PRA Disclosure Statement - The 1115 PMDA application offers a source of high quality and timely data to improve the Center for Medicaid & CHIP Services (CMCS) ability to monitor demonstrations for the achievement of desired outcomes and projected cost savings. The states will upload and submit their budget neutrality workbook to CMCS via PMDA. Eventually PMDA will also be integrated into the Medicaid and CHIP Program (MACPro) System, which currently allows CMS and states to collaborate online to process State Plan Amendments (SPA), 1915 waivers, Quality Measures reports, advance planning documents, and other initiatives. The goal of the PMDA application is collection for the permanent of the permanent of the permanent permanen PRA Disclosure Statement - The 1115 PMDA application offers a source of high quality and timely data to improve the Center for Medicaid & CHIP Services (CMCS) ability

Budget neutrality is a Federal policy that governs the Federal expenditures for 1115 demonstrations. It is assured by placing an upper limit on the amount of Federal Financial Participation (FFP) the state can receive during the demonstration. The upper limit represents what the state could have received in the absence of the 1115 demonstration.

The Budget Neutrality workbook will assist in collecting standardized data in order to determine financial performance for the demonstration in terms of budget neutrality

The workbook has two major groups of tabs: the first group collects and calculates Without Waiver (WOW) numbers, and the second group calculates With Waiver (WW) numbers. Data is collected per each demonstration Medicaid Eliability Group (MED), by demonstration year (DY). A Medicaid section 1115 demonstration is considered budget neutral if the Federal title XX match, or funding received by the state (i.e., "with waiver" expenditures) to evaluate a voice exceed what the state would have (or could have) received without the demonstration (i.e., "without waiver" expenditures) to evaluate any other expenditures of the expenditures of the expenditure of the expenditure of the exceed what the state would have (or could have) and the expenditure of the expendi

The workhook consists of 15 tahs which contain different types of data and calculations. The following color schema is applied to the tahs

Information populated in the Budget Neutrality workbook template based on the demonstration's approved STC by states on a quarterly basis or per the reporting requirements defined in the STC ally populated based on the input from other worksheets

Overview and Dropdowns tabs are read-only, no data entry is required. The Dropdowns tab displays the values used to build the dropdowns menus thoroughout the workbook ding the list of active waivers for the demonstration.

Within the tabs where a State User populates information (C Report, Total Adjustments, WW Spending Projected, MemMon Actual, MemMon Projected, and Summary tabs), yellow highlighted cells denote where data entry may be needed (depending on DY being updated).

Pre-populated values in the downloaded Budget Neutrality workbook template

The original workbook entries are based on the STCs and other demonstration approval documentation. These entries are made on the DY Def, MEG Def, WOW PMPM & Agg, Program Spending Limits, and Summary TC tab (Phase-Down Percentage and Cumulative Target Percentage fields)

The MEG Def tab defines MEGs as Medicaid populations (core demonstration populations), Hypothetical populations (when a demonstration has separate budget neutralit agreements) and Tracking Only populations (for example, "pass-through" populations). The MEG Def tab also defines how expenditure numbers are calculated for a MEG (Per Capita vs. Agregate) and the applicable scenarios (WOW, WW, or both). Also, the tab contains indicators defining MEG characteristics such as expenditure caps or applicability of savings phase-down calculations.

Calculating With Waiver (WW) numbers

ny With Walver (WW) numbers for each active DY of a demonstration are calculated based on a combination of actual WW expenditures, projected future expenditures, and any adjustments entered by a State User. The actual WW expenditures are copied from the Schedule C of the MRES CMS-64 report to the workbook (C Report tab). These numbers are automatically transferred to the C Report Grouper tab, where walver expenditures are grouped by MEGs. The numbers are also transferred to the WW Spending Actual tab, which factors in adjustments entered on the Total Adjustments tab to calculate total actual WW expenditures. The WW Spending Total tab displays the actual WW expenditures plus future projected expenditures (transferred from the WW Spending Projected tab). Finally, the total WW actual and projected numbers are transferred to the Summary TC (Total Computable) tab (into the With-Walver Total Expenditures section).

