Crosswalk of changes to 1932(a) SPA Preprint CMS-PM-10120; OMB No: 0938-0933

Old	Type of Change ¹	Rationale
Section		
А	Added PCCM entity language to first sentence	To include "PCCM entity", which is a new managed care plan type under new regulations.
A	At end of Section A, added reference to new Appendix A for Compliance Dates, and clarification that compliance assurances are for no later than the applicable compliance dates (see sentences beginning "Where the state's assurance")	To incorporate all future compliance dates of new/revised sections of 42 CFR 438.
В	Added references in left column to 42 CFR 438.2 (definitions) and 438.6 (special contract provisions related to payment)	To incorporate key relevant sections that are now cited in section B.
B1	Under MCO, added compliance assurance about 42 CFR 438.6 regarding special contract provisions related to payment.	To prompt state to assure compliance with relevant payment section, and to replace previous assurance with 42 CFR 438.6(c)(5)(iv) regarding bonus/incentive payments.
В	Deleted detailed assurance about bonus/incentive payments (42 CFR 438.6(c)(5)(iv) - which the assurance text had indicated was for PCCM, but actually had only applied to MCO). As above, MCO section now has general compliance assurance regarding 438.6 instead.	To correct error in previous version that indicated applicability to PCCM, but the regulation applied to MCOs.
B2	Deleted "Bonus/incentive payments" from under PCCM (individual practitioners)	To correct error in previous version that indicated applicability to PCCM.
B3	 a. Edited header to use new term PCCM Entity (instead of PCCM (entity based)). b. Deleted "Bonus/incentive payments" from under heading PCCM (entity based) c. Added "Shared savings, incentive payments, and/or financial rewards (see 42 CFR 438.310(c)(2))" as option under PCCM entity. 	 a. To use "PCCM entity" terminology, from regulation b. To correct error in previous version that it indicated applicability to PCCM c. This is relevant to note, as 42 CFR 438.310(c)(2) indicates that specific quality-related regulations are applicable to PCCM Entities that receive such payments.
В3	For PCCM Entity, added checklist for state to select functions, based on list in 42 CFR 438.2	To prompt states to indicate the function(s) of a PCCM Entity.
С	Changed "program" to "managed care program" in first 2 sentences	To be clearer.

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 $^{^1}$ References to the Final Rule are from the Medicaid and CHIP Managed Care Final Rule published in the Federal Register on May 6, 2016, available at https://www.gpo.gov/fdsys/pkg/FR-2016-05-06/pdf/2016-09581.pdf.

Old Section	Type of Change ¹	Rationale
С	Added language to cover new sections of regulations specific to public process for programs with LTSS (42 CFR 438.70 and 438.110) (beginning with "If the program will include")	To incorporate LTSS-specific regulations related to public process, and prompt states to give details regarding them.
D2	Added language regarding PCCM entity – "(including for PCCM entities)"	To include new concept of "PCCM entity".
D4	Added 42 CFR 438.10(g)(2)(vii) as citation	To include reference to relevant regulations.
D6	Added language to include PCCM entities — " and PCCM entities"	To include new concept of "PCCM entity".
D7	Changed reference of 42 CFR 438.6(c) to 438.4	To reflect edit in organization of information in relevant regulation (and related edit to list of regulation sections mentioned in 42 CFR 438.50(c)(6)).
D7	Added assurances/references to 42 CFR 438.5, 438.7, 438.8, and 438.74	To prompt state to assure compliance with new sections of regulations that are relevant to risk contracts.
D9	Changed reference from 45 CFR 92.36 to 45 CFR 75.326	To correct reference per 12/16/14 federal register publication.
D	Added D10, assurances regarding 438.66 (related to monitoring)	To prompt states to assure compliance with new section of regulations.
E	 Extensively revised to: a. Separate population information in to three tables: 1. Included Populations (which includes Eligibility Groups that can be subject to mandatory enrollment); 2. Voluntary Only or Excluded Populations; and 3. (Optional) Other Exceptions. b. List specific Eligibility Groups and relevant citations to regulation/Social Security Act. c. Add Notes column (for each table) d. Consolidate two Geographic Area columns that were previously in main table 	 a. To clarify which populations can be subject to mandatory enrollment and guide states to specifically indicate how they address enrollment for the populations that can't be mandatorily enrolled. b. To elicit more accurate information from states regarding included Eligibility Groups. c. In order to allow states to note relevant specifics not captured otherwise d. To reduce redundancy and allow for new columns, such as Citations, to fit.
E	Under 3. (Optional) Excluded Groups, changed Intermediate Care Facilities for the Mentally Retarded (ICF/MR) to Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)	To reflect change in terminology based on Rosa's Law (Pub. L. 111-256) and as in 42 CFR 483.400 – 483.480.
F1&2	Fully revised sections to reflect new regulation requirements and structure in 42 CFR 438.54 – details of voluntary and mandatory enrollment. Added citation to 438.54.	To reflect new regulations at 42 CFR 438.54.
F3	Changed cite from 42 CFR 438.50 to 42 CFR 438.54.	To reflect new section of regulations.

