



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

Medicaid & CHIP Business Information Solutions (MACBIS)

Introductory Guide to Creating Medicaid Eligibility SPAs in MACPro

Version 1.0

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Table of Contents

Introduction	1
Beginning a New Submission Package	2
Submission RUs	3
Dependencies and Prerequisite RUs	12
Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability RU	14
Mandatory Eligibility Groups RU	16
Optional Eligibility Groups RU	19
Non-MAGI Methodologies RU	24
Medically Needy Income Level RU	27
Handling of Excess Income (Spenddown) RU	31
Medically Needy Resource Level RU	33
More Restrictive Requirements than SSI under 1902(f) – (209(b) States) RU	35
Non-MAGI Eligibility Groups RUs	38

Introduction

This reference guide describes the steps for creating your first Medicaid eligibility State Plan Amendments (SPAs) in MACPro. It is designed for users holding the State Editor role who are responsible for starting a new MACPro submission package and completing the reviewable units (RUs) to be included in a package.

This guide focuses on Medicaid eligibility group SPAs. Other types of eligibility SPAs, such as those related to non-financial eligibility, presumptive eligibility, and enrollment are not specifically addressed in this guide, but many of the same steps apply.

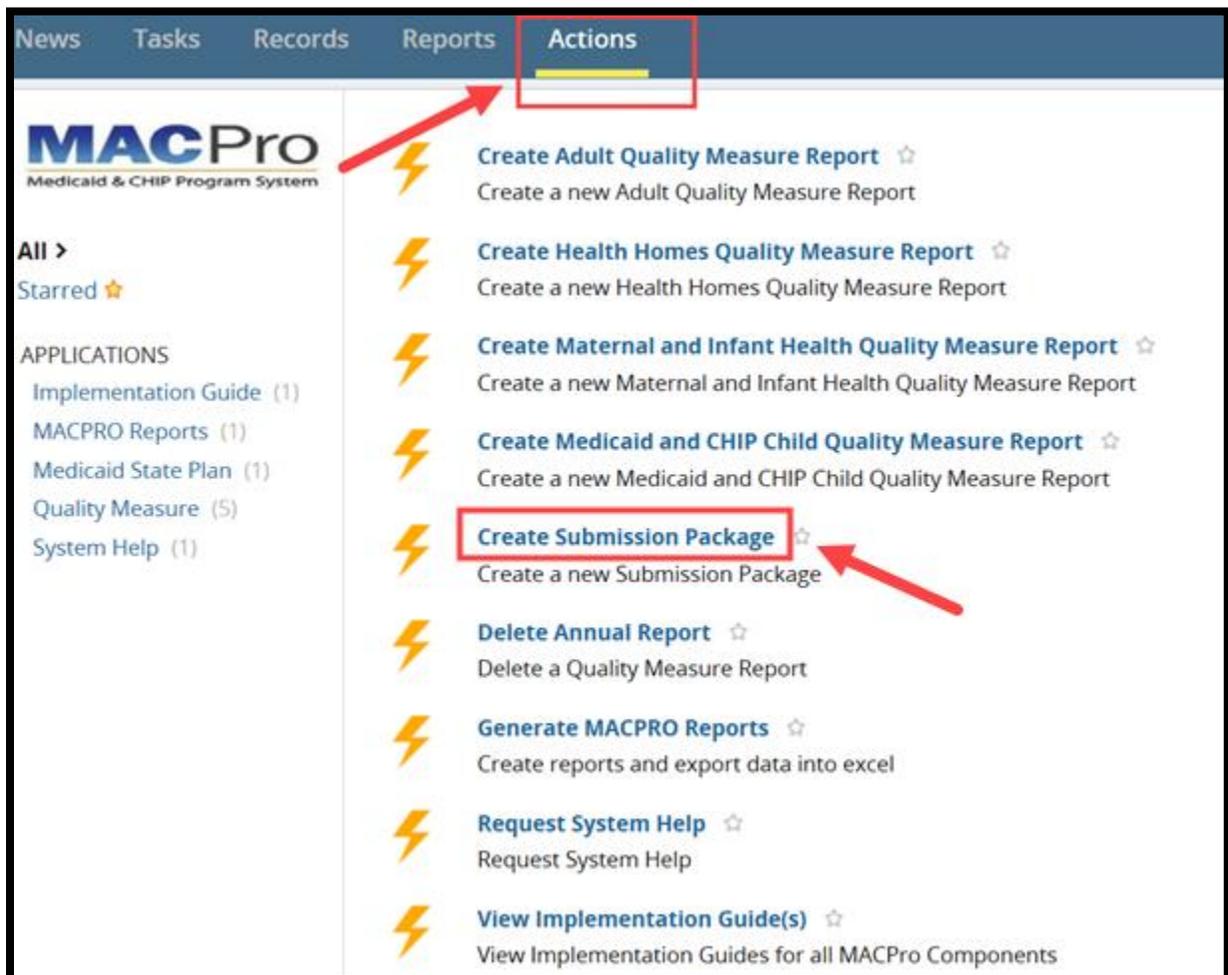
This guide does not walk through every available RU. Detailed background information and instructions for completing an RU can be found in the Implementation Guides contained within MACPro. When you open an RU in MACPro, you will find a link to access the Implementation Guide specific to that RU.

Once you have completed all RUs for your submission, refer to the **MACPro Medicaid State Plan Reference Document for State Users** for next steps in the submission process. The state reference document is available on Medicaid.gov, and you can find it by selecting **Medicaid and CHIP Program Portal** under **Resources for States**.

Beginning a New Submission Package

NOTE: Prior to creating a submission package, you must ensure that a state profile has been created for your state. Only users holding the State System Administrator role can establish or update the state profile. See the **MACPro Medicaid State Plan Reference Document for State Users** for additional information.

1. Log in to MACPro as the **State Editor**. (<https://macpro.cms.gov>)
2. Select the **Create Submission Package** link on the **Actions** tab.



Submission RUs

Every submission package begins with the four Submission reviewable units (RUs). These are required components for any submission package. Like the CMS 179 form, Submission RUs include the following:

- **Submission – Summary** (basic information about the submission type, SPA ID, etc.)
- **Submission – Medicaid State Plan** (sections of the state plan included in the submission)
- **Submission – Public Comment** (adherence to Public Notice requirements)
- **Submission – Tribal Input** (adherence to Tribal Consultation requirements)

1. When beginning a new SPA submission package, you will begin with the **Submission - Summary** RU. Select **View all Responses** to expand all fields at once as shown below in option (a). Or, select the **Expand** links as shown below in option (b) to expand only specific sections.

a. **View all Responses**



Expand links



2. Proceed with entering information into the **Submission – Summary** RU. For detailed steps on completing this RU, please refer to the **MACPro Medicaid State Plan Reference Document for State Users** or the Implementation Guide that accompanies the RU. Then select **Save Reviewable Unit**.

Validation & Navigation

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

Note: This form can be validated only after the Submission - Medicaid State Plan is complete.

Not Started
In Progress
Complete

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

EXIT

→

SAVE REVIEWABLE UNIT

GO TO SELECTED REVIEWABLE UNIT

- To move to the **Submission – Medicaid State Plan** RU, where you will select the eligibility RUs for inclusion in the package, select the drop-down menu under **Navigate to Reviewable Unit** and select **Submission – Medicaid State Plan**.

