

HPMS ePace Automated Application Training

ePace Application Training
February 7, 2018



Greg Buglio
Division of Plan Data
Medicare Drug Benefit and C & D Data Group
Centers for Medicare & Medicaid Services



Topics of ePace Application Presentation - HPMS

- ◆ Accessing the Health Plan Management System (HPMS)
- ◆ User Manuals and Guides
- ◆ Notes on Service Area
- ◆ ePace SAE Application: new service area and/or Pace Site
- ◆ ePace Online Application
- ◆ Basic Contract Management
- ◆ ePace Final Submission Schedule
- ◆ Download and Uploads
- ◆ Confirmation Number
- ◆ Sample Screen Shots
- ◆ Submission History
- ◆ Contact Information

Accessing the Health Plan Management System (HPMS)

- ◆ The online ePace application is housed in the Health Plan Management System (HPMS).
- ◆ HPMS is available at the following URL: hpms.cms.gov
- ◆ When the pending PACE contract number was generated, an email indicating the pending contract number also included instructions on acquiring CMS User IDs. If that action has not yet been taken, please do so as soon as possible.
- ◆ Organizations must have a CMS user ID to access HPMS. It is important to have multiple users with access to HPMS.
- ◆ The ePace online applications are available via the Contract Management module.
- ◆ Organizations must trigger their own SAE Application: additional service area and/or new Pace Sites.

User Guides Affiliated with Online Applications

Under the Documentation link, on the Basic Contract Management screen, various Manuals and Guides are available to assist with completion of the online applications.

- ◆ Basic Contract Management User's Manual – this manual provides information on completing and maintaining basic information required in Contract Management. These data must be completed prior to Final Submission of any application.
- ◆ Online Application User Manuals – Click this link to download a zip file containing various Online Application User Manuals. Once it downloads to your computer, open the zip file. One of the manuals is titled CY2019 PACE Online Appl UserManual_01092018.pdf. This is the version you should use for 2018 applications (the CY2019 is an error we will attempt to fix).
- ◆ Upload Guides for MA, Part D– these guides provides technical instructions on how to upload documentation to HPMS in support of the various application types.

IMPORTANT NOTES ON SERVICE AREA!!

- ◆ Applicants may indicate that a county is Full or Partial. The Online Application User Manual provides step-by-step instructions on how to add full or partial counties.
- ◆ When selecting a full county, all of the zip codes in that county are part of your service area.
- ◆ When adding a partial county, you will be prompted to select the zip codes you are requesting.
- ◆ If a zip code crosses into a neighboring county, and you wish to cover the zip code in full, applicant must add the neighboring county as well.
- ◆ PLEASE refer to the CY2019 PACE Online Appl UserManual_01092018.pdf and the Basic Contract Management User's Manual PRIOR to and DURING completing your online applications!

The ePace Initial Online Application

- ◆ To access the ePace and Part D online applications, from the HPMS Home Page: Contract Management > Basic Contract Management > Select a Contract Number > Submit Application Data (note that all of the links found on the Basic Contract Management screen must be completed to submit an application – not just the links on the Submit Application Data screen).
- ◆ The ePace Online Application is the automated version of the traditional paper PACE application.
- ◆ The ePace Online Application consists of PACE and Part D attestations and uploads.
- ◆ All information needed to complete the applications are available in HPMS, including templates and readme files.
- ◆ Readme files explain which upload files to group together in one zip file, which section to upload to, and the naming conventions to use for the files.
- ◆ One Final Submit button is utilized to submit the PACE and Part D portions of the application. Applicants may only Final Submit in the quarter affiliated with their application. All attestations, uploads, and Basic Contract Management data must be completed prior to hitting Final Submit.
- ◆ Organizations may download a blank copy of the application from the link (see screen shots).

The ePace SAE Application

- ◆ Organizations must take an action to trigger the Service Area Expansion (SAE) application.
- ◆ There are two types of ePace SAE Applications
 - Expanding the Contract Service Area
 - Adding/Editing Pace Site information
 - Organizations may do both concurrently
- ◆ To trigger the SAE application process, click the “Add SAE Data” link, found on the Basic Contract Management screen (see screen shots later in presentation).
- ◆ You may trigger one or both types of SAE applications, as appropriate.
- ◆ After an SAE is added, the link name changes to “Update SAE Data.”
- ◆ Once the SAE application is created, HPMS will display the Submit Application link and a blank copy of the application, which you may download.
- ◆ HPMS will automatically display the sections appropriate to the SAE application.

