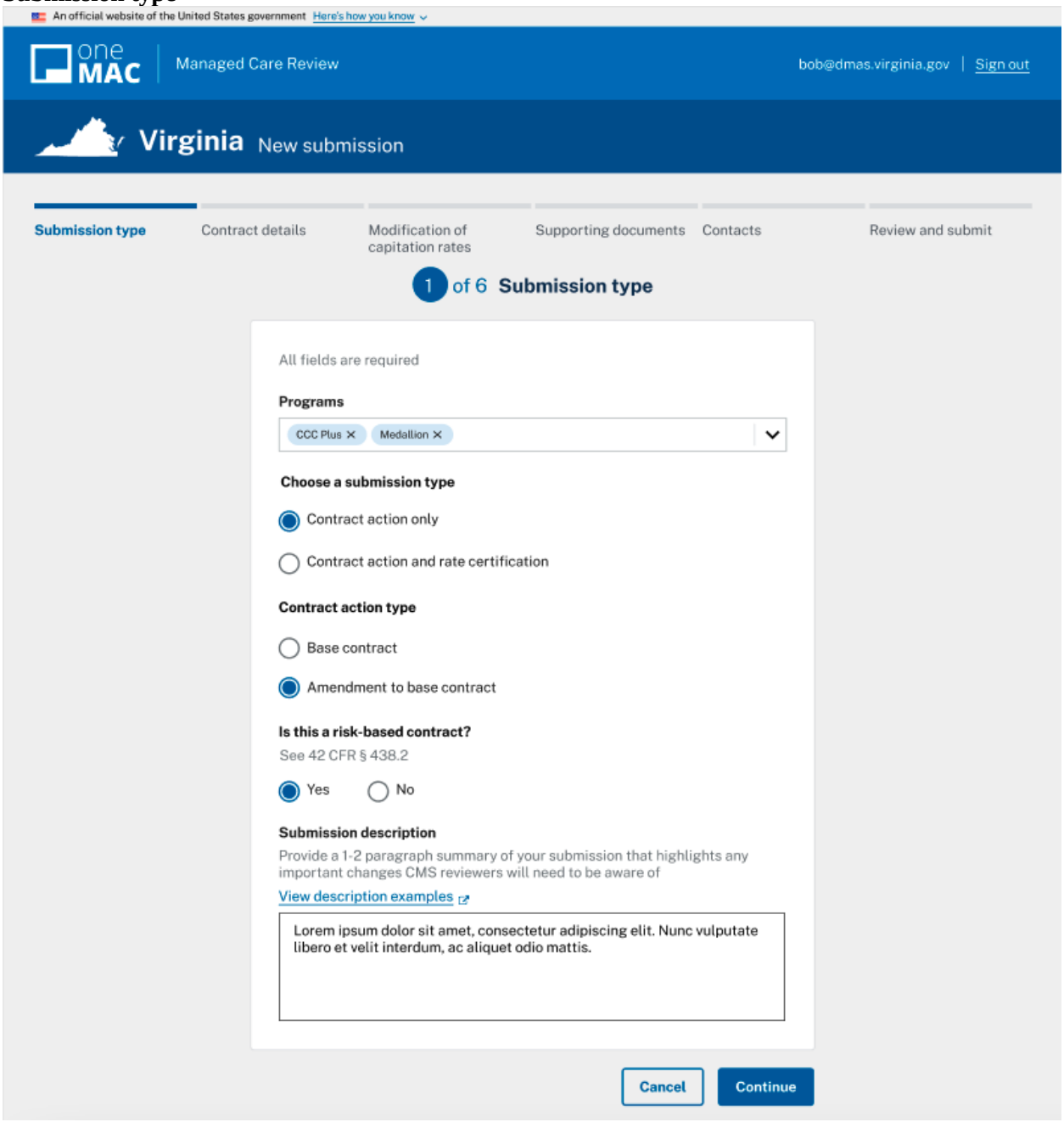
