Exchange Establishment - Quarterly Progress Report Data Elements

Estimated Annualized Hours	460
Estimated Annual Line Items	689
Estimated Quarterly Hours	115
Estimated Quarterly Line Items	172
Estimated Avg Hours/Line Item	0.67

Report Section	Line Items
<u>2011-2014 Total</u>	
Core Areas	104
Milestones	516
Overall Project	6
Budget Suppl.	28
Cost Allocation. Suppl.	28
IT Supplemental	54
Total	736
Quarterly Average	
Core Area	75
Milestones	32
Overall Project	6
Budget Suppl.	28
Cost Allocation. Suppl.	28
IT Supplemental	3
Total	172

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Core Area
Background Research
Background Research
Background Research
Background Research
Stakeholder Consultation
Stakeholder Consultation
Stakeholder Consultation
Stakeholder Consultation
Legislative/Regulatory Action
Legislative/Regulatory Action
Legislative/Regulatory Action
Legislative/Regulatory Action
Governance
Governance
Governance
Governance
Exchange IT Systems
Program Integration
Program Integration
Program Integration
Program Integration
Financial Management
Financial Management
Financial Management
Financial Management
Oversight & Program Integrity
Health Insurance Market Reforms
Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints
Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints
Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints
Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints
Certification of Qualified Health Plans
Call Center & In-Person Assistance

Call Center & In-Person Assistance Exchange Website and Calculator Quality Rating System Navigator Navigator Navigator Navigator Navigator Size of the System System Religibility Determinations Eligibility Determinations Enrollment Process Enrollment Pr	Call Center & In-Person Assistance
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Outreach and Education	Information reporting to IRS and enrollee
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Outreach and Education
Outreach and Education
Outreach and Education
Risk adjustment and transitional reinsurance
SHOP-specific Functions
SHOP-specific Functions
SHOP-specific Functions
SHOP-specific Functions

Line Item

What are the primary strategies your Program has used to approach this Core Area?

What are some of your Program's significant accomplishments or strengths in this Core Area?

What are some of the significant barriers your program has encountered?

What strategies has your Program employed to deal with these barriers?

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What are some of the significant barriers your program has encountered?
What strategies has your Program employed to deal with these barriers?

Response Format
Free text

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#	Core Area	Milestones
1	Background Research	Conduct analysis of State insurance market and develop recommendations for Exchange structure based on this analysis. Analysis must include number of uninsured in the State, size of the current individual and small group markets, number of carriers in each market and market shares for the ten largest carriers
2	Background Research	Conduct analysis of State insurance market and develop recommendations for Exchange structure based on this analysis. Analysis must include number of uninsured in the State, size of the current individual and small group markets, number of carriers in each market and market shares for the ten largest carriers
3	Background Research	Conduct analysis of State insurance market and develop recommendations for Exchange structure based on this analysis. Analysis must include number of uninsured in the State, size of the current individual and small group markets, number of carriers in each market and market shares for the ten largest carriers
4	Stakeholder Consultation	Establish a stakeholder advisory committee with the support of the Governor and State legislature to solicit input on Exchange design and function by stakeholder groups.
5	Stakeholder Consultation	Establish a stakeholder advisory committee with the support of the Governor and State legislature to solicit input on Exchange design and function by stakeholder groups.
6	Stakeholder Consultation	Establish a stakeholder advisory committee with the support of the Governor and State legislature to solicit input on Exchange design and function by stakeholder groups.
7	Stakeholder Consultation	Complete stakeholder meetings that cover all regions of the State.
8	Stakeholder Consultation	Complete stakeholder meetings that cover all regions of the State.
9	Stakeholder Consultation	Complete stakeholder meetings that cover all regions of the State.

10	Stakeholder Consultation	In addition to general stakeholder consultation, establish, implement, and document a process for consultation with federally recognized Indian Tribal governments to solicit their input on the establishment and ongoing operation of the Exchange.
11	Stakeholder Consultation	In addition to general stakeholder consultation, establish, implement, and document a process for consultation with federally recognized Indian Tribal governments to solicit their input on the establishment and ongoing operation of the Exchange.
12	Stakeholder Consultation	In addition to general stakeholder consultation, establish, implement, and document a process for consultation with federally recognized Indian Tribal governments to solicit their input on the establishment and ongoing operation of the Exchange.
13	Stakeholder Consultation	Provide to HHS publicly-available minutes from completed open stakeholder meetings.
14	Stakeholder Consultation	Provide to HHS publicly-available minutes from completed open stakeholder meetings.
15	Stakeholder Consultation	Provide to HHS publicly-available minutes from completed open stakeholder meetings.
16	Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
17	Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
18	Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
19	Stakeholder Consultation	Complete stakeholder meetings and provide publically-available minutes related to the open enrollment process and outreach materials.
20	Stakeholder Consultation	Complete stakeholder meetings and provide publically-available minutes related to the open enrollment process and outreach materials.
21	Stakeholder Consultation	Complete stakeholder meetings and provide publically-available minutes related to the open enrollment process and outreach materials.

Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Stakeholder Consultation	Post evidence of regular consultation with required stakeholders and other groups and hold regular public meetings to solicit public input on the Exchange website.
Stakeholder Consultation	Post evidence of regular consultation with required stakeholders and other groups and hold regular public meetings to solicit public input on the Exchange website.
Stakeholder Consultation	Post evidence of regular consultation with required stakeholders and other groups and hold regular public meetings to solicit public input on the Exchange website.
Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Stakeholder Consultation	In addition to stakeholder consultation, continue to implement and document its Tribal consultations to solicit Tribal input on the ongoing operation of the Exchange.
Legislative/Regulatory Action	Draft enabling legislation, implementing regulation, or other mechanism that provides the legal authority to establish and operate an Exchange that complies with Federal requirements.
Legislative/Regulatory Action	Draft enabling legislation, implementing regulation, or other mechanism that provides the legal authority to establish and operate an Exchange that complies with Federal requirements.
Legislative/Regulatory Action	Draft enabling legislation, implementing regulation, or other mechanism that provides the legal authority to establish and operate an Exchange that complies with Federal requirements.
Legislative/Regulatory Action	Introduce enabling legislation as appropriate.
Legislative/Regulatory Action	Introduce enabling legislation as appropriate.
	Stakeholder Consultation Legislative/Regulatory Action Legislative/Regulatory Action

36	Legislative/Regulatory Action	Introduce enabling legislation as appropriate.
37	Legislative/Regulatory Action	Hold public hearings on Exchange enabling legislation as appropriate.
38	Legislative/Regulatory Action	Hold public hearings on Exchange enabling legislation as appropriate.
39	Legislative/Regulatory Action	Hold public hearings on Exchange enabling legislation as appropriate.
40	Legislative/Regulatory Action	Has regulation implementing enabling legislation, or other mechanism that provides the legal authority to establish and opera an Exchange that complies with Federal requirements.
41	Legislative/Regulatory Action	Has regulation implementing enabling legislation, or other mechanism that provides the legal authority to establish and opera an Exchange that complies with Federal requirements.
42	Legislative/Regulatory Action	Has regulation implementing enabling legislation, or other mechanism that provides the legal authority to establish and opera an Exchange that complies with Federal requirements.
43	Legislative/Regulatory Action	Have the necessary legal authority to establish and operate an Exchange that complies with Federal requirements and provides for establishment of governance and Exchange structure (required in order to be eligible for Level Two Establishment)
44	Legislative/Regulatory Action	Have the necessary legal authority to establish and operate an Exchange that complies with Federal requirements and provides for establishment of governance and Exchange structure (required in order to be eligible for Level Two Establishment)
45	Legislative/Regulatory Action	Have the necessary legal authority to establish and operate an Exchange that complies with Federal requirements and provides for establishment of governance and Exchange structure (required in order to be eligible for Level Two Establishment)
46	Governance	Develop a governance model by working with stakeholders to answer key questions about the governance structure of the Exchange.
47	Governance	Develop a governance model by working with stakeholders to answer key questions about the governance structure of the Exchange.
48	Governance	Develop a governance model by working with stakeholders to answer key questions about the governance structure of the Exchange.
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49	Governance	Determine standards for the Exchange governing body that will ensure public accountability, transparency, and prevention of conflict of interest
50	Governance	Determine standards for the Exchange governing body that will ensure public accountability, transparency, and prevention of conflict of interest
51	Governance	Determine standards for the Exchange governing body that will ensure public accountability, transparency, and prevention of conflict of interest
52	Governance	Establish governance structure.
53	Governance	Establish governance structure.
54	Governance	Establish governance structure.
55	Governance	Appoint a governing board (if applicable) and a management team sufficient to oversee the operations of the Exchange.
56	Governance	Appoint a governing board (if applicable) and a management team sufficient to oversee the operations of the Exchange.
57	Governance	Appoint a governing board (if applicable) and a management team sufficient to oversee the operations of the Exchange.
58	Governance	Develop a formal operating charter or by-laws that are consistent with State and Federal requirements including public accountability, transparency, and conflicts of interest.
59	Governance	Develop a formal operating charter or by-laws that are consistent with State and Federal requirements including public accountability, transparency, and conflicts of interest.
60	Governance	Develop a formal operating charter or by-laws that are consistent with State and Federal requirements including public accountability, transparency, and conflicts of interest.
61	Exchange IT Systems	Conduct a gap analysis of existing systems and the end goal for systems development by 2014.
62	Exchange IT Systems	Conduct a gap analysis of existing systems and the end goal for systems development by 2014.

