTED]
Version Number	1	Package Status	RAI
Submitted By	HELPDESK STATESPOCIOWA	Submission Date	4/1/2016
		RAI Period	90 days remain Awaiting State Response
		Review Status	RAI

[View Entire Package](#)

Audit Information

Created By	[REDACTED]	Updated By	[REDACTED]
Created Date	[REDACTED]	Updated Date	[REDACTED]

Choose Action

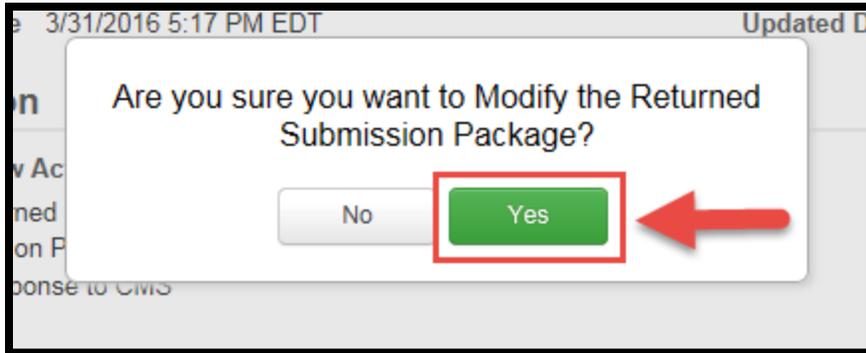
Available Workflow Actions *

- Modify the Returned Submission Package** 
- Return Submission Package to State Editor for Revision
- Submit RAI Response to CMS

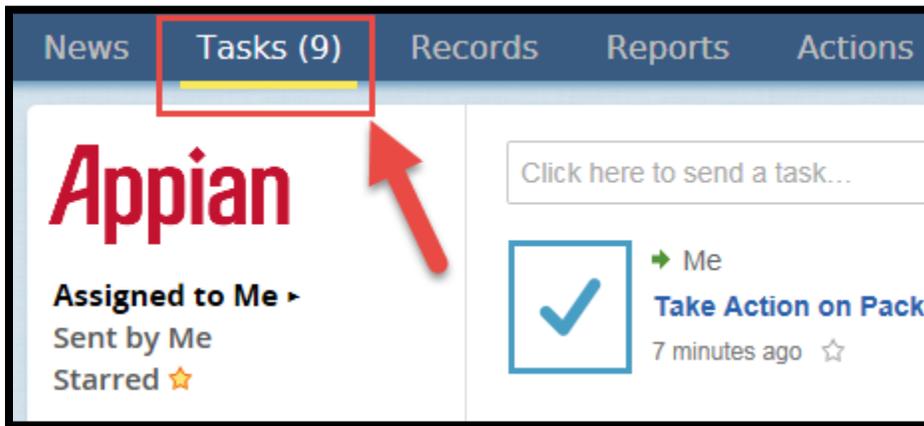
Instructions



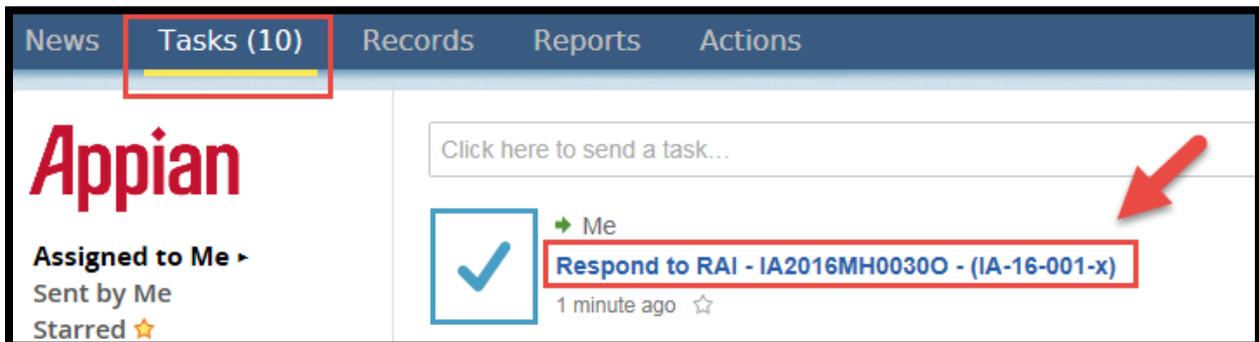
12. Select "Yes".



13. Select the "Tasks" tab to refresh it.



14. You will now see the task to "Respond to RAI" again. This time, you will have the ability to edit the reviewable units.



15. You can select the blue links to each reviewable unit you wish to edit. After you have edited a reviewable unit you must re-validate the page and select “Save Reviewable Unit”.

Submission Form - Reviewable Units

Reviewable Unit	Updated By	Updated Date	Status
Submission - Summary	HELPDESK STATEEDITORIOWA	3/31/2016 10:57 AM EDT	✓
Submission - Medicaid State Plan	HELPDESK STATEEDITORIOWA	3/30/2016 1:02 PM EDT	✓
Submission - Public Comment	HELPDESK STATEEDITORIOWA	3/30/2016 1:49 PM EDT	✓
Submission - Tribal Input	HELPDESK STATEEDITORIOWA	3/30/2016 1:49 PM EDT	✓
Submission - SAMHSA Consultation	HELPDESK STATEEDITORIOWA	3/30/2016 1:50 PM EDT	✓

Health Homes SPA - Reviewable Units

Reviewable Unit	Proposed Effective Date	Updated By	Updated Date	Status
Health Homes Intro	3/31/2016	HELPDESK STATEEDITORIOWA	3/30/2016 3:11 PM EDT	✓
Health Homes Population and Enrollment Criteria	3/31/2016	HELPDESK STATEEDITORIOWA	3/30/2016 3:12 PM EDT	✓
Health Homes Geographic Limitations	3/31/2016	HELPDESK STATEEDITORIOWA	3/30/2016 3:13 PM EDT	✓
Health Homes Services	3/31/2016	HELPDESK STATEEDITORIOWA	3/30/2016 3:17 PM EDT	✓
Health Homes Providers	3/31/2016	HELPDESK STATEEDITORIOWA	3/30/2016 4:41 PM EDT	✓
Health Homes Service Delivery Systems	3/31/2016	HELPDESK STATEEDITORIOWA	3/31/2016 10:59 AM EDT	✓

Validation & Navigation

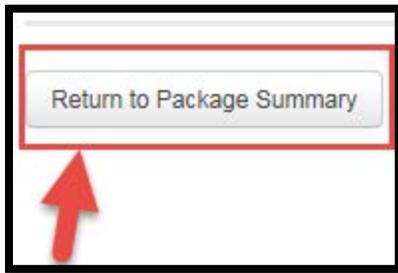
Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

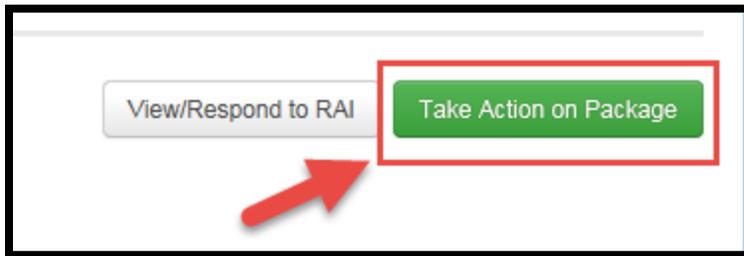
PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Return to Package Summary Save Reviewable Unit Go to Selected Reviewable Unit

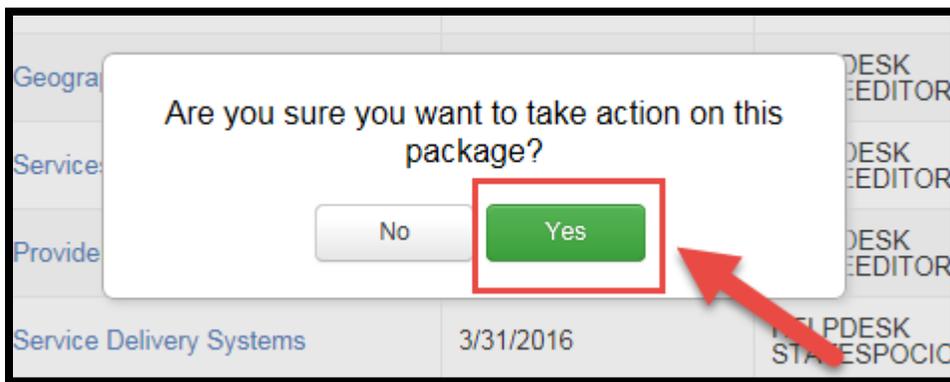
16. Select "Return to Package Summary".



17. Select "Take Action on Package".



18. Select "Yes".



19. Select "Submit to RAI Response to CMS" and then select "Execute Action".

Take Action on Package

MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Package Information

Package ID	IA2016MH00300	Submission Type	Official
Program Name	[REDACTED]	State	[REDACTED]
SPA ID	IA-16-001-x	Region	[REDACTED]
Version Number	2	Package Status	RAI
Submitted By	[REDACTED]	Submission Date	4/1/2016
		RAI Period	90 days remain Awaiting State Response
		Review Status	RAI

[View Entire Package](#)

Audit Information

Created By	[REDACTED]	Updated By	[REDACTED]
Created Date	[REDACTED]	Updated Date	[REDACTED]

Choose Action

Available Workflow Actions *

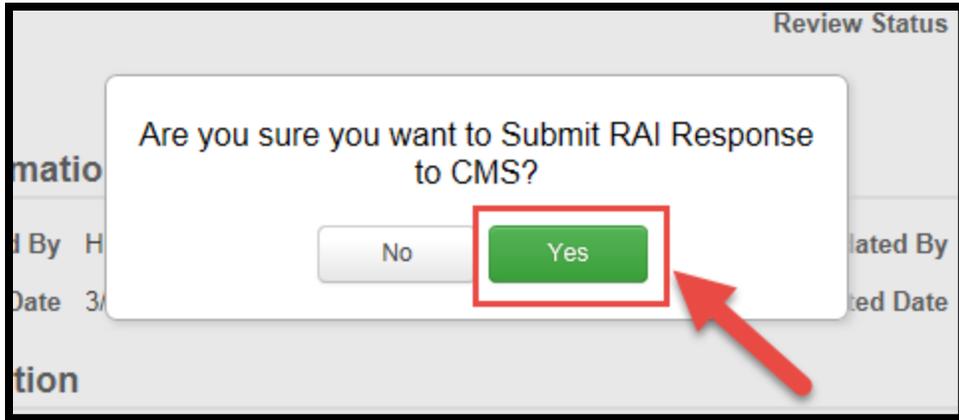
- Return Submission Package to State Editor for Revision
- Submit RAI Response to CMS

