Reinstatement of Previously Approved GenICs CMS-10398, OMB 0938-1148

With the exception of GenIC #72 (Expressions of Interest in the Infant Well-Child Visit Affinity Group) and GenIC #75 (ARP 1135 State Plan Amendment) we are proposing to reinstate the following GenICs that had been active prior to the April 30, 2024, expiration.

GenIC #	Title	Discontinu e	Reinstate w/Change	Reinstate w/o Change	Transfer from MACPro (0938-1188)	Time (hours)
5	Medicaid Payment Suspensions	N	N	Y		1,120
7	Connecting Kids to Coverage Outreach and Enrollment	N	N	Υ		14,964
9	Application for Section 1915(b)(4) Waiver - Fee For Service Selective Contracting Program	N	N	Y		2,240
10	Section 1115 Demonstration and Waiver Application	N	N	Y		1,600
11	MAGI-Based Eligibility Verification Plan	N	N	Y		2,278
13	Medicaid Accountability – Nursing Facility, Outpatient Hospital and Inpatient Hospital Upper Payment Limits	N	N	Y		2,240
16	Federally-Facilitated Marketplace (FFM) Integration Data Collection Tool	N	N	Y		1,120
17	CHIP State Plan Eligibility	N	N	Y		2,800
18	Alternative Benefit Plans	N	N	Υ		448
21	FMAP Claiming State Plan Amendment	N	N	Υ		160
24	Medicaid Accountability – UPL ICF/IID, Clinic Services, Medicaid Qualified Practitioner Services and Other Inpatient & Outpatient Facility Providers	N	N	Y		2,240
27	MAGI Conversion Plan Part 2	N	N	Y		1,120
29	Medicaid Cost Sharing	N	N	Y		50
30	State Reporting Medicaid Payment Suspension	N	N	Y		1,040
32	Provider-Preventable Conditions under 42 CFR 438.6 and 447.26 and Title 2702 Non-Payment Preprint (Attachment 4.19)	N	N	Y		78
34	Model Application Template and Instructions for State Child Health Plan Under Title XXI of the Social Security Act, State Children's Health Insurance Program	N	N	Y		160
35	Eligibility and Enrollment Performance Indicators	N	N	Υ		765
37	Managed Care Rate Setting Guidance	N	N	Υ		754
43	Section 223 Demonstration Programs to Improve Community Mental Health Services	N	N	Y		7,490
45	Certified Community Behavioral Health Clinic (CCBHC) 2024 State Proposal Demonstration Application	N	N	Y		1,790
46	1915(i) State Plan Home and Community Based Services	N	N	Y		1,026
48	Section 223 Demonstration Programs to Improve Community Mental Health Services	N	N	Y		1,387
50	Community First Choice State Plan	N	N	Υ		560
51	Fast Track Federal Review Process for Section 1115 Medicaid and CHIP Demonstration Extensions	N	N	Y		450
52	Delivery System and Provider Payment Initiatives Under Medicaid Managed Care Products	N	N	Y		264
53	Section 1115 Substance Use Disorder (SUD) Demonstration: Guide for Developing Implementation Plan Protocols	N	N	Y		784