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Exchange IT Systems	Conduct a gap analysis of existing systems and the end goal for systems development by 2014.
Exchange IT Systems	Complete the review of product feasibility, viability, and alignment with Exchange program goals and objectives.
Exchange IT Systems	Complete the review of product feasibility, viability, and alignment with Exchange program goals and objectives.
Exchange IT Systems	Complete the review of product feasibility, viability, and alignment with Exchange program goals and objectives.
Exchange IT Systems	Complete preliminary business requirements and develop an IT architectural and integration framework.
Exchange IT Systems	Complete preliminary business requirements and develop an IT architectural and integration framework.
Exchange IT Systems	Complete preliminary business requirements and develop an IT architectural and integration framework.
Exchange IT Systems	Complete Systems Development Life Cycle (SDLC) implementation plan.
Exchange IT Systems	Complete Systems Development Life Cycle (SDLC) implementation plan.
Exchange IT Systems	Complete Systems Development Life Cycle (SDLC) implementation plan.
Exchange IT Systems	Complete security risk assessment and release plan.
Exchange IT Systems	Complete security risk assessment and release plan.
Exchange IT Systems	Complete security risk assessment and release plan.
Exchange IT Systems	Complete preliminary detailed design and system requirements documentation (e.g. technical, design, etc.).
Exchange IT Systems	Complete preliminary detailed design and system requirements documentation (e.g. technical, design, etc.).
Exchange IT Systems	Complete preliminary detailed design and system requirements documentation (e.g. technical, design, etc.).
	Exchange IT Systems Exchange IT Systems

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94	Exchange IT Systems	Complete pre-operational readiness review to validate readiness of all system components. Complete end-to-end testing and security control validations.
95	Exchange IT Systems	Complete pre-operational readiness review to validate readiness of all system components. Complete end-to-end testing and security control validations.
96	Exchange IT Systems	Complete pre-operational readiness review to validate readiness of all system components. Complete end-to-end testing and security control validations.
97	Exchange IT Systems	Prepare and deploy all system components to production environment. Obtain security accreditation.
98	Exchange IT Systems	Prepare and deploy all system components to production environment. Obtain security accreditation.
99	Exchange IT Systems	Prepare and deploy all system components to production environment. Obtain security accreditation.
100	Exchange IT Systems	Support business operations and maintenance of all systems components.
101	Exchange IT Systems	Support business operations and maintenance of all systems components.
102	Exchange IT Systems	Support business operations and maintenance of all systems components.
103	Program Integration	Perform detailed business process documentation to reflect current State business processes, and include future State process changes to support proposed Exchange operational requirements
104	Program Integration	Perform detailed business process documentation to reflect current State business processes, and include future State process changes to support proposed Exchange operational requirements
105	Program Integration	Perform detailed business process documentation to reflect current State business processes, and include future State process changes to support proposed Exchange operational requirements
106	Program Integration	Initiate communication with the State HIT Coordinators, State Department of Insurance and the State Medicaid agency, and the State Human Services agency as appropriate, and hold regular collaborative meetings to develop work plans for collaboration.

107	Program Integration	Initiate communication with the State HIT Coordinators, State Department of Insurance and the State Medicaid agency, and the State Human Services agency as appropriate, and hold regular collaborative meetings to develop work plans for collaboration.
108	Program Integration	Initiate communication with the State HIT Coordinators, State Department of Insurance and the State Medicaid agency, and the State Human Services agency as appropriate, and hold regular collaborative meetings to develop work plans for collaboration.
109	Program Integration	Execute an agreement with the State Department of Insurance that includes: Determination of the roles and responsibilities of the Exchange and the State DOI as they relate to qualified health plans offered inside and outside the Exchange, and a strategy for limiting adverse selection between the Exchange and the outside market, possibly including legislative changes to level the playing field.
110	Program Integration	Execute an agreement with the State Department of Insurance that includes: Determination of the roles and responsibilities of the Exchange and the State DOI as they relate to qualified health plans offered inside and outside the Exchange, and a strategy for limiting adverse selection between the Exchange and the outside market, possibly including legislative changes to level the playing field.
111	Program Integration	Execute an agreement with the State Department of Insurance that includes: Determination of the roles and responsibilities of the Exchange and the State DOI as they relate to qualified health plans offered inside and outside the Exchange, and a strategy for limiting adverse selection between the Exchange and the outside market, possibly including legislative changes to level the playing field.

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112	Program Integration	Execute an agreement with any agency administering Medicaid, CHIP, and the Basic Health Program, and other specific health and human services programs as appropriate, that includes: Determination of the roles and responsibilities related to eligibility determination, verification, and enrollment; identification of challenges in the program integration process, strategies for mitigating those issues, and timelines for completion; strategies for compliance with the "no wrong door" policy; standard operating procedures for interactions between the Exchange and Medicaid, CHIP, and the Basic Health Program.Cost allocation among the Exchange grants, Medicaid Federal Financial Participation (FFP), and other funding streams as appropriate.
113	Program Integration	Execute an agreement with any agency administering Medicaid, CHIP, and the Basic Health Program, and other specific health and human services programs as appropriate, that includes: Determination of the roles and responsibilities related to eligibility determination, verification, and enrollment; identification of challenges in the program integration process, strategies for mitigating those issues, and timelines for completion; strategies for compliance with the "no wrong door" policy; standard operating procedures for interactions between the Exchange and Medicaid, CHIP, and the Basic Health Program.Cost allocation among the Exchange grants, Medicaid Federal Financial Participation (FFP), and other funding streams as appropriate.
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115	Program Integration	Collaborate among the Exchange, Medicaid, and CHIP on business and systems approaches to identify and work with all possible "doors" into system in order to ensure common/leverage processing regardless of entry point.

116	Program Integration	Collaborate among the Exchange, Medicaid, and CHIP on business and systems approaches to identify and work with all possible "doors" into system in order to ensure common/leverage processing regardless of entry point.
117	Program Integration	Collaborate among the Exchange, Medicaid, and CHIP on business and systems approaches to identify and work with all possible "doors" into system in order to ensure common/leverage processing regardless of entry point.
118	Program Integration	Collaborate on testing of systems for the Exchange, Medicaid, CHIP, and the Basic Health program.
119	Program Integration	Collaborate on testing of systems for the Exchange, Medicaid, CHIP, and the Basic Health program.
120	Program Integration	Collaborate on testing of systems for the Exchange, Medicaid, CHIP, and the Basic Health program.
121	Program Integration	Coordinate the beginning of open enrollment with Medicaid, CHIP, and the Basic Health Program.
122	Program Integration	Coordinate the beginning of open enrollment with Medicaid, CHIP, and the Basic Health Program.
123	Program Integration	Coordinate the beginning of open enrollment with Medicaid, CHIP, and the Basic Health Program.
124	Program Integration	For every state HHS agency managing an entitlement program that performs eligibility, enrollment, and verification, create a responsibility matrix that reflects how these standard services will be organizationally managed in a singular manner, as defined by the Program Integration goals and objectives in particular to the 'no wrong door' policy. Draft and execute against an agreement that reflects these responsibilities. In the master project plan, include all deliverables that are part of these services.
125	Program Integration	For every state HHS agency managing an entitlement program that performs eligibility, enrollment, and verification, create a responsibility matrix that reflects how these standard services will be organizationally managed in a singular manner, as defined by the Program Integration goals and objectives in particular to the 'no wrong door' policy. Draft and execute against an agreement that reflects these responsibilities. In the master project plan, include all deliverables that are part of these services.