Instructions

[REDACTED]

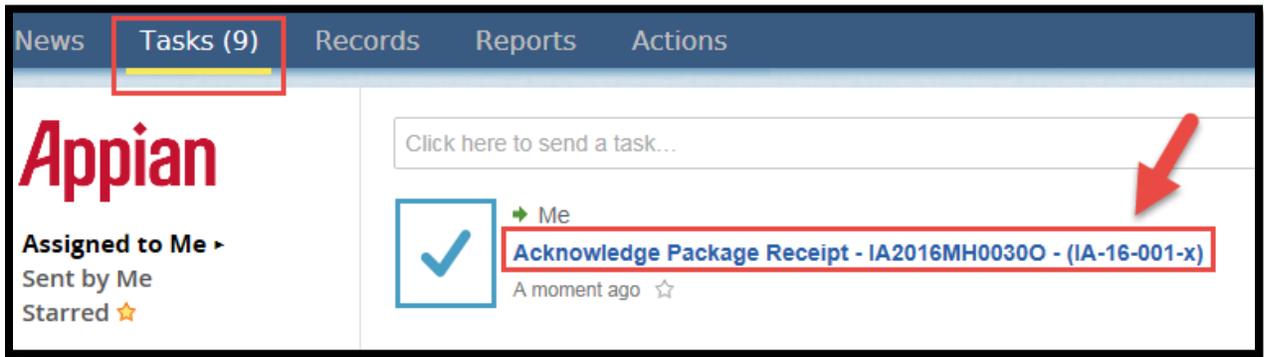
[Return to Package Task](#) [Execute Action](#)

20. Select "Yes".



Acknowledge Disposition

1. Once the CMS POC has approved the submission package the State Point of Contact will receive a notification to acknowledge the package receipt. After logging in as State Point of Contact, select "Tasks" from the upper tool bar and then select "Acknowledge Package Receipt" for your submission package.



2. Select "Acknowledge the Approved Submission Package" and then select "Execute Action".

Acknowledge Package Receipt - IA2016MH00300

MEDICAID - Health Homes Program - Avni's Test Draft Submission - IA - 2016

Package Information

Package ID	IA2016MH00300	Submission Type	Official
Program Name	[REDACTED]	State	[REDACTED]
SPA ID	IA-16-001-x	Region	[REDACTED]
Version Number	2	Package Status	Approved
Submitted By	[REDACTED]	Submission Date	4/1/2016
Package Disposition		Approval Date	4/1/2016 4:02 PM EDT

[View Entire Package](#)

Audit Information

Created By	[REDACTED]	Updated By	[REDACTED]
Created Date	[REDACTED]	Updated Date	[REDACTED]

Choose Action

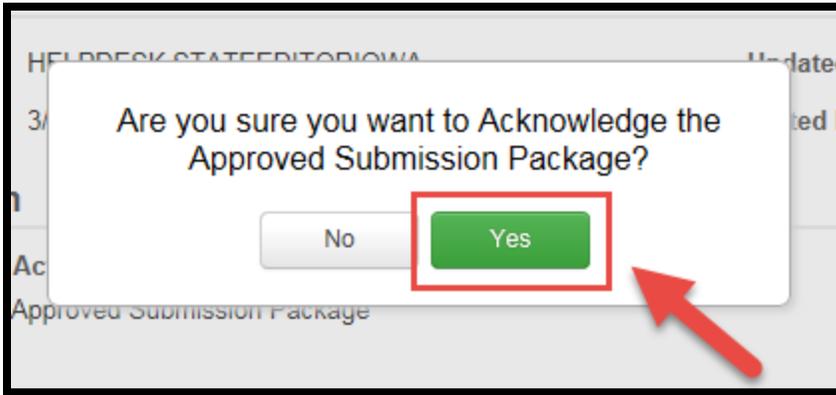
Available Workflow Actions *

- Acknowledge the Approved Submission Package 

Instructions

 Execute Action

3. Select "Yes".



Amendments

What to Keep in Mind When Working with Amendments

1. When an amendment submission package is created, you may choose to amend certain Reviewable Units within a Health Homes program.
 - a. When a Reviewable Unit is added to the amendment submission package, MACPro populates the fields within that Reviewable Unit with the information from the currently approved Reviewable Unit (for the program you are amending) with the latest effective date, regardless if it's in the past or future. Keep in mind, this may not necessarily be the most recently approved version.
2. There are two pages that show indicators for whether a reviewable unit you are amending is included in another package or not.
 - a. In the first page (as shown below), you will see in the right hand column of the table if a Reviewable Unit is included in another submission package.
 - i. This is important for version control and can be used for your reference. If the Reviewable Unit is included in another submission package, we encourage you to wait for that submission package to be reviewed and closed prior to submitting another amendment. If you do not wait, please refer to the scenarios in number 3 below. Please Note: **This indicators will only be flagged if you have another submission package with the same Reviewable Unit included either being worked on by your State or in CMS review.**

<input type="checkbox"/> Reviewable Unit	Included in Another Submission Package
<input type="checkbox"/> Health Homes Intro	<input checked="" type="radio"/>
<input type="checkbox"/> Health Homes Population and Enrollment Criteria	<input type="radio"/>
<input type="checkbox"/> Health Homes Geographic Limitations	<input type="radio"/>
<input type="checkbox"/> Health Homes Services	<input type="radio"/>
<input type="checkbox"/> Health Homes Providers	<input type="radio"/>
<input type="checkbox"/> Health Homes Service Delivery Systems	<input checked="" type="radio"/>
<input type="checkbox"/> Health Homes Payment Methodologies	<input checked="" type="radio"/>
<input type="checkbox"/> Health Homes Monitoring, Quality Measurement and Evaluation	<input checked="" type="radio"/>

1-8 of 8

- b. On the second page that shows indicators (as shown below), there is an indicator for if there are other approved versions. This indicator is important so that you know if there are other approved submission packages for this Reviewable Unit within the program that may not be effective yet. If you hover over the image in the right column, a message appears indicating “Reviewable unit does not have another approved version with future effective date”. You may use this information for your reference. Please Note: **This indicator will only be flagged if you have another approved Submission package with a future effective date.**

Audit Information

Created By: [Redacted] Updated By: [Redacted]
 Created Date: [Redacted] Updated Date: [Redacted]

Submission Form - Reviewable Units

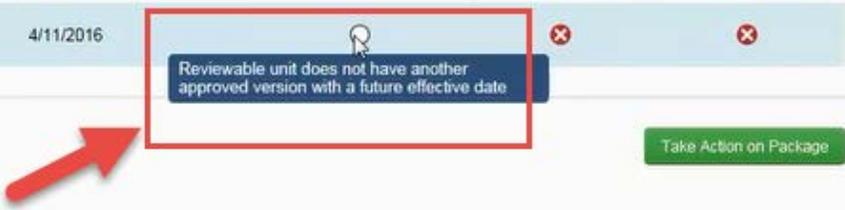
Reviewable Unit	My Review Status	Team Review Status
Submission - Summary	✓	✓
Submission - Medicaid State Plan	✓	✓
Submission - Public Comment	✓	✓
Submission - Tribal Input	✓	✓
Submission - SAMHSA Consultation	✓	✓

Health Homes SPA - Reviewable Units

Reviewable Unit	Proposed Effective Date	Other Approved Version	My Review Status	Team Review Status
Health Homes Population and Enrollment Criteria	4/11/2016			

Reviewable unit does not have another approved version with a future effective date

Take Action on Package

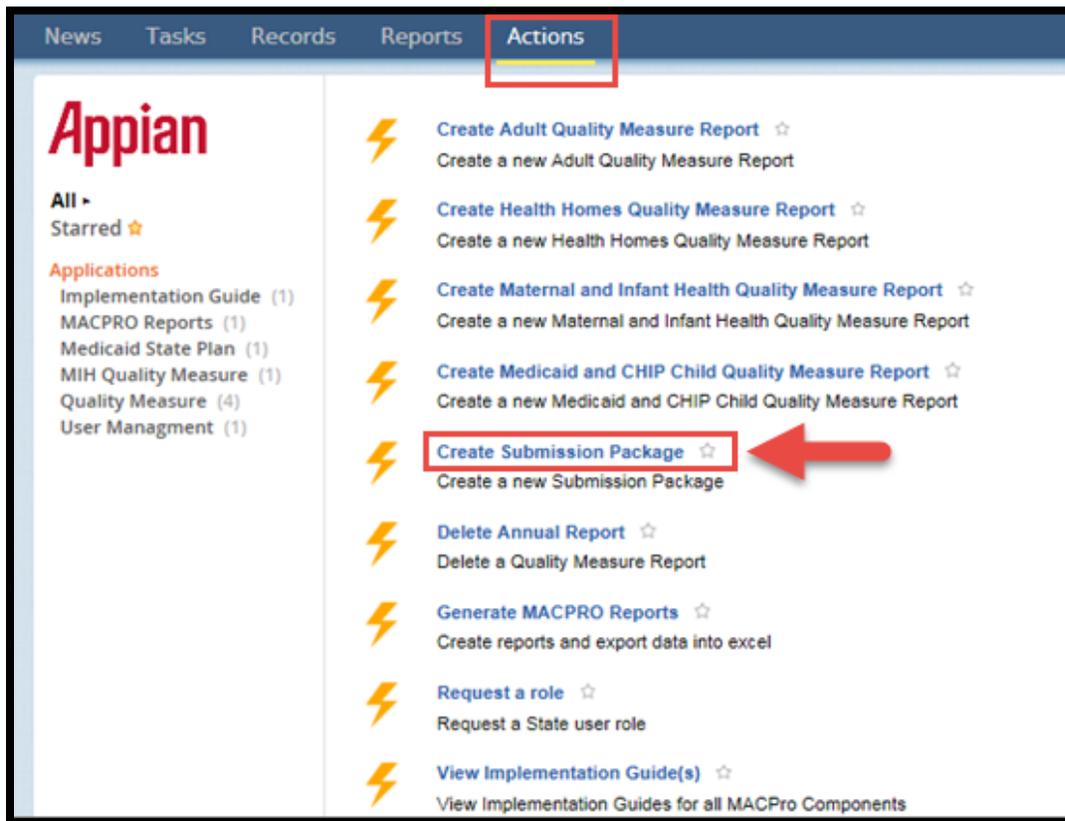


3. If a state can't wait for a current review of an amendment with a specific reviewable unit to be complete due to an effective date, this new amendment (with the same reviewable unit) will not include the information within the Reviewable Unit from the submission that is currently under review. To avoid overwriting, the state has a few options (**keep in mind, this only applies to when both amendment submissions are impacting the same Reviewable Unit**):
- Copy the information from the first submission Reviewable Unit (the amendment under review) into the second amendment Reviewable Unit prior to submitting it. (Assuming that the amendment currently under review will be approved prior to the amendment you are currently submitting).

