

# **Creating and Editing Medicaid and CHIP State Plan Amendments (SPAs) in MMDL**

State/Territory User Training

January 2024

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# Overview



- ◆ The Medicaid Model Data Lab (MMDL) is a web-based system to support the reporting and processing of Medicaid Alternative Benefit (ABP), Children's Health Insurance Program (CHIP), and Medicaid Premiums and Cost Sharing (MPC) state plan amendments (SPAs).
- ◆ States\* can access fillable PDFs through the PDF Repository in MMDL.
- ◆ States submit SPAs in the following MMDL modules:
  - Alternative Benefit Plan (ABP)
  - Children's Health Insurance Program (CHIP)
  - Medicaid Premiums and Cost Sharing (MPC)
- ◆ State staff follow the same process to access and submit SPA documentation through MMDL whether it is for ABP, CHIP, or MPC.

\* **State = state/territory**

# Overview (cont.)



- ◆ For SPAs originally submitted via MMDL, states submit official RAI responses through the One Medicaid and CHIP (OneMAC) system, while continuing to submit updated SPA documents via MMDL.

Note: Medicaid cost-sharing SPAs are submitted in MMDL (MPC). Medicaid premium SPAs are submitted on paper pages through OneMAC.

- ◆ Medicaid MAGI-based and non-MAGI-based Eligibility and Administration SPAs are maintained in the Medicaid and Children's Health Insurance Program (MACPro) system. You can no longer create new Medicaid Eligibility and Administration SPAs in MMDL. All new submissions must be created and submitted in MACPro.

# State Workflow

# Repository Details and Workflow



- ◆ The PDF Repository allows states and CMS various workflow actions in creating, submitting and reviewing a SPA.
  
- ◆ The state workflow actions include:
  - ◆ [Submit](#) – States submit their SPA to CMS. Once submitted, the SPA is locked for CMS review.
  
  - ◆ [Withdraw](#) – States can withdraw a SPA submission in Unlocked or RAI status. Withdrawal of the SPA stops all review, and the SPA will not be considered for adjudication. The pages will never be edited again. The review of this package has concluded.
  
  - ◆ [Allow CMS View](#) - States may allow CMS to view a SPA draft in order to facilitate a discussion or quick review prior to officially submitting.

# Additional Functionality



- ◆ Additional available functionality:
  - ◆ [Browse](#): Allows states to view the SPA in Read Only mode.
  - ◆ [Edit](#): Allows states to modify the SPA.
  - ◆ [Print](#): Allows states to print a SPA to PDF from MMDL.
  - ◆ [Transaction History](#): Allows states to display the transaction history.
  - ◆ [User Access](#): Allows the State Medicaid Director/State System Manager to assign user access to edit a SPA.

# State User Roles



- ◆ The system has multiple user roles that govern what a user can and cannot do in the system.

State Role	Abilities in MMDL
State Auxiliary (State Auxiliary)	<b>(CHIP, ABP, MPC)</b> Within their state: read all SPAs
State Staff (State Staff)	<b>(CHIP, ABP, MPC)</b> Within their state: read, create, edit, and withdraw SPAs
State System Manager (State Sys/OP Mgr)	<b>(CHIP, ABP, MPC)</b> Within their state: read, create, edit, withdraw SPAs, assign state users to edit SPAs, create new/edit existing state user profiles
State Medicaid Director (State Medicaid Dir)	<b>(CHIP, ABP, MPC)</b> Within their state: read, create, edit, submit, and withdraw all SPAs, assign state users to edit SPAs, create new/edit existing state user profiles

# Logging In

# Medicaid Model Data Lab Home Page



- ◆ Link: <https://wms-mmdl.cms.gov/MMDL/faces/portal.jsp>
  - ◆ Chrome is the preferred browser.
- ◆ From the MMDL home page, you can log into a module or download blank PDF forms for a selected PDF Repository module.
- ◆ Logging In:
  - ◆ After selecting **Access Module** (#1 in screenshot), you are directed to the Log-in page for that module.
- ◆ Downloading PDFs:
  - ◆ Select the **PDF Forms** link (#2 in screenshot) for a list of PDFs available in that module for download.

MMDL Medicaid Model Data Lab

Home Logout

**MMDL Modules**

Select a MMDL module to begin: For the MMDL module select **Login** to prepare, submit, or review a state submission or **Documents** for resource materials.

**Medicaid Payment Suspensions State Annual Report(MPS)**  
[Access Module](#)  
[MPS Documents](#)

**Balancing Incentive Program(BIP)**  
[Access Module](#)  
[BIP Documents](#)

**Health Home State Plan Amendment(HHS)**  
[Access Module](#)  
[HHS Documents](#)

**PDF Repository**

For the PDF Repository program select **Login** to prepare, submit, or review a State Plan Amendment; **PDF Forms** to download the forms to complete; or **Implementation Guides** to review the resource materials.

**Medicaid State Plan Eligibility**  
[Access Module](#)  
[Eligibility PDF Forms](#)  
[Eligibility Implementation Guides](#)

**Children's Health Insurance Program (CHIP) Eligibility**  
[Access Module](#)  
[CHIP PDF Forms](#)  
[CHIP Implementation Guides](#)

**Medicaid Alternative Benefit Plan**  
[Access Module](#)  
[ABP PDF Forms](#)  
[ABP Implementation Guides](#)

**Medicaid Premiums and Cost Sharing**  
[Access Module](#)  
[Premiums and Cost Sharing PDF Forms](#)  
[Premiums and Cost Sharing Implementation Guides](#)

**Documentation**  
[CMS Upload Approval Letter Instructions](#)  
[State Download Approval Letter Instructions](#)  
[CMS Instructions for Reports](#)

# User Credentials



- ◆ Current Medicaid Model Data Lab (MMDL) or Waiver Management System (WMS) users can use their current MMDL user ID and password.
- ◆ To request a user name and password (or a password reset), please select the **Contact** link at the bottom of any MMDL screen and complete the form that displays.



- ◆ The request should include the name, state, email and desired role of the requester.
- ◆ Once submitted, your request is immediately emailed to the Help Desk, who will contact you within one day to process your request.

# Login Page



- ◆ To log in, enter your user name and password, then select **Log In**.
- ◆ Once you have logged in, you will be transferred to the first page within the application, the Finder page.

A screenshot of a web application's login page. The page has a white background and a black border. At the top left, the word "Login" is written in a blue, sans-serif font. Below this, there are two input fields. The first is labeled "User Name:" and the second is labeled "Password:". Both labels are in a black, sans-serif font. The input fields are empty and have a light blue border. Below the input fields, there is a paragraph of text in a black, sans-serif font: "For security reasons, it is strongly recommended that you do not allow Windows to remember and autocomplete your password when you log in." At the bottom left of the form, there is a button labeled "Log In" in a blue, sans-serif font, with a light blue background and a black border.

# Changing Password



- ◆ A new user is assigned a temporary password. It is recommended to change it upon your first login. To do so:
  1. Complete the User Name and Password fields but do not select **Log In**.
  2. Select the **Change Password** link at the top of the screen.

A screenshot of the CMS login interface. At the top, there is a yellow navigation bar with two links: 'Home' and 'Change Password'. The 'Change Password' link is highlighted with a red rectangular border. Below the navigation bar is a white login box with a grey border. Inside the box, the word 'Login' is displayed in blue. There are two input fields: 'User Name:' and 'Password:'. Below the password field is a security warning: 'For security reasons, it is strongly recommended that you do not allow Windows to remember and autocomplete your password when you log in.' At the bottom left of the login box is a 'Log In' button.

# Changing Password (cont.)



3. The Change Password page will display.
4. Enter the new password twice to confirm the password.
5. Finalize it by selecting **Change** or to void the change, select **Cancel**.
6. Once you have changed your password, a red message "**Password Updated.**" will display, and you can enter the application by selecting **Finder** in the top menu bar.

**Change Password**

Passwords must contain 6-15 characters and contain at least one letter and one number with no spaces between. Passwords are case sensitive.

User Name:

New Password:

Confirm Password:

Home Logout **Finder**

**Change Password**

Password Updated.

Passwords must contain 6-15 characters and contain at least one letter and one number with no spaces between. Passwords are case sensitive.

# **Resolving Error When Opening PDFs in MMDL**

# Opening PDFs in MMDL Using Google Chrome, Firefox, or Microsoft Edge



- ◆ Users may receive an error message when opening PDFs in Google Chrome, Firefox, or Microsoft Edge. If a user encounters this error message, complete the steps on the next few pages.