Calculating Without Waiver (WOW) numbers

WOW numbers can be obtained either one of two ways: using Aggregate or Per Capita calculations. If total projected expenditures for a MEG is known and the expenditure calculation type is defined as 'Aggregate' on the MEG Def tab, the total projected expenditure amount is entered for each active DY. However, if the expenditure calculation type is defined as 'Per Capita', total projected expenditures are derived by multiplying per member per month (PMPM) costs by the actual number of member months.

Both Aggregate and PMPM numbers are populated on the WOW PMPM & Agg tab. The number of actual member months (number of beneficiaries times the number of months enrolled) are entered by a State User on the MemMon Actual tab for each DY. On the MemMon Projected tab, State User enters projected numbers. The totals for actual and projected member months are calculated on the MemMon Total tab. WOW aggregate, PMPM and member month data is then moved to the the Without-Waiver Total Expenditures section of the Summary TC tab, where final calculations are performed.

Based on information from all tabs, the WW and WOW numbers are compared to determine the budget neutrality status of the demonstration

Below are the definitions for the tabs of the workbook which require data entries from State User

On top of the C Report tab, enter data in the following highlighted cells:

'Data Pulled On:' - enter the date the source file used to enter data on this tab was pulled Data Pulsed Un: - enter me date me soutce the scale or enter date on this tab was pulsed For the Time Period Through : - enter the date through which the source file data was pulsed Reporting DY* - enter the Demonstration Year (DY) for which data is being reported. Enter by Value must align with DYs from the DY Def tab. Reporting Quarter - enter a number of the quarter (values 1 through 4) for which data is being reported.

- Notes:

 Dates must be entered in the following format: mm/dd/yyyy

 Dates must be entered in the following format: mm/dd/yyyy

 Dates must be entered in the following format: mm/dd/yyyy

 And Reporting DY and Reporting Quarter entries affect which portion of the 'Medicaid Aggregate' and 'Medicaid Aggregate WOW only' amounts for a DY will be calculated as as actuals, and which will be calculated as Projected

 Entry for each of these four fields is required for the workbook submission. If any field is not populated, you will receive an error and the document will not be uploaded to

State User enters information on the following tabs:

C Report Tab

Open Schedule C of the CMS 64 Expenditure Report. Under your state, locate expenditure data for the specific demonstration. From this location on the CMS 64 Expenditure Report, copy expenditure data cells for all DYs (active and non-active). On the C Report tab, paste the data into the correct cell/row. Repeat the copy and paste process for MAP Walvers section (Total Computable and Federal Share) and ADM Walvers section (if applicable). Verify that the pasted numbers are correctly aligned with the Walver Name values.

When adjustments are relevant for a demonstration, enter the actual numbers of total contributions to the reported expenditures, per each MEG, for the reportir quarter. Add new reported adjustments to any existing numbers for previous quarters for the reported D' Note: Any adjustments that reduce expenditures must be entered as negative numbers (for example, -\$10,000).

WW Spending Projected tab

Enter projected annual expenditures for each MEG for the active DYs of a demonstration

For each reporting quarter, update the projected numbers so they reflect only future quarter projections. Please see the example for the MemMon Projected tab.

MemMonth Actual tab

For each MEG, calculate the actual number of member months for the reported quarter and add this number to the previously entered number for the same DY. For example, for Q3 reporting period, add Q3 member months to the existing number for the same MEG and DY and enter the result into the same ce

MemMonth Projected tab

For each MEG, enter projected (future) annual member months for all active DYs of the demonstration. Adjust future DY numbers as need For the current DY, enter only the number that reflects future quarters. For example, for Q3 reporting, only enter the projected number for Q4. There should be no projected numbers for completed (actual) DYs.

Summary TC tab

In the Net Variance section, for each DY, enter estimated numbers in row "1115A Dual Demonstration Savings (state preliminary estimated numbers)."

In the Net Variance section, for each DY, enter estimated numbers in row "1115A Dual Demonstration Savings (state preliminary estimated numbers)."