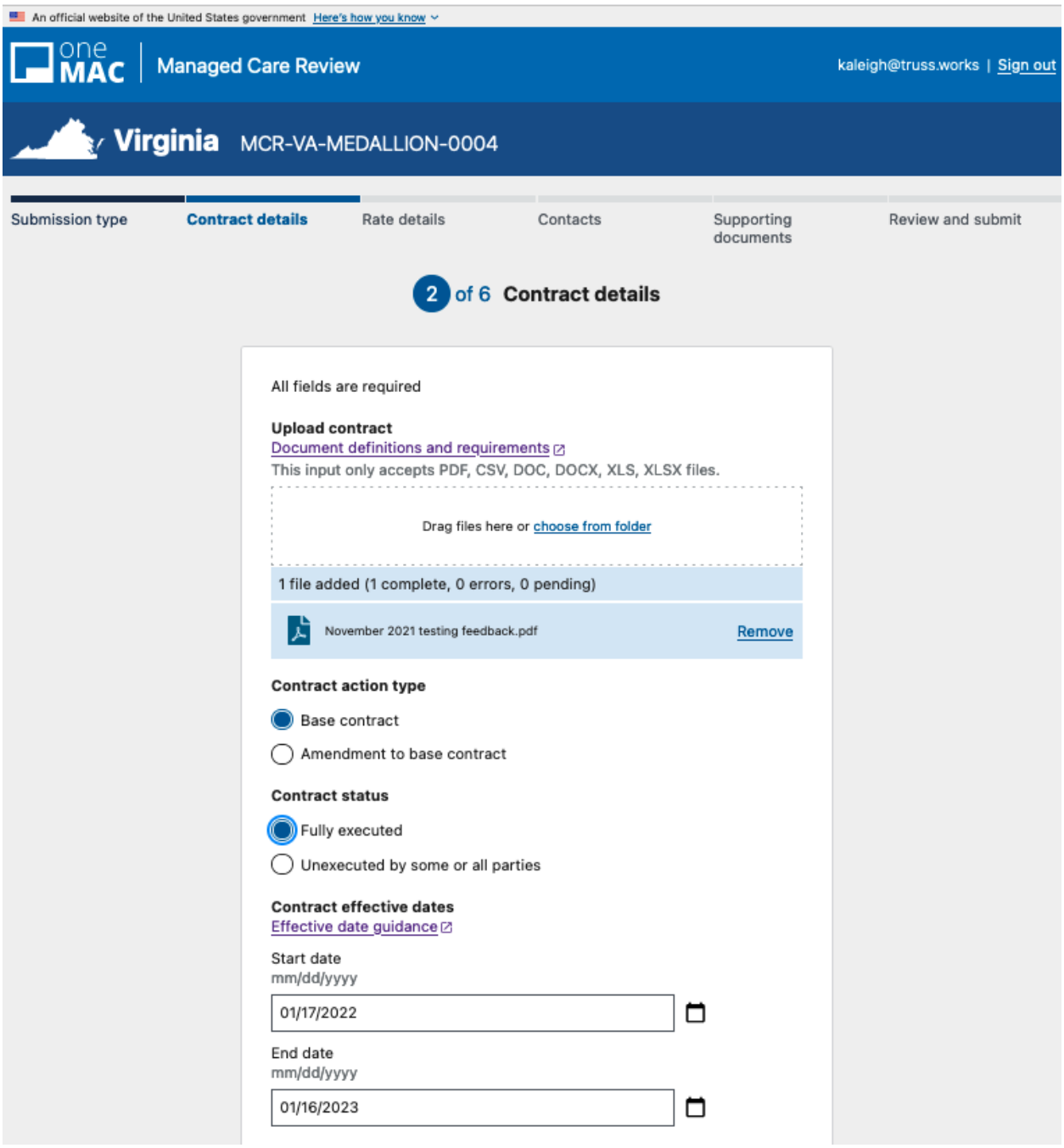
Attachment A: Application Screenshots