Please wait...

If this message is not eventually replaced by the proper contents of the document, your PDF viewer may not be able to display this type of document.

You can upgrade to the latest version of Adobe Reader for Windows®, Mac, or Linux® by visiting [http://www.adobe.com/go/reader\\_download](http://www.adobe.com/go/reader_download).

For more assistance with Adobe Reader visit <http://www.adobe.com/go/acrreader>.

Windows is either a registered trademark or a trademark of Microsoft Corporation in the United States and/or other countries. Mac is a trademark of Apple Inc., registered in the United States and other countries. Linux is the registered trademark of Linus Torvalds in the U.S. and other countries.

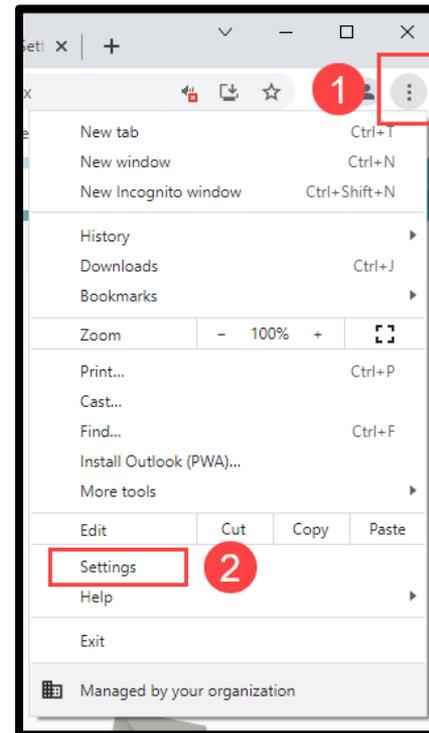
# Opening PDFs Using Google Chrome

The following describes two options for opening PDFs in Google Chrome.

**Option 1** -- Download the PDF and open it with Reader or Acrobat, instead of within your browser.

**Option 2** -- Change the default PDF viewer

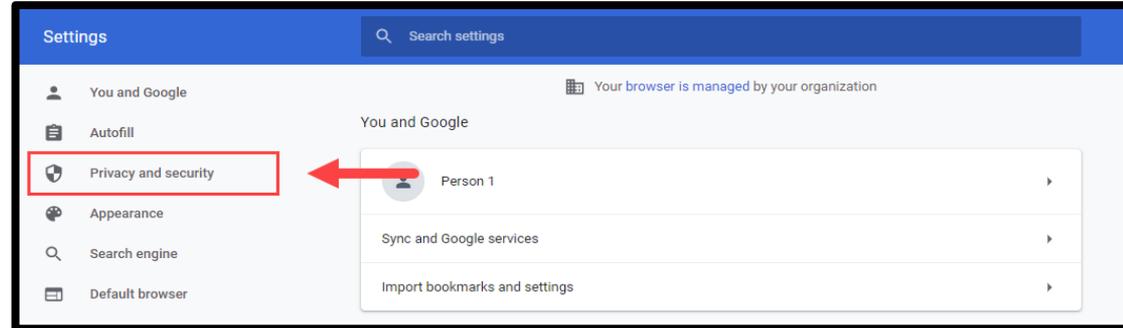
1. Open the Google Chrome **Settings** window (upper right corner).



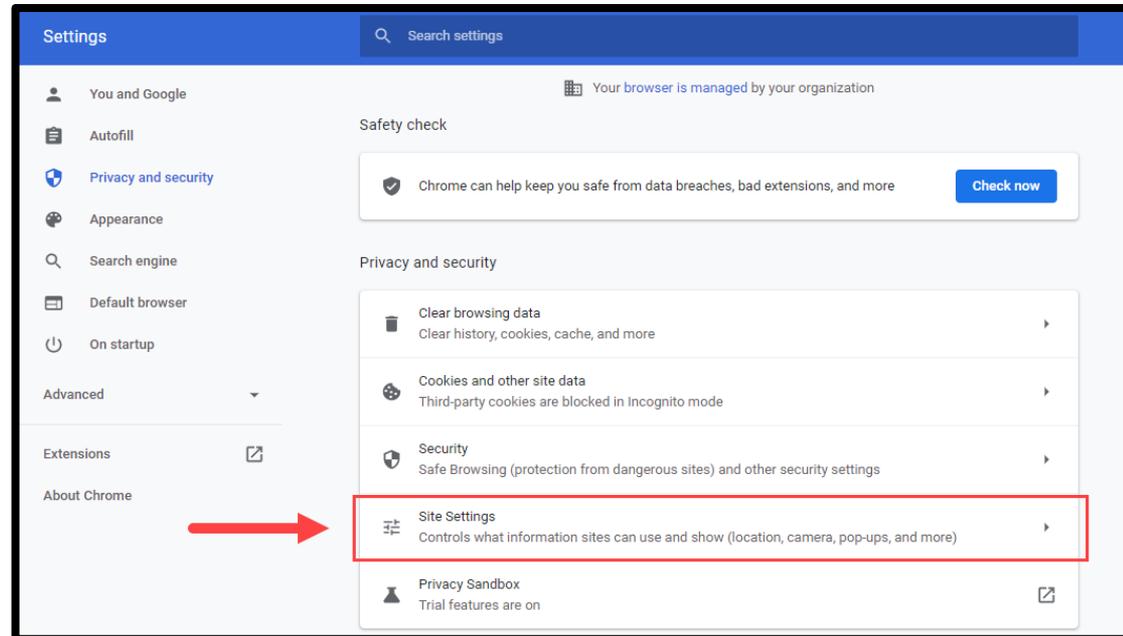
# Opening PDFs Using Google Chrome (cont.)



2. Select **Privacy and security**



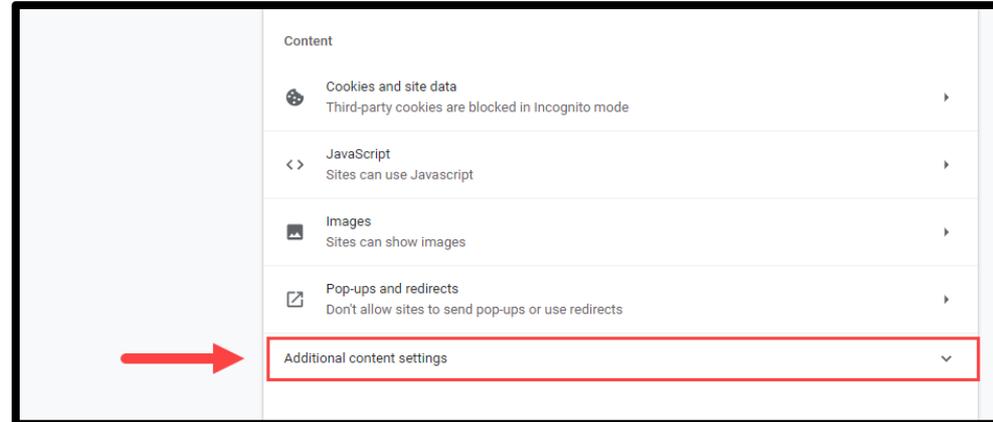
3. Select **Site settings**



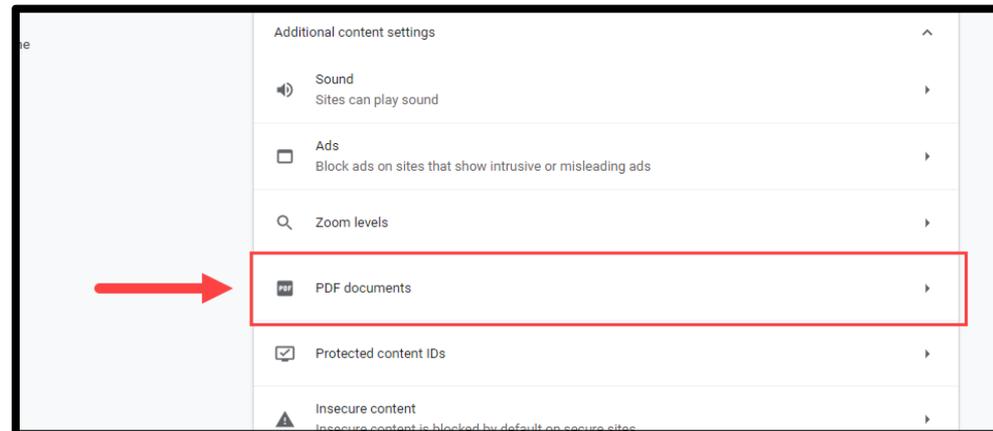
# Opening PDFs Using Google Chrome (cont.)