Navigate to Reviewable Unit

-- Select Reviewable Unit --

-- Select Reviewable Unit --

Submission - Summary

Submission - Medicaid State Plan

Submission - Public Comment

Submission - Tribal Input

SAVE REVIEWABLE UNIT

GO TO SELECTED REVIEWABLE UNIT

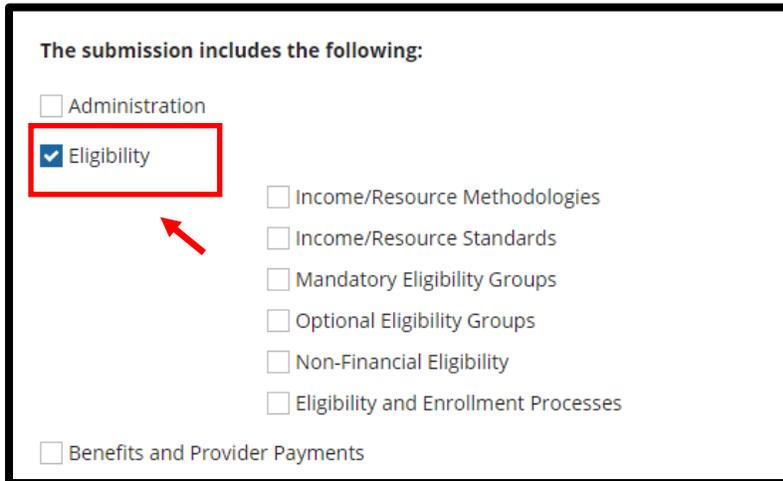
- Select **Go to Selected Reviewable Unit**.

SAVE REVIEWABLE UNIT

GO TO SELECTED REVIEWABLE UNIT

Submission – Medicaid State Plan RU

1. Select the Eligibility section.



The submission includes the following:

- Administration
- Eligibility
- Income/Resource Methodologies
- Income/Resource Standards
- Mandatory Eligibility Groups
- Optional Eligibility Groups
- Non-Financial Eligibility
- Eligibility and Enrollment Processes
- Benefits and Provider Payments

A red box highlights the 'Eligibility' checkbox, and a red arrow points to it.

Two eligibility RUs appear:

- **Mandatory Eligibility Groups**
- **Optional Eligibility Groups**

And four eligibility subsections appear:

- **Income/Resource Methodologies**
- **Income/Resource Standards**
- **Non-Financial Eligibility**
- **Eligibility and Enrollment Processes**

When you select one of the eligibility subsections, additional RUs will appear.

2. Select the RUs you want to include in the SPA. When an RU is selected, a table appears with the following information: the RU name, whether the RU is included in another submission package, and the source of any pre-populated information.

Optional Eligibility Groups

Reviewable Unit Name	Included in Another Submission Package	Source Type
Optional Eligibility Groups	<input checked="" type="radio"/>	APPROVED

Non-financial requirements
 Eligibility and enrollment Processes

Eligibility Process

Reviewable Unit Name	Included in Another Submission Package	Source Type
Eligibility Process	<input type="radio"/>	NEW

- a. **Included in Another Submission Package:**
A solid or filled-in circle indicates that the selected RU **is** included in another package that is currently being adjudicated by CMS. An empty circle indicates that the selected RU is **not** included in another package being adjudicated by CMS.
- b. **Source Type:** If the source type is listed as **New**, this means that you will be starting with a blank template of the RU.
 - If the Source Type is listed as **Approved**, this means that you are starting with the information previously approved in MACPro. The RU **will be pre-populated with the current, approved information with the latest effective date. The RU does not need to be effective to be pre-populated.**
 - A **Converted** source type would indicate that the RU is populated with data from a SPA migrated from the Medicaid Model Data Lab (MMDL). Converted data is available only for MAGI-based eligibility RUs.
3. The first time your state submits an eligibility SPA in MACPro, you will need to complete one or more prerequisite RUs. See the [Dependencies and Prerequisite RUs](#) section for additional information. Once these RUs have been submitted and approved in MACPro, you will not need to submit them again, unless the policy changes.

Depending on the type of SPA that you are submitting, you will need to include one or more of the following RUs:

- a. **Any Eligibility SPA:** you must complete the **Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability** RU. This is necessary even if your SPA contains RUs related to children and families exclusively.

Select the **Income/Resource Methodologies** subsection and then select the **Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability** RU.

The screenshot shows a web interface with two red boxes highlighting selected options. The first box contains a checked checkbox next to 'Income/Resource Methodologies'. The second box contains a checked checkbox next to 'Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability'. Below these boxes is a table with the following structure:

Reviewable Unit Name	Included in Another Submission Package	Source Type
Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability	<input type="radio"/>	NEW

NOTE: Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability was formerly named **Financial Eligibility Requirements for Non-MAGI Groups**. If your state has already completed **Financial Eligibility Requirements for Non-MAGI Groups** and it was approved by CMS, you do not need to complete **Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability**.

- b. Eligibility Group SPA: you must complete the **Mandatory Eligibility Groups** RU and the **Optional Eligibility Groups** RU.

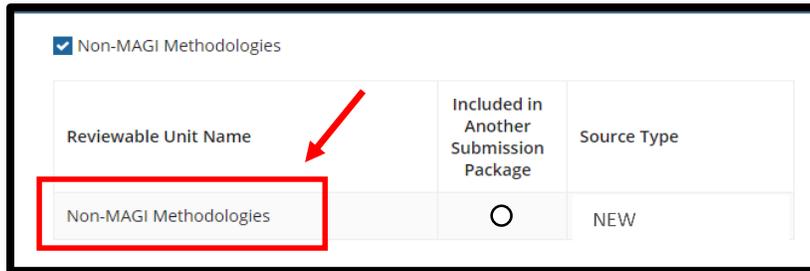
The screenshot shows a web interface with two red boxes highlighting selected options. The first box contains a checked checkbox next to 'Mandatory Eligibility Groups'. The second box contains a checked checkbox next to 'Optional Eligibility Groups'. Below these boxes are two tables with the following structure:

Reviewable Unit Name	Included in Another Submission Package	Source Type
Mandatory Eligibility Groups	<input type="radio"/>	NEW

Reviewable Unit Name	Included in Another Submission Package	Source Type
Optional Eligibility Groups	<input type="radio"/>	NEW

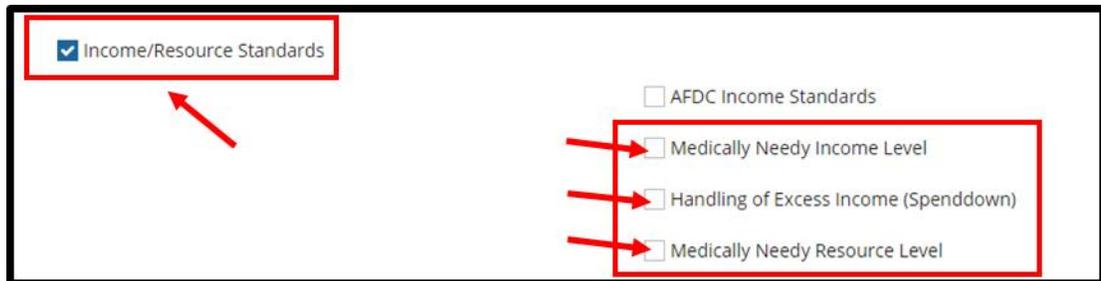
- c. Non-MAGI Eligibility Group SPA: you must complete the **Non-MAGI Methodologies** RU.