Old Section	Type of Change ¹	Rationale
F3	Added regulation citations to left column in subparts of F.3. (based on citations in right column) e.g., for new 3a, cite 438.52 in left column	To be consistent with formatting used in the rest of the document.
F3a	Deleted	Concept now explicitly covered in F1&2 (42 CFR 438.54(c)(4) and (d)(4)).
F3b	(Now F3a) Edited to reflect new specifics of 42 CFR 438.52 about choice requirements for MCO, PCCM, and PCCM entity. Edited to specify this is regarding mandatory enrollment.	To reflect new specifics in 42 CFR 438.52.
F3c	(Now F3b) Changed to reflect that rural exception is for MCOs only (not PCCM)	To reflect change in 42 CFR 438.52.
F3	Added F3d, assurance regarding new section of regulation - 42 CFR 438.71 - beneficiary support system	To prompt state to assure compliance with new section of regulation.
G2	Deleted dropdown and word "months"	To be more flexible in accommodating potential answers.
G3	Changed citation from 438.56(c) to 438.56 more broadly	To be more inclusive of requirements regarding disenrollment.
G4	Changed language to be "during the 90 days following the date of their initial enrollment into the MCO, PCCM, or PCCM entity. (Examples: state generated correspondence, enrollment packets, etc.)" instead of the original language of: "during the first 90 days of their enrollment. (Examples: state generated correspondence, HMO enrollment packets etc.)"	To be more specific about intent of "first 90 days of enrollment", and to remove reference to HMO.
Н	Changed text to refer to 42 CFR 438.10 instead of 42 CFR 438.10(e) specifically.	Removed (e) to make applicable to enrollees (not only potential enrollees).
Н	Added language to include PCCM entities.	To include new concept of "PCCM entity".
	Changed open-ended request for list of benefits ("List all benefits for which the MCO is responsible.") to be table. Table adds prompt for states to enter Medicaid state plan citation (including attachment, page, and item numbers) for each benefit, in order to be specific and tie each benefit to those in State Plan. Added new instructions in section, which explain how to complete the table.	To prompt states to link services provided by the MCO to State Plan approved services, making it easier to ensure that the services are in fact State Planapproved.
J	Changed "internal grievance procedure" to "internal grievance and appeal system".	To reflect new regulation text at 42 CFR 438.228.
K	Changed section to focus on compliance assurances regarding 42 CFR 438.62, 438.68, 438.206, 438.207, 439.208 (instead of "Describe how the state has assured adequate capacity and services.")	To restructure as compliance assurance (consistent with format of other sections of pre-print document) and to add new relevant section of regulations (42 CFR 438.68).
L	Changed citation from 42 CFR 438.240, to 438.330 and 438.340.	438.240 was deleted in new regulations, and 438.330 and 438.340 are now the relevant sections regarding quality.
L	Changed 1932(a)(5)(D)(c)(1)(A) citation to be 1932(c)(1)(A).	To correct error in the previous version.

Old Section	Type of Change ¹	Rationale
L	Changed to "The state assures that all applicable requirements of 42 CFR 438.330 and 438.340, regarding a quality assessment and performance improvement program and State quality strategy, will be met." from "The state assures that a quality assessment and improvement strategy has been developed and implemented."	Changed format to be assurance of compliance with relevant regulations and mirror the format of other assurances in this pre-print application. Also, added language (underlined part is added), to reflect terminology used in 42 CFR 438.330 and 438.340: " quality assessment and performance improvement strategy and State quality strategy".
M	Changed 1932(a)(5)(D)(c)(2)(A) citation to be 1932(c)(2)(A).	To correct error in the previous version.
M	Added citations to 42 CFR 438.354 and 42 CFR 438.364	To prompt states to assure compliance to other new sections of the regulation that are also relevant to external quality review.
М	Changed to "The state assures that all applicable requirements of 42 CFR 438.350, 438.354, and 438.364 regarding an annual external independent review conducted by a qualified independent entity, will be met." from "The state assures that an external independent review conducted by a qualified independent entity will be performed yearly."	Changed format to be assurance of compliance with relevant regulations and mirror the format of other assurances in this pre-print application.
N/A	Added "Appendix A: Compliance Dates (from Supplementary Information in 81 FR 27497, published 5/6/2016)"	To incorporate all future compliance dates of new/revised sections of 42 CFR 438.