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In the Net Variance section, for each DY, enter estimated numbers in row "1115A Dual Demonstration Savings".

In the Net Variance section (state preliminary estimated numbers).

In the Net Variance section (state preliminary estimated numbers). In the next row, "1115A Dual Demonstration Savings (OACT certified)" enter certified numbers.

Both estimated and certified numbers must be negative, as dual demonstration savings numbers reduce the Net Variance amo

Demonstration Years Definitions

DY	1	2	3	4	5
Start Date	7/1/2019	7/1/2020	7/1/2021	7/1/2022	7/1/2023
End Date	6/30/2020	6/30/2021	6/30/2022	6/30/2023	6/30/2024

Enter any general comments / notes:

MEG Definitions

	MEG Name	MEG Description	Savings Phase-Down	Expenditures Subject to Cap?	Hypothetical Populations Included in Calculations?	Start DY	Start Date	End DY	End Date
	Hypothetical 1 Per Capita				Hypothetical Test 1				
1	ABD	Aged, Blind and Disabled	N/A	No	Yes	1	7/1/2019	5	6/30/2024
2	DUAL	Dual Eligibles	N/A	No	Yes	1	7/1/2019	5	6/30/2024
3	FAM	Families	N/A	No	Yes	1	7/1/2019	5	6/30/2024
4	EXP eff. 10/1/2021	All medical assistance expenditures during an IMD stay month for Expansion population All medical assistance expenditures during an	N/A	No	Yes	3	10/1/2021	5	6/30/2024
5	EXP Medically Frail eff. 10/1/20	IMD stay month for Expansion population medically frail beneficiaries All medical assistance expenditures during an	N/A	No	Yes	2	10/1/2020	3	9/30/2021
6	EXP Non-Medically Frail eff. 10/1/20	IMD stay month for Expansion population non- medically frail beneficiaries	N/A	No	Yes	3	10/2/2020	4	10/1/2021

WOW PMPMs and Aggregates

		DEMONSTRATION YI	EARS (DY)			
		1	2	3	4	5
Hypothetical 1 Per Capita						
ABD	1	\$2,008.00	\$2,080.00	\$2,155.00	\$2,232.00	\$2,313.00
DUAL	2	\$332.00	\$344.00	\$356.00	\$369.00	\$382.00
FAM	3	\$589.00	\$611.00	\$634.00	\$657.00	\$681.00
EXP eff. 10/1/2021	4			\$1,086.00	\$1,148.00	\$1,213.00
EXP Medically Frail eff. 10/1/20	5		\$2,062.00	\$2,180.00		
EXP Non-Medically Frail eff. 10/1/20	6		\$818.00	\$865.00		
·						

Program Spending Limits

	Cap Amounts pe	Cap Amounts per Demonstration Year						
Program Name and Associated MEGs	1	2	3	4	5			
Spending Cap								
						\$ -		
Expenditures Subject to Cap								
Variance						\$ -		
Over or Under			•	•				

Data Pulled On:	Reporting DY	
For the Time		
Period Through:	Reporting Quarter	

Paste all information related to the demonstration from Schedule C of the CMS 64 Waiver Expenditure Report.

- 1. On the Schedule C Report, locate rows relevant to all expenditures for a specific demonstration.
- 2. Complete two rounds of copy/paste starting from the cell in column A (Waiver Name).
- MAP Waivers/ Total Computable section into cell A100
- MAP Waivers/ Federal Share section into cell A200
- 3. If ADM waivers are applicable to the demonstration, complete two more rounds of copy/paste starting from the cell in column A (Waiver Name).
- ADM Waivers/ Total Computable section cell A300
- ADM Waivers/ Federal Share section cell A400