Select the **Income/Resource Methodologies** subsection under **Eligibility** and then select the **Non-MAGI Methodologies** RU.



- d. *Medically Needy Eligibility Group SPA*: you must complete the **Medically Needy Income Level** RU, the **Handling of Excess Income (Spenddown)** RU, and the **Medically Needy Resource Level** RU.

Select the **Income/Resource Standards** subsection under **Eligibility** and then select each of these RUs.



- 4. For 209(b) states only, before completing a non-MAGI eligibility group RU, you will need to complete the **Handling of Excess Income (Spenddown)** RU, which can be found in the **Income/Resource Standards** subsection under Eligibility. And you will need to complete the **More Restrictive Requirements than SSI under 1902(f) – (209(b) States)** RU, which can be found in the **Income/Resource Methodologies** subsection.

First, select the **Income/Resource Standards** subsection under **Eligibility** and then select the **Handling of Excess Income (Spenddown)** RU.

Income/Resource Standards

AFDC Income Standards

Medically Needy Income Level

Handling of Excess Income (Spenddown)

Reviewable Unit Name	Included in Another Submission Package	Source Type
Handling of Excess Income (Spenddown)	<input type="radio"/>	NEW

Medically Needy Resource Level

Next, select the **Income/Resource Methodologies** subsection under **Eligibility** and then select the **More Restrictive Requirements than SSI under 1902(f) – (209(b) States)** RU.

Income/Resource Methodologies

Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability

MAGI-Based Methodologies

Non-MAGI Methodologies

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

Reviewable Unit Name	Included in Another Submission Package	Source Type
More Restrictive Requirements than SSI under 1902(f) - (209(b) States)	<input type="radio"/>	NEW

- After your selection(s) have been made, scroll to the bottom of the screen and select **Save Form**. This RU is automatically validated since there is only one sub-section to complete.

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

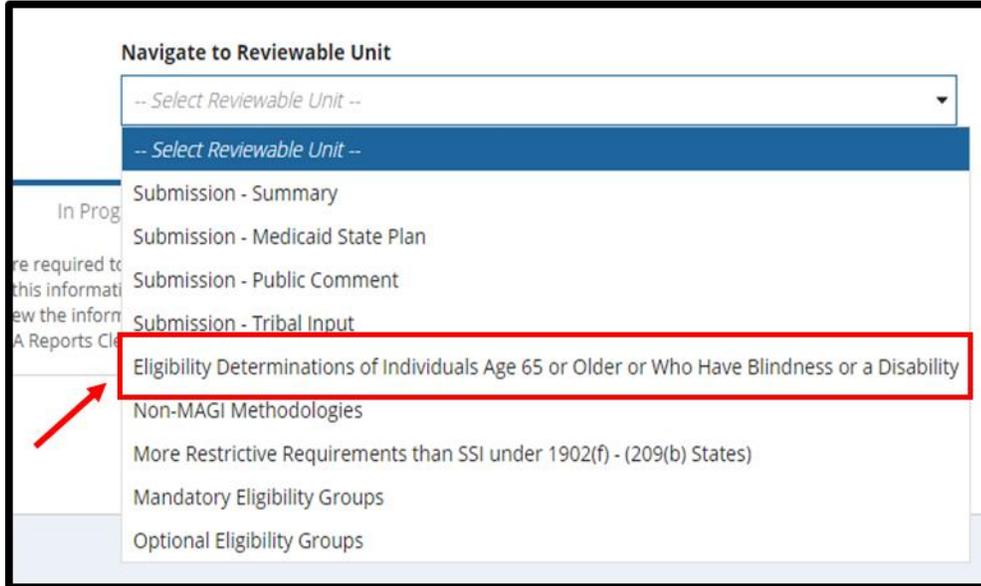
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➔

- Once the form is saved, the RUs you added to your submission package will appear in the **Navigate to Reviewable Unit** drop-down list. You may complete the **Submission - Public Comment** and the **Submission - Tribal Input** RUs next or you can complete them later. For detailed information on these RUs, please refer to the **MACPro Medicaid State Plan Reference Document for State Users** or the Implementation Guide that accompanies the RU.
- Then select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list and click **Go To Selected Reviewable Unit**.

If you are completing your first eligibility group SPA, you will select the **Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability** RU. Proceed to the [Eligibility Determinations of Individuals Age 65 or Older or Who Have](#)

[Blindness or a Disability RU](#) section of this guide for information on how to complete that RU.

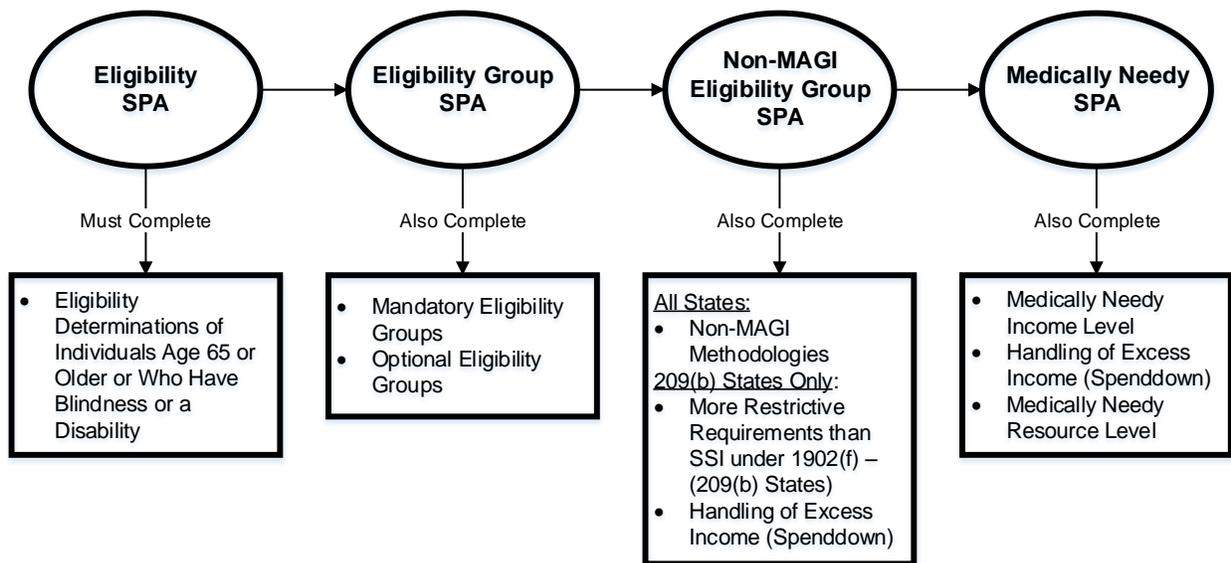


Dependencies and Prerequisite RUs

Many RUs in MACPro are dependent upon other RUs. This means that a change to one will result in a change to the other. In MACPro, these dependent RUs are described as primary and secondary RUs.

The primary RUs dictate the information and options available in secondary RUs, so the primary RUs must be completed first. You cannot access a secondary RU in MACPro unless the primary RU (1) has already been approved in MACPro, or (2) is included in the submission package and has already been completed and validated.

In Medicaid eligibility, many RUs are dependent upon other RUs. The figure below shows four different types of Medicaid eligibility SPAs and the prerequisite RUs that must be completed as you develop your SPA submission package.



