

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
GENERAL INFORMATION AND INSTRUCTIONS					
1. High level edits to entire document including the addition of missing words, capitalization, deletion of missing spaces, and renumbering	To maintain a consistent format	Entire Document	All Sections	N/A	N
2. Corrected addresses for Boston, Dallas and Seattle Regional Offices	Correction	Section 1	1.4 – Technical Support	N/A	N
3. Added clarification on partial county submissions to clarify that CMS will not accept partial county requests after the initial application submission	Clarification	Section 2	2.6 – Applicants Seeking to Serve Partial Counties	N/A	N
ATTESTATIONS					
4. Delete the request for key personnel resumes.	To comply with CMS requirements and acknowledge that CMS does not specify “key personnel.”	Section 3 - Attestations	3.1 – Experience and Organization History	N/A	D
5. Revise the attestation language under the “State Licensure” section to explain the process for submitting renewed license documentation. The attestation reads: “...Applicant agrees to upload into HPMS the renewed license no later than the final upload. If the renewed license is not available at that time. Applicant agrees to (1) upload, in place of the license, a copy of its completed license renewal application or other documentation (e.g., invoice from payment of renewal fee) to show that the renewal process is being completed in a timely manner, and (2)	To provide detailed information to clarify the current process for submitting proof of renewal.	Section 3 - Attestations	3.3 – State Licensure	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden</i> <i>D – Decreases burden</i> <i>N – No Change</i>
electronically send a copy of the renewed license to the CMS Regional Office Account Manager promptly upon issuance.					
6. Revise language in Section B and C to read: “If you are applying as an MA-only non-network organization (i.e., PFFS or MSA), in HPMS...”	To clarify and make current text consistent.	Section 3 - Attestations	3.5 Compliance Plan	N/A	N
7. Revise attestation #1 to read, “Applicant attests that all staff is qualified to perform their respective duties.” “...as outlined in the key management position descriptions outlined in Section B” was removed from the original sentence.	To be consistent with no longer requesting position descriptions.	Section 3 – Attestations	3.6 – Key Management Staff	N/A	N
8. Revised attestation #2 to clarify the location of the required chart.	Clarification	Section 3 – Attestations	3.6 – Key Management Staff	N/A	N
9. Delete Section “B” request for uploaded PDs.	To comply with CMS requirements and acknowledge that CMS does not specify “key personnel.”	Section 3 – Attestations	3.6 – Key Management Staff	N/A	D
10. Delete Sections 3.7A.2, 3.7A.3, and 3.7C.	To reduce repetitive language found in the State Licensure section.	Section 3 - Attestations	3.7 – Fiscal Soundness	N/A/60-day	N
11. Add a note between sections “A” and “B” to read the “Applicant may only designate or request a partial county service area during the initial application submission. Also added “...and Partial County Network Assessment Table” to the end of the sentence in	To clarify confusion among applicants during the CY 2013 MA application season and ensure that full county to partial county changes are not made in the middle of the application review process.	Section 3 – Attestations	3.8 – Service Area	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
Section 3.8 B.					
12. Revise attestation #2 to update the name of the matrix to CMS Provider Contract Required Provisions Matrix.	To make the matrix title consistent throughout the application.	Section 3 – Attestations	3.9 – CMS Provider Participation Contracts & Agreements (attestation #2)	N/A	N
13. Add the CMS Model MA Contract Addendum attestations back into this section upon OGC approval. Edited to remove the word “Model” from CMS Model Medicare Advantage Contract Amendment because the name of the document submitted to OGC does not include the word “Model”.	To support the lean process improvement by reviewing a smaller sample of actual vs. the entire universe of the template contracts. To maintain consistency within the application document.	Section 3 – Attestations	3.9 – CMS Provider Participation Contracts & Agreements (attestations #5-7)	N/A	N
14. Added NOTE following the attestations to clarify what the CMS Medicare Advantage Contract Amendment is and when it was/will be released (pending date).	Clarification	Section 3 – Attestations	3.9 – CMS Provider Participation Contracts & Agreements	N/A	N
15. Revise instructions in Section B to read, “In HPMS, upon request, upload a completed “CMS Contract Sample Matrix,” the “CMS Provider Contract Required Provisions Matrix,” and the provider contracts that CMS will name during the application review process...”	To support the lean process improvement by including the CMS Provider Contract Required Provisions Matrix.	Section 3 – Attestations	3.9 – CMS Provider Participation Contracts & Agreements	N/A	N
16. Delete attestations #2-13 and add language in new #2 attestation asking the applicant to verify that the information it has provided in the HPMS Delegated Business Function Table accurately	To streamline the MA application and consolidate attestations.	Section 3 - Attestations	3.10 – Contracts for Admin. & Management Services	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
describes/names its delegated entities and functions.					