Online Applications - links

- ◆ Click on Submit Application Data
 - Submit Attestations: PACE, Part D
 - Download Templates: PACE, Part D
 - Upload Files: PACE Supporting Files, Part D Supporting Files
 - Final Submission: Submit Final Application, View Confirmation History (this link appears after you have successfully Final Submitted the application).

- ◆ All sections of the Basic Contract Management screen must also be completed.

Basic Contract Management- links

The following links on the Basic Contract Management screen must be accessed and completed prior to Final Submitting the ePace application:

- Basic Contract Data
- Org. Marketing Data
- Plan Management Data (CMS enters data on this screen)
- Offshore Subcontractor Data (only applicable if your organization utilizes Offshore Subcontractors)
- Add/Update ACS Data
- NAIC Data – may be skipped until CMS enters a Parent Org in HPMS. Not required to hit Final Submit
- HPID Data (Optional) – not required to hit Final Submit
- Part C Data
- Part D Data
- Add Service Area Data
- Contact Data
- Submit Application Data

The ePace Online Application – Final Submit Schedule

- ◆ Applicants must submit a completed application in the quarter of their application window by clicking Final Submit. Applications may only be submitted on the last business day of the Quarter (see DMAO training slides for these dates). Note – if you access the Final Submit screen PRIOR to the last business day of the quarter of your application, you will see a message stating that the deadline for you to submit your Final Application has already passed. This is referencing the prior quarter deadline. You will only be able to submit on the last business day of the quarter in which you initiated your application.
- ◆ You may only Final Submit on the day listed as the last business day of the quarter, by 5pm Eastern Time.
- ◆ The Division of Medicare Advantage Operations (DMAO) publishes the quarterly due dates annually.

Download Templates

- ◆ Download templates exist for each application (PACE and Part D).
- ◆ The templates are found on the Submit Application Data page.
- ◆ Each zipped set of download templates contains all of the required templates (when they exist) for the uploads which support the various applications.
- ◆ The download templates also include Readme files which indicate which templates/uploads are required for each application type.
- ◆ NOTE: The Readme file indicates naming conventions of uploaded files and indicates which files to group together and the name of the section where they are uploaded on the PACE Supporting Files or Part D Supporting Files screen.

General Notes about Uploads

- ◆ Often, documents must be grouped together in a zipped file before uploading. The PACE and Part D Readme files (found in the appropriate download templates) details which files to group together and which are uploaded by themselves.
- ◆ The Readme Files provide Naming Conventions for all uploaded files. If no naming convention is listed in the readme files, use your best judgment and ALWAYS include your contract number in the file name.
- ◆ Each upload overwrites the prior upload. Reuploading a grouped file means you MUST include ALL files in the group in the reupload!
- ◆ If there are items in the Download templates which are not indicated for submission in the online application instructions, please verify that you may skip them. Example: If there are other pharmacy upload templates, but they are not required for your application.


Confirmation Number

- ◆ Your application will not be considered complete until you receive a CONFIRMATION NUMBER.
- ◆ The Confirmation Number will be issued after you Final Submit your application with no errors identified.
- ◆ You will receive a NEW Confirmation Number if you are required to resubmit any part of your application (each time you hit Final Submit).
- ◆ To view uploaded documents after you click final submit, you will need this confirmation number.
- ◆ **Note:** Even if you upload a document, the application is not considered complete until you receive a confirmation number. Final Submits must occur **PRIOR** to deadlines!

Screen Shots

- ◆ The following screen shots are examples of the screens you will encounter in completing your ePace application. They are not necessarily accurate and are for illustrative purposes only.
- ◆ These screen shots are not all-inclusive and are provided for illustrative purposes only.
- ◆ Certain links will not appear to PACE Organizations (SNP Data, for example). All links appropriate to PACE organizations will appear appropriately in HPMS.

HPMS Homepage

**HPMS**
Health Plan Management System

NUMBER4 | [User Resources](#) | [Log Out](#) | [A](#) [A](#) [A](#)
Last logged in at 4:30 PM on December 11, 2013

Contract Management

Plan Bids

Plan Formularies

Monitoring

Quality and Performance

Risk Adjustment

Cost Reports

Data Extract Facility

Testing Comments

Basic Contract Management

Electronic Contracting

Contract Reports


Plan Connectivity Data

01/01/2015 [snapshots](#) TEST #2 For Maricka

01/01/2013 - 05/16/2013 Test [My file 2.](#)

01/01/2013 - 05/16/2013 Test [my file.](#)

[More »](#)




Announcements

There are no active announcements. Click more to view archived announcements.