126	Program Integration	For every state HHS agency managing an entitlement program that performs eligibility, enrollment, and verification, create a responsibility matrix that reflects how these standard services will be organizationally managed in a singular manner, as defined by the Program Integration goals and objectives in particular to the 'no wrong door' policy. Draft and execute against an agreement that reflects these responsibilities. In the master project plan, include all deliverables that are part of these services.
127	Program Integration	Define and document how cost allocation among the Exchange grants, Medicaid Federal Financial Participation (FFP), and other funding streams as appropriate will be implemented, managed, monitored, and controlled.
128	Program Integration	Define and document how cost allocation among the Exchange grants, Medicaid Federal Financial Participation (FFP), and other funding streams as appropriate will be implemented, managed, monitored, and controlled.
129	Program Integration	Define and document how cost allocation among the Exchange grants, Medicaid Federal Financial Participation (FFP), and other funding streams as appropriate will be implemented, managed, monitored, and controlled.
130	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
131	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
132	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
133	Financial Management	Begin defining financial management structure and the scope of activities required to comply with requirements.
134	Financial Management	Begin defining financial management structure and the scope of activities required to comply with requirements.
135	Financial Management	Begin defining financial management structure and the scope of activities required to comply with requirements.
136	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.

137	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.
138	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.
139	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
140	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
141	Financial Management	Adhere to HHS financial monitoring activities carried out for the Planning Grant and under the Establishment Cooperative Agreement.
142	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.
143	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.
144	Financial Management	Establish a financial management structure and commit to hiring experienced accountants to support financial management activities of the Exchange, which include responding to audit requests and inquiries of the Secretary and the Government Accountability Office as needed.
145	Financial Management	Develop a plan to ensure sufficient resources to support ongoing operations and determine if legislation is necessary to assess user fees.
146	Financial Management	Develop a plan to ensure sufficient resources to support ongoing operations and determine if legislation is necessary to assess user fees.
147	Financial Management	Develop a plan to ensure sufficient resources to support ongoing operations and determine if legislation is necessary to assess user fees.

148	Financial Management	Assess adequacy of accounting and financial reporting systems.
149	Financial Management	Assess adequacy of accounting and financial reporting systems.
150	Financial Management	Assess adequacy of accounting and financial reporting systems.
151	Financial Management	Conduct a third party objective review of all systems of internal control.
152	Financial Management	Conduct a third party objective review of all systems of internal control.
153	Financial Management	Conduct a third party objective review of all systems of internal control.
154	Financial Management	Demonstrate capability to manage the finances of the Exchange soundly, including the ability to publish all expenses, receivables, and expenditures consistent with Federal requirements.
155	Financial Management	Demonstrate capability to manage the finances of the Exchange soundly, including the ability to publish all expenses, receivables, and expenditures consistent with Federal requirements.
156	Financial Management	Demonstrate capability to manage the finances of the Exchange soundly, including the ability to publish all expenses, receivables, and expenditures consistent with Federal requirements.
157	Financial Management	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
158	Financial Management	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
159	Financial Management	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
160	Financial Management	Post information related to Exchange financial management on its website and identify other means to make financial activities associated with the management of the Exchange transparent.
161	Financial Management	Post information related to Exchange financial management on its website and identify other means to make financial activities associated with the management of the Exchange transparent.
162	Financial Management	Post information related to Exchange financial management on its website and identify other means to make financial activities associated with the management of the Exchange transparent.

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163	Financial Management	Submit the required annual accounting report to HHS.
164	Financial Management	Submit the required annual accounting report to HHS.
165	Financial Management	Submit the required annual accounting report to HHS.
166	Oversight & Program Integrity	Ensure the prevention of waste, fraud, and abuse related to the expenditure of Exchange Planning and Exchange Establishment grants.
167	Oversight & Program Integrity	Ensure the prevention of waste, fraud, and abuse related to the expenditure of Exchange Planning and Exchange Establishment grants.
	Oversight & Program Integrity	Ensure the prevention of waste, fraud, and abuse related to the expenditure of Exchange Planning and Exchange Establishment grants.
169	Oversight & Program Integrity	Continue planning process and hire staff for oversight and program integrity functions.
	Oversight & Program Integrity	Continue planning process and hire staff for oversight and program integrity functions.
171	Oversight & Program Integrity	Continue planning process and hire staff for oversight and program integrity functions.
172	Oversight & Program Integrity	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
173	Oversight & Program Integrity	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
174	Oversight & Program Integrity	Establish procedures for external audit by a qualified auditing entity to perform an independent external financial audit of the Exchange.
	Oversight & Program Integrity	Develop a plan outlining approach, mechanisms, and steps to prevent fraud, waste, and abuse.
176	Oversight & Program Integrity	Develop a plan outlining approach, mechanisms, and steps to prevent fraud, waste, and abuse.
177	Oversight & Program Integrity	Develop a plan outlining approach, mechanisms, and steps to prevent fraud, waste, and abuse.

178	Oversight & Program Integrity	Establish procedures to detect, deter, and protect against fraud, waste, and abuse.
179	Oversight & Program Integrity	Establish procedures to detect, deter, and protect against fraud, waste, and abuse.
180	Oversight & Program Integrity	Establish procedures to detect, deter, and protect against fraud, waste, and abuse.
181	Oversight & Program Integrity	Develop procedures for reporting to HHS on efforts to prevent fraud, waste, and abuse.
182	Oversight & Program Integrity	Develop procedures for reporting to HHS on efforts to prevent fraud, waste, and abuse.
183	Oversight & Program Integrity	Develop procedures for reporting to HHS on efforts to prevent fraud, waste, and abuse.
184	Oversight & Program Integrity	Comply with HHS requirements related to reporting, auditing and the prevention of fraud, waste, and abuse.
185	Oversight & Program Integrity	Comply with HHS requirements related to reporting, auditing and the prevention of fraud, waste, and abuse.
186	Oversight & Program Integrity	Comply with HHS requirements related to reporting, auditing and the prevention of fraud, waste, and abuse.
187	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Coordinate with existing organizations in the State if applicable; and assure that the following services are available and sufficient to meet State residents' need for assistance: (i) help individuals determine eligibility for private and public coverage and enroll in such coverage; (ii) provide information on filing grievances and appeals; (iii) provide information about consumer protections; and (iv) collect data on inquiries and problems and how they are resolved.
188	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Coordinate with existing organizations in the State if applicable; and assure that the following services are available and sufficient to meet State residents' need for assistance: (i) help individuals determine eligibility for private and public coverage and enroll in such coverage; (ii) provide information on filing grievances and appeals; (iii) provide information about consumer protections; and (iv) collect data on inquiries and problems and how they are resolved.

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189	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Coordinate with existing organizations in the State if applicable; and assure that the following services are available and sufficient to meet State residents' need for assistance: (i) help individuals determine eligibility for private and public coverage and enroll in such coverage; (ii) provide information on filing grievances and appeals; (iii) provide information about consumer protections; and (iv) collect data on inquiries and problems and how they are resolved.
190	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
191	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
192	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
193	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	If the State chooses to operate these functions within the Exchange, establish protocols for appeals of coverage determinations including review standards and timelines and provision of information to consumers during the appeals process.
194	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	If the State chooses to operate these functions within the Exchange, establish protocols for appeals of coverage determinations including review standards and timelines and provision of information to consumers during the appeals process.
195	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	If the State chooses to operate these functions within the Exchange, establish protocols for appeals of coverage determinations including review standards and timelines and provision of information to consumers during the appeals process.
196	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Draft scope of work for building capacity to provide information to consumers on filing grievances and appeals.

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19/	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Draft scope of work for building capacity to provide information to consumers on filing grievances and appeals.
198	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Draft scope of work for building capacity to provide information to consumers on filing grievances and appeals.
199	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
200	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of Exchanges.
202	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish a process for reviewing consumer complaint information collected by the State Consumer Assistance program when certifying qualified health plans.
203	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish a process for reviewing consumer complaint information collected by the State Consumer Assistance program when certifying qualified health plans.
204	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish a process for reviewing consumer complaint information collected by the State Consumer Assistance program when certifying qualified health plans.