17. Delete the reference to applicant's parent organization.	To eliminate confusion and provide clarity.	Section 3 – Attestations	3.10 – Contracts for Admin. & Management Services (attestation #4); 3.10D	N/A	N
18. Revised attestation #5 to clarify that CMS is seeking information about whether the applicant received an application approval during one of the last two review cycles, not on whether or not CMS approved the applicant's administrative agreements during those application reviews.	Clarification of requested information in attestation.	Section 3 – Attestations	3.10A – Contracts for Admin & Management Services (attestation #5)	N/A	D
19. Revise the name of the CMS Administrative Contract/Management Delegated Contracting Matrix to CMS Administrative Contract Required Provision Matrix.	To ensure that the name of the Matrix is consistent throughout the application.	Section 3 – Attestations	3.10A – Contracts for Admin. & Management Services (attestation #4); 3.10 C.; 4.5 Matrix	N/A	N
20. Revise current language to read: "...If the Applicant has received a Part C application approval, initial or SAE, from CMS during one or both of the two most recent application review cycles (refer to Attestation #15), then no administrative contract upload is necessary."	To clarify the current text.	Section 3 – Attestations	3.10D – Contracts for Admin. & Management Services	N/A	N
21. Delete Section A.	To reduce duplication. Section A does not serve a purpose since uploads are requested in Section B.	Section 3 – Attestations	3.22 Part C Application Certification	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
22. Added note of clarification following attestations that a PFFS applicant cannot select multiple model types (attestations #1-3) for a single application.	Clarification – An applicant submitted a CY2013 application selecting both network-only and combination models, which was not appropriate but not recognized as a deficiency by CMS until late in the review process.	Section 3 – Attestations	3.24A – Access to Services (PFFS & MSA)	N/A	N
23. Delete Section 3.28 “Tiering of Medical Benefits.”	CMS will collect this information outside the application process.	Section 3 – Attestations	3.28 – Tiering of Medical Benefits	N/A	D
HSD INSTRUCTIONS, TABLES AND EXCEPTION PROCESS					
24. Instructions updated to reflect the removal of Cardiac Surgery and Thoracic Surgery.	To combine the two specialties into Cardiothoracic Surgery.	N/A	N/A	N/A	N
TEMPLATES					
25. Revise the section name to match the new matrix name: “CMS Provider Contract Required Provision Matrix.”	To provide consistency throughout the application.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix	N/A	N
26. Revise the Instructions: Instructions for CMS Provider Contract Required Provision Matrix. This matrix must be completed... that CMS has identified in the contract sample and in those contracts that link the identified provider / facility to the Applicant.	To clarify requested sample.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (instructions)	N/A	N
27. Revise Matrix instructions Step 2. “At the top of each column, enter the name of the provider...”	To provide clarification to the applicant.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (Step #2)	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
28. Revised Matrix instructions Step 3 to remove "Model" from CMS Model Medicare Advantage Contract Amendment to match the document name.	To provide clarification to the applicant.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (Step #3)	N/A	N
29. Revise Matrix instructions Step 5. Designate downstream provider(s), group(s) or other entity with a "(DS)" next to the provider / facility name.	To provide clarification to the applicant.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (Step #5)	N/A	N
30. Revise Matrix instructions Step 6 to clarify where the information is appropriate.	To provide clarification to the applicant.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (Step #6)	N/A	N
31. Revised the CMS Provider Contract Required Provision Matrix to include two new rows (to repeat at the top of each page) showing whether the applicant has used the CMS Medicare Advantage Contract Amendment and if the provider listed is first tier or downstream. Neither are new matrix requirements, but they were previously combined with the provider name cell.	To provide clarification to the applicant	Section 4 – Templates	4.3 – CMS Provider Contract Matrix	N/A	N
32. Revise the CMS Provider Contract Required Provision Matrix second regulation (CFR 422.504 (a) 13 and 422.118) title from Confidentiality and Enrollee Record Accuracy to Confidentiality LW CMS and Sponsor	To provide clarification to the applicant.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (CFR 422.504 (a) 13 and 422.118)	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