Note: The pages and the fields inside each page are conditional based on various selections the state makes as they work through the form. What you see below are all of the possible pages and options fleshed out in full, though what a state would actually encounter would be a subset of what you see here, based on their submission type and other information.

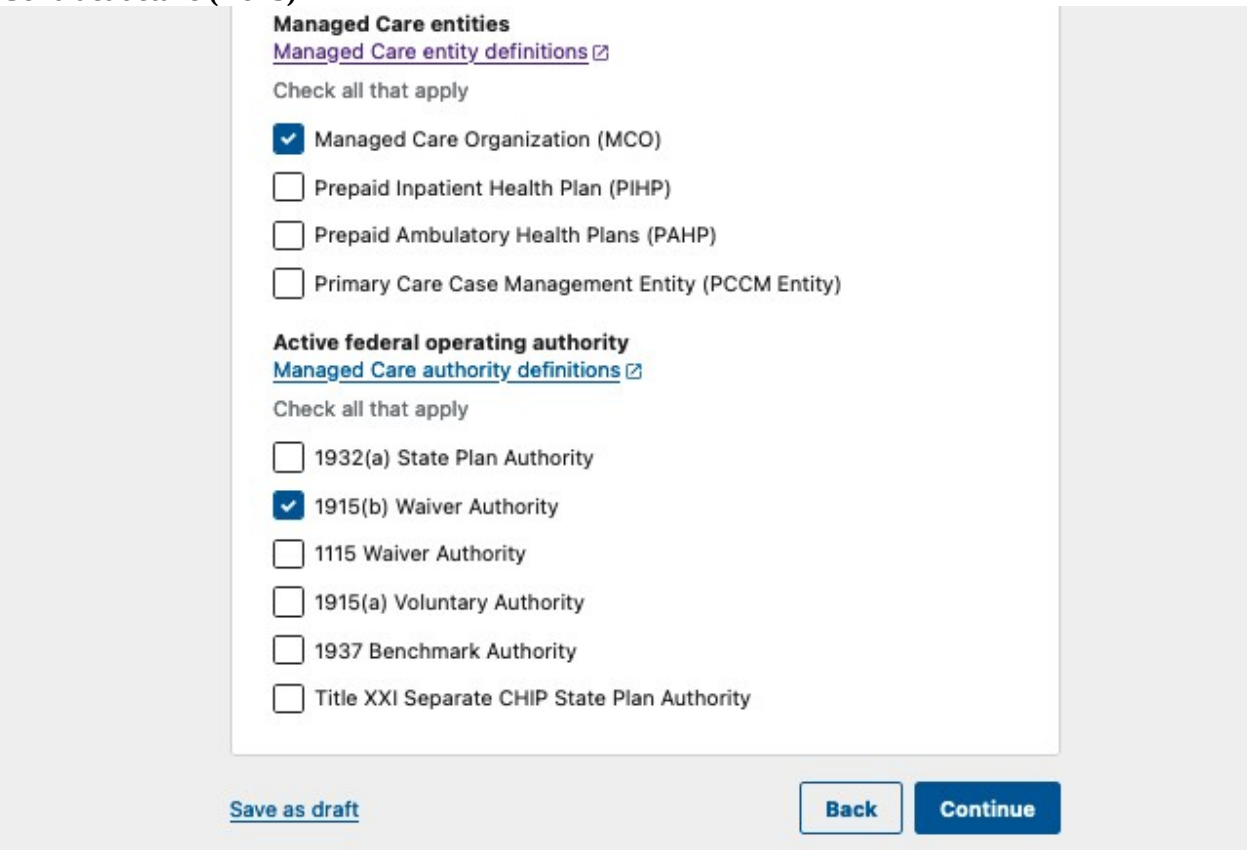
Submission type



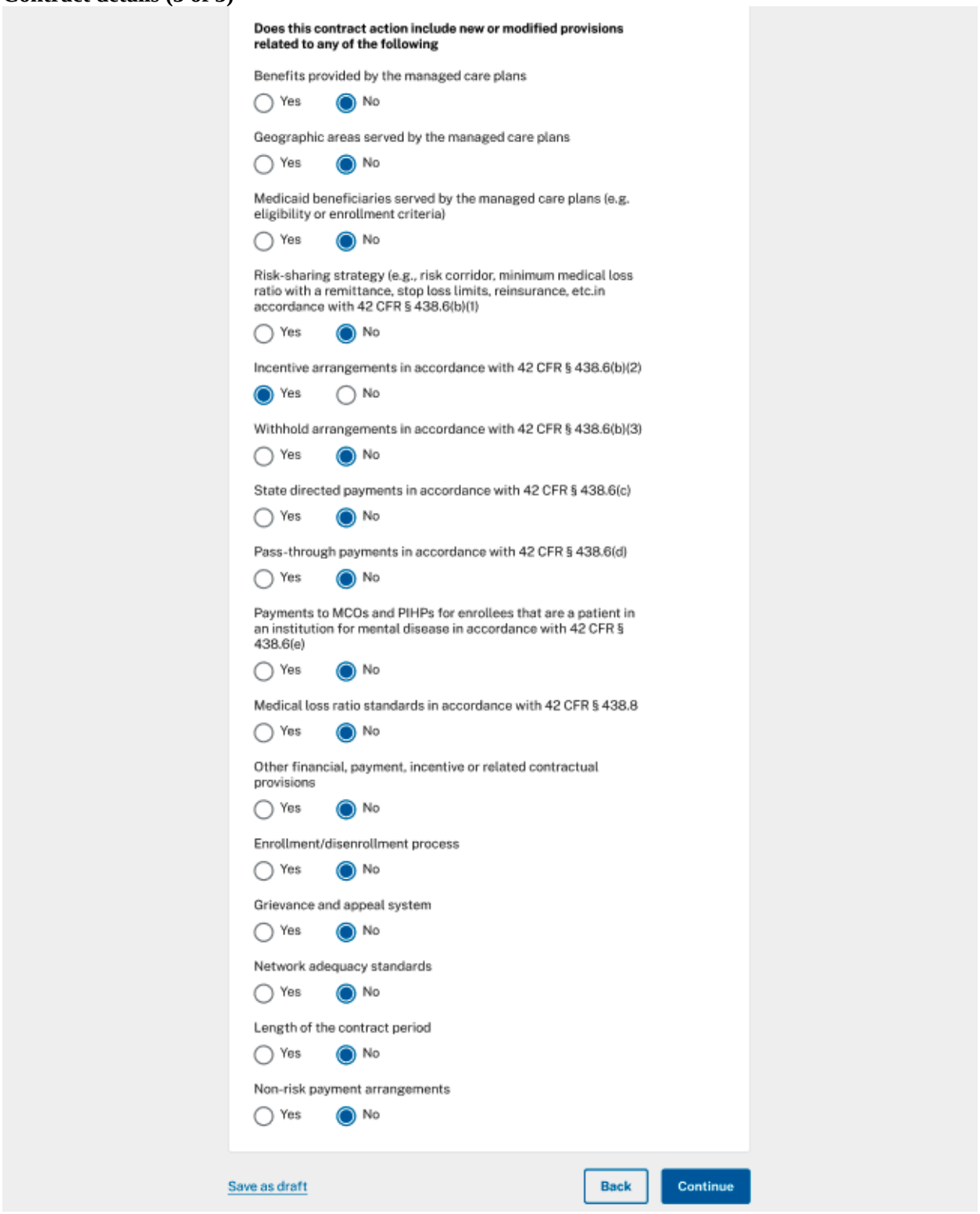
Contract details (1 of 3)


An official website of the United States government Here's how you know
one MAC
Managed Care Review
kaleigh@truss.works | Sign out
Virginia MCR-VA-MEDALLION-0004
Submission type
Contract details
Rate details
Contacts
Supporting documents
Review and submit
2 of 6 Contract details
All fields are required
Upload contract
Document definitions and requirements
This input only accepts PDF, CSV, DOC, DOCX, XLS, XLSX files.
Drag files here or choose from folder
1 file added (1 complete, 0 errors, 0 pending)
November 2021 testing feedback.pdf
Remove
Contract action type
Base contract
Amendment to base contract
Contract status
Fully executed
Unexecuted by some or all parties
Contract effective dates
Effective date guidance
Start date
mm/dd/yyyy
01/17/2022
End date
mm/dd/yyyy
01/16/2023

Contract details (2 of 3)



Contract details (3 of 3)



Does this contract action include new or modified provisions related to any of the following

Benefits provided by the managed care plans
- ○ Yes
- ◉ No

Geographic areas served by the managed care plans
- ○ Yes
- ◉ No

Medicaid beneficiaries served by the managed care plans (e.g. eligibility or enrollment criteria)
- ○ Yes
- ◉ No

Risk-sharing strategy (e.g., risk corridor, minimum medical loss ratio with a remittance, stop loss limits, reinsurance, etc.in accordance with 42 CFR § 438.6(b)(1)
- ○ Yes
- ◉ No