- b. After submitting the second amendment and before CMS approves it, CMS will need to send the submission package back via Clarification or RAI so that the State can include the information from the first submission into the second (this is only the case for when a reviewable unit is in both amendment submission packages and when the first submission package is approved first).
- c. Submit the second amendment without including the information from the first amendment (this is only the case for when the same Reviewable Unit is in both submissions). If the second amendment is approved first. The first amendment, will need to be sent back to the state via Clarification or RAI to include the information from the second amendment, where applicable in the same Reviewable Unit, to avoid overwriting.

Create an Amendment to an Existing Health Homes Program

1. Log in to MACPro as the State Editor
2. Select the “Actions” tab from the upper tool bar, and then select “Create a Submission Package”



3. Select "View All Responses" on the Submission Summary Reviewable Unit.

Submission - Summary

MEDICAID - - - -

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	N/A	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

View All Responses

4. Enter in all the information as shown in [Step 2](#) of this guide. After selecting "Save Reviewable Unit", select "Submission-Medicaid State Plan" from the Navigate to Reviewable Unit drop down menu. Then select "Go to Selected Reviewable Unit".

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: This form can be validated only after the Submission - Medicaid State Plan is complete.

Navigate to Reviewable Unit
Submission - Medicaid State Plan

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

7. It is possible to start drafting a submission package while a Reviewable Unit within the program is included in another submission package. When you add a Reviewable Unit to an amendment, it pulls the information with the latest effective date that has been approved. The indicator, as shown in the screen shot on pg. 91, on the right lets us know which Reviewable Unit is included in another submission package that has not been dispositioned. This indicator is important, because if we do not include the other amendment information in this particular reviewable unit – there is a potential to overwrite the other information that’s not currently in this submission package. Here is a situation that details how to avoid overwriting:
 1. Let’s say today, we create a submission package with an effective date of tomorrow for the Health Homes Services Reviewable Unit that we have not yet submitted. ***(We have checked the Health Homes Services Reviewable Unit checkbox and pressed Save to add it to the package. The indicator next to this unit would be flagged in this situation.)***
 2. Before we submit this submission package with an effective date of tomorrow,, another submission package that is currently in CMS review is approved with an effective date of two days from now (the day after tomorrow). This submission package is also an amendment to the Health Homes Services Reviewable Unit. When we created our new amendment, the information for second amendment that was just approved was not yet populated by MACPro.
 3. We can then have the approved information for the Health Homes Services Unit with the latest effective date (the second submission that was just approved) within a Reviewable Unit populated by checking the box next to the currently approved Health Homes Services Reviewable Unit and then selecting “Save Reviewable Unit” at the bottom of the screen. Essentially, you previously removed the Health Homes Services Reviewable Unit and are now re-adding it. This should only be done if it is easier for you. In other situations it may be easier to just add the information in manually from the approved amendment. ***(At this point, before we checkmark the Health Homes Service Reviewable Unit, the indicator would not be flagged. Once a package is approved, regardless of effective date, the indicator on this page will not be flagged. This indicator will be flagged if the package is included in another submission package that has not yet been dispositioned on the State or CMS side.)***

This image displays the information detailed above in number 7.

Health Homes SPA - Reviewable Units

Reviewable Unit	Included in Another Submission Package
<input checked="" type="checkbox"/> Health Homes Intro	●
<input type="checkbox"/> Health Homes Population and Enrollment Criteria	○
<input type="checkbox"/> Health Homes Geographic Limitations	○
<input type="checkbox"/> Health Homes Services	○
<input type="checkbox"/> Health Homes Providers	○
<input checked="" type="checkbox"/> Health Homes Service Delivery Systems	●
<input checked="" type="checkbox"/> Health Homes Payment Methodologies	●
<input checked="" type="checkbox"/> Health Homes Monitoring, Quality Measurement and Evaluation	●

1-8 of 8

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Warning: Any field containing more than 4000 characters will be truncated when saved.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

8. After selecting “Save Reviewable Units” the drop down menu under Navigate to Reviewable Unit will be updated to include the units you checked and saved.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: If validation fails, errors will appear in red above.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no valid OMB control number. The valid OMB control number for this information collection is estimated to average 40 hours per response, including the time to review instruction and review the information collection. If you have comments concerning the accuracy of the information collection, please write them on this form and mail to: 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05

Navigate to Reviewable Unit

- Select Reviewable Unit --
- Submission - Summary
- Submission - Medicaid State Plan
- Submission - Public Comment
- Submission - Tribal Input
- Submission - SAMHSA Consultation
- Health Homes Intro
- Health Homes Service Delivery Systems
- Health Homes Payment Methodologies
- Health Homes Monitoring, Quality Measurement and Evaluation

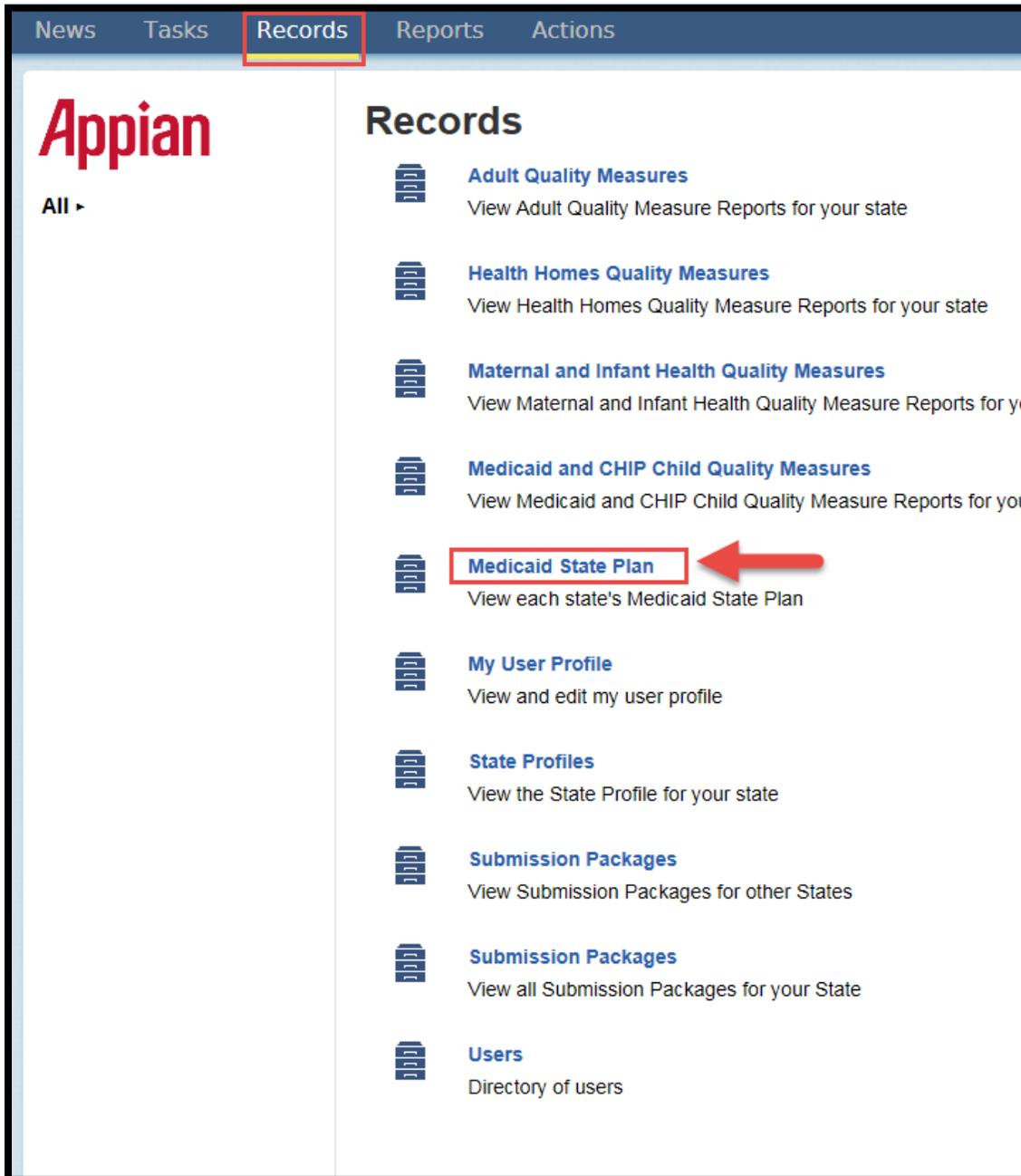
Exit Save Reviewable Unit Go to Selected Reviewable Unit

9. If you decide before submitting that you would like to amend another Health Homes Reviewable Unit within this package, you can do so by updating the check list, and saving on the Submission - Medicaid State Plan Reviewable Unit page. This action will update the options available in the Reviewable Unit drop down list.

Additional Actions

View Current, Previous, and Future State Plan Content

1. Under the “Records” tab, select “Medicaid State Plan”.



The screenshot displays the Appian interface with the 'Records' tab selected. The 'Records' section lists several options, with 'Medicaid State Plan' highlighted by a red box and a red arrow pointing to it. The 'Records' tab is also highlighted with a red box.