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205	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish process for referrals to consumer assistance programs if available in another entity.
206	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish process for referrals to consumer assistance programs if available in another entity.
207	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Establish process for referrals to consumer assistance programs if available in another entity.
208	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Ensure that any consumer complaints or coverage appeal requests are referred directly to the State program that is designated to process these calls.
209	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Ensure that any consumer complaints or coverage appeal requests are referred directly to the State program that is designated to process these calls.
	Providing Assistance to Individuals and Small Businesses, Coverage Appeals, and Complaints	Ensure that any consumer complaints or coverage appeal requests are referred directly to the State program that is designated to process these calls.
211	Certification of Qualified Health Plans	Develop a clear certification process, including a timeline for application submission, evaluation, and selection of qualified health plans.
212	Certification of Qualified Health Plans	Develop a clear certification process, including a timeline for application submission, evaluation, and selection of qualified health plans.
213	Certification of Qualified Health Plans	Develop a clear certification process, including a timeline for application submission, evaluation, and selection of qualified health plans.
214	Certification of Qualified Health Plans	Develop plan for integration of staff and IT systems needed to support qualified health plan certification process.

215	Certification of Qualified Health Plans	Develop plan for integration of staff and IT systems needed to support qualified health plan certification process.
216	Certification of Qualified Health Plans	Develop plan for integration of staff and IT systems needed to support qualified health plan certification process.
	Certification of Qualified Health Plans	Begin developing standards that will be required for certification of a qualified health plan.
218	Certification of Qualified Health Plans	Begin developing standards that will be required for certification of a qualified health plan.
	Certification of Qualified Health Plans	Begin developing standards that will be required for certification of a qualified health plan.
220	Certification of Qualified Health Plans	Draft applicable certification documents (notices/solicitations, applications, agreements, etc.) that will be used in connection with the certification of qualified health plans. Such documents must address Exchange policies relating to the minimum qualifications of a qualified health plan including any user fees, the length of the initial certification, recertification, and terms that may lead to decertification.
221	Certification of Qualified Health Plans	Draft applicable certification documents (notices/solicitations, applications, agreements, etc.) that will be used in connection with the certification of qualified health plans. Such documents must address Exchange policies relating to the minimum qualifications of a qualified health plan including any user fees, the length of the initial certification, recertification, and terms that may lead to decertification.
222	Certification of Qualified Health Plans	Draft applicable certification documents (notices/solicitations, applications, agreements, etc.) that will be used in connection with the certification of qualified health plans. Such documents must address Exchange policies relating to the minimum qualifications of a qualified health plan including any user fees, the length of the initial certification, recertification, and terms that may lead to decertification.
223	Certification of Qualified Health Plans	Release the initial solicitation for the certification of a qualified health plans (with the exception of rate and benefit information), prior to the release of such solicitation all policy decisions and internal preparation must be complete.
224	Certification of Qualified Health Plans	Release the initial solicitation for the certification of a qualified health plans (with the exception of rate and benefit information), prior to the release of such solicitation all policy decisions and internal preparation must be complete.

225	Certification of Qualified Health Plans	Release the initial solicitation for the certification of a qualified health plans (with the exception of rate and benefit information), prior to the release of such solicitation all policy decisions and internal preparation must be complete.
226	Certification of Qualified Health Plans	Launch plan management and bid evaluation system to allow upload of qualified health plan bids and other required information.
227	Certification of Qualified Health Plans	Launch plan management and bid evaluation system to allow upload of qualified health plan bids and other required information.
228	Certification of Qualified Health Plans	Launch plan management and bid evaluation system to allow upload of qualified health plan bids and other required information.
229	Certification of Qualified Health Plans	Prepare training documents for qualified health plan orientation.
230	Certification of Qualified Health Plans	Prepare training documents for qualified health plan orientation.
231	Certification of Qualified Health Plans	Prepare training documents for qualified health plan orientation.
232	Certification of Qualified Health Plans	Collect submissions from the solicitation and begin evaluating proposals.
233	Certification of Qualified Health Plans	Collect submissions from the solicitation and begin evaluating proposals.
234	Certification of Qualified Health Plans	Collect submissions from the solicitation and begin evaluating proposals.
235	Certification of Qualified Health Plans	Receive rate and benefit information and evaluate all application information from health plan issuers.
236	Certification of Qualified Health Plans	Receive rate and benefit information and evaluate all application information from health plan issuers.
237	Certification of Qualified Health Plans	Receive rate and benefit information and evaluate all application information from health plan issuers.
	Certification of Qualified Health Plans	Complete the certification of qualified health plans, complete any negotiations, finalize agreements with health plan issuers, and make a public announcement of the selection of qualified health plans.

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239	Certification of Qualified Health Plans	Complete the certification of qualified health plans, complete any negotiations, finalize agreements with health plan issuers, and make a public announcement of the selection of qualified health plans.
240	Certification of Qualified Health Plans	Complete the certification of qualified health plans, complete any negotiations, finalize agreements with health plan issuers, and make a public announcement of the selection of qualified health plans.
241	Certification of Qualified Health Plans	Conduct plan readiness reviews/activities (e.g., test enrollment interfaces with plans, review member materials, test financial reconciliation, cross-functional implementation sessions with plans, etc).
242	Certification of Qualified Health Plans	Conduct plan readiness reviews/activities (e.g., test enrollment interfaces with plans, review member materials, test financial reconciliation, cross-functional implementation sessions with plans, etc).
243	Certification of Qualified Health Plans	Conduct plan readiness reviews/activities (e.g., test enrollment interfaces with plans, review member materials, test financial reconciliation, cross-functional implementation sessions with plans, etc).
244	Certification of Qualified Health Plans	Collect user fees if the Exchange is utilizing this funding mechanism.
245	Certification of Qualified Health Plans	Collect user fees if the Exchange is utilizing this funding mechanism.
246	Certification of Qualified Health Plans	Collect user fees if the Exchange is utilizing this funding mechanism.
247	Certification of Qualified Health Plans	Demonstrate capability for the Exchange and/or for the State insurance regulatory body to monitor the practices and conduct, as well as the pricing and benefits, of health insurance issuers offering products in the Exchange with regard to their products inside and outside the Exchange.
248	Certification of Qualified Health Plans	Demonstrate capability for the Exchange and/or for the State insurance regulatory body to monitor the practices and conduct, as well as the pricing and benefits, of health insurance issuers offering products in the Exchange with regard to their products inside and outside the Exchange.
249	Certification of Qualified Health Plans	Demonstrate capability for the Exchange and/or for the State insurance regulatory body to monitor the practices and conduct, as well as the pricing and benefits, of health insurance issuers offering products in the Exchange with regard to their products inside and outside the Exchange.

250	Call Center & In-Person Assistance	Collaborate with the State Consumer Assistance Program or Health Ombudsman program if applicable, or with other state entities if applicable, to determine if call center functionalities can be shared.
251	Call Center & In-Person Assistance	Collaborate with the State Consumer Assistance Program or Health Ombudsman program if applicable, or with other state entities if applicable, to determine if call center functionalities can be shared.
252	Call Center & In-Person Assistance	Collaborate with the State Consumer Assistance Program or Health Ombudsman program if applicable, or with other state entities if applicable, to determine if call center functionalities can be shared.
253	Call Center & In-Person Assistance	Complete call center procurement process and select a vendor to operate the call center.
254	Call Center & In-Person Assistance	Complete call center procurement process and select a vendor to operate the call center.
255	Call Center & In-Person Assistance	Complete call center procurement process and select a vendor to operate the call center.
256	Call Center & In-Person Assistance	Develop call center customer service representative protocols and scripts to respond to likely requests from health care consumers in the State.
257	Call Center & In-Person Assistance	Develop call center customer service representative protocols and scripts to respond to likely requests from health care consumers in the State.
258	Call Center & In-Person Assistance	Develop call center customer service representative protocols and scripts to respond to likely requests from health care consumers in the State.
259	Call Center & In-Person Assistance	Develop protocols for accommodating the hearing impaired and those with other disabilities and foreign language and translation services.
260	Call Center & In-Person Assistance	Develop protocols for accommodating the hearing impaired and those with other disabilities and foreign language and translation services.
261	Call Center & In-Person Assistance	Develop protocols for accommodating the hearing impaired and those with other disabilities and foreign language and translation services.
262	Call Center & In-Person Assistance	Train call center representatives on eligibility verification and enrollment process, and other applicable areas, so they can facilitate enrollment of individuals over the phone.