Before completing any eligibility SPA, you must first complete the **Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability** RU. This RU is a prerequisite to almost all Medicaid eligibility SPAs.

If you are developing a non-MAGI eligibility group SPA, you must first complete the **Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability** RU, which is required for all eligibility SPAs, along with the **Mandatory** and **Optional Eligibility**

Group RUs, which are required for all eligibility group SPAs. Finally, you must complete the **Non-MAGI methodologies RU**.

You can jump ahead in this guide by clicking on the name of the RU that you need to complete.

Any Eligibility SPA:

[Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability](#)

Eligibility Group SPA:

[Mandatory Eligibility Groups](#)

[Optional Eligibility Groups](#)

Non-MAGI Eligibility Group SPA:

[Non-MAGI methodologies](#)

Medically Needy Eligibility Group SPA:

[Medically Needy Income Level](#)

[Handling of Excess Income \(Spendedown\)](#)

[Medically Needy Resource Level](#)

209(b) states only:

[Handling of Excess Income \(Spendedown\)](#)

[More Restrictive Requirements than SSI under 1902\(f\) – \(209\(b\) States\)](#)

Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability RU

NOTE: The **Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability RU** was formerly named **Financial Eligibility Requirements for Non-MAGI Groups**. If you have already obtained approval of this RU under its old name, you do not need to complete it again under its new name.

1. Select the option – 1634 State, SSI Criteria State, or 209(b) State – that corresponds to your state.

A. Eligibility Determinations of Individuals Who Are Age 65 or Older or Who Have Blindness or a Disability

You must include the Optional Eligibility Groups and Mandatory Eligibility Groups reviewable units in this submission package.

Eligibility determinations of individuals who are age 65 or older or who have blindness or a disability are based on one of the following:

- 1. SSA Eligibility Determination State (1634 State)
The state has an agreement under section 1634 of the Social Security Act for the Social Security Administration to determine Medicaid eligibility of SSI beneficiaries. For all other individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, the state requires a separate Medicaid application and determines financial eligibility based on SSI income and resource methodologies.
- 2. State Eligibility Determination (SSI Criteria State)
The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility based on SSI income and resource methodologies.
- 3. State Eligibility Determination (209(b) State)
The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility using income and resource methodologies more restrictive than SSI.

2. Select **Yes** to validate the RU and then select **Save Reviewable Unit**.

Validation & Navigation

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

Navigate to Reviewable Unit
-- Select Reviewable Unit --

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

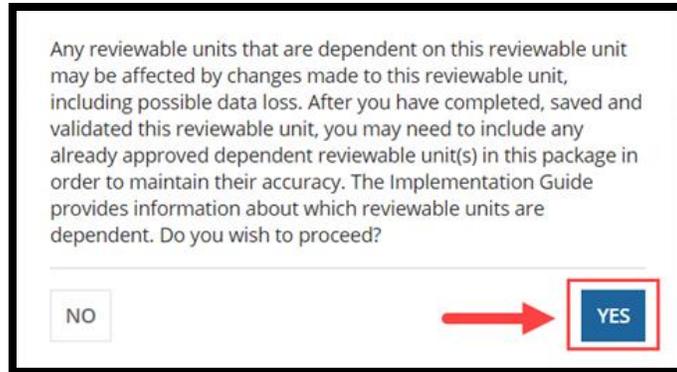
Not Started In Progress Complete

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EXIT SAVE REVIEWABLE UNIT GO TO SELECTED REVIEWABLE UNIT

3. Select **Yes** to continue after reviewing the prompt that appears. The prompt indicates that any RUs dependent on the **Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability RU** will be affected by changes made to this RU.

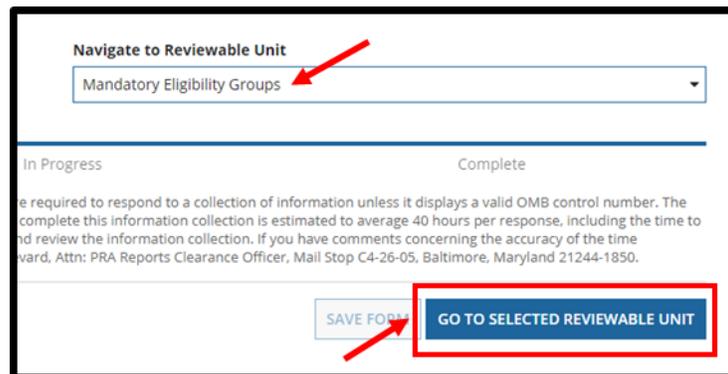
Moving from a 209(b) state to a 1634 or SSI Criteria State will impact many other eligibility RUs. Refer to the Implementation Guide included with this RU for information on the other RUs that may be impacted and a description of the relationship between the selections made on this RU and the options available on the other RUs.



Any reviewable units that are dependent on this reviewable unit may be affected by changes made to this reviewable unit, including possible data loss. After you have completed, saved and validated this reviewable unit, you may need to include any already approved dependent reviewable unit(s) in this package in order to maintain their accuracy. The Implementation Guide provides information about which reviewable units are dependent. Do you wish to proceed?

A red arrow points from the 'NO' button to the 'YES' button.

- To go to the next RU, select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list and then **select Go to Selected Reviewable Unit**. If you are completing your first eligibility group SPA, proceed to the **Mandatory Eligibility Groups** RU.



Navigate to Reviewable Unit

Mandatory Eligibility Groups

In Progress Complete

Required to respond to a collection of information unless it displays a valid OMB control number. The completion of this information collection is estimated to average 40 hours per response, including the time to review the information collection. If you have comments concerning the accuracy of the time and review the information collection. If you have comments concerning the accuracy of the time and review the information collection. If you have comments concerning the accuracy of the time and review the information collection. If you have comments concerning the accuracy of the time and review the information collection. Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Red arrows point to the 'Mandatory Eligibility Groups' dropdown and the 'GO TO SELECTED REVIEWABLE UNIT' button.

Mandatory Eligibility Groups RU

Upon initially navigating to the **Mandatory Eligibility Groups** RUs, an attention message may appear indicating that this RU is dependent upon information provided by the **Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability** RU. You will receive this message if that RU is not already approved in MACPro and you have not already included the RU in your submission package. You must complete and validate the [Eligibility Determinations of Individuals Age 65 or Older or Who have Blindness or a Disability](#) RU before you can enter information into the **Mandatory Eligibility Groups** RU.

Submission Type Draft

Approval Date N/A

Superseded SPA ID N/A

Initial Submission Date N/A

Effective Date N/A

[View Implementation Guide](#)

ATTENTION:

In order to access this Reviewable Unit, you must either have an approved version of Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability in MACPro, or you must include it, complete it and save it in this Submission Package.

Validation & Navigation

1. Upon opening the **Mandatory Eligibility Groups** RU, you will see that all of the eligibility groups in **Section A**. have been pre-checked in the **Covered in State Plan** column.

Mandatory Coverage

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Infants and Children under Age 19		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	NEW
Parents and Other Caretaker Relatives		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	NEW
Pregnant Women		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Deemed Newborns		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

- If you plan to include a mandatory eligibility group RU in this submission package, check the box next to that RU in the **Include RU in Package** column. You do not need to include any specific eligibility group RUs in the package at this time, but you may include as many as you want.