4. Select **Additional content settings**



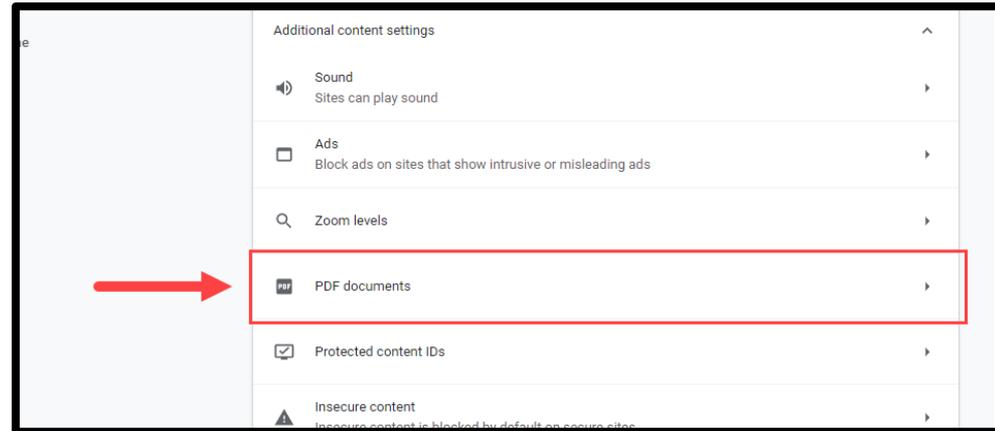
5. Select **PDF Documents**



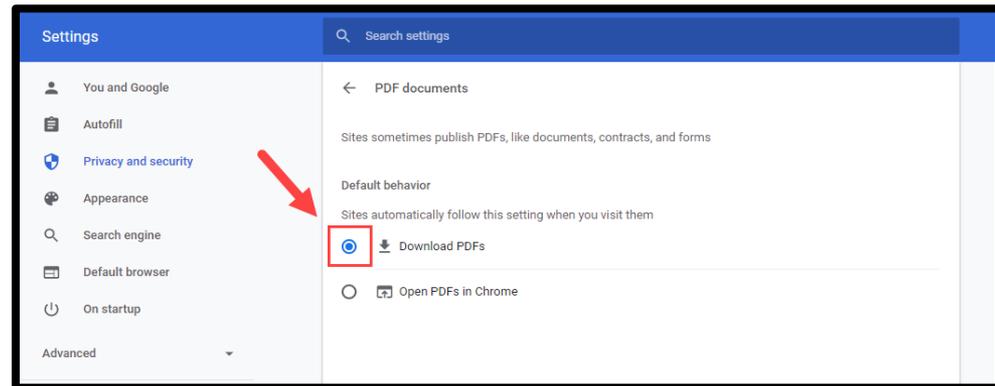
# Opening PDFs Using Google Chrome (cont.)



6. Select the radio button to turn on **Download PDFs**



7. Restart Chrome. All future PDFs opened in Chrome will be downloaded to your computer.

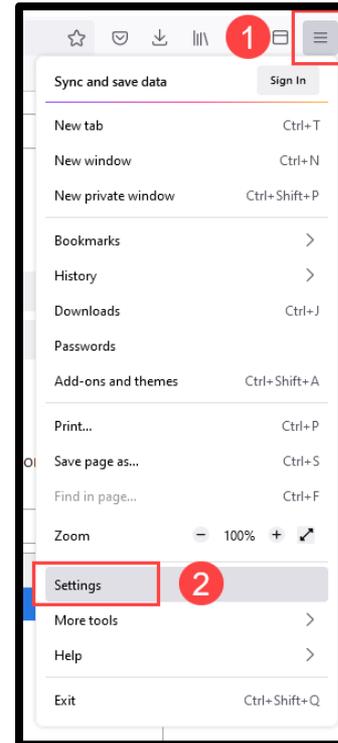


# Opening PDFs Using Firefox



The following describes instructions for opening PDFs in Firefox.

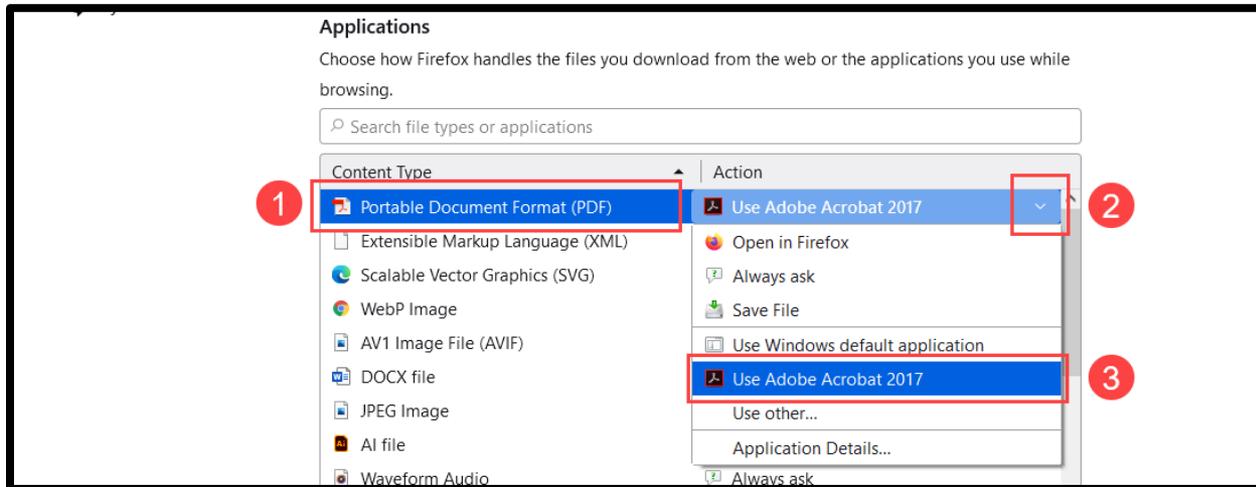
1. Open the Firefox **Settings** window (upper right corner).



# Opening PDFs Using Firefox (cont.)



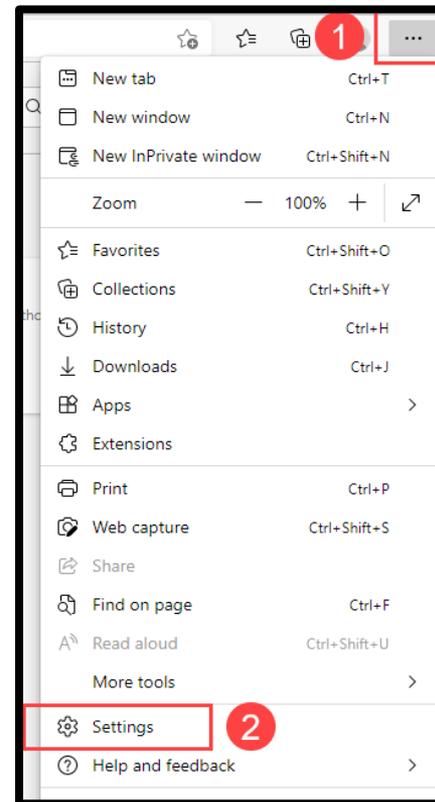
- Go to the Applications section, scroll and select **Portable Document Format (PDF)** on the Content Type list, and then select **Use Adobe Acrobat** on the Action list. All future PDFs opened in Firefox will display on your computer. You may experience a slight delay while the PDF opens—no need to open the PDF again.



# Opening PDFs Using Microsoft Edge

The following describes instructions for opening PDFs in Microsoft Edge.

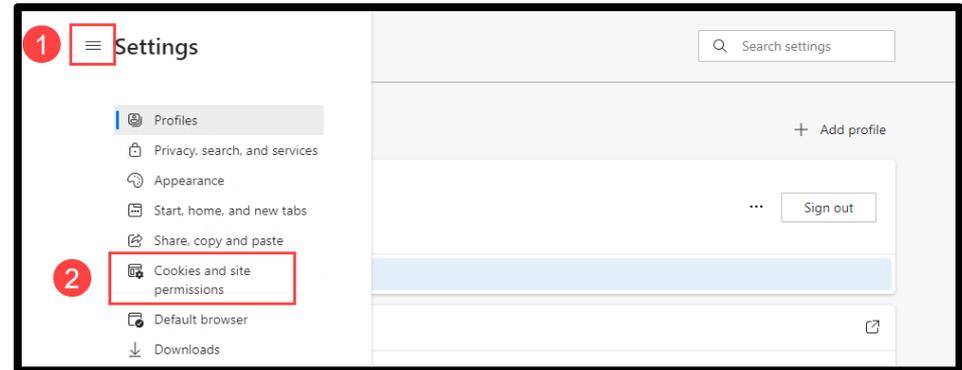
1. Open the Microsoft Edge **Settings** window (upper right corner).