Incentive arrangements in accordance with 42 CFR § 438.6(b)(2)
- ◉ Yes
- ○ No

Withhold arrangements in accordance with 42 CFR § 438.6(b)(3)
- ○ Yes
- ◉ No

State directed payments in accordance with 42 CFR § 438.6(c)
- ○ Yes
- ◉ No

Pass-through payments in accordance with 42 CFR § 438.6(d)
- ○ Yes
- ◉ No

Payments to MCOs and PIHPs for enrollees that are a patient in an institution for mental disease in accordance with 42 CFR § 438.6(e)
- ○ Yes
- ◉ No

Medical loss ratio standards in accordance with 42 CFR § 438.8
- ○ Yes
- ◉ No

Other financial, payment, incentive or related contractual provisions
- ○ Yes
- ◉ No

Enrollment/disenrollment process
- ○ Yes
- ◉ No

Grievance and appeal system
- ○ Yes
- ◉ No

Network adequacy standards
- ○ Yes
- ◉ No

Length of the contract period
- ○ Yes
- ◉ No

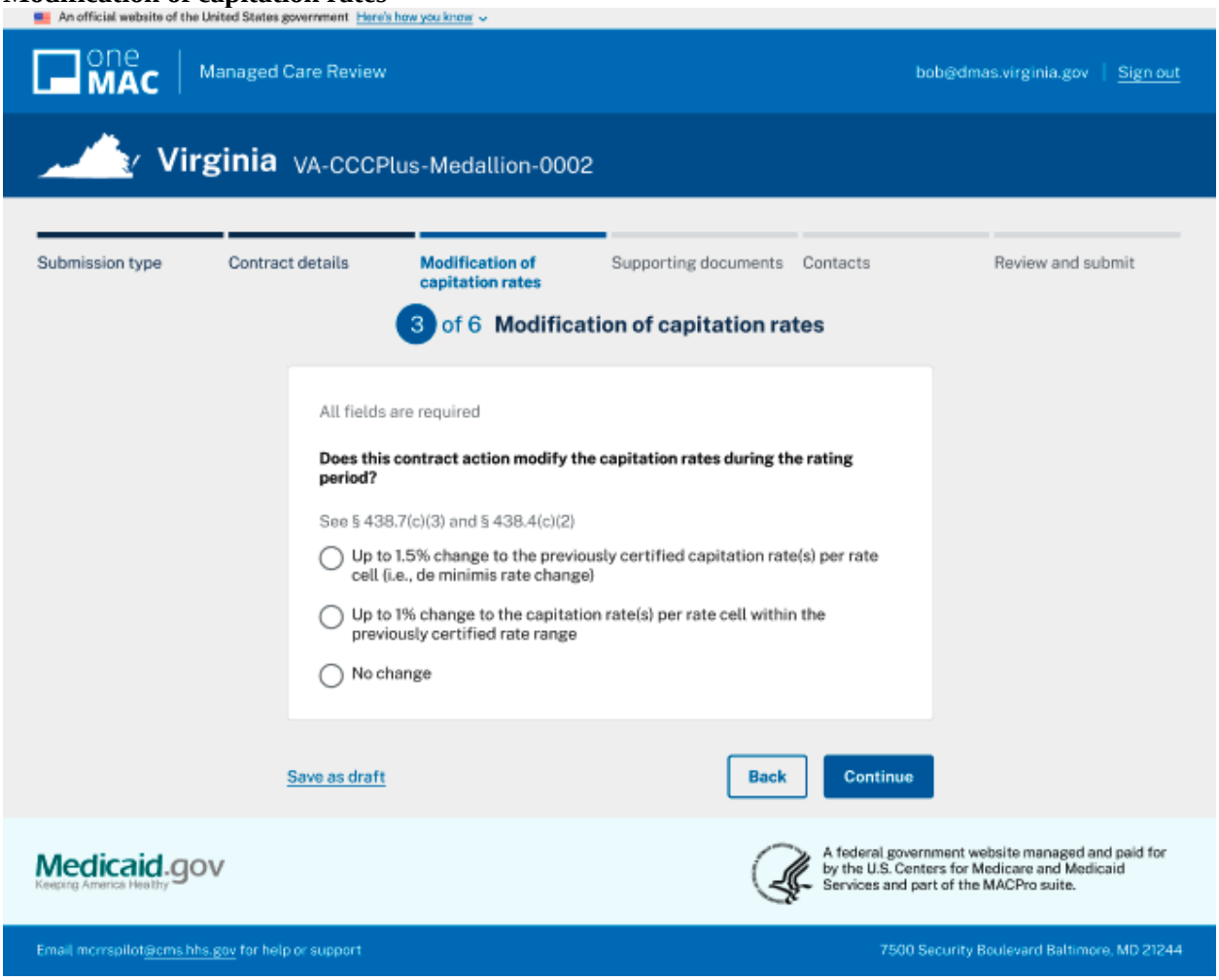
Non-risk payment arrangements
- ○ Yes
- ◉ No