Limit on Federal Financial Participation for Durable Medical Equipment in Medicaid Section 1115 Demonstration: Budget Neutrality Workbook N N Y 1,897 Section 1115 Demonstration: Budget Neutrality Workbook N N Y 1,897 Section 1115 Substance Use Disorder (SUD) Demonstration: Monitoring Reports Documents and Templates Medicaid Section 1115 Elipibility and Coverage Demonstration Implementation Plan and Monitoring Reports Documents and Templates Medicaid Section 1115 Elipibility and Coverage Demonstration Implementation Plan and Monitoring N N Y 3,080 Bed Medicaid Section 1115 Elipibility and Coverage Demonstration Implementation Plan and Monitoring Demonstration Implementation Plan and Monitoring Demonstration Interest								
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Demonstration: Monitoring Reports Documents and Templates N	56	Section 1115 Demonstration: Budget Neutrality Workbook	N	N	Y		1,897	
Benonstration Implementation Plan and Monitoring Reports Documents and Templates Reports Documents and Template Reports Documents and Template Reports Documents Documen	57	Demonstration: Monitoring Reports Documents and	N	N	Y		10,080	
Emotional Disturbance Demonstrations Data Collection for Section 1003 of the SUPPORT Act 1932(a) State Plan Amendment Template Pederal Meta-Analysis Support: Section 1115 Substance Use Disorder Demonstrations Eligibility Processing Data Report and Renewal Compliance Template Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID-19 Emergency Reporting Requirements for State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services During the COVID-19 Emergency Expressions of Interest in the Infant Well-Child Visit Affinity Group Zuplemental Payment Reporting under the Consolidated Appropriations Act, 2021 ARP 1135 State Plan Amendment Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF Liny Services During Universession of Interest N N N Y 104 104 105 107 108 108 109 109 109 109 109 109	58	Demonstration Implementation Plan and Monitoring	N	N	Y		3,080	
1932(a) State Plan Amendment Template	59		N	N	Y		5,022	
Federal Meta-Analysis Support: Section 1115 Substance Use Disorder Demonstrations N N N Y 162 66 Eligibility Processing Data Report and Renewal Compliance Template Section 1006(b) of the SUPPORT Act: Medicaid Assisted Treatment (MAT) N N N Y 4.485 69 Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID-19 Emergency Reporting Requirements for State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services During the COVID-19 Emergency Page Expressions of Interest in the Infant Well-Child Visit Affinity Group 72 Expressions of Interest in the Infant Well-Child Visit Affinity Group 73 Supplemental Payment Reporting under the Consolidated Appropriations Act, 2021 74 Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials 75 ARP 1135 State Plan Amendment Y N Y 140 79 COVID-19 Risk Corridor Reconciliation Reporting Template N N Y 104 105 106 107 108 108 109 109 109 109 109 100 100	62	Data Collection for Section 1003 of the SUPPORT Act	N	N	Υ		840	
Use Disorder Demonstrations N	63	1932(a) State Plan Amendment Template	N	N	Υ		70	
Eligibility Processing Data Report and Renewal N N N n/a Y Revised (C #66) 8 Section 1006(b) of the SUPPORT Act: Medicaid Assisted Treatment (MAT) 8 Section 1006(b) of the SUPPORT Act: Medicaid Assisted Treatment (MAT) 8 Reporting Requirements for Additional Funding for Medicaid HCBS During the COVID-19 Emergency 8 Reporting Requirements for State Planning Grants for Qualifying Community-Based Mobile Crisis Intervention Services During the COVID-19 Emergency 8 Expressions of Interest in the Infant Well-Child Visit Affinity Y N Y (140) 8 Supplemental Payment Reporting under the Consolidated Appropriations Act, 2021 7 Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials 7 ARP 1135 State Plan Amendment Y N N Y (168) 8 Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group 8 Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group 8 Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF 8 Quality Improvement Affinity Group Expression of Interest N N N N N N N N N N N N N N N N N N N	64		N	N	Y		162	
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71 Qualifying Community-Based Mobile Crisis Intervention Services During the COVID-19 Emergency N N Y 640 72 Expressions of Interest in the Infant Well-Child Visit Affinity Group Y N Y (140) 73 Supplemental Payment Reporting under the Consolidated Appropriations Act, 2021 N N Y 3,240 74 Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials N N Y 61 75 ARP 1135 State Plan Amendment Y N Y (168) 76 Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group N N Y 140 79 COVID-19 Risk Corridor Reconciliation Reporting Template N N N Y 90 81 Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF N N N N N N///> N// 104 82 Quality Improvement Affinity Group Expression of Interest Form N N N N///> N// N///> N// N///> N/// N///> N/// N///> N/// N///>	69		N	N	Y		1,344	
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Appropriations Act, 2021 N N Y 3,240 Coverage of Routine Patient Cost for Items & Services in Qualifying Clinical Trials N N Y 61 To ARP 1135 State Plan Amendment Y N Y (168) Expressions of Interest in the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery Affinity Group N N Y 140 COVID-19 Risk Corridor Reconciliation Reporting Template N N Y 90 Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF Quality Improvement Affinity Group Expression of Interest Form N N N N N N N N N N N N N N N N N N N	72		Y	N	Y		(140)	
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by Reducing Low-Risk Cesarean Delivery Affinity Group N N Y 90 COVID-19 Risk Corridor Reconciliation Reporting N N N Y 90 Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF Quality Improvement Affinity Group Expression of Interest Form N N N N N N N N N N N N N N N N N N N	75	ARP 1135 State Plan Amendment	Y	N	Υ		(168)	
Template Improving Quality of Care and Outcomes Data for Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF R2 Quality Improvement Affinity Group Expression of Interest Form N N N Y 104 (See New IC #82)	76		N	N	Y		140	
Pregnant Medicaid Beneficiaries and Newborn Infants through Linkage and Evaluation of VR, BC, DC, and TAF 82 Quality Improvement Affinity Group Expression of Interest Form N N Y 104 (See New IC #82)	79	, , ,	N	N	Y		90	
82 Quality improvement Affinity Group Expression of Interest N N n/a Y New IC #82)	81	Pregnant Medicaid Beneficiaries and Newborn Infants	N	N	Y		104	
	82		N	N	n/a	Y	New IC	
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