[More »](#)

[Home](#) | [About HPMS](#) | [Website Accessibility](#) | [Web Policies](#) | [File Formats and Plug-Ins](#) | [Rules Of Behavior](#) | [System Requirements](#) | [FAQ](#)
This is a U.S. Government computer system subject to Federal law.



Contract Management Start Page - Select Contract Number

Contract Selection

[Select Contract Number](#)

Documentation

[Basic Contract Management User's Manual \(revised 10/11/2013\)](#)

[Online Application User's Manual \(revised 01/15/2013\)](#)

[MA Upload Guide \(revised 01/10/2012\)](#)

[Part D Upload Guide \(revised 01/10/2012\)](#)

[SNP Upload Guide \(revised 01/10/2012\)](#)

[MMP Upload Guide \(new 01/09/2013\)](#)

[Contract Definitions \(revised 10/01/2013\)](#)

[Top of Page](#)


[Back](#)

Contract Management Start Page

You will use this module to perform the following actions:

- Enter and maintain information about contracts.

Contract Management Start Page

**HPMS**
Health Plan Management System

Health Plan Management System
Home

Contract Selection
Select Contract Number

General Information
Basic Contract Data
Org. Marketing Data
Plan Management Data
Offshore Subcontractor Data
Add/Update ACS Data
NAIC Data
HPID Data
Part A/B Full Risk Option Data

Part C and D Information
Part C Data
Part D Data

Contract Service Area
View Current Service Area Data
Add Service Area Data
View Current Pace Sites
Update PACE Sites

Contact Information
Contact Data

Online Application
Print Blank Application
Submit Application Data

Documentation
Basic Contract Management User Manual (revised 01/13/2016)
Online Application User Manual (revised 02/16/2016)
MA Upload Guide (revised 01/10/2012)
Part D Upload Guide (revised 01/10/2012)
SNP Upload Guide (revised 01/10/2012)
MMP Upload Guide (new 01/09/2013)
Contact Definitions (revised 04/05/2016)

Top of Page
Back

Contract Management Start Page

Contract: Z0001
Contract Status: Pending
Effective: 12/1/2018
Contract Name: EXAMPLE CONTRACT
Organization Type: National PACE

You will use this module to perform the following actions:

- Enter and maintain information about contracts.

Online Application Start Page



Health Plan Management System
[Home](#)

Submit Attestations

[PACE](#)
[Part D](#)

Download Templates

[PACE](#)
[Part D](#)

Upload Files

[PACE Supporting Files](#)
[Part D Supporting Files](#)

Final Submission

[Submit Final Application](#)

Online Application

Selected Contract #: Z0001 EXAMPLE CONTRACT 1
Application Type: Initial
Organization Type: National PACE
Plan Type: National PACE

You will use this module to perform the following actions:


- [Submit Attestations.](#)
- [Download Templates.](#)
- [Upload Files.](#)
- [Submit Application.](#)

Go To: [Contract Management Start Page](#)

[Top of Page](#)

[Back](#)

PACE Attestation Screen

**HPMS**
Health Plan Management System

Health Plan Management System
Home

Service Area

Legal Entity and Organizational Structure

Governing Body

Fiscal Soundness

Marketing

Explanation of Rights

Grievances

Appeals

Enrollment

Disenrollment

Personnel Compliance

Program Integrity

Contracted Services

Required Services

Service Delivery

Infection Control

Interdisciplinary Team

Participant Assessment

Plan of Care

Restraints

Physical Environment

Emergency and Disaster Preparedness

Transportation Services

Dietary Services

Termination

Maintenance of Records & Reporting Data

Medical Records

Quality Assessment Performance Improvement Program (QAPI)

State Attestations

Waivers

Application Attestation

State Readiness Review

MA Attestations

Selected Contract #: Z0001 EXAMPLE CONTRACT 1
Application Type: Initial
Organization Type: National PACE
Plan Type: National PACE

You will use this module to perform the following actions:

- Enter MA Attestation Information.