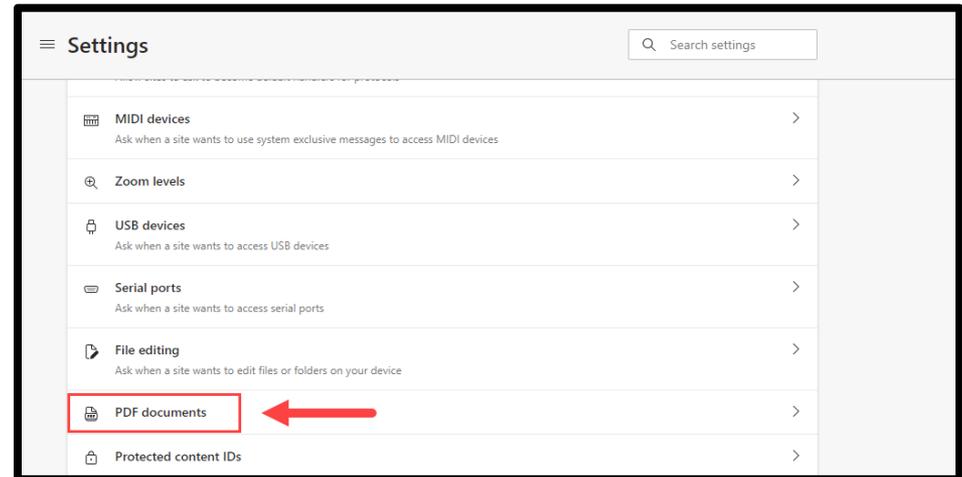
# Opening PDFs Using Microsoft Edge (cont)



2. Open Settings, then select **Cookies and site permissions**



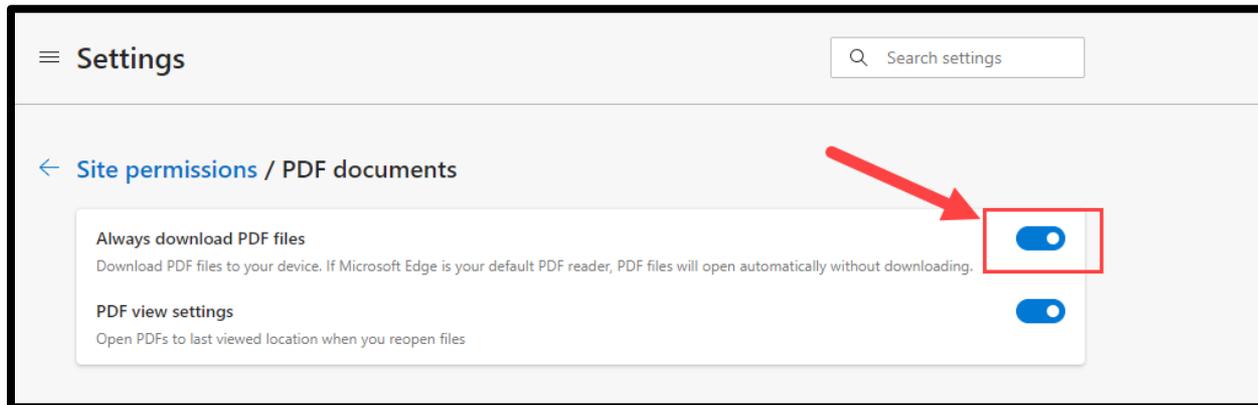
3. Select **PDF documents**



# Opening PDFs Using Microsoft Edge (cont)



4. Turn on the option to **Always download PDF files**.



# **Creating a New State Plan Amendment (SPA)**

Note: Screenshots feature ABP, but also represent functionality available in CHIP and MPC modules; however, the fields may differ

# Create New State Plan Amendment (SPA)



- ◆ After logging in, the Finder page appears:

Medicaid Alternative Benefit Plan Finder

State #	Submission ID	Draft ID	Submission title	
ZZ		ZZ.209	ZZ ABP	<a href="#">Active</a> <a href="#">Detail</a>
ZZ	ZZ.5100	ZZ.376	ZZ ABP -	<a href="#">Active</a> <a href="#">Detail</a>

[Create New](#) Warning: Only use this option if you are creating a new ABP SPA. If you are amending an existing SPA, navigate to the Control Panel of the base SPA (SS.####.R00.00) and select **Create Amendment**.

- ◆ **CHIP or MPC SPA:** To create a new or amend an existing CHIP or MPC SPA, select **Create New**. This will start a blank version of the SPA application and take you to the first data entry page of the application (General Information section).
- ◆ **ABP SPA:** For ABP SPAs, use **Create New** only if you are creating a *new* ABP SPA, not amending an existing SPA. To amend an existing ABP SPA, see instructions under "[Amending an Existing ABP SPA](#)," in this document.

# Navigation Functions



- ◆ To navigate to any section, use the navigation menu on the left side.
- ◆ Select a section and the system will navigate directly to the first page of that section.

Control Panel

General Information

**File Management**

Tribal Input

Summary

### Medicaid Alternative Benefit Plan: File Management Summary

State/Territory name: ZZ Test State

Transmittal Number:

Form Code	Form Name	Uploaded Form Count	Action
ABP1	Alternative Benefit Plan Populations	0	<a href="#">Manage</a>
ABP2a	Voluntary Benefit Package Selection Assurances - Eligibility Group under Section 1902(a)(10)(A)(i)(VIII) of the Act	0	<a href="#">Manage</a>
ABP2b	Voluntary Enrollment Assurances for Eligibility Groups other than the Adult Group under Section 1902(a)(10)(A)(i)(VIII) of the Act	0	<a href="#">Manage</a>
ABP2c	Enrollment Assurances - Mandatory Participants	0	<a href="#">Manage</a>

# ABP General Information Section



- ◆ Enter submission title and program description SPA number. (i.e. templates being amended, benefits being amended/added/removed, etc.). For alignment ABPs the state should reference the underlying Medicaid SPA number.
- ◆ States must include the date the public notice was issued. This date cannot be more than one year prior to the current date, nor a future date.  
*\*See next page for ABP workaround if date is greater than one year.*
- ◆ The public note comment period should be at least two weeks prior to the submission of a SPA.

Medicaid Alternative Benefit Plan: General Information

State/Territory name: ZZ Test State  
Transmittal Number: ZZ-23-1234-a

**General Information:**

Submission Title:  
*short (under 100 characters) label used to identify this submission in the web application*  
ZZ ABP

Description:  
Character Count: 0 out of 2000

The state attests that this SPA does not make a substantive change and therefore does not require the state to provide public notice in accordance with 42 CFR 440.386.

Public notice has been conducted prior to SPA submission pursuant to 42 CFR 440.386.

Date public notice was issued  (mm/dd/yyyy)

# Public Notice Date Workaround for Unlocked ABP SPAs After RAI Status



- ◆ For ABPs, states can submit a public notice date greater than 1 year only for SPAs that are in RAI status.
- ◆ If an ABP SPA is unlocked after being placed in RAI status, states will encounter a validation error when attempting to resubmit a SPA that has a public notice date greater than 1 year from submission.
- ◆ In this situation, in order to pass system validations when resubmitting the ABP, states can enter a public notice date that falls within the one-year period instead of the original (greater than 1 year) public notice date as long as you provide a note detailing the original public notice date.

# ABP General Information Section (cont.)



- ◆ For ABPs, before continuing, states must select the check boxes beside the four assurances concerning compliance with public notice requirements.

- The state/territory assures that it has provided the public with advance notice of the amendment and reasonable opportunity to comment.
- The state/territory assures that it has included in the notice a description of the method for assuring compliance with 42CFR 440.345 related to full access to EPSDT services.
- The state/territory assures that it has included in the notice a description of the method for complying with the provisions of section 5006(e) of the American Recovery and Reinvestment Act of 2009.
- The state/territory assures that it has performed any required tribal consultation.

# General Information Section (cont.)



- ◆ All states must also upload the public notice that was issued for the SPA or amendment using the **Add a Document** feature.
- ◆ For ABPs, specify covered populations.
- ◆ Once this page is complete, select **Continue** to navigate to the File Management section.