MAP	Waivers	

To	tal	Co	mp	ut	a	bl	e

SUD Waiver Demonstration - DUAL

Total Computable																
					_	_	_	_	_	_						
Waiver Name		A	1	2	3	4	5	6	7	8	9	10	11	12	13	14
SUD 1115 Demonstration		0	203,755	169,388	229,918	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration – EXP		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration – EXP Medically Frail		0	0	353,325	0	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration - EXP Non-Medically Frail		0	0	172,465	490	0	0	0	0	0	0	0	0	0	0	0
SUD Waiver Demonstration - ABD		0	0	0	140,897	0	0	0	0	0	0	0	0	0	0	0
SUD Waiver Demonstration - DUAL		0	0	0	22,697	0	0	0	0	0	0	0	0	0	0	0
SUD Waiver Demonstration - FAM		0	0	751	69,669	0	0	0	0	0	0	0	0	0	0	0
	Total	0	203,755	695,929	463,671	0	0	0	0	0	0	0	0	0	0	0
Federal Share																
Waiver Name		Α	1	2	3	4	5	6	7	8	9	10	11	12	13	14
SUD 1115 Demonstration		0	115,328	106,453	206,693	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration – EXP		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration - EXP Medically Frail		0	0	317,992	0	0	0	0	0	0	0	0	0	0	0	0
SUD 1115 Demonstration - EXP Non-Medically Frail		0	0	155,218	307	0	0	0	0	0	0	0	0	0	0	0
SUD Waiver Demonstration - ABD					89,594											

14,394

C Report Grouper

MAP Waivers Only

MEG Names		C Report Waiver Names	DEMONSTRATIO	N YEARS (DY)			
			1	2	3	4	5
Hypothetical 1 Per Capita							
ABD	1	SUD Waiver Demonstration - ABD			\$140,897		
DUAL	2	SUD Waiver Demonstration - DUAL			\$22,697		
FAM	3	SUD Waiver Demonstration - FAM		\$751	\$69,669		
EXP eff. 10/1/2021	4	SUD 1115 Demonstration – EXP					
		SUD 1115 Demonstration – EXP Medically					
EXP Medically Frail eff. 10/1/20	5	Frail		\$353,325			
•		SUD 1115 Demonstration – EXP Non-					
EXP Non-Medically Frail eff. 10/1/20	6	Medically Frail		\$172,465	\$490		
TOTAL			\$ -	\$ 526,541 \$	233,753 \$	-	\$

Adjustments made to the reported expenditures

Enter total adjustments made to the expenditure numbers, including adjustments to the previous reporting periods.

Positive adjustments increase expenditures, and negative adjustments decrease expenditures. Enter adjustments for every MEG for which adjustments were made or are planned.

Helpful Hint: Remember to enter total adjustments as positive or negative (for example, -\$10,000 reflects a decrease in expenditures).

		DEMONSTRATIO	N YEARS (DY)				Description (type of collection, time
		1	2	3	4	5	period, CMS-64 reporting line, etc.)
Hypothetical 1 Per Capita							
ABD	1						
DUAL	2						
FAM	3						
EXP eff. 10/1/2021	4						
EXP Medically Frail eff. 10/1/20	5						
EXP Non-Medically Frail eff. 10/1/20	6						
,							

WW Spending - Actual

		DEMONSTRATION	ON YEARS (DY)			
		1	2	3	4	5
l						
Hypothetical 1 Per Capita						
ABD	1			\$140,897		
DUAL	2			\$22,697		
FAM	3		\$751	\$69,669		
EXP eff. 10/1/2021	4					
EXP Medically Frail eff. 10/1/20	5		\$353,325			
EXP Non-Medically Frail eff. 10/1/20	6		\$172,465	\$490		
TOTAL		\$	- \$ 526,541 \$	233,753 \$	-	\$ -

\$285,696	\$601,380
\$44,649	\$93,208
\$184,617	\$388,851
\$1,462,552	\$3,136,818
	-

WW Spending - Projected

Enter projected spending for the demonstration which includes the remaining quarters of the current DY and all future DYs.

Enter the projected annual expenditures for each DY per MEG for the active DYs.

For the current DY, only future quarters should have projected spending information. Do not include expenditures that were reported as actuals.