263	Call Center & In-Person Assistance	Train call center representatives on eligibility verification and enrollment process, and other applicable areas, so they can facilitate enrollment of individuals over the phone.
264	Call Center & In-Person Assistance	Train call center representatives on eligibility verification and enrollment process, and other applicable areas, so they can facilitate enrollment of individuals over the phone.
265	Call Center & In-Person Assistance	Launch call center functionality and publicize 1-800 number. Prominently post information on the Exchange website related to contacting the call center for assistance.
266	Call Center & In-Person Assistance	Launch call center functionality and publicize 1-800 number. Prominently post information on the Exchange website related to contacting the call center for assistance.
267	Call Center & In-Person Assistance	Launch call center functionality and publicize 1-800 number. Prominently post information on the Exchange website related to contacting the call center for assistance.
268	Exchange Website and Calculator	Begin developing requirements for systems and program operations, including: requirements related to online comparison of qualified health plans; requirements related to online application and selection of qualified health plans; premium tax credit and cost-sharing reduction calculator functionality; requests for assistance; linkages to other State health subsidy programs, and other health and human services programs as appropriate.
269	Exchange Website and Calculator	Begin developing requirements for systems and program operations, including: requirements related to online comparison of qualified health plans; requirements related to online application and selection of qualified health plans; premium tax credit and cost-sharing reduction calculator functionality; requests for assistance; linkages to other State health subsidy programs, and other health and human services programs as appropriate.
270	Exchange Website and Calculator	Begin developing requirements for systems and program operations, including: requirements related to online comparison of qualified health plans; requirements related to online application and selection of qualified health plans; premium tax credit and cost-sharing reduction calculator functionality; requests for assistance; linkages to other State health subsidy programs, and other health and human services programs as appropriate.

271	Exchange Website and Calculator	Begin systems development.
272	Exchange Website and Calculator	Begin systems development.
273	Exchange Website and Calculator	Begin systems development.
274	Exchange Website and Calculator	Submit content for informational website to HHS for comment.
275	Exchange Website and Calculator	Submit content for informational website to HHS for comment.
276	Exchange Website and Calculator	Submit content for informational website to HHS for comment.
277	Exchange Website and Calculator	Complete systems development and final user testing of informational website.
278	Exchange Website and Calculator	Complete systems development and final user testing of informational website.
279	Exchange Website and Calculator	Complete systems development and final user testing of informational website.
280	Exchange Website and Calculator	Launch information website.
281	Exchange Website and Calculator	Launch information website.
282	Exchange Website and Calculator	Launch information website.
283	Exchange Website and Calculator	Collect and verify plan data for comparison tool.
284	Exchange Website and Calculator	Collect and verify plan data for comparison tool.
285	Exchange Website and Calculator	Collect and verify plan data for comparison tool.
286	Exchange Website and Calculator	Test comparison tool with consumers and stakeholders.

287	Exchange Website and Calculator	Test comparison tool with consumers and stakeholders.
288	Exchange Website and Calculator	Test comparison tool with consumers and stakeholders.
289	Exchange Website and Calculator	Launch comparison tool with pricing information but without online enrollment function.
290	Exchange Website and Calculator	Launch comparison tool with pricing information but without online enrollment function.
291	Exchange Website and Calculator	Launch comparison tool with pricing information but without online enrollment function.
292	Exchange Website and Calculator	Launch fully functioning comparison tool with pricing information and online enrollment functionality on the first day of open enrollment.
293	Exchange Website and Calculator	Launch fully functioning comparison tool with pricing information and online enrollment functionality on the first day of open enrollment.
294	Exchange Website and Calculator	Launch fully functioning comparison tool with pricing information and online enrollment functionality on the first day of open enrollment.
295	Quality Rating System	Utilize the Federal quality rating system developed by HHS in development of draft contract for qualified health plans.
296	Quality Rating System	Utilize the Federal quality rating system developed by HHS in development of draft contract for qualified health plans.
297	Quality Rating System	Utilize the Federal quality rating system developed by HHS in development of draft contract for qualified health plans.
298	Quality Rating System	Anticipate data collection needs for Federal quality rating system in development of draft contract for qualified health plans.
299	Quality Rating System	Anticipate data collection needs for Federal quality rating system in development of draft contract for qualified health plans.
300	Quality Rating System	Anticipate data collection needs for Federal quality rating system in development of draft contract for qualified health plans.
301	Quality Rating System	Include quality rating functionality in system business requirements for the Exchange website.

302	Quality Rating System	Include quality rating functionality in system business requirements for the Exchange website.
303	Quality Rating System	Include quality rating functionality in system business requirements for the Exchange website.
304	Quality Rating System	Complete testing and validation of quality rating functionality.
305	Quality Rating System	Complete testing and validation of quality rating functionality.
306	Quality Rating System	Complete testing and validation of quality rating functionality.
307	Quality Rating System	Post quality rating system information on the Exchange website.
308	Quality Rating System	Post quality rating system information on the Exchange website.
309	Quality Rating System	Post quality rating system information on the Exchange website.
310	Quality Rating System	Continually update quality rating information on the Exchange website and for call center representatives so they have the most-up-to date information on qualified health plans.
311	Quality Rating System	Continually update quality rating information on the Exchange website and for call center representatives so they have the most-up-to date information on qualified health plans.
312	Quality Rating System	Continually update quality rating information on the Exchange website and for call center representatives so they have the most-up-to date information on qualified health plans.
313	Navigator	Conduct preliminary planning activities related to the Navigator program including developing high level milestones and timeframes for establishment of the program.
314	Navigator	Conduct preliminary planning activities related to the Navigator program including developing high level milestones and timeframes for establishment of the program.
315	Navigator	Conduct preliminary planning activities related to the Navigator program including developing high level milestones and timeframes for establishment of the program.
316	Navigator	Determine targeted organizations in the State who would qualify to function as Navigators.

317	Navigator	Determine targeted organizations in the State who would qualify to function as Navigators.
318	Navigator	Determine targeted organizations in the State who would qualify to function as Navigators.
319	Navigator	Determine Navigator grantee organizations and award contracts or grants (funded from the operational funds of the Exchange)
320	Navigator	Determine Navigator grantee organizations and award contracts or grants (funded from the operational funds of the Exchange)
321	Navigator	Determine Navigator grantee organizations and award contracts or grants (funded from the operational funds of the Exchange)
322	Navigator	Train Navigators
323	Navigator	Train Navigators
324	Navigator	Train Navigators
325	Navigator	Begin operations of Navigators.
326	Navigator	Begin operations of Navigators.
327	Navigator	Begin operations of Navigators.
328	Eligibility Determinations	Begin coordination with agencies administering other Applicable State Health Subsidy Programs (OASHSPs), including Medicaid and CHIP agencies and other health and human services agencies as appropriate, and create institutional structure to support future work.
329	Eligibility Determinations	Begin coordination with agencies administering other Applicable State Health Subsidy Programs (OASHSPs), including Medicaid and CHIP agencies and other health and human services agencies as appropriate, and create institutional structure to support future work.

330	Eligibility Determinations	Begin coordination with agencies administering other Applicable State Health Subsidy Programs (OASHSPs), including Medicaid and CHIP agencies and other health and human services agencies as appropriate, and create institutional structure to support future work.
331	Eligibility Determinations	Begin coordination with the State Department of Insurance on Exchange planning efforts.
332	Eligibility Determinations	Begin coordination with the State Department of Insurance on Exchange planning efforts.
333	Eligibility Determinations	Begin coordination with the State Department of Insurance on Exchange planning efforts.
334	Eligibility Determinations	Begin developing requirements, including requirements on the Exchange side and in OASHSPs, (and other program agencies as appropriate), including:integrating or interfacing with OASHSPs to support enrollment transactions and eligibility referrals; coordinating appeals; coordinating applications and notices; managing transitions; communicating the enrollment status of individuals.
335	Eligibility Determinations	Begin developing requirements, including requirements on the Exchange side and in OASHSPs, (and other program agencies as appropriate), including:integrating or interfacing with OASHSPs to support enrollment transactions and eligibility referrals; coordinating appeals; coordinating applications and notices; managing transitions; communicating the enrollment status of individuals.
336	Eligibility Determinations	Begin developing requirements, including requirements on the Exchange side and in OASHSPs, (and other program agencies as appropriate), including:integrating or interfacing with OASHSPs to support enrollment transactions and eligibility referrals; coordinating appeals; coordinating applications and notices; managing transitions; communicating the enrollment status of individuals.
337	Eligibility Determinations	Begin system development, including any systems development needed by OASHSPs and other programs as appropriate.
338	Eligibility Determinations	Begin system development, including any systems development needed by OASHSPs and other programs as appropriate.
339	Eligibility Determinations	Begin system development, including any systems development needed by OASHSPs and other programs as appropriate.