**Upload Public Notice Documents**

**Add a Document**

**ABP Screening Statements to Indicate Required Forms**

Select one of the following options for eligibility group coverage:

- The population group for this Alternative Benefit Plan includes **only** the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act. *If the state selects this option, the state must complete form ABP2a to indicate agreement to voluntary benefit package selection assurances for the adult group.*
- The population group for this Alternative Benefit Plan includes the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act, and also includes other groups. *If the state selects this option, the state must complete forms ABP2a and ABP2b to indicate agreement to voluntary benefit package selection assurances for the adult group and voluntary enrollment assurances for other eligibility groups.*
- The population for this Alternative Benefit Plan does not include the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act. *If the state selects this option, the state must complete form ABP2b to indicate agreement to voluntary enrollment assurances for these eligibility groups.*

Enrollment is mandatory for some or all participants. *If selected, the state must complete form ABP2c to indicate agreement to mandatory enrollment assurances.*

Specify the number of **benchmark** benefit packages that will be created or amended with this submission. *The state must submit one version of forms ABP3, ABP3.1, ABP4, ABP5, and ABP8 for each benchmark benefit package.*

Specify the number of **benchmark-equivalent** benefit packages that will be created or amended with this submission. *The state must submit one version of forms ABP3, ABP3.1, ABP4, ABP6, and ABP8 for each benchmark-equivalent benefit package.*

# File Management Section



- ◆ The File Management section tracks if a particular form code has been uploaded.
- ◆ For ABPs, this table displays the form count of each form code, since MMDL enables states to upload more than one copy of each PDF for ABPs.
- ◆ For CHIP and MPC, this table indicates Yes or No if a form is uploaded.
- ◆ To upload a specific PDF to any SPA type, select **Manage** in the far-right column of the corresponding PDF form code.

## Medicaid Alternative Benefit Plan: File Management Summary

State/Territory name: ZZ Test State

Transmittal Number:

Form Code	Form Name	Uploaded Form Count	Action
ABP1	Alternative Benefit Plan Populations	0	<a href="#">Manage</a>
ABP2a	Voluntary Benefit Package Selection Assurances - Eligibility Group under Section 1902(a)(10)(A)(i)(VIII) of the Act	0	<a href="#">Manage</a>
ABP2b	Voluntary Enrollment Assurances for Eligibility Groups other than the Adult Group under Section 1902(a)(10)(A)(i)(VIII) of the Act	0	<a href="#">Manage</a>
ABP2c	Enrollment Assurances - Mandatory Participants	0	<a href="#">Manage</a>

# File Management Section (cont.)



- ◆ When you select **Manage**, a new screen appears where the state can upload PDFs and enter description text.
- ◆ To upload the PDF, select **Add a Form**, find the saved PDF on your computer, and then select **Upload**.

Form ABP1: Alternative Benefit Plan Populations

ABP1 Forms List

Form
------

[Add a Form](#)

# Using Current PDF Templates



V.20181119

- ◆ PDF templates can be modified resulting in new versions being implemented.
- ◆ To ensure a current PDF template is up to date, check the version number on the bottom right side of the last page to see if it matches the version number of the template available for download on the PDF Forms Library.
- ◆ For CHIP and MPC, if an old template is already uploaded or the state attempts to upload an older template, you will receive an error message and cannot proceed until the old version is removed and the most current template from the library is downloaded, edited, and uploaded to the SPA.

Errors on the page.

Form Description: Character Count:0 out of 2000

Uploaded Form: Date Uploaded:  
No file to download

Select form for upload:  No file chosen

CS11\_val\_xfa.pdf is an incorrect version of the PDF. Please go to the PDF Forms page and download the correct version. If you need help, please contact formsupport@us.ibm.com

# Adding Support Documents



- ◆ Additional documentation can be attached by selecting **Add a Document**, finding the supporting document on the computer, and selecting **Upload**.
- ◆ Once all documents are uploaded, navigate back to the file management list by selecting **Return to File Management**.

Control Panel

[Return to File Management](#)

## Form ABP1: Alternative Benefit Plan Populations

### ABP1 Forms List

Form	
Please provide a short description of this ABP1 form: <small>Character Count:0 out of 2000</small>	Delete
Uploaded Form Name: <small>Date Uploaded:</small>	
Select Form: <input type="button" value="Browse..."/>	
<input type="button" value="Upload"/>	
<a href="#">Add a Form</a>	

### Support Documents

Document	
Please provide a short description of this support document: <small>Character Count:0 out of 2000</small>	Delete
Uploaded Document Name: <small>Date Uploaded:</small>	
Select Document: <input type="button" value="Browse..."/>	
<input type="button" value="Upload"/>	
<a href="#">Add a Document</a>	

# Tribal Input



- ◆ Complete the Tribal Input section directly in the web report.

**Control Panel**

---

**General Information**

---

**File Management**

---

**Tribal Input**

---

**Summary**

### Medicaid Alternative Benefit Plan: Tribal Input

State/Territory name: ZZ Test State

Transmittal Number:

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this State.

- This State Plan Amendment is likely to have a direct effect on Indians, Indian health programs or Urban Indian Organizations.
- The State has solicited advice from Indian Health Programs, Urban Indian Organizations, and/or Tribal governments prior to submission of this State Plan Amendment.

*Complete the following information regarding any tribal consultation conducted with respect to this submission:*

*Tribal consultation was conducted in the following manner. States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:*

- Indian Tribes
- Indian Health Programs
- Urban Indian Organization

# Summary Page



- ◆ The Summary Page serves as the CMS 179 for Medicaid. Information such as the transmittal number and proposed effective date are entered here.

Control Panel

General Information

File Management

Tribal Input

**Summary**

---

Medicaid Alternative Benefit Plan: Summary Page (CMS 179)

State/Territory name: ZZ Test State

**Transmittal Number:**  
*Enter the Transmittal Number (TN), including dashes, in the format SS-YY-NNNN or SS-YY-NNNN-xxxx (with xxxx being optional to specific SPA types), where SS = 2-character state abbreviation, YY = last 2 digits of submission year, NNNN = 4-digit number with leading zeros, and xxxx = OPTIONAL, 1- to 4-character alpha/numeric suffix.*

**Proposed Effective Date**  
 (mm/dd/yyyy)

**Federal Statute/Regulation Citation**

**Federal Budget Impact**

	Federal Fiscal Year	Amount
First Year	<input type="text"/> 0	\$ <input type="text"/> 0.00
Second Year	<input type="text"/>	\$ <input type="text"/> 0.00

**Subject of Amendment**  
 Character Count: 0 out of 2000

# Transmittal Number Validations



◆ **Format validations** – ensures you enter the correct Transmittal Number format.

◆ **Uniqueness validation** - checks that the Transmittal Number being saved does not already exist in MMDL (i.e., in all MMDL SPA modules). Uppercase and lowercase versions of the same Transmittal Number are considered the same number.

*Note: The validation for Transmittal Number uniqueness applies to all MMDL PDF Repository modules, including Medicaid State Plan Eligibility, CHIP, MPC and ABP SPAs.*

State/Territory name: ZZ Test State

**Transmittal Number:**

Enter the Transmittal Number (TN), including dashes, in the format SS-YY-NNNN or SS-YY-NNNN-xxxx (with xxxx being optional to specific SPA types), where SS = 2-character state abbreviation, YY = last 2 digits of submission year, NNNN = 4-digit number with leading zeros, and xxxx = OPTIONAL, 1- to 4-character alpha/numeric suffix.

The Transmittal Number (TN) must be in the format of SS-YY-NNNN or SS-YY-NNNN-xxxx, with xxxx being optional to specific SPA types. You must enter dashes.

State/Territory name: ZZ Test State

**Transmittal Number:**

Enter the Transmittal Number (TN), including dashes, in the format SS-YY-NNNN or SS-YY-NNNN-xxxx (with xxxx being optional to specific SPA types), where SS = 2-character state abbreviation, YY = last 2 digits of submission year, NNNN = 4-digit number with leading zeros, and xxxx = OPTIONAL, 1- to 4-character alpha/numeric suffix.

According to our records, this Transmittal Number already exists. Please check the Transmittal Number and try entering again.

# **Amending an Existing ABP SPA**

# Amend Existing ABP SPA



- ◆ For ABPs only, if amending an existing SPA, instead of selecting **Create New** on the Finder screen, navigate to the Control Panel of the correct base SPA (the submission number should end in **.00** as shown in the screenshot) and select **Create Amendment**.