33. Revise Delegated Activities and list them individually.	To provide clarification to the applicant and the CMS reviewers.	Section 4 - Templates	4.3 - CMS Provider Contract Matrix (Delegated Activities)	N/A	N
34. Revise the instructions to include the new matrix name: Instructions: The Applicant must...The applicant must also submit a completed CMS Provider Contract Required Provision Matrix indicating...	To maintain consistency throughout the MA application.	Section 4 - Templates	4.4 - CMS Contract Sample Matrix (instructions)	N/A	N
35. Add language back into the sample matrix: ...”Indicate with an “M” any contracts that use the CMS Model Medicare Advantage Contract Amendment.”	Lean process improvement Model Contract Amendment.	Section 4 - Templates	4.4 - CMS Contract Sample Matrix (column #5)	N/A	N
36. Changed the heading in column 3 from “If different from column B...” to “If different from Provider Name...” because we don’t have column letter headings and referring to a Column B might confuse applicants.	To provide clarification to the applicant.	Section 4 - Templates	4.4 - CMS Contract Sample Matrix (column #3)	N/A	N
37. Changed heading of column 5 by deleting reference to Column A (which actually conflicted with the previous reference to that same column as Column B) and removing “Model” from the CMS Model Medicare Advantage Contract Amendment.	Clarification and to ensure consistency	Section 4 - Templates	4.4 - CMS Contract Sample Matrix (column #5)	N/A	N
38. Revise matrix name: CMS Administrative Contract Required Provision Matrix	To ensure consistency throughout the entire application	Section 4 - Templates	4.5 CMS Administrative / Management Delegated	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden D – Decreases burden N – No Change</i>
			Contracting Matrix		
39. Revised Matrix instructions to keep format consistent with previous matrix instructions.	To ensure consistency throughout the entire application	Section 4 - Templates	4.5 CMS Administrative / Management Delegated Contracting Matrix	N/A	N
40. Inserted new step #3 to include instructions on marking if the administrative contract / agreement used the CMS Medicare Advantage Contract Amendment	To ensure consistency throughout the entire application	Section 4 - Templates	4.5 CMS Administrative / Management Delegated Contracting Matrix (Step 3)	N/A	N
41. Revised CMS Administrative Contracting Required Provision Matrix to include a new header row requesting information about whether the administrative contract includes the CMS Medicare Advantage Contract Amendment	To ensure consistency throughout the entire application	Section 4 - Templates	4.5 CMS Administrative / Management Delegated Contracting Matrix	N/A	N
42. Remove Section 4.13: Tiering of Medical Benefits Request Document	To coincide with the policy decision on pages 86-88.	Section 4 - Templates	4.13 Tiering of Medical Benefits Request Document	N/A	D
43. Insert Partial County Justification document as the new Section 4.13. Revised document attached.	To address the 2014 requirement.	Section 4 - Templates	4.13 - Partial County Justification	N/A	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden I = Increases burden D – Decreases burden N – No Change
44. Insert Partial County Network Assessment Table as new Section 4.14. Revised document attached.	To address the 2014 requirement.	Section 4 - Templates	4.14 - Partial County Network Assessment Table	N/A	N
Special Needs Plan (SNP) Proposals					
45. Insert the revised D-SNP State Medicaid Agency Contract Upload Document to reflect what is currently present in HPMS.	To be consistent with the online application.	APPENDIX I: Solicitations for Special Needs Plan (SNP) Proposals	14. - D-SNP Upload Document (Number 3)	60-day	N
46. Revised the question #1 to read "If no, go to question #4" instead of question #3. The note was also updated to refer to question #4.	To correct an error in the application.	APPENDIX I: Solicitations for Special Needs Plan (SNP) Proposals	6. - D-SNP Medicaid Agency(ies) Contract(s),	N/A	N
47. Revise the name of the former D-SNP State Medicaid Agency Contract Upload Document to the D-SNP State Medicaid Agency Contract Negotiation Status Document.	To reduce confusion among applicants.	APPENDIX I: Solicitations for Special Needs Plan (SNP) Proposals	14. - D-SNP Upload Document (Number 3)	N/A	N
Employer/Union Direct Contract for MA					
48. Revise the CFR references in #9 from 42 CFR 422.80 and 42 CFR 423.80 to 42 CFR 422.2262 to 42 CFR 423.2262.	To be accurate with 42 CFR.	APPENDIX II: Employer/Union -Only Group Waiver Plans	6.4 Attestations (2. Certification; #9)	60-day	N

**High-Level Summary of Changes to the Part C Application for the 2014 Application Season
(30-day comment period)**

Revision	Purpose of the Revision	2013 Part C Application	Application Section	Category of Comment	Level of Applicant Burden <i>I = Increases burden</i> <i>D – Decreases burden</i> <i>N – No Change</i>
		(EGWPs) MAO “800 Series”			