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

Top of Page
Back

Part D Attestation Screen



Health Plan Management System

[Home](#)

Applicant Experience, Contracts, Licensure, and Financial Stability
Benefit Design
Pharmacy Access
Enrollment and Eligibility
Coordination of Benefits
Tracking Out-of-Pocket Costs
Medicare Secondary Payer
Data Exchange Between Part D Sponsor and CMS
Health Insurance Portability and Accountability Act
Prohibition on Use of SSN or Medicare ID number on Enrollee ID Cards
Record Retention
PDE Records
Claims Processing

Part D Attestations

Selected Contract #: Z0001 EXAMPLE CONTRACT 1

Application Type: Initial

Organization Type: National PACE

Plan Type: National PACE

You will use this module to perform the following actions:

- Enter Part D Attestation Information.

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

[Top of Page](#)

[Back](#)

Sample Attestation PACE

MA Attestations

Enter MA Attestation Information - Service Area

Selected Contract #: Z0001 EXAMPLE CONTRACT 1

Application Type: Initial

Organization Type: National PACE

Plan Type: National PACE

Service Area

3.1 The purpose of this section is to ensure that all PACE applicants define the proposed geographic area that will be served consistent with the requirements of 42 CFR §460.22, §460.70, and §460.98.

1. Applicant ensures that contracted services are accessible to participants and located near or within the geographic service area as specified in 42 CFR §460.70(b)(2). ☐ Yes ☐ No

2. Applicant agrees to operate at least one PACE center within or contiguous to the geographic service area with capacity to allow routine attendance by participants as specified in 42 CFR §460.98(d)(1). ☐ Yes ☐ No

3. Applicant's defined geographic service area does not duplicate a service area covered by another PACE program agreement as permitted in 42 CFR §460.22(a)(b). ☐ Yes ☐ No ☐ N/A

B. In the Documents Section, provide a detailed map, with a scale of the complete geographic service area that includes county, zip code, street boundaries, census tract or block or tribal jurisdiction and main traffic arteries, physical barriers such as mountains and rivers and location of the PACE center, hospital providers, ambulatory and institutional services sites. Depict on the map the mean travel time from the farthest points on the geographic boundaries to the nearest ambulatory and institutional service sites. If the geographic service area includes an area covered by another PACE organization, identify the duplicate area.

Note: The map must be developed in accordance with 42 CFR §460.22, §460.70, and §460.98.

[Cancel](#)

[Save](#)

[Go To: Online Application Start Page](#) | [Contract Management Start Page](#)

Sample Attestation Part D



Health Plan Management System
Home

Part D Attestations

Enter Part D Attestation Information - Benefit Design

Selected Contract #: Z0001 EXAMPLE CONTRACT 1
Application Type: Initial
Organization Type: National PACE
Plan Type: National PACE