Appian
All >

Records

- Adult Quality Measures**
View Adult Quality Measure Reports for your state
- Health Homes Quality Measures**
View Health Homes Quality Measure Reports for your state
- Maternal and Infant Health Quality Measures**
View Maternal and Infant Health Quality Measure Reports for your state
- Medicaid and CHIP Child Quality Measures**
View Medicaid and CHIP Child Quality Measure Reports for your state
- Medicaid State Plan** ←
View each state's Medicaid State Plan
- My User Profile**
View and edit my user profile
- State Profiles**
View the State Profile for your state
- Submission Packages**
View Submission Packages for other States
- Submission Packages**
View all Submission Packages for your State
- Users**
Directory of users

2. Search for your state using the search feature in the left panel.

Appian

Search Medicaid State Pla

All >

State Code

A-G

H-N

O-U

V-Z

Medicaid State Plan

AK - Medicaid State Plan
State: Alaska
State Code: AK

AL - Medicaid State Plan
State: Alabama
State Code: AL

AR - Medicaid State Plan
State: Arkansas
State Code: AR

3. Then select your state by selecting the blue link.

IA - Medicaid State Plan

State: Iowa
State Code: IA

4. On the next screen you will be able to see past, current, and future Health Homes Programs.

Records / Medicaid State Plan

IA - Medicaid State Plan [Follow](#)

Medicaid State Plan Structure

Section	Sub Section	Program Name
Benefits	Health Homes Program	
Benefits	Health Homes Program	

Terminate Existing Health Homes Program

1. Log in to MACPro as the State Editor
2. Select the “Actions” tab from the upper tool bar, and then select “Create a Submission Package”



The screenshot displays the MACPro interface. At the top, a navigation bar contains the following tabs: News, Tasks (12), Records, Reports, and Actions. The 'Actions' tab is highlighted with a red box. On the left side, the CMS.gov logo is visible, along with a sidebar menu containing 'All', 'Starred', and 'Applications' sections. The 'Applications' section lists 'Clock Tick Process Action (1)', 'Implementation Guide (1)', 'Medicaid State Plan (1)', and 'Quality Measure (3)'. The main content area on the right lists several actions, each preceded by a yellow lightning bolt icon and followed by a star icon. The 'Create Submission Package' action is highlighted with a red box, and a red arrow points to it from the right. The other actions listed are 'Create Adult Quality Measure Report', 'Create Health Homes Quality Measure Report', 'Create Medicaid and CHIP Child Quality Measure Report', 'Tick Clock by One Day', and 'View Implementation Guide(s)'.

3. Select "View All Responses" on the Submission Summary Reviewable Unit

Submission - Summary
MEDICAID ----

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	N/A	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

View All Responses

4. Enter in all the information as shown in [Step 2](#) of this guide. After selecting "Save Reviewable Unit", select "Submission-Medicaid State Plan" from the Navigate to Reviewable Unit drop down menu. Then select "Go to Selected Reviewable Unit".

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Note: This form can be validated only after the Submission - Medicaid State Plan is complete.

Navigate to Reviewable Unit
Submission - Medicaid State Plan

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Exit **Save Reviewable Unit** **Go to Selected Reviewable Unit**

5. On the Submission-Medicaid State Plan page, select “Terminate existing Health Homes program”. Then select the program you will be terminating from the drop down menu.

Submission - Medicaid State Plan
MEDICAID - Health Homes Program -- SC - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	SC2016MH00680	SPA ID	SC-16-103-x
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

Submission - Medicaid State Plan

The submission includes the following

- Benefits
- Health Homes Program

Create new Health Homes program
 Amend existing Health Homes program
 Terminate existing Health Homes program

-- Select Health Homes Program --

6. Once you have selected your program, scroll to the bottom and select “Save Reviewable Unit”.

Validation & Navigation

Would you like to validate the reviewable unit data?
 Yes No

Warning: Any field containing more than 4000 characters will be truncated when saved.

Navigate to Reviewable Unit
-- Select Reviewable Unit --

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

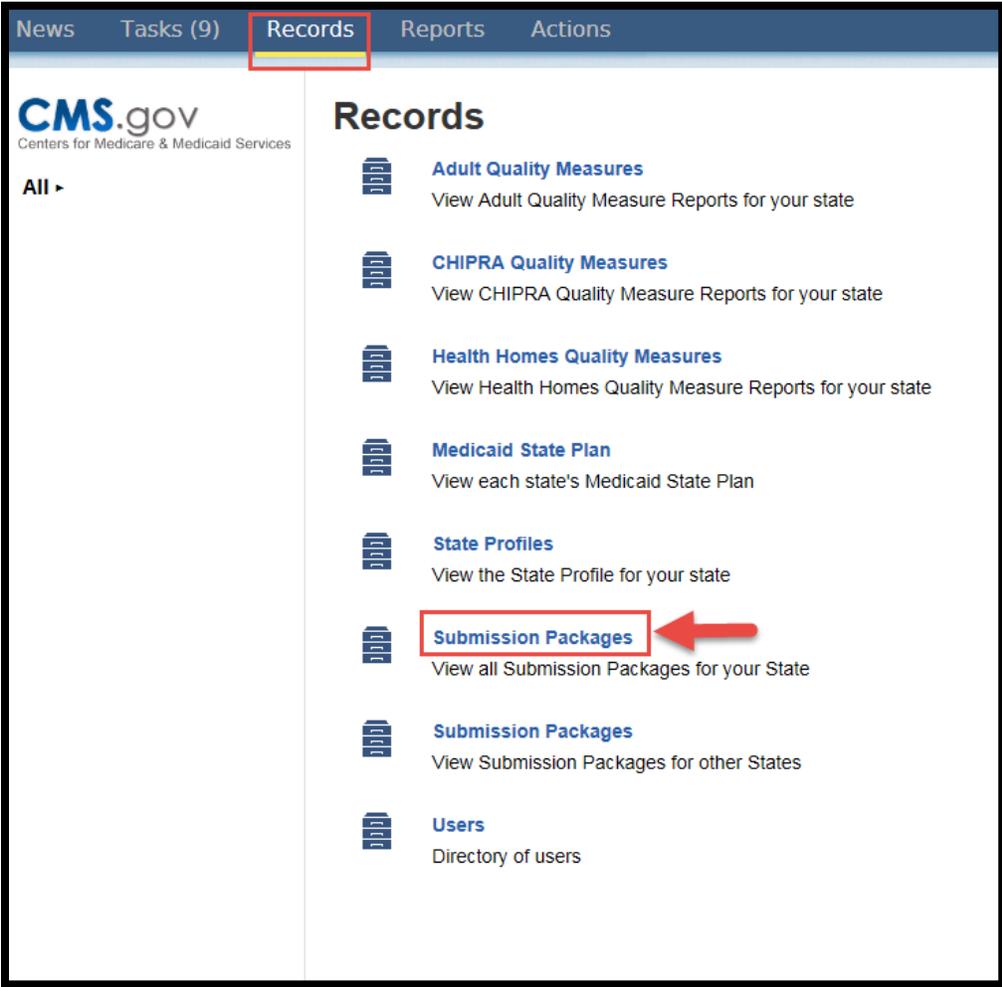
Exit **Save Reviewable Unit** Go to Selected Reviewable Unit

7. Upon doing so, you will be redirected to the “Actions” screen. There will be a yellow notification that appears at the top of the page indicating that “Action Successfully Completed”.

Create a Correspondence Log

The Correspondence Log is the official record for the package. The Correspondence Log can be used as a communication tool, where CMS provides information to the state and the state can respond. Only the SPOC and the CMS Point of Contact can write in the correspondence log, but others may view the correspondence log in a package for reference.

1. Log in to MACPro as the State Point of Contact.
2. Select the “Records” tab from the upper tool bar, and then select “Submission Packages” for your state.



The screenshot displays the MACPro interface. At the top, a navigation bar contains the following tabs: News, Tasks (9), Records, Reports, and Actions. The 'Records' tab is highlighted with a yellow background and a red border. Below the navigation bar, the CMS.gov logo is visible on the left, with the text 'Centers for Medicare & Medicaid Services' underneath. The main content area is titled 'Records' and lists several categories, each with a document icon and a description:

- Adult Quality Measures**: View Adult Quality Measure Reports for your state
- CHIPRA Quality Measures**: View CHIPRA Quality Measure Reports for your state
- Health Homes Quality Measures**: View Health Homes Quality Measure Reports for your state
- Medicaid State Plan**: View each state's Medicaid State Plan
- State Profiles**: View the State Profile for your state
- Submission Packages**: View all Submission Packages for your State (This item is highlighted with a red box and a red arrow pointing to it)
- Submission Packages**: View Submission Packages for other States
- Users**: Directory of users

3. Next, select your Package ID.

Submission Packages

SC **SC - Submission Package - SC2016MH00600 - (SC-16-100-x)**
Package Status: Pending
Creation Date: 3/11/2016 1:37 PM EST
Yesterday, 7:01 PM

SC **SC - Submission Package - SC2016MH0062D**
Package Status: Pending
Creation Date: 3/14/2016 3:55 PM EDT
Yesterday, 6:01 PM

SC **SC - Submission Package - SC2016MH0064D**
Package Status: Pending
Creation Date: 3/14/2016 4:43 PM EDT
Yesterday, 4:43 PM

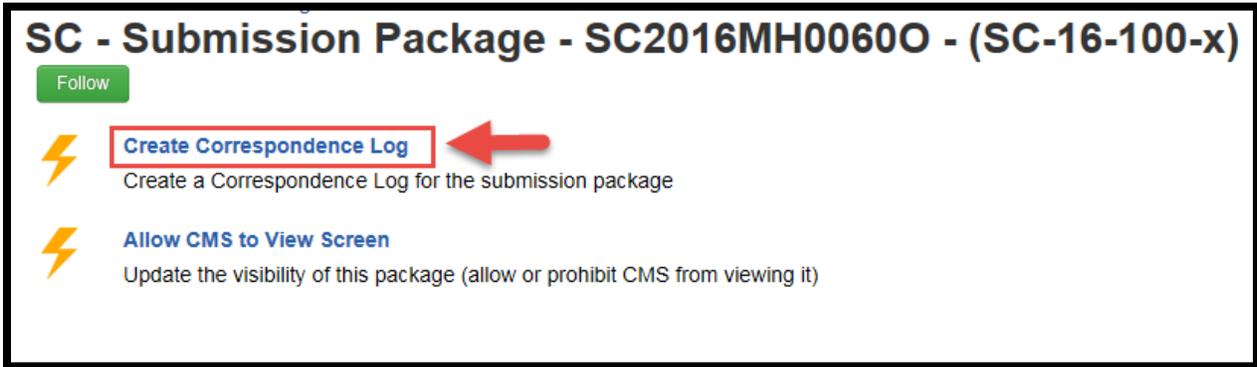
4. You will be taken to the Summary screen of your package. Select “Related Actions” from the left panel.