**Important:** *This copies the data and PDF forms that were approved in the base SPA into a new SPA amendment within the same SPA family and automatically opens this new amendment. This does not copy in the data and PDF forms that were approved in any of the subsequent amendments within this SPA family.*

Medicaid Alternative Benefit Plan: ZZ.0744.R00.00

Document Title: ZZ ABP - Test SPA  
Type of Request: new  
Report Status: APPROVED  
SEA Tool Approval Date: Jun 16, 2016  
Approved Effective Date: Jun 16, 2016  
Draft ID: ZZ.023.00.00

Browse/Edit	History	Actions
<a href="#">Browse</a>	<a href="#">Transaction History</a>	Submit
<a href="#">Edit</a>	Show Comments	Withdraw
<a href="#">Print</a>	<a href="#">Historical View</a>	Add Comment
<a href="#">CMS Approval Letter and Final Approval Package</a>		Unlock
		RAI
		Approve
		Reject

Amend [Create Amendment](#) Access

# Amend Existing ABP SPA (cont.)



- ◆ From within the new ABP amendment, verify and edit the SPA data on the screens to reflect the new amendment. Since the new amendment only contains data that was approved in the base SPA, you may need to navigate to other amendments to locate the most updated SPA data.
- ◆ Upload the correct PDF form(s) to the amendment by selecting **File Management** on the left menu, then **Manage** to the right of the corresponding Form Code(s).

ABP4	Alternative Benefit Plan Cost-Sharing	0	<a href="#">Manage</a>
ABP5	Benefits Description	1	 <a href="#">Manage</a>
ABP6	Benchmark-Equivalent Benefit Package	0	<a href="#">Manage</a>
ABP7	Benefits Assurances	0	<a href="#">Manage</a>

# Amend Existing ABP SPA (cont.)



◆ If you do not need to replace a form, but instead you need to make edits to the already uploaded PDF form, first select **Download** and make edits offline using your PDF software. Then, once updates are complete, follow steps below to add the updated version of the PDF form to the SPA, which will replace the initially uploaded form.

1. If removing an existing form from a SPA (optional), select **Delete** (ABP) and confirm the deletion, or **Remove** (CHIP/MPC).
2. Select **Add a Form**.
3. Select either **Choose File** (Chrome/Edge) or **Browse** (Firefox) and select the file to upload.
4. Select **Upload**.

## ABP1 Forms List

Form	
Please provide a short description of this ABP1 form: <small>Character Count: 0 out of 2000</small>	
<input type="text"/>	<b>1</b>
Uploaded Form Name: <small>Date Uploaded:</small>	<b>Delete</b>
Select Form: <b>3</b> <input type="button" value="Choose File"/> No file chosen	
<b>4</b> <input type="button" value="Upload"/>	
<b>Add a Form</b> <b>2</b>	

# **Editing and Viewing a Submission (State View)**

# Menu Options



- ◆ **Home** – Returns you to the Home Page, where PDF Repository modules and other options are displayed.
- ◆ **Logout** – Saves your work and exits you from the system.
- ◆ **Finder** – Returns you to the current module Finder Page.
- ◆ **Save** – Saves the page you are currently completing. The system automatically saves data when you move from page to page, but your session will time out if a page has not been refreshed for 30 minutes.
- ◆ **Print** – Takes you to the Printing Selection Page.
- ◆ **Help** – Currently disabled – refer to “Questions and Next Steps ” section in this document for instructions on how to reach the system Help Desk.

# Finder



- ◆ After a SPA is created, the Finder will be displayed.

Medicaid Alternative Benefit Plans Finder				
<u>State</u>	<u>Submission #</u>	<u>Draft ID</u>	<u>Submission title</u>	
ZZ		ZZ.55	ZZ ABP -AJ Test - 7 Aug. 2013	<a href="#">Active</a> <a href="#">Detail</a>

- ◆ **Active** directs you to the Control Panel of the most recent submitted or approved SPA.
- ◆ To access additional versions of the SPA within the Draft ID, select **Detail**, which takes you to the Detail Finder page.

# Detail Finder



- ◆ The Detail Finder lists each SPA within a SPA family. CHIP and MPC SPAs should only reflect one SPA per Base Number, whereas ABP SPAs may list more than one SPA if there are related amendments.

Medicaid Alternative Benefit Plans Detail Finder

Base Number:

Title: ZZ ABP -AJ Test - 7 Aug. 2013

Base Draft ID: ZZ.55

**Submission Detail:**

Effective Date	Submission #	Draft ID	Submission title	Status
		ZZ.55.00.00	ZZ ABP -AJ Test - 7 Aug. 2013	DRAFT

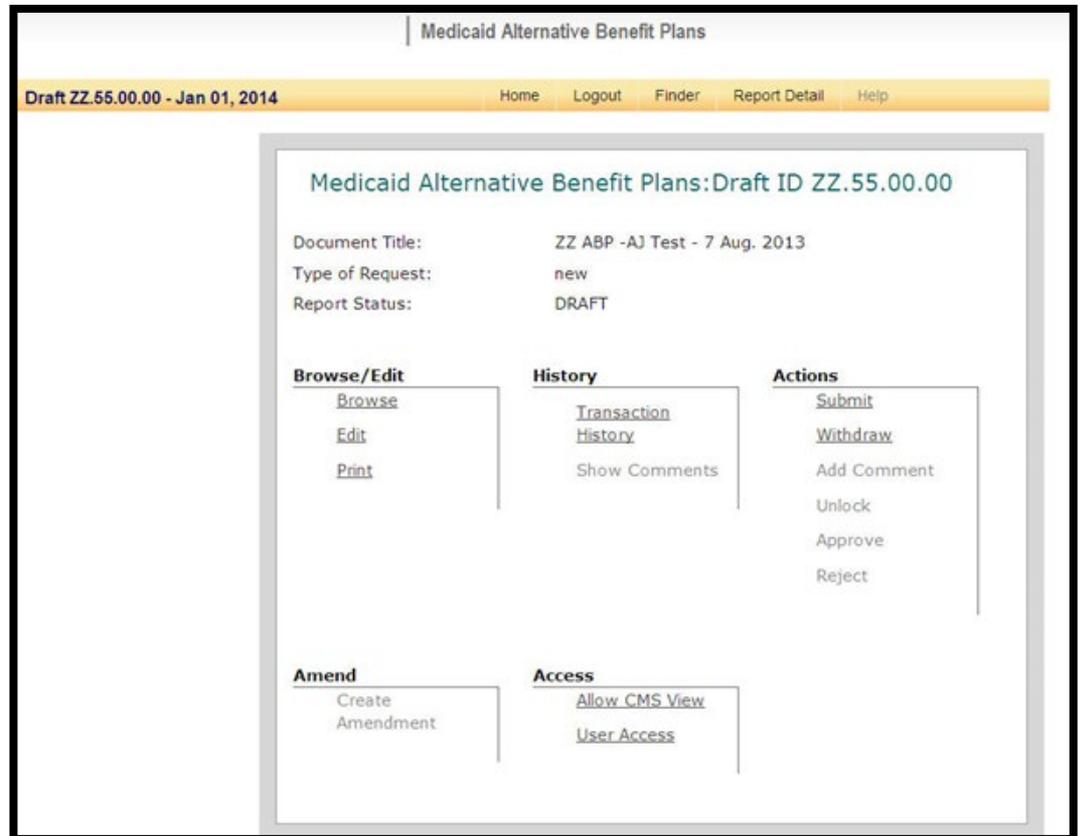
- ◆ SPAs are displayed regardless of status – Draft, Submitted, Unlocked, RAI, Withdrawn and Approved.
- ◆ Select the **Submission #** or **Draft ID** of the desired SPA. This will transfer you to the Control Panel.

# Control Panel Functions

# The Control Panel



- ◆ The Control Panel displays functions available to you, based on your role and the status of the document.
- ◆ Functions in darker text and underlined are available to you. Functions grayed out are not available.
- ◆ Note: The Control Panel can only be accessed when you are within a SPA.



# Control Panel (cont.)



- ◆ You may either **Browse** or **Edit** the SPA through the Control Panel.