Benefit Design	
Formulary/P&T Committee A	
1. Applicant will submit a formulary to CMS for the Part D benefit by the date listed in section 1.3 of the application. Applicant will link all associated contracts to an Initial formulary submission on or before the formulary submission deadline; otherwise, Applicant will be considered to have missed the formulary submission deadline.	<input type="radio"/> Yes (no Waiver) <input type="radio"/> Yes (requesting Waiver) <input type="radio"/> No
2. Applicant has reviewed, understands, and complies with formulary guidance that is contained in the Code of Federal Regulations (42 CFR §423.120(b)), Chapter 6 of the Prescription Drug Benefit Manual, the HPMS Formulary Submission Module and Reports Technical Manual, and all other formulary instructions.	<input type="radio"/> Yes (no Waiver) <input type="radio"/> Yes (requesting Waiver) <input type="radio"/> No
3. Applicant agrees, when using a formulary, to meet all formulary submission deadlines established by CMS. Applicant further agrees that CMS may discontinue its review of the applicant's formulary submission upon the applicant's failure to meet any of the formulary submission deadlines. Applicant acknowledges that failure to receive CMS approval of its formulary may prevent CMS from approving the applicant's bid(s) and contracting with the applicant for the following benefit year.	<input type="radio"/> Yes (no Waiver) <input type="radio"/> Yes (requesting Waiver) <input type="radio"/> No
Formulary/P&T Committee B	
1. Applicant is using the P&T Committee of its PBM for purposes of the Part D benefit.	<input type="radio"/> Yes <input type="radio"/> No
2. If answered yes to 1, Applicant's PBM is operating under a confidentiality agreement for purposes of the P&T Committee (meaning Applicant has no knowledge of the membership of the PBM's P&T Committee). (If not applicable, check "NO.") Note: If answer is YES, then applicant must complete P&T Committee Certification Statement and PBM must complete the P&T Committee Member List located in Appendix XVI entitled Applicant Submission of P&T Committee Member List and Certification Statement.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
3. Applicant has reviewed, understands, and complies with the requirements related to the use and development of a P&T Committee contained in the Code of Federal Regulations (42 CFR §423.120(b)(1)), Chapter 6 of the Prescription Drug Benefit Manual, the HPMS Formulary Submission Module and Reports Technical Manual, and all other guidance related to P&T committees. Note: While the P&T committee may be involved in providing recommendations regarding the placement of a particular Part D drug on a formulary cost-sharing tier, the ultimate decision maker on such formulary design issues is the Part D plan sponsor, and that decision weighs both clinical and non-clinical factors.	<input type="radio"/> Yes <input type="radio"/> No
Formulary/P&T Committee C	
1. If applicant intends to use a formulary for its Part D benefit, then the names of P&T committee members must be provided to CMS either directly by the applicant or by the applicant's PBM. To provide names of P&T committee members directly, enter names in HPMS' Contract Management/Part D Data page. If the PBM operates under a confidentiality agreement (where the applicant does not know the membership of the PBM's P&T Committee) refer to Appendix XVI entitled Applicant Submission of P & T Committee Member List and Certification Statement for additional instructions.	
Electronic Prescription Program	
1. Applicant has reviewed, understands, and complies with electronic prescription and Health Information Technology requirements contained in P.L. 111-5 (2009), 42 CFR §423.159, Chapter 7 of the Prescription Drug Benefit Manual, and all related guidance.	<input type="radio"/> Yes (no Waiver) <input type="radio"/> Yes (requesting Waiver) <input type="radio"/> No

Cancel Save

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

PACE Supporting Files Screen

**HPMS**
Health Plan Management System

Health Plan Management System
Home

Upload MA Supporting Files for Z0001

Important Note: Please refer to the supplemental [MA application upload technical instructions](#) for guidance in determining the MA supporting files required by your application, preparing these files according to CMS instructions, and uploading these files to HPMS.

Step 1. Enter the name of the File(s) that you would like to upload. If you are unsure of the file name(s) and/or location(s), click on the "Browse" button to locate the file(s).

Please Note:

- File names cannot contain the following characters: '#', '%', ':', ',', '&' or '+'.
• File names cannot contain two consecutive periods.
• Upload non-password protected .zip files only. Files with password protection or extensions other than .zip will not be accepted.
• Within the zipped file, only files with a .doc, .docx, .xls, .xlsx, .txt, or .pdf will be accepted.

Step 2. Click on the "Upload" button to send the file to HPMS.

Step 3. Wait until the file transfer is complete. After receiving confirmation of the upload, you may complete another upload or select the "Back" button to return to the "Online Application Start Page".

Appeals	<input type="text"/>	<input type="button" value="Browse..."/>
Disenrollment	<input type="text"/>	<input type="button" value="Browse..."/>
Enrollment	<input type="text"/>	<input type="button" value="Browse..."/>
Explanation of Rights	<input type="text"/>	<input type="button" value="Browse..."/>
Fiscal Soundness	<input type="text"/>	<input type="button" value="Browse..."/>
Governing Body	<input type="text"/>	<input type="button" value="Browse..."/>
Grievances	<input type="text"/>	<input type="button" value="Browse..."/>
Legal Entity and Organizational Structure	<input type="text"/>	<input type="button" value="Browse..."/>
Marketing	<input type="text"/>	<input type="button" value="Browse..."/>
Quality Assessment Performance Improvement Program (QAPI)	<input type="text"/>	<input type="button" value="Browse..."/>
Service Area	<input type="text"/>	<input type="button" value="Browse..."/>
State Attestations	<input type="text"/>	<input type="button" value="Browse..."/>
Termination	<input type="text"/>	<input type="button" value="Browse..."/>
Waivers	<input type="text"/>	<input type="button" value="Browse..."/>
Application Attestation	<input type="text"/>	<input type="button" value="Browse..."/>
State Readiness Review	<input type="text"/>	<input type="button" value="Browse..."/>

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

Part D Supporting Files Screen

Upload Part D Supporting Files for Z0001

Important Note: Please refer to the supplemental [Part D application upload technical instructions](#) for guidance in determining the Part D supporting files required by your application, preparing these files according to CMS instructions, and uploading these files to HPMS.