CMS.gov
Centers for Medicare & Medicaid Services

Summary >
News
Related Actions
Reviewable Units

Records / Submis
SC - Sub
Follow
Pending
Package Info
Package I
Program Nam
SPA I
Version Numbe
Audit Inform
Created B
Created Da

5. Next, select “Create Correspondence Log”

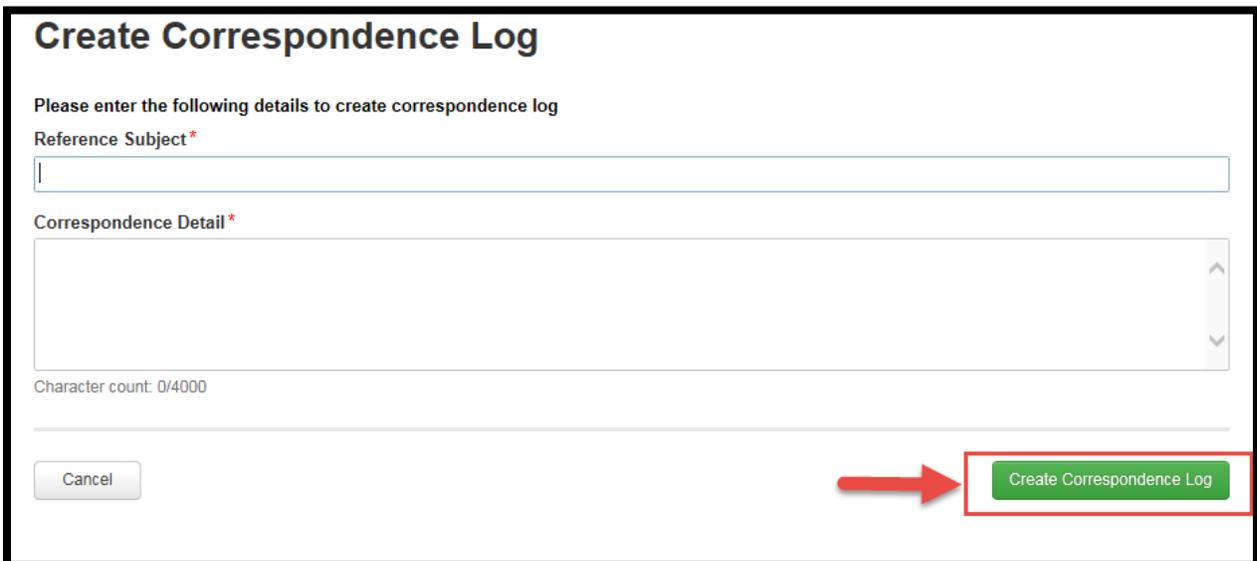


SC - Submission Package - SC2016MH00600 - (SC-16-100-x)

Follow

- Create Correspondence Log** ←
Create a Correspondence Log for the submission package
- Allow CMS to View Screen**
Update the visibility of this package (allow or prohibit CMS from viewing it)

6. Enter in your information and then select “Create Correspondence Log”



Create Correspondence Log

Please enter the following details to create correspondence log

Reference Subject*

Correspondence Detail*

Character count: 0/4000

Cancel **Create Correspondence Log**

7. If you should need to add an entry, follow steps 1 through 4 and then select “Add Entry to Correspondence Log”.



SC - Submission Package - SC2016MH00600 - (SC-16-100-x)

Follow

- Add Entry to Correspondence Log** ←
Add an entry to the Correspondence Log
- Allow CMS to View Screen**
Update the visibility of this package (allow or prohibit CMS from viewing it)

8. On the next screen, fill in your entry and then select “Add Entry to Correspondence Log”.

CMS.gov
Centers for Medicare & Medicaid Services

Summary
News
Related Actions ▶
Reviewable Units
Correspondence Log

Add Entry to Correspondence Log

Reference Subject*

Correspondence Detail*

Character count: 0/4000

Correspondence Log Summary

Search Correspondence Log

Name	POC E-mail	Reference Subject	Correspondence Detail	Time and date
State POC 1 SC (StatePOCSC1)		Test Subject	Did you fill out the test report?	3/15/2016 10:03 AM EDT

Cancel Add Entry to Correspondence Log

9. You may also add an entry to the correspondence log by selecting “Correspondence Log” from the left panel instead of “Related Actions” shown in Step 4. Please note that this link will only appear after you have created a correspondence log.

CMS.gov
Centers for Medicare & Medicaid Services

Summary ▶
News
Related Actions
Reviewable Units
Correspondence Log

Records / SC - S
Follow
Package
Pack
Program
Version N
Audit Info
Crea
Create

10. Select "Add Entry to Correspondence" in the top right corner.

The screenshot shows the CMS.gov interface for a submission package. The breadcrumb trail is 'Records / Submission Packages'. The main heading is 'SC - Submission Package - SC2016MH00600 - (SC-16-100-x)' with a 'Follow' button. A red box highlights the 'Add Entry to Correspond...' button in the top right corner, with a red arrow pointing to it. Below the heading is a 'Correspondence Log Summary' section with a search bar and a table of log entries.

Name	POC E-mail	Reference Subject	Correspondence Detail	Time and date
State POC 1 SC (StatePOCSC1)		Test Subject 2	Test Question 2	3/15/2016 2:25 PM EDT
State POC 1 SC (StatePOCSC1)		Test Subject	Did you fill out the test report?	3/15/2016 10:03 AM EDT

11. Fill in your entry information and then select "Add Entry to Correspondence".

The screenshot shows the 'Add Entry to Correspondence Log' form. It has two input fields: 'Reference Subject' and 'Correspondence Detail'. Below the 'Correspondence Detail' field is a character count: 'Character count: 0/4000'. Below the form is a 'Correspondence Log Summary' section with a search bar and a table of log entries. At the bottom, there is a 'Cancel' button and a green 'Add Entry to Correspondence Log' button, which is highlighted in a red box with a red arrow pointing to it.

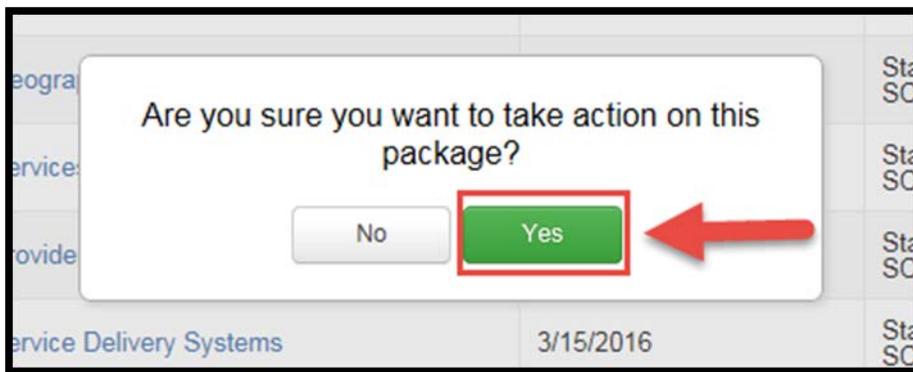
Name	POC E-mail	Reference Subject	Correspondence Detail	Time and date
State POC 1 SC (StatePOCSC1)		Test Subject 2	Test Question 2	3/15/2016 2:25 PM EDT
State POC 1 SC (StatePOCSC1)		Test Subject	Did you fill out the test report?	3/15/2016 10:03 AM EDT

State Point of Contact Returns Package to State Editor

1. After completing the Review of your submission package, if you determine the package needs further revision, then you must return the package to the State Editor for further revision. To do so, scroll to the bottom of the page and select the green button labeled "Take Action on Package".



2. Select "Yes".



3. Select "Return Submission Package to State Editor for Revision", enter instructions, and then select "Execute Action". The instructions box is a required field in this situation.

Take Action on Package
MEDICAID - Health Homes Program - AK Test Draft Package - SC - 2016

Package Information

Package ID	SC2016MH0062D	Submission Type	Draft
Program Name	AK Test Draft Package	State	SC
Version Number	1	Region	Atlanta, GA
		Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State POC 1 SC
Created Date	3/14/2016 3:55 PM EDT	Updated Date	3/15/2016 5:20 PM EDT

Choose Action

Available Workflow Actions*

Forward Submission Package to Director

Return Submission Package to State Editor for Revision

Instructions

[Return to Package Task](#) [Execute Action](#)

4. Select "Yes".

Are you sure you want to Return Submission Package to State Editor for Revision?

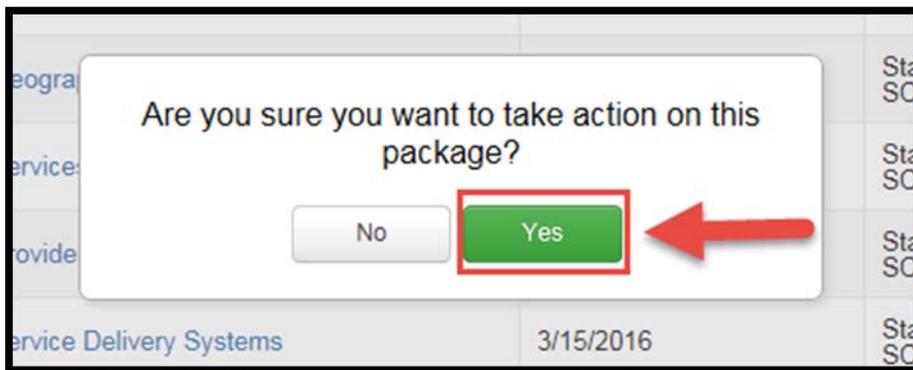
5. At this point, the State Editor will receive a task in their task list. They can add revisions and then will have to go through the process of forwarding the package to State POC, who will then forward the package to the State Director for certification, and then the State Director will forward the report back to the State POC for submission to CMS.

State Director Returns Package to State Point of Contact for Revision

1. After completing the Review of your submission package, if you determine the package needs further revision, then you must return the package to the State POC for further revision. To do so, scroll to the bottom of the page and select the green button labeled "Take Action on Package".



2. Select "Yes".



3. Select "Return Submission Package to State POC for Revision", enter instructions, and then select "Execute Action". The instructions box is a required field in this situation.