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
SSI Beneficiaries		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	NEW
Closed Eligibility Groups		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	NEW
Individuals Deemed To Be Receiving SSI		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

- Next scroll down to **Section B** and select **Yes** or **No** to indicate whether your state covers the Adult Group. If **Yes** is selected, a table will expand to show that the Adult Group is covered in your state plan. You may include the **Adult Group** RU in this submission package by checking the box in the **Include RU in Package** column.

B. The state elects the Adult Group, described at 42 CFR 435.119. *

Yes No

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Adult Group		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	NEW

Optional Eligibility Groups RU

1. Select **View All Responses** to expand all sections of the RU.

Medicaid State Plan Eligibility

Optional Eligibility Groups
 MEDICAID | Medicaid State Plan | Eligibility | NE2018MS00440 | NE-18-7654-IRD

Request System Help

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

Package ID	NE2018MS00440	SPA ID	NE-18-7654-IRD
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	10/6/2018
Superseded SPA ID	NE-16-1234 User-Entered		

View Implementation Guide

VIEW ALL RESPONSES

2. Select **Yes** to the “**The state provides Medicaid to specified optional groups of individuals**” statement. This will reveal the tables listing optional eligibility groups.

A. Options for Coverage

Collapse

The state provides Medicaid to specified optional groups of individuals. *

Yes No

3. Select the eligibility groups that are covered in the state and/or included in the package.

- **Covered in State Plan column:** The first time this RU is completed, some data may be prepopulated for the MAGI-based eligibility groups, based on which groups your state included in MMDL. All optional eligibility groups that are covered in your state plan (in the paper-based state plan, MMDL, or MACPro) need to be selected in the **Covered in State Plan** column.

Once this RU has been approved, deselecting a group under the **Covered in State Plan** column will remove that eligibility group from the state plan.

- Include RU in Package column:** Select the optional eligibility groups, if any, to be included in the package. You do not need to include any of the groups in the package at this time, but you may include as many groups as you want.

NOTE: The Optional Eligibility Groups Implementation Guide provides more information on how to complete the tables.

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Optional Coverage of Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	NEW
Reasonable Classifications of Individuals under Age 21		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
Children with Non-IV-E Adoption Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Independent Foster Care Adolescents		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Optional Targeted Low Income Children		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	APPROVED

- Select **Yes** or **No** to indicate whether your state provides Medicaid to specified groups of individuals who are medically needy.

B. Medically Needy Options for Coverage Collapse

The state provides Medicaid to specified groups of individuals who are medically needy. *

Yes
 No

If **Yes** is selected, a **Mandatory Medically Needy** table and an **Optional Medically Needy** table will appear listing all medically needy eligibility groups.

- Covered in State Plan column:** In the Mandatory Medically Needy table, the eligibility groups have been pre-checked in the **Covered in State Plan** column because these groups are required in any state that covers the medically needy. For the Optional Medically Needy, select all additional medically needy groups your state covers in the **Covered in State Plan** column.

- Include RU in Package column:** Select the specific medically needy eligibility groups, if any, to be included in the package.

1. Mandatory Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Medically Needy Pregnant Women	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Medically Needy Children under Age 18	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Protected Medically Needy Individuals Who Were Eligible in 1973	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

2. Optional Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
------------------------	--	-----------------------	---	--	-------------------------------

6. After all information is entered, select **Yes** to “**Would you like to validate the reviewable unit data?**” Then select **Save Reviewable Unit** to make sure that there are no errors on the page.

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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EXIT

→

SAVE REVIEWABLE UNIT

GO TO SELECTED REVIEWABLE UNIT

7. To go to the next RU, select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list and then select **Go To Selected Reviewable Unit**.

Next appropriate RU:

- If you are completing a MAGI-based eligibility group SPA, you may select the eligibility group now. For detailed information on how to complete an eligibility group RU, refer to the Implementation Guide that accompanies that RU.
- If this is your first non-MAGI eligibility group SPA, select the **Non-MAGI Methodologies** RU and continue with that RU.

Navigate to Reviewable Unit

Non-MAGI Methodologies

Progress Complete

required to respond to a collection of information unless it displays a valid OMB control number. The complete this information collection is estimated to average 40 hours per response, including the time to review the information collection. If you have comments concerning the accuracy of the time card, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

SAVE REVIEWABLE UNIT GO TO SELECTED REVIEWABLE UNIT

Non-MAGI Methodologies RU

1. Select **View All Responses** to expand all sections of the RU.

The screenshot shows the 'Medicaid State Plan Eligibility' page. Under the 'Income/Resource Methodologies' section, there is a sub-section for 'Non-MAGI Methodologies'. A progress bar at the top indicates 'Not Started', 'In Progress', and 'Complete' stages. The 'Package Header' section contains the following information:

Package ID	MD2018MS0022D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	MD-18-0001-HEC6 System-Derived		

In the bottom right corner, there is a 'View Implementation Guide' link and a 'VIEW ALL RESPONSES' button, which is highlighted with a red box and pointed to by a red arrow.

2. Proceed with entering information for **Section A** through **Section G**. Please keep in mind that MACPro is dynamic. As you make selections, additional options may appear. Detailed instructions for completing this RU can be found in the Implementation Guide.

The screenshot displays the implementation guide content for the RU. It includes the following sections:

- A. Basic Financial Methodology** (Collapsible):
 - The state applies the income and resource methodologies of the SSI program when determining eligibility for a population based on age (65 or older) or having blindness or a disability, with the exceptions described below in B. through G.
 - The state applies the financial methodologies of either the SSI program or the AFDC program in effect as of July 16, 1996 (whichever is most closely related) when determining eligibility for a population based on age (as a child), pregnancy, or status as a caretaker relative, with the exceptions described below in B. through G.
- B. Use of Less Restrictive Methodologies** (Collapsible):
 - The state elects to apply income and/or resources methodologies that are less restrictive than those used under the cash assistance programs, in accordance with 42 CFR 435.601(d).
 - Yes
 - No
 - The less restrictive income and resource methodologies are described on the RU for each applicable eligibility group.
- C. Financial Responsibility of Relatives** (Collapsible):
 - In determining financial eligibility for an individual, the state does not include income and resources from anyone other than the individual's spouse, and for individuals under age 21 or who have blindness or disability, the individual's parent.
 - The state includes the income and resources of a spouse or parent only when they are living with the individual in the same household, except as follows:
 - In the case of spouses who are age 65 or older or who have blindness or disability and who share the same room in a Medicaid institution, the state:

- After entering all information, select **Yes** to the “**Would you like to validate the reviewable unit data?**” question. Then select **Save Reviewable Unit**.

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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EXIT **SAVE REVIEWABLE UNIT** GO TO SELECTED REVIEWABLE UNIT

- To go to the next RU, select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list and then select **Go To Selected Reviewable Unit**.

Next appropriate RU:

- If you are completing a non-MAGI eligibility group SPA, and your state is not a 209(b) state, you may select the eligibility group now. Proceed to the [Non-MAGI Eligibility Groups](#) section of this guide for information on how to complete those RUs. Additional information can also be found in the Implementation Guide that accompanies each RU.
- If you are completing a non-MAGI eligibility group SPA, and your state is a 209(b) state, select the **Handling of Excess Income (Spendedown)** RU and continue with that RU. Proceed to the [Handling of Excess Income \(Spendedown\) RU](#) section of this guide for information on how to complete the RU.