Save as draft

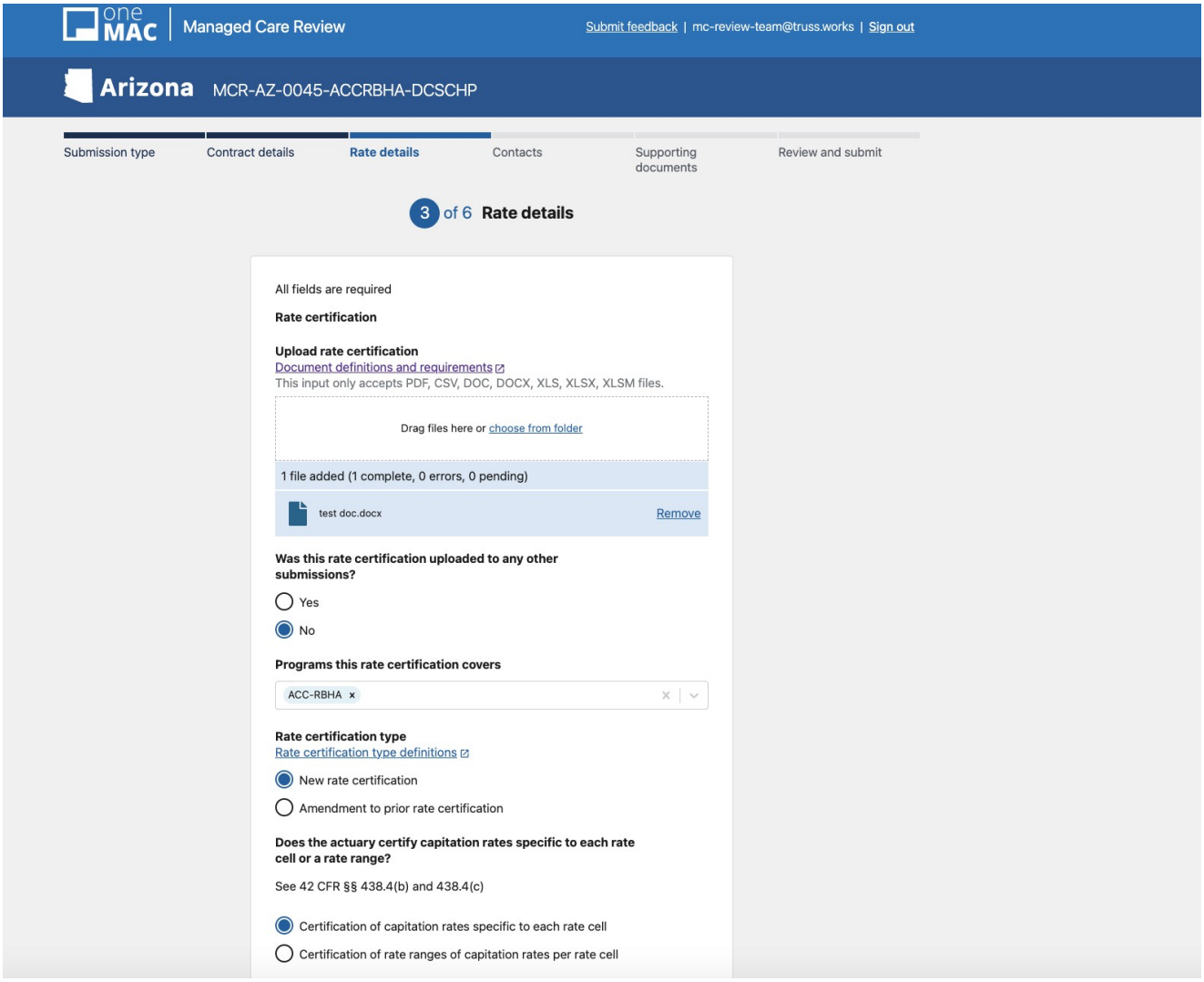
Back

Continue

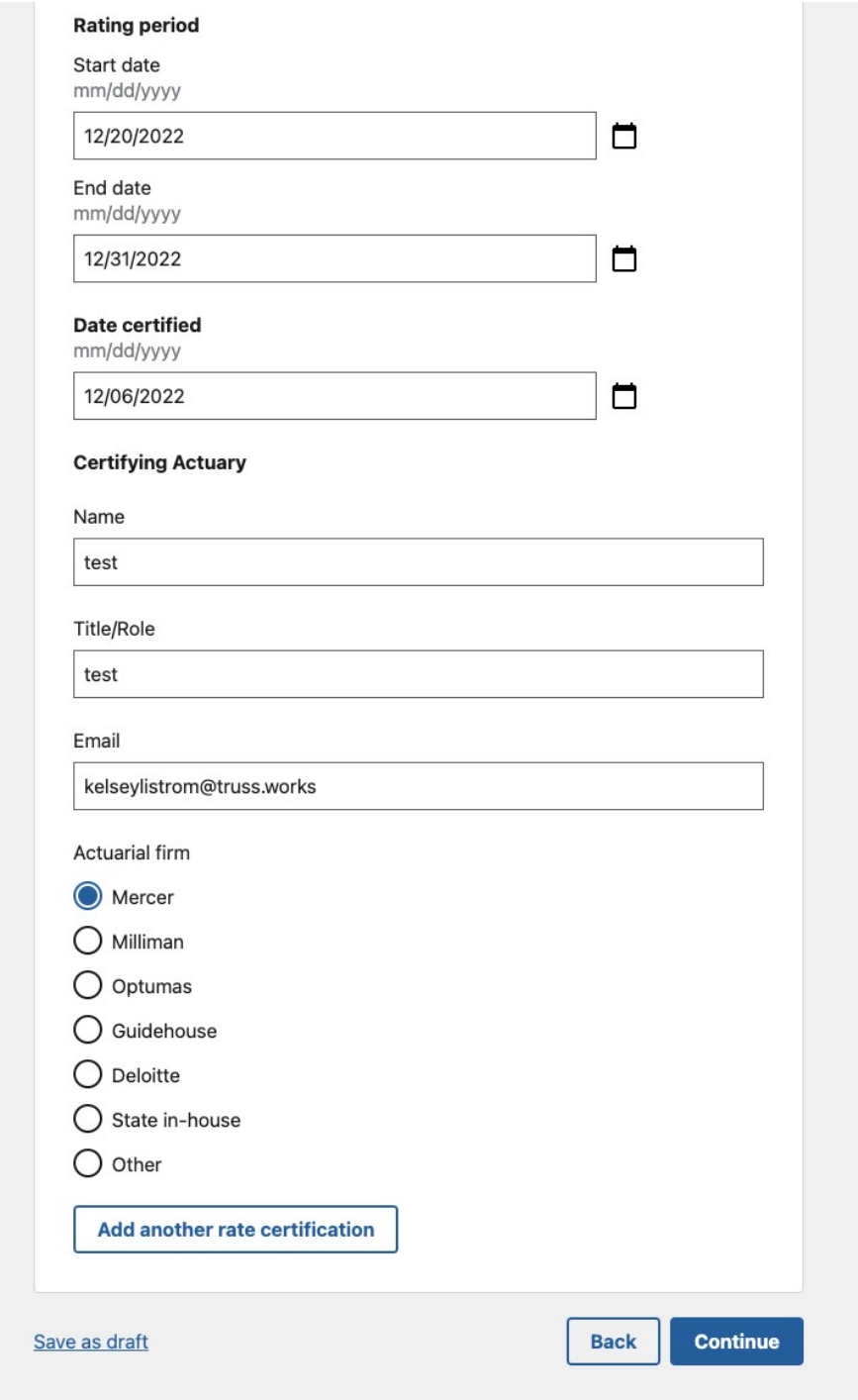