340	Eligibility Determinations	Complete system development, including any systems development needed by OASHSPs and other programs as appropriate.
341	Eligibility Determinations	Complete system development, including any systems development needed by OASHSPs and other programs as appropriate.
342	Eligibility Determinations	Complete system development, including any systems development needed by OASHSPs and other programs as appropriate.
343	Eligibility Determinations	Begin final user testing, including testing of all interfaces.
344	Eligibility Determinations	Begin final user testing, including testing of all interfaces.
345	Eligibility Determinations	Begin final user testing, including testing of all interfaces.
346	Eligibility Determinations	Complete user testing, including full end-to-end integration testing with all other components.
347	Eligibility Determinations	Complete user testing, including full end-to-end integration testing with all other components.
348	Eligibility Determinations	Complete user testing, including full end-to-end integration testing with all other components.
349	Eligibility Determinations	Begin conducting eligibility determinations for OASHSPs, coordinating all relevant business functions, and receiving referrals from OASHSPs for eligibility determination.
350	Eligibility Determinations	Begin conducting eligibility determinations for OASHSPs, coordinating all relevant business functions, and receiving referrals from OASHSPs for eligibility determination.
351	Eligibility Determinations	Begin conducting eligibility determinations for OASHSPs, coordinating all relevant business functions, and receiving referrals from OASHSPs for eligibility determination.
352	Enrollment Process	Begin developing requirements for systems and program operations, including: providing customized plan information to individuals based on eligibility and QHP data; submitting enrollment transactions to QHP issuers; receiving acknowledgements of enrollment transactions from QHP issuers; submitting relevant data to HHS.

353	Enrollment Process	Begin developing requirements for systems and program operations, including: providing customized plan information to individuals based on eligibility and QHP data; submitting enrollment transactions to QHP issuers; receiving acknowledgements of enrollment transactions from QHP issuers; submitting relevant data to HHS.
354	Enrollment Process	Begin developing requirements for systems and program operations, including: providing customized plan information to individuals based on eligibility and QHP data; submitting enrollment transactions to QHP issuers; receiving acknowledgements of enrollment transactions from QHP issuers; submitting relevant data to HHS.
355	Enrollment Process	Begin systems development.
356	Enrollment Process	Begin systems development.
357	Enrollment Process	Begin systems development.
358	Enrollment Process	Complete systems development and prepare for final user testing.
359	Enrollment Process	Complete systems development and prepare for final user testing.
360	Enrollment Process	Complete systems development and prepare for final user testing.
361	Enrollment Process	Begin final user testing, including testing of all interfaces.
362	Enrollment Process	Begin final user testing, including testing of all interfaces.
363	Enrollment Process	Begin final user testing, including testing of all interfaces.
364	Enrollment Process	Complete user testing, including full end-to-end integration testing with all other components.
365	Enrollment Process	Complete user testing, including full end-to-end integration testing with all other components.

366	Enrollment Process	Complete user testing, including full end-to-end integration testing with all other components.
367	Enrollment Process	Begin enrollment into qualified health plans.
368	Enrollment Process	Begin enrollment into qualified health plans.
369	Enrollment Process	Begin enrollment into qualified health plans.
370	Applications & Notices	Review Federal requirements for applications and notices, begin customizing Federal applications and notices as allowable, and begin developing requirements for Exchange-created applications and notices.
371	Applications & Notices	Review Federal requirements for applications and notices, begin customizing Federal applications and notices as allowable, and begin developing requirements for Exchange-created applications and notices.
372	Applications & Notices	Review Federal requirements for applications and notices, begin customizing Federal applications and notices as allowable, and begin developing requirements for Exchange-created applications and notices.
373	Applications & Notices	Finalize all applications and notices including stakeholder review, testing, translation of content, etc. prior to open enrollment.
374	Applications & Notices	Finalize all applications and notices including stakeholder review, testing, translation of content, etc. prior to open enrollment.
375	Applications & Notices	Finalize all applications and notices including stakeholder review, testing, translation of content, etc. prior to open enrollment.
376	Applications & Notices	Begin utilizing applications and notices to support eligibility and enrollment process.
377	Applications & Notices	Begin utilizing applications and notices to support eligibility and enrollment process.
378	Applications & Notices	Begin utilizing applications and notices to support eligibility and enrollment process.

379	Exemptions from Individual Responsibility Requirement and Payment	Begin developing requirements for systems and program operations, including: accepting requests for exemptions; reviewing and adjudicating requests; exchanging relevant information with HHS.
380	Exemptions from Individual Responsibility Requirement and Payment	Begin developing requirements for systems and program operations, including: accepting requests for exemptions; reviewing and adjudicating requests; exchanging relevant information with HHS.
	Exemptions from Individual Responsibility Requirement and Payment	Begin developing requirements for systems and program operations, including: accepting requests for exemptions; reviewing and adjudicating requests; exchanging relevant information with HHS.
	Exemptions from Individual Responsibility Requirement and Payment	Begin systems development.
383	Exemptions from Individual Responsibility Requirement and Payment	Begin systems development.
384	Exemptions from Individual Responsibility Requirement and Payment	Begin systems development.
385	Exemptions from Individual Responsibility Requirement and Payment	Complete systems development and prepare for final user testing.
286	Exemptions from Individual Responsibility Requirement and Payment	Complete systems development and prepare for final user testing.

387	Exemptions from Individual Responsibility Requirement and Payment	Complete systems development and prepare for final user testing.
388	Exemptions from Individual Responsibility Requirement and Payment	Begin final user testing, including testing of all interfaces.
389	Exemptions from Individual Responsibility Requirement and Payment	Begin final user testing, including testing of all interfaces.
390	Exemptions from Individual Responsibility Requirement and Payment	Begin final user testing, including testing of all interfaces.
391	Exemptions from Individual Responsibility Requirement and Payment	Complete user testing, including full end-to-end integration testing with all other components.
392	Exemptions from Individual Responsibility Requirement and Payment	Complete user testing, including full end-to-end integration testing with all other components.
393	Exemptions from Individual Responsibility Requirement and Payment	Complete user testing, including full end-to-end integration testing with all other components.
394	Exemptions from Individual Responsibility Requirement and Payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.

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395	Exemptions from Individual Responsibility Requirement and Payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.
396	Exemptions from Individual Responsibility Requirement and Payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.
397	Premium Tax Credit and Cost-sharing Reduction Administration	Begin developing requirements for systems and program operations, including providing relevant information to QHP issuers and HHS to start, stop, or change the level of premium tax credits and cost-sharing reductions.
398	Premium Tax Credit and Cost-sharing Reduction Administration	Begin developing requirements for systems and program operations, including providing relevant information to QHP issuers and HHS to start, stop, or change the level of premium tax credits and cost-sharing reductions.
399	Premium Tax Credit and Cost-sharing Reduction Administration	Begin developing requirements for systems and program operations, including providing relevant information to QHP issuers and HHS to start, stop, or change the level of premium tax credits and cost-sharing reductions.
400	Premium Tax Credit and Cost-sharing Reduction Administration	Begin systems development.
401	Premium Tax Credit and Cost-sharing Reduction Administration	Begin systems development.
402	Premium Tax Credit and Cost-sharing Reduction Administration	Begin systems development.
403	Premium Tax Credit and Cost-sharing Reduction Administration	Complete systems development and prepare for final user testing.
404	Premium Tax Credit and Cost-sharing Reduction Administration	Complete systems development and prepare for final user testing.