Navigate to Reviewable Unit

Handling of Excess Income (Spenddown)

In Progress Complete

Required to respond to a collection of information unless it displays a valid OMB control number. The time to complete this information collection is estimated to average 40 hours per response, including the time to review the information collection. If you have comments concerning the accuracy of the time estimate, please contact the PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

SAVE REVIEWABLE UNIT GO TO SELECTED REVIEWABLE UNIT

- If this is your first medically needy eligibility group SPA, select the **Medically Needy Income Level RU** and continue with that RU. Proceed to the [Medically Needy Income Level RU](#) section of this guide for information on how to complete the RU.

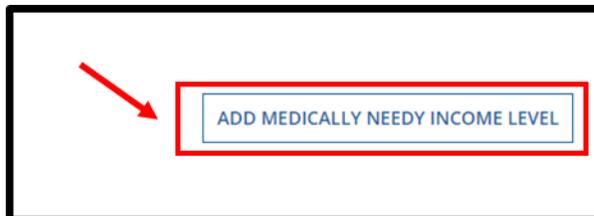
Medically Needy Income Level RU

1. Select **View All Responses** to expand all sections of the RU.



2. After responding to question 2 in **Section A** (and question 3 if you're a 209(b) state), you will enter the medically needy income standard for your state. Depending on your response to question 2 (and question 3 if applicable), you may need to enter more than one income level. Please refer to the Implementation Guide for additional details.

To enter the medically needy income level(s) used, click the **Add Medically Needy Income Level** button.



3. On the next screen, you will indicate whether your medically needy income level is expressed as a dollar amount or as a percentage.

Medically Needy Income Level

[Request System Help](#)
[View Implementation Guide](#)

CMS-10434 OMB 0938-1188

The standard is expressed as: *

A dollar amount
 A percentage

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CANCEL
SAVE MEDICALLY NEEDY INCOME LEVEL

4. If a percentage is selected, choose the type of percentage and enter the percentage in the text box. If a dollar amount is selected, enter the dollar amount for a household size of one and then select “**+Add a household size**” to enter the dollar amount for the next household size.

The standard is expressed as: *

A dollar amount

A percentage

Household size	Standard
1	\$500.00

+Add a household size

5. Continue to add household sizes and enter corresponding dollar amounts as appropriate for your state. Then answer the questions about whether the state uses an additional incremental amount for larger household sizes and whether the dollar amounts increase automatically each year. Depending on your responses, you may need to respond to follow-up questions.
- 6.

The standard is expressed as: *

A dollar amount

A percentage

Household size	Standard
1	\$500.00
2	

+Add a household size

The state uses an additional incremental amount for larger household sizes. *

Yes

No

The dollar amounts increase automatically each year *

Yes

No

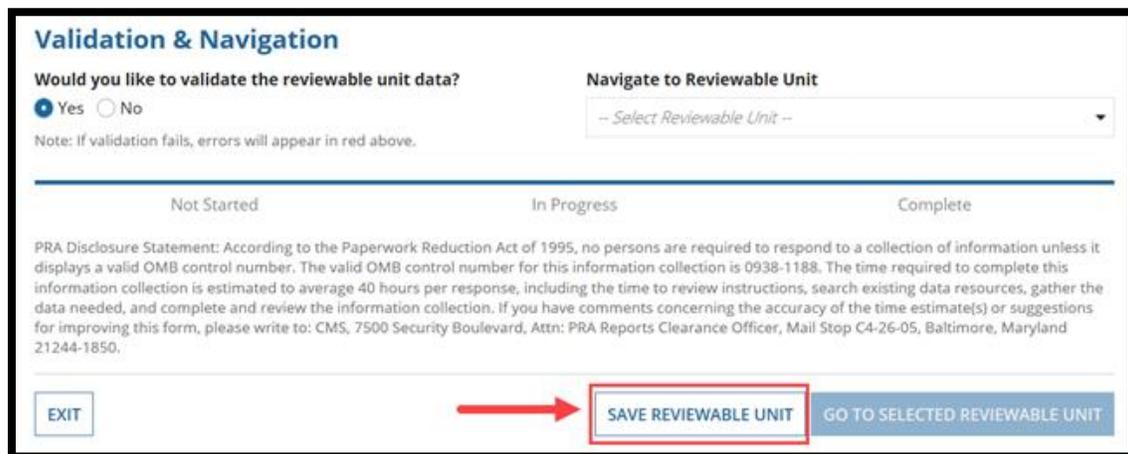
7. Once you've completed all fields, select **Save Medically Needy Income Level** to insert the medically needy income level into your RU.

SAVE MEDICALLY NEEDED INCOME LEVEL

- After the medically needy income level (in this example – 100% of the FPL) has been inserted into the RU, you can modify the standard by clicking the **Edit Medically Needy Income Level** button.



- After entering all information, select **Yes** to the “Would you like to validate the reviewable unit data?” question. Then select **Save Reviewable Unit**.



- To go to the next RU, select the **Handling of Excess Income (Spendedown)** RU from the **Navigate to Reviewable Unit** drop-down list and then select **Go To Selected Reviewable Unit**.

Navigate to Reviewable Unit

Handling of Excess Income (Spenddown) ▼

Progress Complete

required to respond to a collection of information unless it displays a valid OMB control number. The complete this information collection is estimated to average 40 hours per response, including the time to review the information collection. If you have comments concerning the accuracy of the time rd, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

SAVE REVIEWABLE UNIT GO TO SELECTED REVIEWABLE UNIT

Handling of Excess Income (Spendedown) RU

1. Select **View All Responses** to expand all sections of the RU.

[View Implementation Guide](#)

VIEW ALL RESPONSES

If countable income exceeds the income standard, the state must deduct from income medical expenses incurred by the individual or family or financially responsible relatives that are not subject to payment by a third party, in accordance with 42 CFR 435.831 and 42 CFR 435.121.

A. Budget Periods Expand

B. Types of Eligible Expenses Expand

C. Timeframe of Deduction of Expenses

2. Proceed with entering information for **Section A** through **Section G**. Please keep in mind that MACPro is dynamic. As you make selections, additional options may appear. Detailed instructions for completing this RU can be found in the Implementation Guide.

If countable income exceeds the income standard, the state must deduct from income medical expenses incurred by the individual or family or financially responsible relatives that are not subject to payment by a third party, in accordance with 42 CFR 435.831 and 42 CFR 435.121.

A. Budget Periods Collapse

Income in excess of the appropriate income standard is considered available for payment of medical or remedial care expenses in budget periods that do not exceed six months.

1. In determining income eligibility, countable income is reduced by the amount of incurred medical or remedial care expenses during the budget period specified below:

a. One budget period of:

- i. 6 months
- ii. 5 months
- iii. 4 months
- iv. 3 months
- v. 2 months
- vi. 1 month

b. More than one budget period, as described below:

2. The state includes part or all of the retroactive period in the budget period.

Yes

No

B. Types of Eligible Expenses

- After entering all information, select **Yes** to the “**Would you like to validate the reviewable unit data?**” question. Then select **Save Reviewable Unit**.

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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EXIT **SAVE REVIEWABLE UNIT** GO TO SELECTED REVIEWABLE UNIT

- To go to the next RU, select the **Medically Needy Resource Level** RU from the **Navigate to Reviewable Unit** drop-down list and then select **Go To Selected Reviewable Unit**.