Modification of capitation rates



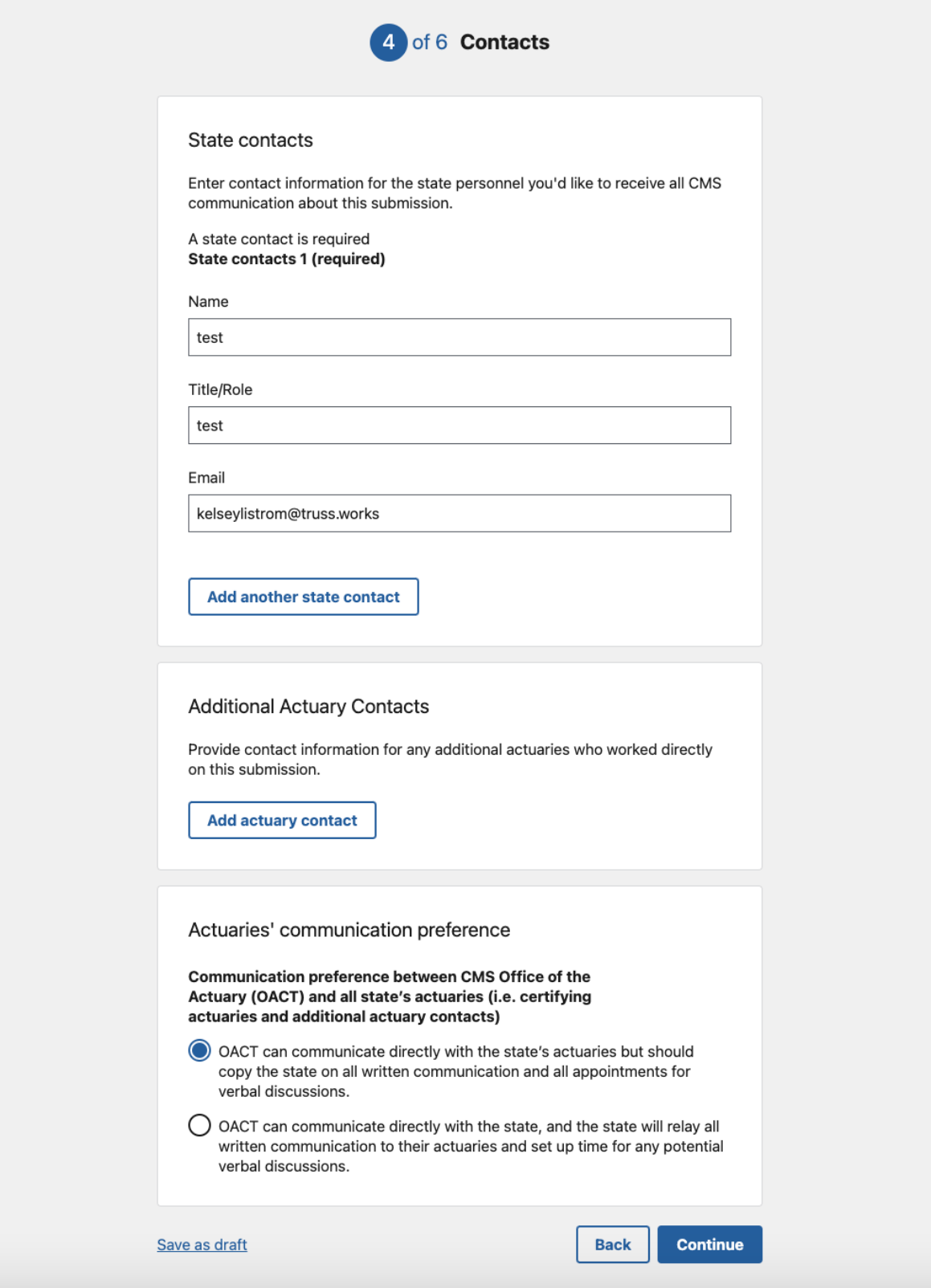
Rate details (1 of 2)



Rate details (2 of 2)



Contacts (1 of 1)



Supporting documents