Take Action on Package

MEDICAID - Health Homes Program - AK Test Draft Package - SC - 2016

Package Information

Package ID	SC2016MH0062D	Submission Type	Draft
Program Name	AK Test Draft Package	State	SC
Version Number	1	Region	Atlanta, GA
		Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State POC 1 SC
Created Date	3/14/2016 3:55 PM EDT	Updated Date	3/15/2016 6:06 PM EDT

Choose Action

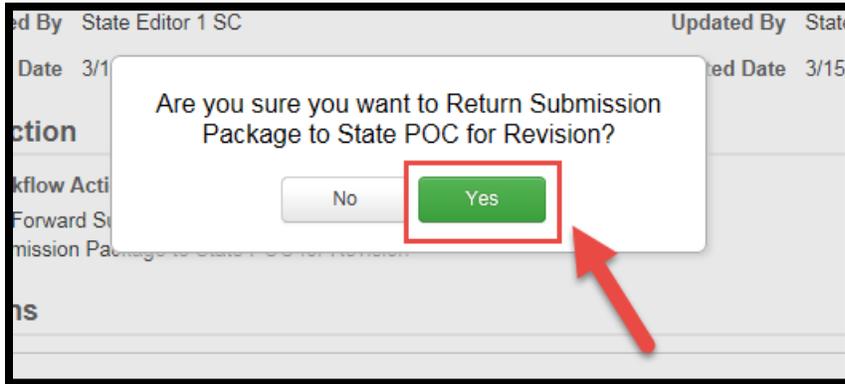
Available Workflow Actions *

- Certify and Forward Submission Package to State POC for Submission to CMS
- Return Submission Package to State POC for Revision

Instructions

[Return to Package Task](#) [Execute Action](#)

4. Select "Yes".

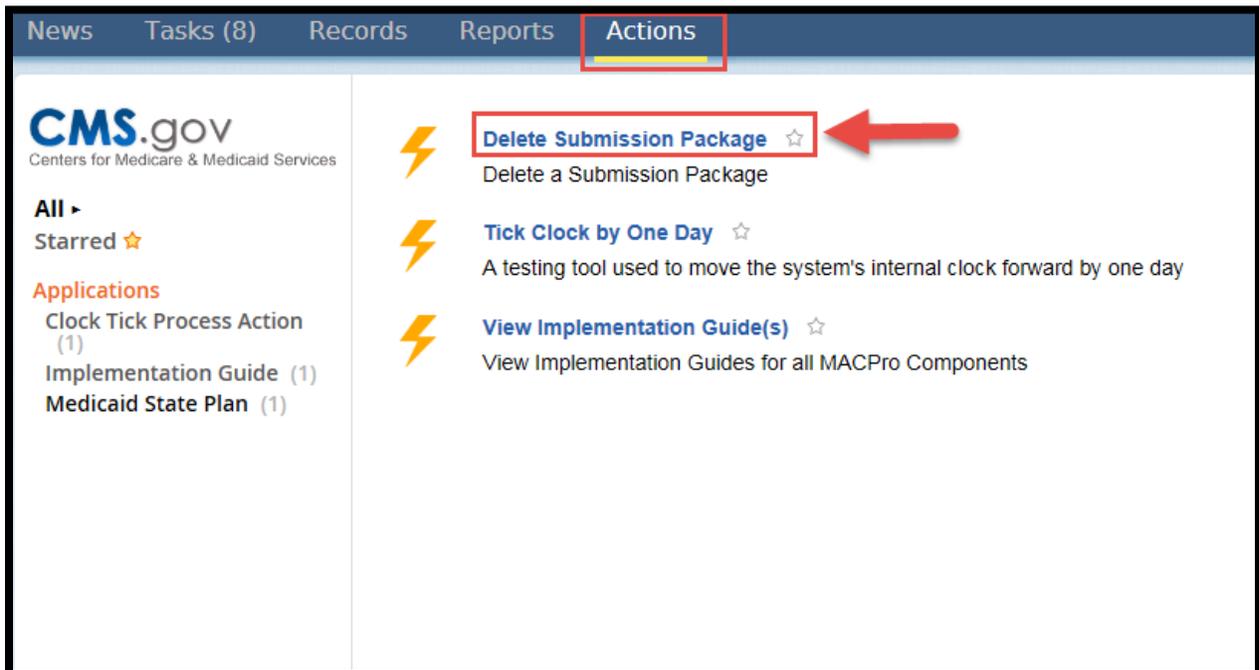


5. At this point the State POC will receive a task in their task list. They may review the package again, or return the report to State Editor for further revisions. Either option will require repeating the process of submitting a package to CMS.

Delete a Submission Package

Please note: A state cannot delete a submission package (Draft or Official) after it has been submitted to CMS. A state has the option to [withdraw a submission](#) package after it is submitted to CMS and during the review process.

1. Log in as State Point of Contact. (Only State POC has this functionality).
2. Go to the "Actions" tab and then select "Delete Submission Package".



3. Enter the Package ID and the SPA ID and then select "Search for Submission Package".

Delete Submission Package
Enter a package ID or SPA ID to search a submission package

Package ID

SPA ID

4. Select "Delete Submission Package".

Package Information

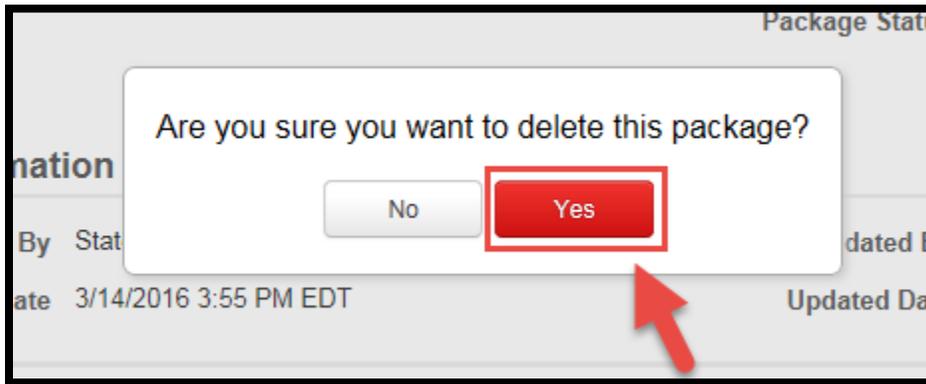
Package ID	SC2016MH0062D	Submission Type	Draft
Program Name		State	SC
Version Number	1	Region	Atlanta, GA
		Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State Director SC 1 SC
Created Date	3/14/2016 3:55 PM EDT	Updated Date	3/15/2016 6:17 PM EDT

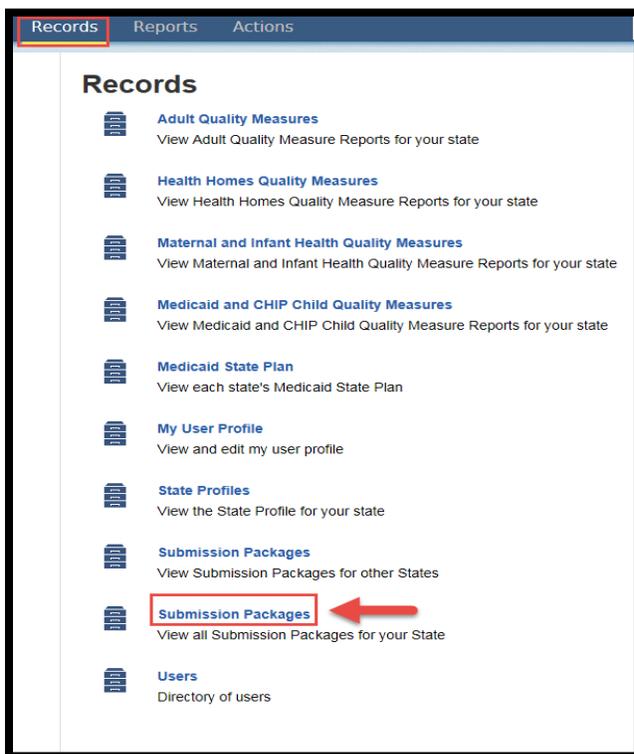
5. Select "Yes".



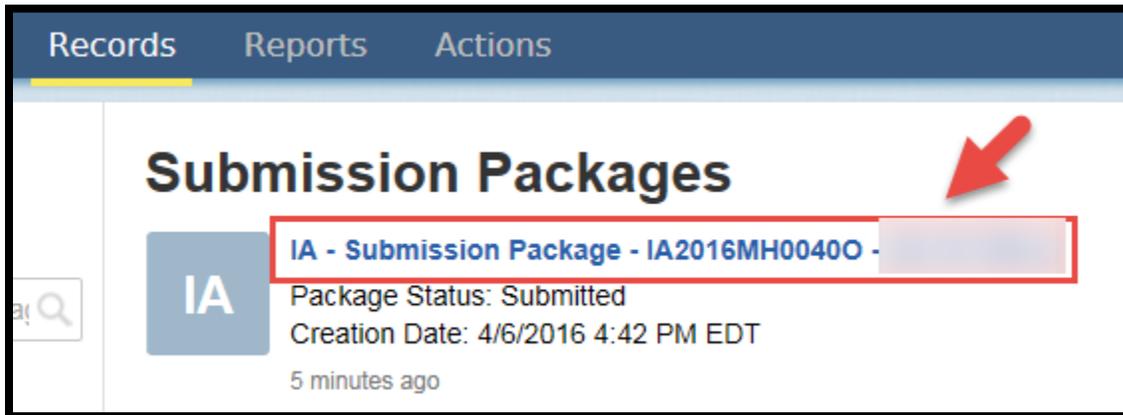
Withdraw a Submission Package

A State may withdraw a submission package once it has been submitted to CMS however you may not resubmit it.

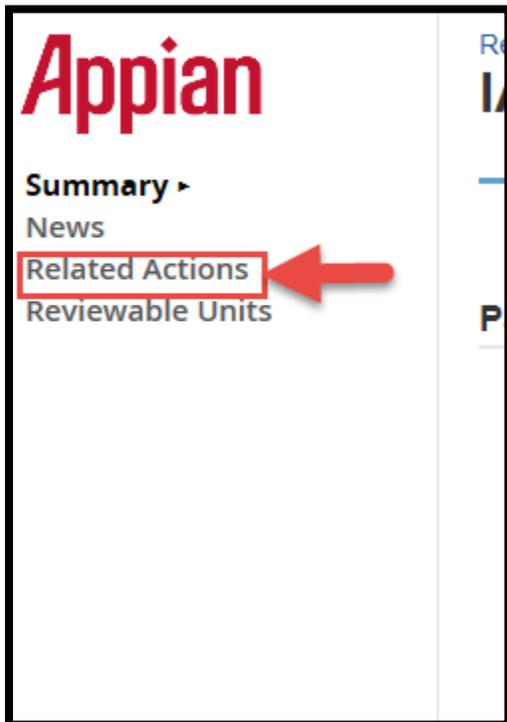
1. Log in as State Point of Contact.
2. Go to the "Records" tab and select "Submission Packages" for your State.