Navigate to Reviewable Unit
 Medically Needy Resource Level

Progress Complete

required to respond to a collection of information unless it displays a valid OMB control number. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

SAVE REVIEWABLE UNIT **GO TO SELECTED REVIEWABLE UNIT**

Medically Needy Resource Level RU

1. Select **View All Responses** to expand all sections of the RU.

View Implementation Guide

VIEW ALL RESPONSES

A. Medically Needy Resource Level Structure Expand

B. Resource Level Used Expand

C. Additional Information (optional) Expand

2. In **Section B.**, you will enter the resource standard used for each household size. If your state is a 209(b) state, you may need to enter more than one resource standard depending on the options elected in **Section A.** Please refer to the Implementation Guide for additional information and detailed instructions.

Enter the resource standard for a household size of one. Then click the “**+Add a household size**” button to add additional household sizes and resource standards.

Household size	Standard
1	<input type="text"/>

+Add a household size

3. Complete any remaining fields. After entering all information, select **Yes** to the “**Would you like to validate the reviewable unit data?**” question. Then select **Save Reviewable Unit**.

- To go to the next RU, select the appropriate medically needy eligibility group RU from the **Navigate to Reviewable Unit** drop-down list. In this example, we've selected the **Medically Needy Pregnant Women** RU. Then select **Go To Selected Reviewable Unit**.

More Restrictive Requirements than SSI under 1902(f) – (209(b) States) RU

Before you can complete the **More Restrictive Requirements than SSI under 1902(f) – (209(b) States) RU**, you must complete several prerequisite RUs. To determine which prerequisite RUs to fill out, refer back to the [Dependencies and Prerequisite RUs](#) section of this document. If you have not yet completed the prerequisite RUs, you will receive a reminder with language like this.

ATTENTION:

In order to access this Reviewable Unit, you must either have an approved version of Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability in MACPro, with option "State Eligibility Determination (209(b) State)" selected, or you must include it, complete it and validate it in this Submission Package.

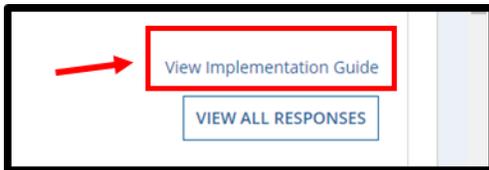
In order to access this Reviewable Unit, you must either have an approved version of Optional Eligibility Groups, or you must include it, complete it and validate it in this Submission Package.

In order to access this Reviewable Unit, you must either have an approved version of Handling of Excess Income (Spending), or you must include it, complete it and validate it in this Submission Package.

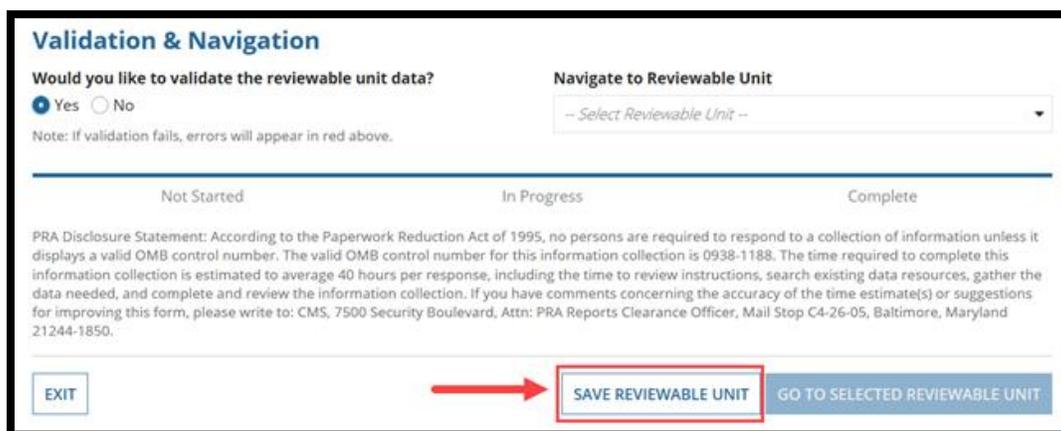
1. Select **View All Responses** to expand all sections of the RU. Please keep in mind that MACPro is dynamic. As you make selections, additional options may appear.

The screenshot shows a user interface for a Reviewable Unit. At the top right, there is a link for "View Implementation Guide" and a button labeled "VIEW ALL RESPONSES" which is highlighted with a red box and a red arrow. Below this, a text line states: "The state applies more restrictive requirements than SSI under the authority of section 1902(f) of the Act, and consistent with 42 CFR 435.121." The main content area contains a list of sections: "A. Use of More Restrictive Requirements", "B. Populations with More Restrictive Requirements", "C. Types of More Restrictive Requirements Used", "J. Income Deductions", and "K. Additional Information (optional)". Each section has an "Expand" button to its right. A red arrow points from the "VIEW ALL RESPONSES" button to the "J. Income Deductions" section. A text box with a black border contains the following text: "Notice that the list skips from section C. to section J. Sections D, E, F, G, H, I may become available depending on the options that you select in the other sections."

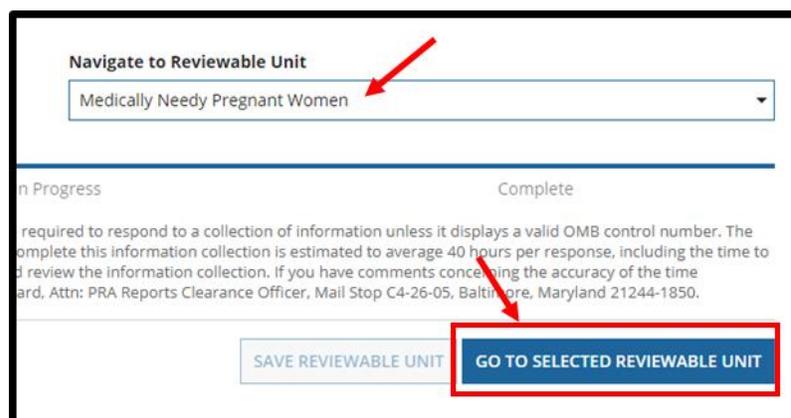
2. Proceed with entering information for **Section A** through **Section K**. Detailed instructions for completing this RU can be found in the Implementation Guide. Click the **View Implementation Guide** link to access the Implementation Guide.



3. After all information has been entered, select **Yes** to the “**Would you like to validate the reviewable unit data?**” question. Then select **Save Reviewable Unit**.



4. To go to the next RU, select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list. In this example, we've selected the **Medically Needy Pregnant Women** RU. Then select **Go To Selected Reviewable Unit**.



For information on how to complete a non-MAGI eligibility group RU, such as a medically needy eligibility group RU, proceed to the next section.

If you have completed all RUs, see the **MACPro Medicaid State Plan Reference Document for State Users** for the next steps in the submission process.

Non-MAGI Eligibility Groups RUs

Many non-MAGI eligibility group RUs include new functionality for entering the less restrictive income and resource counting methodologies permitted by section 1902(r)(2) of the Social Security Act. In the traditional, paper-based state plan, less restrictive methodologies were all entered together in supplements 8a and 8b to Attachment 2.6-A. In MACPro, the less restrictive methodologies applicable to a specific eligibility group are described within the RU for that eligibility group.

Recognizing that one set of less restrictive methodologies may be used for multiple eligibility groups, MACPro will allow you to re-use, or to re-use with modification, a set of less restrictive methodologies that have already been entered for another RU.

Below, we will complete the **Qualified Medicare Beneficiaries** RU to demonstrate the new functionality.