		DEMONSTRATION YEARS (DY)							
		1	2	3	4	5			
There are a standard and A. Daniella									
Hypothetical 1 Per Capita									
ABD	1				\$285,696	\$601,380			
DUAL	2				\$44,649	\$93,208			
FAM	3				\$184,617	\$388,851			
EXP eff. 10/1/2021	4				\$1,462,552	\$3,136,818			
EXP Medically Frail eff. 10/1/20	5								
EXP Non-Medically Frail eff. 10/1/20	6								
-									

WW Spending - Total

		DEMONSTRATIO	N YEARS (DY)			
		1	2	3	4	5
Hypothetical 1 Per Capita						
ABD	1			\$140,897	\$285,696	\$601,380
DUAL	2			\$22,697	\$44,649	\$93,208
FAM	3		\$751	\$69,669	\$184,617	\$388,851
EXP eff. 10/1/2021	4				\$1,462,552	\$3,136,818
EXP Medically Frail eff. 10/1/20	5		\$353,325			
EXP Non-Medically Frail eff. 10/1/20	6		\$172,465	\$490		
TOTAL		\$ -	\$ 526,541 \$	233,753 \$	1,977,514 \$	4,220,257

Member Months - Actual

Enter actual member months (number of beneficiaries times the number of enrolled months) for quarters to date for each active DY.

For the reported quarter, add the actual number of member months per each MEG to the previous actual number. The number should equal the total of *I*Note: Depending of the specifics of the state, you can use Total member months or Average monthly unduplicated counts. Whichever definition is used,

Helpful Hint: When updating a DY, remember to enter actual member months for the reported quarter along with actuals for prior quarter(s). Retroactive

		DEMONSTRAT	ION YEARS (DY)			
		1	2	3	4	5
Hypothetical 1 Per Capita						
ABD	1					
DUAL	2					
FAM	3					
EXP eff. 10/1/2021	4					
EXP Medically Frail eff. 10/1/20	5					
EXP Non-Medically Frail eff. 10/1/20	6					

Member Months - Projected

Enter/adjust projected member months based on reported actuals.

Enter projected number of member months for each active DY per MEG for the demonstration.

For the current DY, enter only the number that reflects projections for future quarters of the DY.

Do not include member months for either the current reporting quarter or past quarters.

		DEMONSTRATION YEARS (DY)						
		1	2	3	4	5		
Hypothetical 1 Per Capita								
ABD	1				128	260		
DUAL	2				121	244		
FAM	3				281	571		
EXP eff. 10/1/2021	4				1274	2586		
EXP Medically Frail eff. 10/1/20	5							
EXP Non-Medically Frail eff. 10/1/20	6							

Member Months - Total

		DEMONSTRATION YEARS (DY)					
		1	2	3	4	5	
Hypothetical 1 Per Capita							
ABD	1				128	260	
DUAL	2				121	244	
FAM	3				281	571	
EXP eff. 10/1/2021	4				1,274	2,586	
EXP Medically Frail eff. 10/1/20	5						
EXP Non-Medically Frail eff. 10/1/20	6						

Budget Neutrality Summary

The Budget Neutrality Reporting Period dropdown menu allows for selection of a specific reporting period, by Demonstration Year. By changing these settings, you change the view for which Demonstration Years will be used in calculating Budget Neutrality. Selecting the 'Reset to Defaults' button will reset the Reporting DY values back to the demonstration's current Period of Performance.

Budget Neutrality Reporting Start DY	1
Budget Neutrality Reporting End DY	5

Actuals + Projected

BASE VARIANCE		\$	- \$	- \$	- \$	- \$	- \$	-
Excess Spending from Hypotheticals							\$	(760,294)
1115A Dual Demonstration Savings (state preliminary estimate)							\$	-
1115A Dual Demonstration Savings (OACT certified)							\$	-
Carry-Forward Savings From Prior Period								
NET VARIANCE		l					\$	(760,294)