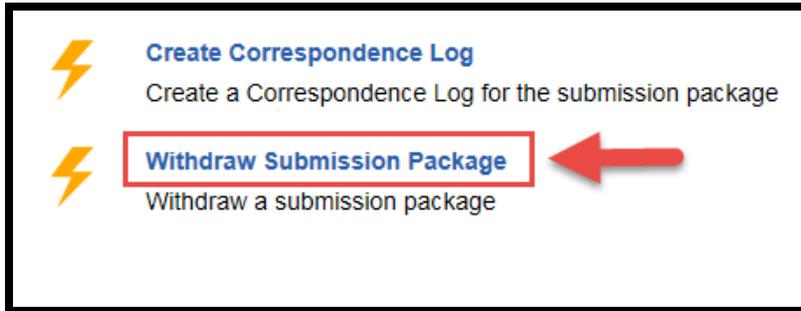
3. Select the link to the Submission Package you wish to withdraw.



4. Select "Related Actions" from the left panel.



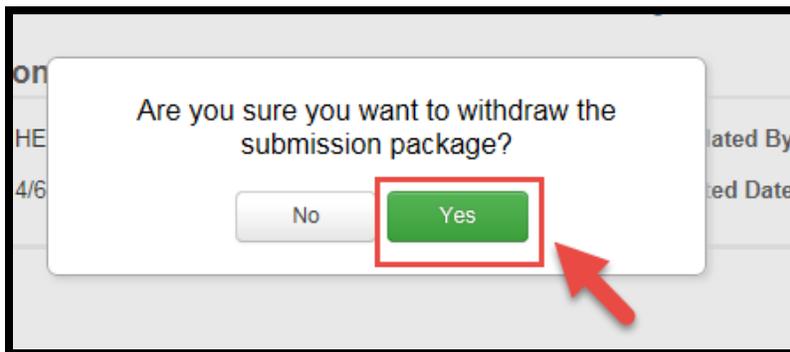
5. Select "Withdraw Submission Package".



6. Select the "Withdraw Submission Package" button.



7. Select "Yes".



8. Once the submission package is withdrawn, you will be redirected to the Records screen and a yellow box will briefly appear at the top indicating the "Action completed successfully".

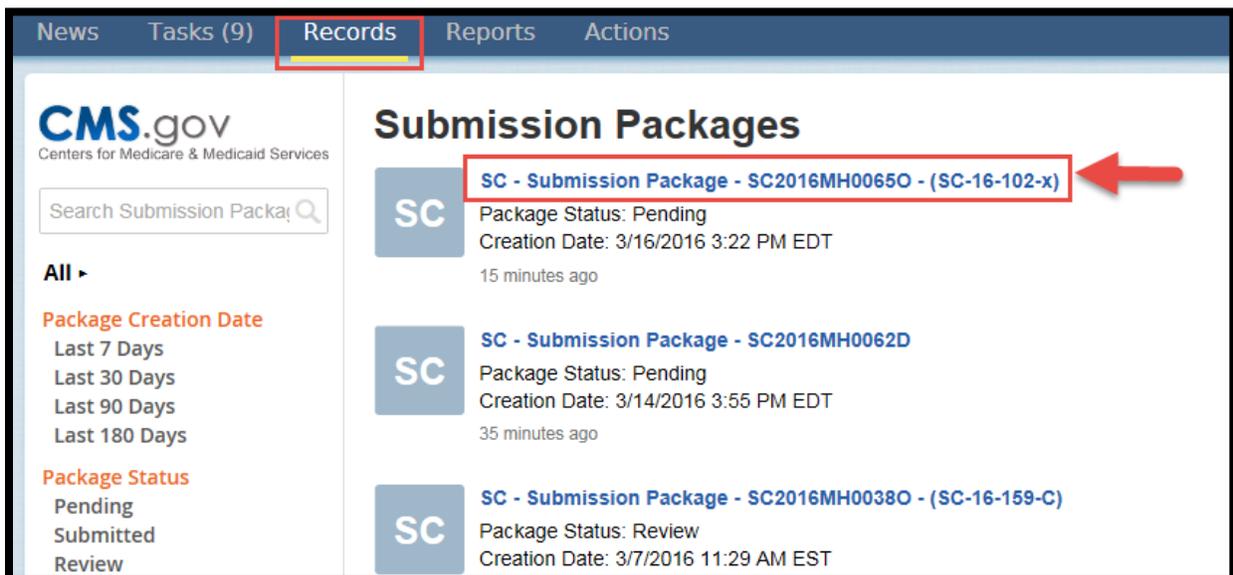


Allow CMS to View Package

1. After the State Editor has forwarded the submission package to the State Point of Contact for Reviewing, the State Point of Contact should log in to MACPro.
2. Go to the “Records” tab and select the “Submission Packages” link for your state.



3. Select the submission package.



4. Go to "Related Actions" in the left panel.

The screenshot shows the CMS.gov interface. On the left, there is a navigation menu with the following items: Summary >, News, Related Actions (highlighted with a red box and a red arrow pointing to it), and Reviewable Units. The main content area on the right is titled "Records / Submission Pack" and "SC - Submiss". Below the title, there is a progress indicator showing "Pending". The "Package Information" section includes: Package ID SC2016, Program Name AK Tes, and Version Number 1. The "Audit Information" section includes: Created By State E and Created Date 3/16/20.

5. Select "Allow CMS to View Screen".

The screenshot shows the CMS.gov interface for a submission package. The title is "SC - Submission Package - SC2016MH00650 - (SC-16-102-x)". Below the title, there is a "Follow" button. There are two action items, each with a lightning bolt icon: "Create Correspondence Log" (Create a Correspondence Log for the submission package) and "Allow CMS to View Screen" (Update the visibility of this package (allow or prohibit CMS from viewing it)). The "Allow CMS to View Screen" option is highlighted with a red box and a red arrow pointing to it.

6. Select "Yes" and then select the green button labeled "Update Visibility".

Allow CMS to View Screen

Use the form below to change the visibility of this package

Package Information

Package ID	SC2016MH00650	Submission Type	Official
Program Name		State	SC
SPA ID	SC-16-102-x	Region	Atlanta, GA
Version Number	1	Package Status	Pending

[View Entire Package](#)

Audit Information

Created By	State Editor 1 SC	Updated By	State Editor 1 SC
Created Date	3/16/2016 3:22 PM EDT	Updated Date	3/16/2016 3:45 PM EDT

Visibility Setting

Would you like to allow CMS to view the screen? *

Yes 

No

Note : Selecting this option will permit the CMS review team to see the screens in this submission package as they are now. It does not cause the package to be submitted as Draft or Official, and does not start a CMS review clock. Validation of the screens is not required. Notify your CMS contact that viewing is available and who you wish to see it; MACPro does not notify CMS staff. You can deselect this option at any time



View Implementation Guides

This guide provides explanations of the components of the page along with review criteria. We encourage you to utilize the implementation guides to assist you in completing your submission package within MACPro.

1. The “View Implementation Guides” feature is included in any Reviewable Unit in the upper right hand corner of the page.

Submission - Summary
MEDICAID --- IA - 2016

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	IA2016MH0027D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseding SPA ID	N/A		

[View Implementation Guide](#)

[View All Responses](#)

State Information +/-

Submission Component +/-

Submission Type +/-

Key Contacts +/-

Executive Summary

2. Clicking this link will direct you to download the guides.



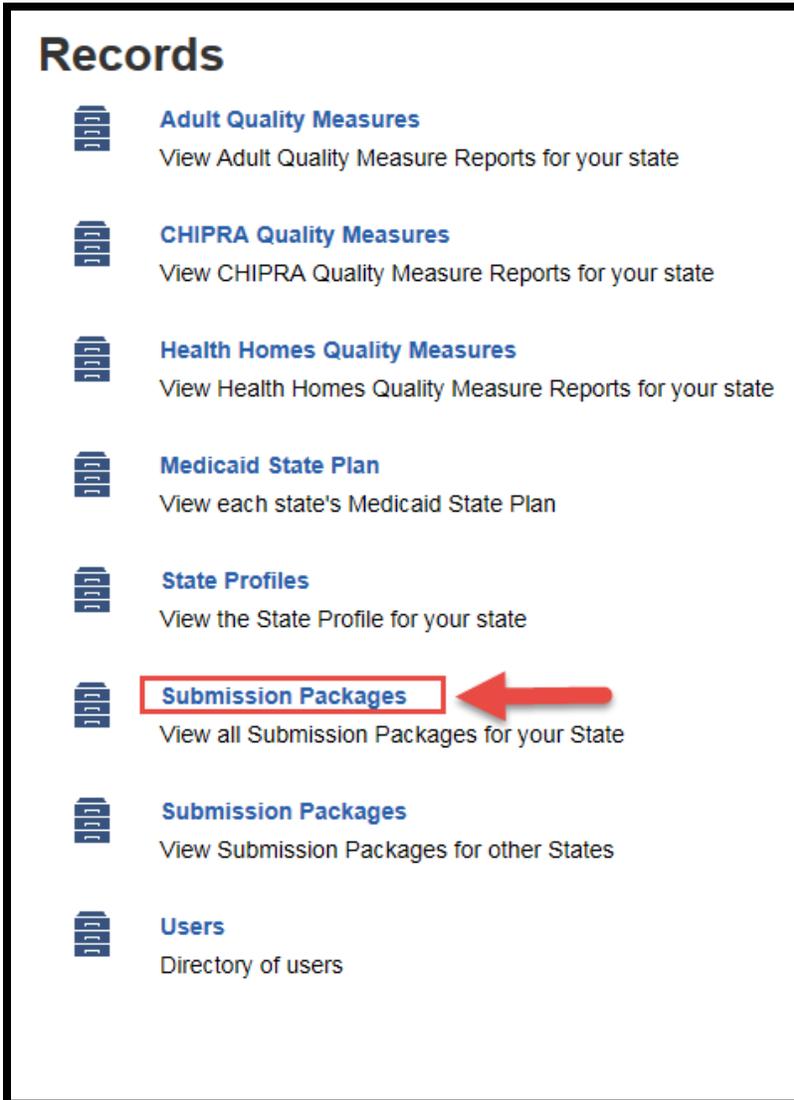
3. The guide will open up in Adobe for your viewing.