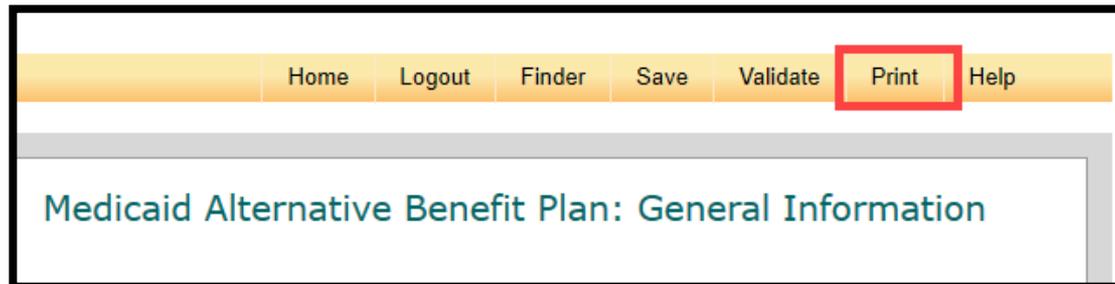
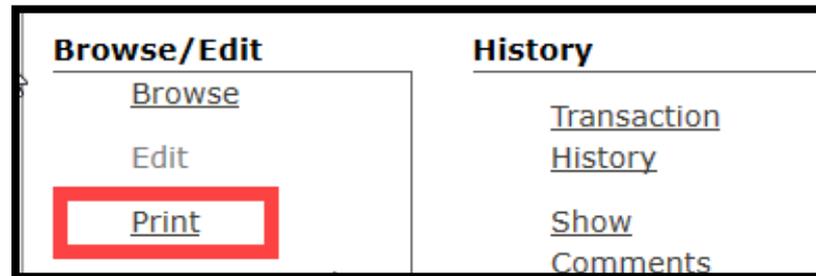
- ◆ Selecting **Browse** allows you to view the SPA in Read Only mode.
- ◆ Selecting **Edit** allows you to modify the SPA.
- ◆ Either option brings you to the General Information page of the application.

# Printing a SPA

# Printing in MMDL



- ◆ Follow the steps below to print a SPA in MMDL. These steps do not include printing uploaded PDF forms. To download forms attached to a SPA, please refer to the "[Downloading Attached PDF Forms](#)" section in this document.
- ◆ To print the SPA, select **Print** from the Control Panel or in the top menu of the SPA.



# Selecting a Section to Print



- ◆ Use the radio button to select your desired section, or the full SPA by selecting **Entire Report**. Then select **Create Printable View**.

### Printing Selection

To print a report, make a selection below and select Create Printable View. This action will open up another browser with a printable version of the report. To print, select either the print icon in the toolbar or use the browser's print function. When you are finished close the printable version of the report.

Select section to print:

- Entire Report
- General Information
- File Management Summary
- File Management Detail
- Tribal Input
- Summary Page (CMS 179)

[Create Printable View](#)

*It may take a few moments to load the printable version. Please wait for the browser to finish loading before printing the contents.*

# Printable View Tab



- ◆ A printable view of the SPA displays (this screenshot reflects using the Chrome browser). To create a PDF to expand the text boxes, either select **Print** from the File menu, or right click and select **Print** from the dropdown menu that appears:

**Medicaid Alternative Benefit Plan**

Medicaid Alternative Benefit Plan: General Information

State/Territory name: ZZ Test State

Transmittal Number:

**General Information:**

**Submission Title:**  
*short (under 100 characters) label used to identify this submission in the web application*  
Demo Base SPA

**Description:**  
test

The state attests that this SPA does not make a substantive change and therefore does not require the state to publish a public notice.

Public notice has been conducted prior to SPA submission pursuant to 42 CFR 440.386.

Date public notice was issued: 12/01/2022 (mm/dd/yyyy)

The state/territory assures that it has provided the public with advance notice of the amendment and reasonable notice of the opportunity to comment on the proposed SPA.

The state/territory assures that it has included in the notice a description of the method for assuring compliance with the requirements of the Act.

The state/territory assures that it has included in the notice a description of the method for complying with the requirements of the Act.

The state/territory assures that it has performed any required tribal consultation.

**Upload Public Notice Documents**

**ABP Screening Statements to Indicate Required Forms**

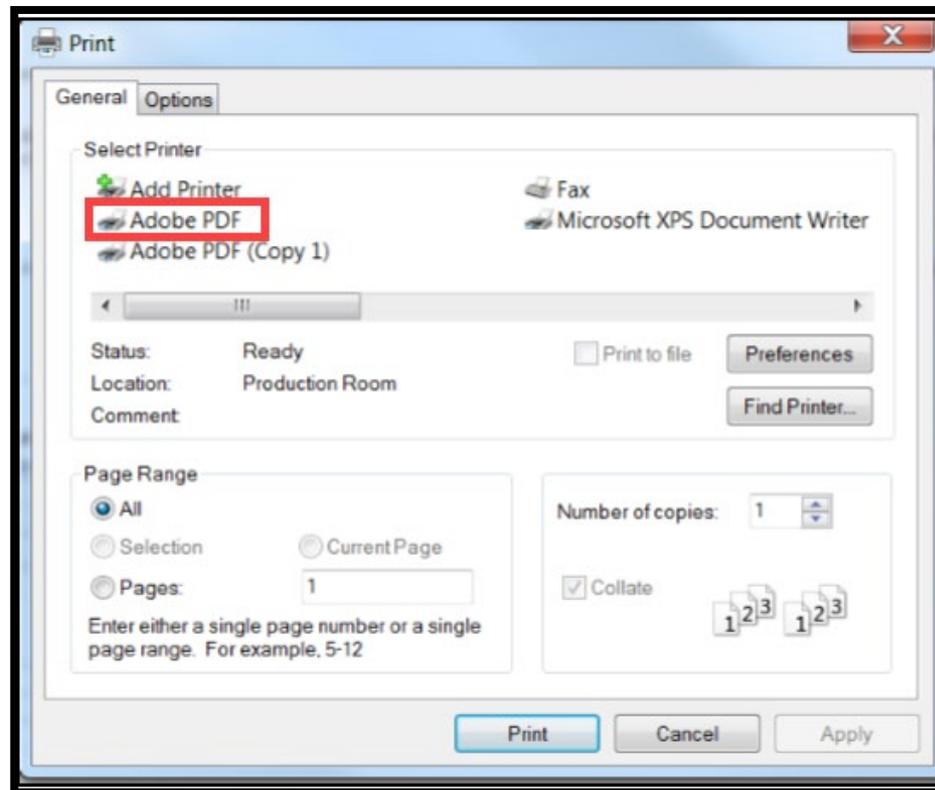
Select one of the following options for eligibility group coverage:

- The population group for this Alternative Benefit Plan includes only the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act.** If the state selects this option, the state must complete form ABP2a to indicate agreement to voluntary benefit package selection assurances for the adult group.
- The population group for this Alternative Benefit Plan includes the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act, and also includes other groups.** If the state selects this option, the state must complete forms ABP2a and ABP2b to indicate agreement to voluntary benefit package selection assurances for the adult group and voluntary enrollment assurances for other eligibility groups.
- The population for this Alternative Benefit Plan does not include the adult group under section 1902(a)(10)(A)(i)(VIII) of the Act.** If the state selects this option, the state must complete form ABP2b to indicate agreement to voluntary enrollment assurances for these eligibility groups.

Enrollment is mandatory for some or all participants. If selected, the state must complete form ABP2c to indicate agreement to mandatory enrollment assurances.

# Creating a PDF

- ◆ Select your PDF creation software from the list of options and select **Print**. Then **Save** the PDF.



# **Downloading Attached PDF Forms**

# Downloading PDFs of Forms



On the Form Management screen there are two options to download PDFs of forms attached to a SPA:

- ◆ **Download** - permits you to download a non-508 compliant, fillable PDF that has been uploaded to a SPA package.
- ◆ **Download for Screen Reader** - permits you to download a 508 compliant version of a PDF template, without fillable fields, that has been uploaded to a SPA package.
  - Users downloading PDFs must choose the 508 compliant PDF when creating the CMS Approval Letter and Final Approval Package.
  - If the file downloaded is an older version of a modified PDF template, the PDF generated by selecting the **Download For Screen Reader** button is not considered fully 508 compliant due to the +/- labels in the table headers.

The screenshot shows a web interface titled "ABP1 Forms List". It contains a form with the following elements:

- A header section labeled "Form".
- A text input field with the prompt "Please provide a short description of this ABP1 form:". To the right of the field, it displays "Character Count: 65" and "out of 2000".
- A label "Uploaded Form Name:" followed by a text input field.
- To the right of the "Uploaded Form Name:" field, it displays "Date Uploaded: 08/14/2013".
- At the bottom of the form, there are two buttons: "Download" and "Download For Screen Reader". Both buttons are highlighted with red boxes.