1. Select **View All Responses** to expand all sections of the RU.

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

- A. Characteristics** Expand
- B. Financial Methodologies** Expand
- C. Income Standard Used** Expand
- D. Resource Standard Used** Expand
- E. Medical Assistance Provided** Expand
- F. Additional Information (optional)** Expand

[View Implementation Guide](#)
VIEW ALL RESPONSES

- In the **Financial Methodologies** section, you will have the option to indicate whether your state uses less restrictive income counting or resource counting methodologies for this eligibility group.

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state. [View approve](#)

2. Less restrictive methodologies are used in calculating countable income. * 

Yes
 No

3. Less restrictive methodologies are used in calculating countable resources. * 

Yes
 No

- If **Yes** is selected, click on the **Add/Modify Less Restrictive Methodologies** button.



- You will be directed to a new screen entitled “**Less Restrictive Income Methodologies under 1902(r)(2)**” or “**Less Restrictive Resource Methodologies under 1902(r)(2)**”. If this is the first time your state has entered a less restrictive methodology, you will need to select “**Start with a blank form to enter less restrictive methodologies.**”

You’ll be asked to enter a name for this less restrictive methodology, so that you can access it again later. Once you’ve entered a set of less restrictive methodologies, those methodologies can be used in other RUs, even if they have not yet been approved.

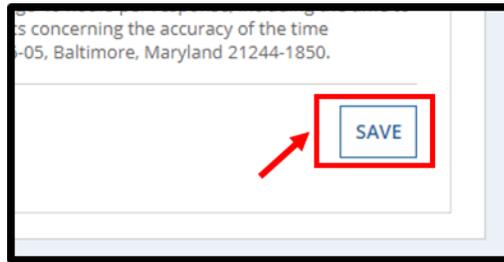
In this example, we chose the name “Medicare Savings Program methodology” because we plan to use this less restrictive income counting methodology for our other Medicare Savings

Program eligibility groups. Click the **Describe New Methodology** button to proceed to the next screen.

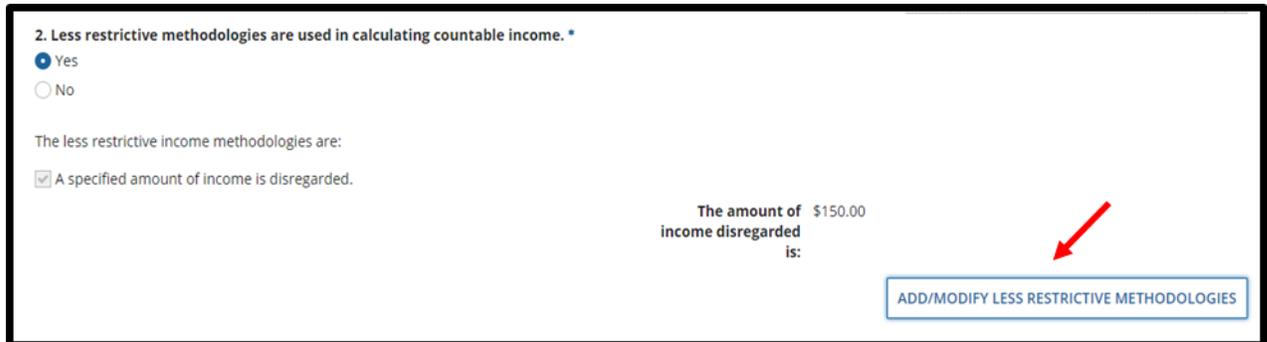
5. Select **View all Responses** to expand all sections of the screen.

6. Then select one or more less restrictive methodologies. In this example, we elected to disregard a specified amount of income and entered the amount as \$150.

- Once all disregards have been entered, click the **Save** button in the bottom right corner of the screen.



- The less restrictive methodologies will be inserted into your RU. You can modify these less restrictive methodologies by clicking the **Add/Modify Less Restrictive Methodologies** button.

A screenshot of a web form. The form contains a question: "2. Less restrictive methodologies are used in calculating countable income. *". Below the question are two radio buttons: "Yes" (selected) and "No". Underneath, it says "The less restrictive income methodologies are:" followed by a checked checkbox for "A specified amount of income is disregarded." To the right of this, it says "The amount of income disregarded is: \$150.00". At the bottom right of the form is a button labeled "ADD/MODIFY LESS RESTRICTIVE METHODOLOGIES". A red arrow points from the top right towards this button.

- This set of less restrictive methodologies is now available for use in other eligibility group RUs that allow for the use of less restrictive methodologies. The next time you select

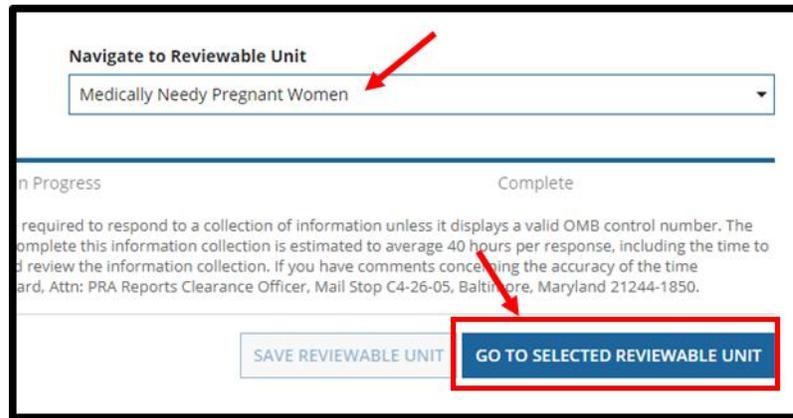
Add/Modify Less Restrictive Methodologies, you see that the set of methodologies we just created is available as an option.

You may re-use this set of less restrictive methodologies in one of two ways:

- a. If you select, “**Start with an existing set of less restrictive methodologies to use as is**”, you may re-use it with exactly the same selections you made the first time.
- b. If you select, “**Start with an existing set of less restrictive methodologies to modify**”, you may re-use it, but make changes to it. In this case, you will be required to provide a new name, as you will be creating a new set of less restrictive methodologies. This option may save time if the less restrictive methodologies you need are almost, but not quite, the same as what you have already entered.

10. After all information has been entered, select **Yes** to the “**Would you like to validate the reviewable unit data?**” question. Then select **Save Reviewable Unit**.

11. To go to the next RU, select the next appropriate RU from the **Navigate to Reviewable Unit** drop-down list and then select **Go To Selected Reviewable Unit**. In this example, we've selected the **Medically Needy Pregnant Women** RU.



The screenshot shows a web interface for navigating to a reviewable unit. At the top, there is a section titled "Navigate to Reviewable Unit" with a dropdown menu currently displaying "Medically Needy Pregnant Women". A red arrow points to this dropdown. Below the dropdown is a horizontal line. Underneath, there is a progress indicator with "In Progress" and "Complete" labels. A paragraph of text follows, starting with "required to respond to a collection of information unless it displays a valid OMB control number." At the bottom, there are two buttons: "SAVE REVIEWABLE UNIT" and "GO TO SELECTED REVIEWABLE UNIT". The "GO TO SELECTED REVIEWABLE UNIT" button is highlighted with a red rectangular box, and a red arrow points to it.

If you have completed all RUs, see the **MACPro Medicaid State Plan Reference Document for State Users** for the next steps in the submission process.