Printing a Submission Package

1. Select "Records" from the upper tool bar.



2. Select "Submission Packages" for your State.



Records

-  **Adult Quality Measures**
View Adult Quality Measure Reports for your state
-  **CHIPRA Quality Measures**
View CHIPRA Quality Measure Reports for your state
-  **Health Homes Quality Measures**
View Health Homes Quality Measure Reports for your state
-  **Medicaid State Plan**
View each state's Medicaid State Plan
-  **State Profiles**
View the State Profile for your state
-  **Submission Packages** 
View all Submission Packages for your State
-  **Submission Packages**
View Submission Packages for other States
-  **Users**
Directory of users

3. Select the appropriate submission package.

Submission Packages

- SC** **SC - Submission Package - [redacted]**
Package Status: Pending
Creation Date: 3/16/2016 4:48 PM EDT
55 minutes ago
- SC** **SC - Submission Package [redacted]**
Package Status: Review
Creation Date: 3/7/2016 11:29 AM EST
1 hour ago
- SC** **SC - Submission Package - [redacted]** 
Package Status: Pending
Creation Date: 3/16/2016 3:22 PM EDT
1 hour ago
- SC** **SC - Submission Package - [redacted]**
Package Status: Pending
Creation Date: 3/14/2016 3:55 PM EDT
2 hours ago
- SC** **SC - Submission Package - [redacted]**
Package Status: Closed
Creation Date: 3/7/2016 10:46 AM EST
Package Disposition: Approved
4 hours ago
- SC** **SC - Submission Package - SC2016MH00600 - (SC-16-100-x)**
Package Status: Review
Creation Date: 3/11/2016 1:37 PM EST
6 hours ago
- SC** **SC - Submission Package - SC2016MH0064D**

4. Choose "Reviewable Units" from the left panel.

The screenshot displays the CMS.gov interface. At the top, there is a navigation bar with tabs for 'News', 'Tasks (9)', 'Records', 'Reports', and 'Actions'. The 'Records' tab is currently selected. On the left side, there is a sidebar with the CMS.gov logo and a 'Summary >' section. Under 'Summary >', there are links for 'News', 'Related Actions', and 'Reviewable Units'. The 'Reviewable Units' link is highlighted with a red rectangular box, and a red arrow points to it from the right. The main content area on the right shows the breadcrumb 'Records / Submission Packages' followed by the title 'SC - Submission Pa'. Below the title is a green 'Follow' button. A progress indicator shows a blue bar at the beginning of a scale, with the word 'Pending' below it. Further down, there is a section titled 'Package Information' with fields for 'Package ID', 'Program Name', 'SPA ID', and 'Version Number'. Below that is an 'Audit Information' section with fields for 'Created By' (State Editor 1 SC) and 'Created Date' (3/16/2016 3:22 PM ED).

5. Click on a Reviewable Unit link.

Records / Submission Packages

SC - Submission Package - SC2016MH00650 - (SC-16-102-x)

Follow

Submission Form - Reviewable Units

Reviewable Unit	Updated By	Updated Date	Status
Submission - Summary	State Editor 1 SC	3/16/2016 3:32 PM EDT	✓
Submission - Medicaid State Plan	State Editor 1 SC	3/16/2016 3:23 PM EDT	✓
Submission - Public Comment	State Editor 1 SC	3/16/2016 3:33 PM EDT	✓
Submission - Tribal Input	State Editor 1 SC	3/16/2016 3:33 PM EDT	✓
Submission - SAMHSA Consultation	State Editor 1 SC	3/16/2016 3:34 PM EDT	✓

Health Homes SPA - Reviewable Units

Reviewable Unit	Proposed Effective Date	Updated By	Updated Date	Status
Health Homes Intro	3/14/2016	State Editor 1 SC	3/16/2016 3:34 PM EDT	✓
Health Homes Population and Enrollment Criteria	3/14/2016	State Editor 1 SC	3/16/2016 3:35 PM EDT	✓
Health Homes Geographic Limitations	3/14/2016	State Editor 1 SC	3/16/2016 3:35 PM EDT	✓
Health Homes Services	3/14/2016	State Editor 1 SC	3/16/2016 3:37 PM EDT	✓
Health Homes Providers	3/14/2016	State Editor 1 SC	3/16/2016 3:38 PM EDT	✓
Health Homes Service Delivery Systems	3/14/2016	State Editor 1 SC	3/16/2016 3:40 PM EDT	✓
Health Homes Payment Methodologies	3/14/2016	State Editor 1 SC	3/16/2016 3:40 PM EDT	✓
Health Homes Monitoring, Quality Measurement and Evaluation	3/14/2016	State Editor 1 SC	3/16/2016 3:45 PM EDT	✓

6. Either select "View All Responses" or select each +/- button to expand each section depending on which option is available.

Records / Submission Packages

SC - Submission Package - SC2016MH00650 - (SC-16-102-x)

[Follow](#)

[← All Reviewable Units](#)

Health Homes Population and Enrollment Criteria

MEDICAID - Health Homes Program - [REDACTED]

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	[REDACTED]	SPA ID	[REDACTED]
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	3/14/2016
Superseding SPA ID	N/A		

[View Implementation Guide](#)

[View All Responses](#)

Categories of Individuals and Populations Provided Health Homes Services

[+/-](#)

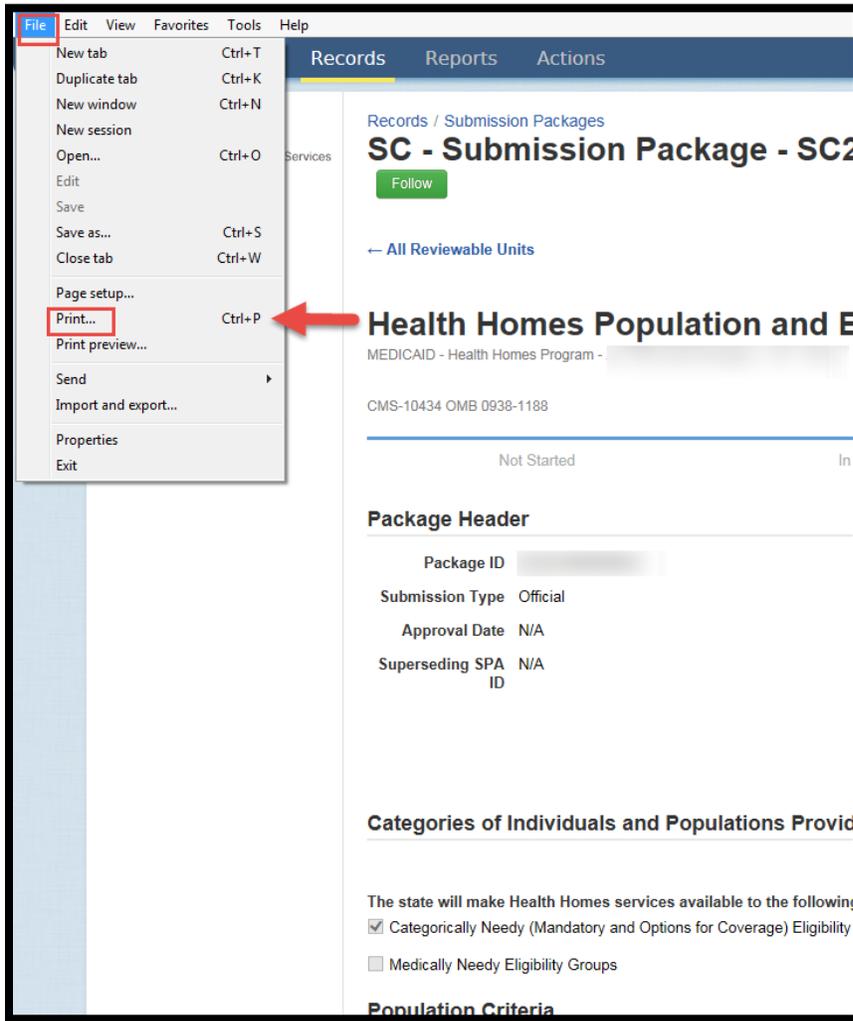
Population Criteria

[+/-](#)

Enrollment of Participants

[+/-](#)

7. Select "File", scroll down and then select "Print". You may also use the keyboard shortcut Ctrl+P. This will print the Reviewable Unit data to the printer of your choice.



Reports in MACPro

Report Name	Description	Available For
State Agency Profile Report	Overview of a State's Medicaid Plan including the prior 12 months' submission package history	State Point of Contact; State Director
Submission Detail Report	View details on packages by date	State Editor; State Point of Contact; State Director
Submission Statistics Detail Report	View all Submission Packages currently in review	State Editor; State Point of Contact; State Director
Submission Summary Report	Overview of submitted packages by date	State Editor; State Point of Contact; State Director

Experiencing Concurrent Sessions Error

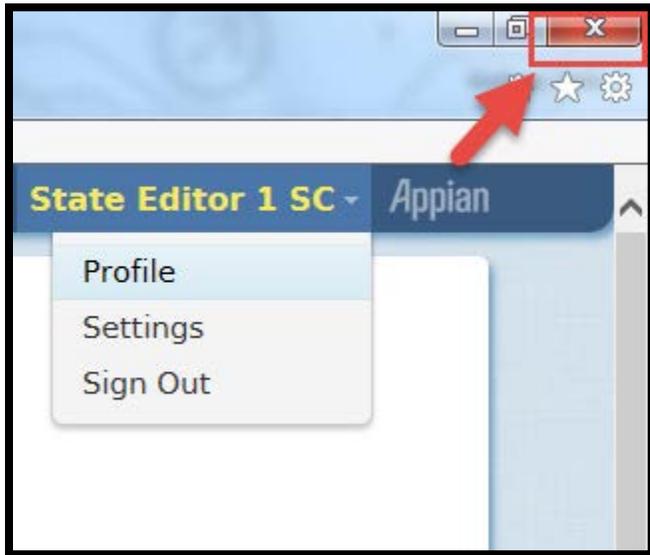
1. A concurrent session error should appear as this:



2. The maximum allowed concurrent sessions is one session. In order to avoid this error, anytime you are logged in to MACPro, make sure to log out and not just close the browser. Just closing the browser does not automatically log you out. Logging out is selecting your name in the top right corner and then selecting "Sign Out".



3. Closing the browser is selecting the red "X" in the top right corner of your screen. Do not select this red "X" before logging out of MACPro.



Conversion from Medicaid Model Data Lab (MMDL) to MACPro

More detailed guidance is forthcoming for conversion from MMDL to MACPro, see below for an overview.

1. The data in MMDL from approved Health Home SPAs will be copied into the MACPro Health Homes template, for states to use as the basis for future amendments.
 - a. Except where the MMDL and MACPro templates differ, states will find the MACPro screens prepopulated with the currently approved information.
2. The official and complete copy of all Health Home SPAs approved in MMDL may be viewed in MACPro as PDFs.
3. Health Home SPAs currently being processed in MMDL will be completed in MMDL.
4. Once the MACPro Health Homes application is operational, CMS will announce a date by which the last submissions can be made in MMDL.
5. When subsequent SPAs are submitted and approved in MACPro, they become the official record of the Health Home program.