405	Premium Tax Credit and Cost-sharing Reduction Administration	Complete systems development and prepare for final user testing.	
406	Premium Tax Credit and Cost-sharing Reduction Administration	Begin final user testing, including testing of all interfaces.	
407	Premium Tax Credit and Cost-sharing Reduction Administration	Begin final user testing, including testing of all interfaces.	
408	Premium Tax Credit and Cost-sharing Reduction Administration	Begin final user testing, including testing of all interfaces.	
409	Premium Tax Credit and Cost-sharing Reduction Administration	Complete user testing, including full end-to-end integration testing with all other components.	
410	Premium Tax Credit and Cost-sharing Reduction Administration	Complete user testing, including full end-to-end integration testing with all other components.	
411	Premium Tax Credit and Cost-sharing Reduction Administration	Complete user testing, including full end-to-end integration testing with all other components.	
412	Premium Tax Credit and Cost-sharing Reduction Administration	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.	
413	Premium Tax Credit and Cost-sharing Reduction Administration	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.	
414	Premium Tax Credit and Cost-sharing Reduction Administration	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.	

415	Premium Tax Credit and Cost-sharing Reduction Administration	Begin submitting tax credit and cost-sharing reduction information to QHP issuers and HHS.
416	Premium Tax Credit and Cost-sharing Reduction Administration	Begin submitting tax credit and cost-sharing reduction information to QHP issuers and HHS.
417	Premium Tax Credit and Cost-sharing Reduction Administration	Begin submitting tax credit and cost-sharing reduction information to QHP issuers and HHS.
418	Adjudication of Appeals of Eligibility Determinations	Begin developing business processes and operational plan for appeals functions.
419	Adjudication of Appeals of Eligibility Determinations	Begin developing business processes and operational plan for appeals functions.
420	Adjudication of Appeals of Eligibility Determinations	Begin developing business processes and operational plan for appeals functions.
421	Adjudication of Appeals of Eligibility Determinations	Establish resources to handle appeals of eligibility determinations including training on eligibility requirements.
422	Adjudication of Appeals of Eligibility Determinations	Establish resources to handle appeals of eligibility determinations including training on eligibility requirements.
423	Adjudication of Appeals of Eligibility Determinations	Establish resources to handle appeals of eligibility determinations including training on eligibility requirements.
424	Adjudication of Appeals of Eligibility Determinations	Test appeals processes.
425	Adjudication of Appeals of Eligibility Determinations	Test appeals processes.
426	Adjudication of Appeals of Eligibility Determinations	Test appeals processes.
427	Adjudication of Appeals of Eligibility Determinations	Initiate communication with CMS on process for referring appeals to the Federal appeals process.

428	Adjudication of Appeals of Eligibility Determinations	Initiate communication with CMS on process for referring appeals to the Federal appeals process.	
429	Adjudication of Appeals of Eligibility Determinations	Initiate communication with CMS on process for referring appeals to the Federal appeals process.	
430	Adjudication of Appeals of Eligibility Determinations	Begin receiving and adjudicating requests.	
431	Adjudication of Appeals of Eligibility Determinations	Begin receiving and adjudicating requests.	
432	Adjudication of Appeals of Eligibility Determinations	Begin receiving and adjudicating requests.	
433	Notification and appeals of employer liability for the employer responsibility payment	Begin developing requirements for systems and program operations including coordination of employer appeals with appeals of individual eligibility and submission of relevant data to HHS.	
434	Notification and appeals of employer liability for the employer responsibility payment	Begin developing requirements for systems and program operations including coordination of employer appeals with appeals of individual eligibility and submission of relevant data to HHS.	
435	Notification and appeals of employer liability for the employer responsibility payment	Begin developing requirements for systems and program operations including coordination of employer appeals with appeals of individual eligibility and submission of relevant data to HHS.	
436	Notification and appeals of employer liability for the employer responsibility payment	Begin systems development.	
437	Notification and appeals of employer liability for the employer responsibility payment	Begin systems development.	

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438	Notification and appeals of employer liability for the employer responsibility payment	Begin systems development.
439	Notification and appeals of employer liability for the employer responsibility payment	Complete systems development and prepare for final user testing.
440	Notification and appeals of employer liability for the employer responsibility payment	Complete systems development and prepare for final user testing.
441	Notification and appeals of employer liability for the employer responsibility payment	Complete systems development and prepare for final user testing.
442	Notification and appeals of employer liability for the employer responsibility payment	Begin final user testing, including testing of all interfaces.
443	Notification and appeals of employer liability for the employer responsibility payment	Begin final user testing, including testing of all interfaces.
444	Notification and appeals of employer liability for the employer responsibility payment	Begin final user testing, including testing of all interfaces.
445	Notification and appeals of employer liability for the employer responsibility payment	Complete user testing, including full end-to-end integration testing with all other components.

446	Notification and appeals of employer liability for the employer responsibility payment	Complete user testing, including full end-to-end integration testing with all other components.	
447	Notification and appeals of employer liability for the employer responsibility payment	Complete user testing, including full end-to-end integration testing with all other components.	
448	Notification and appeals of employer liability for the employer responsibility payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations.Begin notifying employers in coordination with eligibility determinations.	
449	Notification and appeals of employer liability for the employer responsibility payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations. Begin notifying employers in coordination with eligibility determinations.	
450	Notification and appeals of employer liability for the employer responsibility payment	Begin processing exemptions from individual responsibility requirements and payment and reporting to HHS on outcome of determinations. Begin notifying employers in coordination with eligibility determinations.	
451	Information reporting to IRS and enrollee	Begin developing requirements for systems and program operations, including: capturing data used in enrollment process, submitting relevant data to HHS for later use in information reporting, and a capacity to generate information reports to enrollees.	
452	Information reporting to IRS and enrollee	Begin developing requirements for systems and program operations, including: capturing data used in enrollment process, submitting relevant data to HHS for later use in information reporting, and a capacity to generate information reports to enrollees.	
453	Information reporting to IRS and enrollee	Begin developing requirements for systems and program operations, including: capturing data used in enrollment process, submitting relevant data to HHS for later use in information reporting, and a capacity to generate information reports to enrollees.	

454	Information reporting to IRS and enrollee	Begin systems development.
455	Information reporting to IRS and enrollee	Begin systems development.
456	Information reporting to IRS and enrollee	Begin systems development.
457	Information reporting to IRS and enrollee	Complete systems development and prepare for final user testing.
458	Information reporting to IRS and enrollee	Complete systems development and prepare for final user testing.
459	Information reporting to IRS and enrollee	Complete systems development and prepare for final user testing.
460	Information reporting to IRS and enrollee	Begin final user testing, including testing of all interfaces.
461	Information reporting to IRS and enrollee	Begin final user testing, including testing of all interfaces.
462	Information reporting to IRS and enrollee	Begin final user testing, including testing of all interfaces.
463	Information reporting to IRS and enrollee	Complete user testing, including full end-to-end integration testing with all other components.
464	Information reporting to IRS and enrollee	Complete user testing, including full end-to-end integration testing with all other components.
465	Information reporting to IRS and enrollee	Complete user testing, including full end-to-end integration testing with all other components.
466	Information reporting to IRS and enrollee	Confirm that systems are prepared to generate information reports to enrollees.
467	Information reporting to IRS and enrollee	Confirm that systems are prepared to generate information reports to enrollees.
468	Information reporting to IRS and enrollee	Confirm that systems are prepared to generate information reports to enrollees.

469	Outreach and Education	Perform market analysis/environmental scan to assess outreach/education needs to determine geographic and demographic-based target areas and vulnerable populations for outreach efforts.
470	Outreach and Education	Perform market analysis/environmental scan to assess outreach/education needs to determine geographic and demographic-based target areas and vulnerable populations for outreach efforts.
471	Outreach and Education	Perform market analysis/environmental scan to assess outreach/education needs to determine geographic and demographic-based target areas and vulnerable populations for outreach efforts.
472	Outreach and Education	Develop outreach and education plan to include key milestones and contracting strategy.
473	Outreach and Education	Develop outreach and education plan to include key milestones and contracting strategy.
474	Outreach and Education	Develop outreach and education plan to include key milestones and contracting strategy.
475	Outreach and Education	Distribute outreach and education plan to stakeholders and HHS for input and refinement.
476	Outreach and Education	Distribute outreach and education plan to stakeholders and HHS for input and refinement.
477	Outreach and Education	Distribute outreach and education plan to stakeholders and HHS for input and refinement.
478	Outreach and Education	Develop a "toolkit" for outreach to include educational materials and information.
479	Outreach and Education	Develop a "toolkit" for outreach to include educational materials and information.
480	Outreach and Education	Develop a "toolkit" for outreach to include educational materials and information.
481	Outreach and Education	Develop performance metrics and evaluation plan.
482	Outreach and Education	Develop performance metrics and evaluation plan.

