



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

## **Medicaid and CHIP Program (MACPro)**

### **I2-Medicaid State Plan PRA document**

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## Table of Contents

<b>1.</b>	<b>I2-Medicaid State Plan – Screenshots.....</b>	<b>1</b>
1.1	Medicaid State Plan .....	1
1.2	Medicaid State Plan – Benefits and Payment – Path 1 .....	2
1.3	Medicaid State Plan – Benefits and Payment – Path 2 .....	2
1.4	Medicaid State Plan – Benefits and Payment – Path 3 .....	3
1.5	Medicaid State Plan – Benefits and Payment – Path 4 .....	3
1.6	Medicaid State Plan – Benefits and Payment – Path 5 .....	3

## List of Figures

Figure 1:	Medicaid State Plan – 1 .....	1
Figure 2:	Medicaid State Plan – 2 .....	1
Figure 3:	Medicaid State Plan – 3 .....	2
Figure 4:	Benefits and Payment – 1 .....	2
Figure 5:	Benefits and Payment – 2 .....	2
Figure 6:	Benefits and Payment – 3 .....	3
Figure 7:	Benefits and Payment – 4 .....	3
Figure 8:	Benefits and Payment – 5 .....	3

# 1. I2-Medicaid State Plan – Screenshots

## 1.1 Medicaid State Plan

### Submission - Medicaid State Plan

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

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CMS-10434 OMB 0938-1188

Not Started
In Progress
Complete

[View Implementation Guide](#)

**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.

**Navigate to Reviewable Unit**

-- Select Reviewable Unit --

Not Started
In Progress
Complete

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

EXIT

SAVE FORM

GO TO SELECTED REVIEWABLE UNIT

**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