Step 1. Enter the name of the File(s) that you would like to upload. If you are unsure of the file name(s) and/or location(s), click on the "Browse" button to locate the file(s).

Please Note:

- File names cannot contain the following characters: '#', '%', ',', '&' or '+'.
- File names cannot contain two consecutive periods.
- Upload non-password protected .zip files only. Files with password protection or extensions other than .zip will not be accepted.
- Within the zipped file, only files with a .doc, .docx, .xls, .xlsx, .txt, or .pdf will be accepted.

Step 2. Click on the "Upload" button to send the file to HPMS.

Step 3. Wait until the file transfer is complete. After receiving confirmation of the upload, you may complete another upload or select the "Back" button to return to the "Online Application Start Page".

Contracting

Browse...

Program Integrity

Browse...

Retail Pharmacy

Browse...

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

Add/Update SAE Data Service Area Link

Select PACE SAE Type for Z0001

PACE service area expansions (SAEs) can be the addition of counties and/or zip codes to the existing service area and/or the addition of a new PACE site (one or more). Based on the type of SAE you would like to submit, select each link below.

Note: If you want to add both counties/zip codes and site(s) then select the "Add PACE Service Area SAE" link and add the service area and then select the "Add PACE Site SAE" link and add one or more PACE sites.

[Add PACE Service Area SAE](#)

[Update PACE Site SAE](#)

PACE Site Name	Effective Date
PACE Test	12/01/2018
New PACE site	12/01/2018
Test adding on new day	12/01/2018

[Back](#)

Go To: [Contract Management Start Page](#)

Add/Update SAE Data – PACE Site Link

Update Current PACE Site Data for Z0001

Contract Number: Z0001

To add a PACE site, click on the "Add" button.

PACE Sites

No Sites Found

--

Back

Add

Go To: [Contract Management Start Page](#)

Add/Update SAE Data – PACE Site Link (continued)



Health Plan Management System
Home

Add a PACE Site

Please note that required fields are indicated with an asterisk (*).

Contract Number: Z0001

Contract Name: EXAMPLE CONTRACT

*Site Name:
*Address:
Address2:
*City:
*State:
*Zip: numbers only

Go To: [Contract Management Start Page](#)

View PACE Site information



Health Plan Management System
Home

View Pace Sites for Z0001

Legal Entity Name: EXAMPLE LEGAL NAME

Pace Site	Effective Date	Status	Address
EXAMPLE LEGAL NAME	12/01/2018	Pending	123 Main Street, Arlington VA 22301

Back

Go To: [Contract Management Start Page](#)

Final Submission – Missing Data



Health Plan Management System
Home

Final Submission for Z0001

The deadline for you to submit your Final Application has already passed.

To complete the missing information for Contract Management sections, select "Contract Management Start Page" link at the bottom of the page and then select the link corresponding to each section to complete the missing information. To complete the missing information for Online Application sections, select the "Back" button or the "Online Application Start Page" link at the bottom of the page and then select the link corresponding to each section to complete the missing information.