483	Outreach and Education	Develop performance metrics and evaluation plan.
484	Outreach and Education	Design a media strategy and other information dissemination tools.
485	Outreach and Education	Design a media strategy and other information dissemination tools.
486	Outreach and Education	Design a media strategy and other information dissemination tools.
487	Outreach and Education	Submit final outreach and education plan (to include performance metrics and evaluation plan) to HHS.
488	Outreach and Education	Submit final outreach and education plan (to include performance metrics and evaluation plan) to HHS.
489	Outreach and Education	Submit final outreach and education plan (to include performance metrics and evaluation plan) to HHS.
490	Outreach and Education	Focus test materials with key stakeholders and consumers and make refinements based on input.
491	Outreach and Education	Focus test materials with key stakeholders and consumers and make refinements based on input.
492	Outreach and Education	Focus test materials with key stakeholders and consumers and make refinements based on input.
493	Outreach and Education	Launch outreach and education strategy and continue to refine messaging based on response and feedback from consumers.
494	Outreach and Education	Launch outreach and education strategy and continue to refine messaging based on response and feedback from consumers.
495	Outreach and Education	Launch outreach and education strategy and continue to refine messaging based on response and feedback from consumers.
496	SHOP-specific Functions	Research the design and approach of the SHOP Exchange and whether it will be merged with the individual market Exchange.
497	SHOP-specific Functions	Research the design and approach of the SHOP Exchange and whether it will be merged with the individual market Exchange.
498	SHOP-specific Functions	Research the design and approach of the SHOP Exchange and whether it will be merged with the individual market Exchange.

499	SHOP-specific Functions	Begin developing requirements for systems and program operations.	
500	SHOP-specific Functions	Begin developing requirements for systems and program operations.	
501	SHOP-specific Functions	Begin developing requirements for systems and program operations.	
502	SHOP-specific Functions	Begin systems development.	
503	SHOP-specific Functions	Begin systems development.	
504	SHOP-specific Functions	Begin systems development.	
505	SHOP-specific Functions	Complete systems development and prepare for final user testing.	
506	SHOP-specific Functions	Complete systems development and prepare for final user testing.	
507	SHOP-specific Functions	Complete systems development and prepare for final user testing.	
508	SHOP-specific Functions	Begin final user testing, including testing all interfaces.	
509	SHOP-specific Functions	Begin final user testing, including testing all interfaces.	
510	SHOP-specific Functions	Begin final user testing, including testing all interfaces.	
511	SHOP-specific Functions	Complete user testing, including full end-to-end integration testing with other components.	
512	SHOP-specific Functions	Complete user testing, including full end-to-end integration testing with other components.	
513	SHOP-specific Functions	Complete user testing, including full end-to-end integration testing with other components.	
514	SHOP-specific Functions	Begin enrolling employees of small employers into qualified health plans.	

515	ISHOP-SDECING FUNCTIONS	Begin enrolling employees of small employers into qualified health plans.
516	ISHOP-Specific Functions	Begin enrolling employees of small employers into qualified health plans.

Line Item	Response Format
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment

What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment
What is your targeted quarter for completion of this milestone?	Drop-down [Quarter and Year]
What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment

Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Upload attachment
Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Upload attachment
Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Upload attachment
Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Upload attachment
Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity

Upload attachment
Drop-down [Quarter and Year]
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
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What is the status of this milestone?	Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
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Upload attachment	
Drop-down [Quarter and Year]	
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]	
Upload attachment	
Drop-down [Quarter and Year]	
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]	
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Document evidence of completion (if you marked Complete) or Corrective Action (if you marked Behind)	Upload attachment

 What is the status of this project?
Percentage of project completed [by quartile]
Overall progress narrative
Document approved work plan changes.
Please describe any changes to key personnel assigned to this project, including contractual staff.
Request CCIIO consultation?

Response Format
Drop-down [Complete, Ahead, On Schedule, Behind, No Activity Planned]
Drop-down [0-24%, 25-49%, 50-74%, 75-99%, 100%]
Free text
Free text/upload
Free text/upload
Free text/check box

Quarterly Financial Progress Report				
[State] - QQ/YYYY	Approved	Unobligated	Obligated	Spent
State Personnel				
IT [include FTEs]				
Non-IT [include FTEs]				
Fringe				
Travel				
Supplies				
IT				
Non-IT				
Equipment				
IT				
Non-IT				
Contractual				
IT				
Non-IT				
Consultant				
IT				
Non-IT				
Other [please specify]				
TOTAL DIRECT COSTS	\$ -	\$ -	\$ -	\$ -

Contractual - Detail	
Award Date	
Contractor if known	
Amount	
Period of Performance	
Services	

Total [Obligated + Spent]	
\$ -	-
\$ -	-
\$ -	-
\$ -	-
\$ -	-
\$ -	-
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Cost Allocation of IT Functions			
[State] - YYYY	Approved	Exchange	Medicaid
IT Functions			
Health Care Coverage Portal			
Business Rules Management and Operations System			
Interfaces to Federal Data Services Hub			
Interfaces to Other Verification Sources			
Account Creation and Case Notes			
Notices			
Customer Service Technology Support			
	\$0	\$	\$

СНІР	Other (Specify)	Cumulative
		0
		0
		0
		0
		0
		0
		0
		0
\$	\$	\$0

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Line Item

Identify the percentage of your State's population that is uninsured.

Identify the percentage of your State's population that receives employee-sponsored health insurance benefits.

Identify the percentage of your State's population that purchases health insurance coverage through the individual market.

Identify the percentage of your State's population that are Medicaid beneficiaries.

Identify the percentage of your State's population that are Medicare beneficiaries.

Identify the percentage of your State's population that are forms of public insurance other than Medicaid or Medica

Name of Medicaid Program

Name of State Medicaid Agency

State Population (2010)

Medicaid Enrollment (as of 12/31/2010)

Projected Newly Enrolled in Medicaid

Does your State have a 1115 Comprehensive Demonstration Waiver, and if so, what is the demonstration period?

Does your State have an Early Option Coverage?

Current Delivery System(s): address FFS, Managed Care, and Other systems.

Is CHIP run as Separate or Medicaid Expansion

Name of CHIP Program

Name of Agency that Administers CHIP

Identify MMIS Vendor

Identify MMIS Platform

Identify age of current MMIS core system

Identify Medicaid/IE Eligibility System Vendor

Identify Medicaid/ IE Eligibility Platform

Idenfity age of currentMedicaid/IE Eligibility Core System

Identify Exchange Vendor

Idenfity Proposed Exchange Platform

Identify Vendor Performing IT Gap Analysis

Plans for Affordable Care Act E&E Activities

Eligibility & Enrollment Project Summary

E&E Project Schedule

E&E Resources (number of FTE, etc.)

E&E Procurement Approach

E&E Vendor

E&E Solution Type (specify if COTS)

E&E Proposed Budget

E&E System (Integrated Eligibility System, Medicaid/CHIP-Stand Alone, MMIS, or Other)

Is your Program developing to 7 S&C's?

Use of other funding sources (brief description and amount)?

Cost Allocation Methodology

Interfaces

(e.g. IRS, VA, DHS, etc.)

Current Status (APD, RFP)

Current type of E&E system (i.e, Integrated Eligibility System, Medicaid/CHIP Stand-Alone, MMIS, other)

Age of Eligibility Core System

Vendor

Medicaid Eligibility System Platform

Solution Type (specify if COTS)

Current system enhancements and/or plans for replacement

Age of MMIS Core System

MMIS Vendor

MMIS Platform

Solution Type (specify if COTS)

Current system enhancements and/or plans for replacement

MITA Maturity Level

Expected Date of Completion for IT Gap Analysis (month and year)

Response Format
Free text

Free text	
Free text	
Free text	