# Users with PDF Reader Software



- ◆ Users with PDF reader software:
  - ◆ After choosing **Download for Screen Reader**, select **Save** on the dialogue box that appears.
  - ◆ A 508 compliant PDF with all text fields expanded is automatically generated in the web browser.
  - ◆ Save the PDF. Once you save the file from this dialogue box and confirm the logical reading order, the PDF output is now considered 508 compliant. To ensure the printed output is formatted correctly, you must always save the PDF prior to printing. Once the PDF is saved you may then open the file and print.
  - ◆ Do not select **Save As** or the file cannot be confirmed to be 508 compliant.

# Users without PDF Reader Software



- ◆ Users without PDF reader software:
  - After choosing **Download for Screen Reader**, select **Save** on the dialogue box that appears.
  - If you are using the Microsoft Edge, Chrome or Firefox web browser, the PDF generated in your web browser is considered 508 compliant, so you can save that file.
- ◆ Save the PDF. Once you save the file from this dialogue box and confirm the logical reading order, the PDF output is now considered 508 compliant. To ensure the printed output is formatted correctly you must always save the PDF prior to printing. Once the PDF is saved you may then open the file and print.
- ◆ Do not select **Save As** or the file cannot be confirmed to be 508 compliant.

# **Additional Control Panel Functions**

# Submit



- ◆ Select **Submit** to submit the SPA.
- ◆ Only users with the State Medicaid Director role can submit a SPA.
- ◆ Selecting **Submit** starts the 90-day clock for review of the SPA.

<b>Browse/Edit</b>	<b>History</b>	<b>Actions</b>
<a href="#">Browse</a>	<a href="#">Transaction History</a>	<a href="#">Submit</a>
<a href="#">Edit</a>	<a href="#">Show Comments</a>	<a href="#">Withdraw</a>
<a href="#">Print</a>		Add Comment
		Unlock
		Approve
		Reject
<b>Amend</b>	<b>Access</b>	
Create Amendment	<a href="#">Hide From CMS</a>	
	<a href="#">User Access</a>	

# Withdraw



- ◆ State users can **Withdraw** a SPA.
- ◆ If a SPA is withdrawn, the state will be required to complete a brand new submission package which includes refilling all the web-based pages and attaching each PDF to the new submission.

Browse/Edit	History	Actions
<a href="#">Browse</a>	<a href="#">Transaction History</a>	<a href="#">Submit</a>
<a href="#">Edit</a>	<a href="#">Show Comments</a>	<a href="#">Withdraw</a>
<a href="#">Print</a>		<a href="#">Add Comment</a>
		<a href="#">Unlock</a>
		<a href="#">Approve</a>
		<a href="#">Reject</a>
Amend	Access	
<a href="#">Create Amendment</a>	<a href="#">Hide From CMS</a>	
	<a href="#">User Access</a>	

# Warning Message for Withdraw



- ◆ When a state selects **Withdraw** they will see a warning message specific to the type of SPA they are withdrawing.

Confirm Action: WITHDRAWN

Enter comments (optional) and confirm or cancel the action.

Character Count: 0 out of 1500

WARNING: By completing this action you will be withdrawing the package and will not be able to resubmit the SPA or undo this action. If you are not sure this is the correct action to take, contact your CMS point of contact for assistance.

Confirm Cancel

# Allow CMS View



- ◆ Draft SPAs are not viewable by CMS unless the state selects **Allow CMS View**.

Browse/Edit	History	Actions
<a href="#">Browse</a>	<a href="#">Transaction History</a>	Submit
<a href="#">Edit</a>	Show Comments	<a href="#">Withdraw</a>
<a href="#">Print</a>	Historical View	Add Comment
<a href="#">Validate</a>		Unlock
		RAI
		Approve
		Reject
<b>Amend</b>	<b>Access</b>	
Create Amendment	<a href="#">Allow CMS View</a>	

- ◆ A state may allow this functionality to facilitate a discussion or quick review by CMS prior to official submission.
- ◆ To allow CMS to view the SPA, select **Allow CMS View** from the Control Panel. If this button is not selected, then CMS cannot view a SPA until it is submitted.

# Hide From CMS



- ◆ Once the state has allowed CMS to view a SPA, it remains viewable unless the state selects **Hide from CMS.**
- ◆ This feature hides the draft so CMS can no longer view it.
- ◆ This feature is available once the state has allowed CMS to view a draft SPA.

Browse/Edit	History	Actions
<a href="#">Browse</a>	<a href="#">Transaction History</a>	<a href="#">Submit</a>
<a href="#">Edit</a>	<a href="#">Show Comments</a>	<a href="#">Withdraw</a>
<a href="#">Print</a>		<a href="#">Add Comment</a>
		<a href="#">Unlock</a>
		<a href="#">Approve</a>
		<a href="#">Reject</a>
Amend	Access	
<a href="#">Create Amendment</a>	<a href="#">Hide From CMS</a>	
	<a href="#">User Access</a>	

# Transaction History



- ◆ Selecting **Transaction History** from the Control Panel will display the transaction history.

<b>Browse/Edit</b> <a href="#">Browse</a> <a href="#">Edit</a> <a href="#">Print</a> <a href="#">Validate</a>	<b>History</b> <a href="#">Transaction History</a> <a href="#">Show Comments</a> <a href="#">Historical View</a>	<b>Actions</b> <a href="#">Submit</a> <a href="#">Withdraw</a> <a href="#">Add Comment</a> <a href="#">Unlock</a> <a href="#">RAI</a> <a href="#">Approve</a> <a href="#">Reject</a>
<b>Amend</b> <a href="#">Create Amendment</a>	<b>Access</b> <a href="#">Allow CMS View</a>	

# Transaction History (cont.)



- ◆ The Transaction History screen shows any major transactions that change the status of a SPA: submit, draft, approval, disapproval, unlock, RAI.

**Transaction History**

Submission  
Number:  
Submission Title: ZZ ABP -AJ Test - 7 Aug. 2013

Change Date	New Status	Username	Name	Role
08/07/2013 14:14:17	DRAFT			State Medicaid Dir

[BACK](#)

# Assign User Access



- ◆ Users with the State Medicaid Director or State System Manager role can assign user access to edit a SPA.
- ◆ All users who have created a submission package (usually the State Staff) can edit the package they created and have the ability to add other users to edit their applications.
- ◆ To assign edit access to a SPA application, select **User Access** on the Control Panel.

Browse/Edit	History	Actions
<a href="#">Browse</a>	<a href="#">Transaction History</a>	<a href="#">Submit</a>
<a href="#">Edit</a>	Show Comments	<a href="#">Withdraw</a>
<a href="#">Print</a>	Historical View	Add Comment
<a href="#">Validate</a>		Unlock
		RAI
		Approve
		Reject
Amend	Access	
Create Amendment	<a href="#">Allow CMS View</a>	
	<a href="#">User Access</a>	

# Assign User Access (cont.)



- ◆ The User Access table lists State Staff users in a state. For any active user who needs access, check the corresponding box under Access.
- ◆ Once the user(s) who need(s) access has been checked, select **Back**.

**User Access**

Waiver Number:  
Program Title:ZZ ABP

Username	First Name	Last Name	Active	Access
			yes	<input type="checkbox"/>
			yes	<input type="checkbox"/>
			yes	<input type="checkbox"/>
			no	<input type="checkbox"/>
			no	<input type="checkbox"/>
			no	<input type="checkbox"/>



# Other Features

# Session Time Out Feature



- ◆ A system time out occurs when the system has not saved for 30 minutes.

**Session Timed Out.**

You have been logged out of MMDL.

- ◆ The system saves when the user moves from page to page. The system does not save when a user is working within a page unless the user selects a field that changes available options and refreshes the page. Failure to save data may result in loss of unsaved data.
- ◆ The system saves and the 30-minute time out resets whenever the system refreshes. In most cases in the MMDL, a refresh happens when the user moves from page to page and when an upload occurs.

# Questions and Next Steps

# Technical Support



- ◆ The most efficient way to report your system question is to select the **Contact** link at the bottom of any MMDL screen and complete the form that displays.
- ◆ Once submitted, your request is immediately emailed to the Help Desk, who will contact you within one day to process your request.
- ◆ You may also contact the Help Desk Monday – Friday / 9:00 AM – 5:00 PM ET at 1.833.228.2540.

FAQs | Site Map | **Contact** | [Medicaid.gov](#) | [CMS.gov](#)