HYPOTHETICALS TEST 1

Without-Waiver Total Expenditures

Without-Waiver Total Expenditures			DEMONSTRA	TION VEADO (DV)					
			DEMONSTRA 1	TION YEARS (DY)	2	3	4	5	TOTAL
Hypothetical 1 Per Capita ABD	1	Total PMPM Mem-Mon	\$	- \$ \$2,008.00	- \$ \$2,080.00	- \$ \$2,155.00	285,696 \$ \$2,232.00 128	601,380 \$2,313.00 260	
DUAL	2	Total PMPM Mem-Mon	\$	- \$ \$332.00	- \$ \$344.00	- \$ \$356.00	44,649 \$ \$369.00 121	93,208 \$382.00 244	
FAM	3	Total PMPM Mem-Mon	\$	- \$ \$589.00	- \$ \$611.00	- \$ \$634.00	184,617 \$ \$657.00 281	388,851 \$681.00 571	
EXP eff. 10/1/2021	4	Total PMPM Mem-Mon	\$	- \$	- \$	- \$ \$1,086.00	1,462,552 \$ \$1,148.00 1,274	3,136,818 \$1,213.00 2,586	
EXP Medically Frail eff. 10/1/20	5	Total PMPM Mem-Mon	\$	- \$	- \$ \$2,062.00	- \$ \$2,180.00	- \$	-	
EXP Non-Medically Frail eff. 10/1/20	6	Total PMPM Mem-Mon	\$	- \$	- \$ \$818.00	- \$ \$865.00	- \$	-	
TOTAL							\$1,977,514	\$4,220,257	\$6,197,771

With-Waiver	Total	Expenditures

		DEMONSTR	RATION YEARS (DY)						
			1	2	3	4	5		TOTAL
Hypothetical 1 Per Capita									
ABD	1	\$	- \$	- \$	140,897	\$ 285,69	6 \$ 601,3	80	
DUAL	2	\$	- \$	- \$	22,697	\$ 44,64	9 \$ 93,2	08	
FAM	3	\$	- \$	751 \$	69,669	\$ 184,61	7 \$ 388,8	51	
EXP eff. 10/1/2021	4	\$	- \$	- \$	-	\$ 1,462,55	2 \$ 3,136,8	18	
EXP Medically Frail eff. 10/1/20	5	\$	- \$	353,325 \$	-	\$	- \$	-	
EXP Non-Medically Frail eff. 10/1/20	6	\$	- \$	172,465 \$	490	\$	- \$	-	
TOTAL		\$	- \$	526,541 \$	233,753	\$ 1,977,51	4 \$ 4,220,2	57 \$	6,958,065
INTERIOR OF THE PARTY OF THE PA				/#AA #44\ A	(000 ==0)				(200.004)

HYPOTHETICALS	TEST 1	Cumulative	Target I imit

ı			DEMONST	RATION YEAR	S (DY)							
				1	2		3		4			5
	Cumulative Target Percentage (CTP)			2.0%		1.5%		1.0%		0.5%	4	
	Cumulative Parget Percentage (CTP) Cumulative Budget Neutrality Limit (CBNL)		\$	2.070	S	1.570	, S	1.070		1,977,514		6,197,771
	Allowed Cumulative Variance (= CTP X CBNL)		\$	-	\$	-	\$	-	\$	9,888	\$	-
	Astrol Commission Visionas (Basilian - Commission)				•	526.541	•	760.294		760.294		760.294
	Actual Cumulative Variance (Positive = Overspending) Is a Corrective Action Plan needed?		Ф	- ,	پ CAP Needed	520,541	CAP Needed	700,294	CAP Needed		CAP Needed	

Yes No Yes	Waiver List MAP WAIVERS	Demonstration Reporting Start DY Demonstration Reporting End DY				
No	Not Applicable					
	SUD 1115 Demonstration					
Per Capita or Aggregate	SUD 1115 Demonstration – EXP					
Per Capita	SUD 1115 Demonstration – EXP Medically Frail					
Aggregate	SUD 1115 Demonstration – EXP Non-Medically Frail					
	SUD Waiver Demonstration - ABD					
Phase-Down	SUD Waiver Demonstration - DUAL					
No Phase-Down	SUD Waiver Demonstration - FAM					
Savings Phase-Down	ADM WAIVERS	Reporting Net Variance				
		\$	(760,294)			
Actuals and Projected Actuals Only Actuals + Projected			·			

MAP ADM
MAP+ADM Waivers
MAP Waivers Only