



Centers for Medicare & Medicaid Services
CMS eXpedited Life Cycle (XLC)

Medicaid and CHIP Program (MACPro)

I2-Medicaid State Plan PRA document

Version 1.0

08/17/2017

Document Number: 192-QSSI-MACPro-PRA-I2-D

Contract Number: HHSM-500-2007-00024I: HHSM-500-T0014

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1. I2-Medicaid State Plan – Screenshots

1.1 Medicaid State Plan

Submission - Medicaid State Plan

MEDICAID | Medicaid State Plan | CA2017MS0013D [Request System Help](#)

CMS-10434 OMB 0938-1188 [View Implementation Guide](#)

Not Started
In Progress
Complete

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment

Validation & Navigation

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

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

Not Started
In Progress
Complete

Navigate to Reviewable Unit

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You must select at least one component in order to complete this form.

Figure 1: Medicaid State Plan – 1

- Administration
 - Designation and Authority
 - Intergovernmental Cooperation Act Waivers
 - Eligibility Determinations and Fair Hearings
 - Organization and Administration
 - Single State Agency Assurances
- Eligibility
 - Methodologies for calculating income and resources that apply across many eligibility groups
 - MAGI-Based Methodologies
 - Financial Eligibility Requirements for Non-MAGI Groups
 - Income or Resource Standards
 - AFDC Income Standards
 - Mandatory Eligibility Groups
 - Optional Eligibility Groups
 - Non-financial requirements
 - State Residency
 - Citizenship and Non-Citizen Eligibility
 - Eligibility and enrollment Processes
 - Eligibility Process
 - Application
 - Presumptive Eligibility

Figure 2: Medicaid State Plan – 2

Eligibility and enrollment Processes

- Eligibility Process
- Application
- Presumptive Eligibility
 - Presumptive Eligibility for Children under Age 19
 - Parents and Other Caretaker Relatives - Presumptive Eligibility
 - Presumptive Eligibility for Pregnant Women
 - Adult Group - Presumptive Eligibility
 - Individuals above 133% FPL under Age 65 - Presumptive Eligibility
 - Individuals Eligible for Family Planning Services - Presumptive Eligibility
 - Former Foster Care Children - Presumptive Eligibility
 - Presumptive Eligibility by Hospitals

Benefits and Payment

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

Figure 3: Medicaid State Plan – 3

1.2 Medicaid State Plan – Benefits and Payment – Path 1

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment
 - Health Homes Program
 - Create new Health Homes program
 - Amend existing Health Homes program
 - Terminate existing Health Homes program
 - Copy from existing Health Homes program
 - Create new program from blank form

* Name of Health Homes Program:

* -- Select Health Homes Program --

Figure 4: Benefits and Payment – 1

1.3 Medicaid State Plan – Benefits and Payment – Path 2

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment
 - Health Homes Program
 - Create new Health Homes program
 - Amend existing Health Homes program
 - Terminate existing Health Homes program
 - Copy from existing Health Homes program
 - Create new program from blank form

* Name of Health Homes Program:

Figure 5: Benefits and Payment – 2

1.4 Medicaid State Plan – Benefits and Payment – Path 3

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment
 - Health Homes Program

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

-- Select Health Homes Program --

*

Amend an existing program that is neither approved in MACPro nor converted.

Figure 6: Benefits and Payment – 3

1.5 Medicaid State Plan – Benefits and Payment – Path 4

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment
 - Health Homes Program

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

*

Amend an existing program that is neither approved in MACPro nor converted.

* Name of Health Homes Program to be amended:

Figure 7: Benefits and Payment – 4

1.6 Medicaid State Plan – Benefits and Payment – Path 5

The submission includes the following:

- Administration
- Eligibility
- Benefits and Payment
 - Health Homes Program

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

-- Select Health Homes Program --

Figure 8: Benefits and Payment – 5