Required Data is Missing for:	
Online Application: PACE Attestations	
<ul style="list-style-type: none">The following PACE Attestations must be completed (174 unanswered).<ul style="list-style-type: none">Service Area (3 unanswered)Legal Entity and Organizational Structure (8 unanswered)Governing Body (3 unanswered)Fiscal Soundness (5 unanswered)Marketing (8 unanswered)Explanation of Rights (6 unanswered)Grievances (6 unanswered)Appeals (12 unanswered)Enrollment (13 unanswered)Disenrollment (11 unanswered)Personnel Compliance (7 unanswered)Program Integrity (2 unanswered)Contracted Services (7 unanswered)Required Services (2 unanswered)Service Delivery (5 unanswered)Infection Control (3 unanswered)Interdisciplinary Team (5 unanswered)Participant Assessment (9 unanswered)Plan of Care (7 unanswered)Restraints (4 unanswered)Physical Environment (4 unanswered)Emergency and Disaster Preparedness (8 unanswered)Transportation Services (6 unanswered)Dietary Services (5 unanswered)Termination (5 unanswered)Maintenance of Records & Reporting Data (5 unanswered)Medical Records (4 unanswered)Quality Assessment Performance Improvement Program (QAPI) (10 unanswered)Waivers (1 unanswered)	
Online Application: Part D Attestations	
<ul style="list-style-type: none">The following Part D Attestations must be completed (30 unanswered).<ul style="list-style-type: none">Applicant Experience, Contracts, Licensure, and Financial Stability (2 unanswered)Benefit Design (7 unanswered)Enrollment and Eligibility (2 unanswered)Coordination of Benefits (1 unanswered)Tracking Out-of-Pocket Costs (1 unanswered)Medicare Secondary Payer (3 unanswered)Data Exchange Between Part D Sponsor and CMS (4 unanswered)Health Insurance Portability and Accountability Act (3 unanswered)Prohibition on Use of SSN or Medicare ID number on Enrollee ID Cards (1 unanswered)Record Retention (1 unanswered)PDE Records (4 unanswered)Claims Processing (1 unanswered)	
Online Application: PACE Supporting Documentation	
<ul style="list-style-type: none">The appropriate PACE Supporting Documentation must be uploaded for CMS to consider this application complete.	
Online Application: Part D Supporting Documentation	
<ul style="list-style-type: none">The appropriate Part D Supporting Documentation must be uploaded for CMS to consider this application complete.	

There are quarterly submission windows for PACE applications:

- Q1: March 31
- Q2: June 30
- Q3: September 30
- Q4: December 30

[Back](#)

[Go To: Online Application Start Page](#) | [Contract Management Start Page](#)

Final Submission – No Missing Data

Upload Type	Section
HSD Tables	MA Provider Table (12/16/2013 5:53:07 PM) MA Facility Table (12/16/2013 5:55:59 PM)
Pharmacy Lists	Home Infusion Pharmacy List (12/17/2013 10:52:15 AM) Long Term Care Pharmacy List (12/17/2013 10:55:51 AM) Retail Pharmacy List (12/17/2013 11:03:09 AM)
MA Supporting Files	State Licensure (12/16/2013 5:31:05 PM) Service Area (12/16/2013 5:31:05 PM) Provider Contracts & Agreements (12/16/2013 5:31:05 PM) Contracts for Administrative & Management Services (12/16/2013 5:31:05 PM) Part C Application Certification (12/16/2013 5:31:05 PM)
Part D Supporting Files	Contracting (12/16/2013 5:31:39 PM) Program Integrity (12/16/2013 5:31:39 PM) Retail Pharmacy (12/16/2013 5:31:39 PM) Licensure/Solvency (12/16/2013 5:31:39 PM) Attestation Waiver Requests (12/16/2013 5:31:39 PM)

Note: The following HSD table(s) have not unloaded successfully. This will not prevent you from selecting Final Submit but your HSD files will not be sent to the ACC for time and distance review:

- MA Provider
- MA Facility

YOU MUST CLICK FINAL SUBMIT TO MAKE YOUR APPLICATION SUBMISSION OFFICIAL.

Once you click Final Submit, you will receive a confirmation number. Please be sure to print the confirmation screen for your records.

Clicking Final Submit and obtaining a confirmation number means CMS HAS received your application submission.

Failure to click Final Submit and obtain a confirmation number means CMS has not received your application submission.

Click on "Submit" to mark your online application as a final submission (you will no longer be able to make any changes to your online submission).

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

Final Submission – Confirmation Number

Submission Confirmation History Page for Z0001

CONFIRMATION NUMBER: 3000

This page serves as confirmation that CMS has received the documentation your organization has submitted to CMS (through HPMS) in support of its application for qualification for a 2015 Medicare contract. This confirmation makes no representation concerning CMS' determination regarding the accuracy or completeness of your application submission.

Pending Application Contract Number (Initial or SAE): Z0001
Legal Entity Name: EXAMPLE CONTRACT 1
Confirmation Date: 11/27/2013 12:50:30 pm

MA Application

• Attestations - [latest answers](#)

Section	Last Updated
Experience & Organization History	11/27/2013 11:57:10
Administrative Management	11/27/2013 11:57:10
State Licensure	11/27/2013 11:57:10
Program Integrity	11/27/2013 11:57:10
Compliance Plan	11/27/2013 11:57:10
Key Management Staff	11/27/2013 11:57:10
Fiscal Soundness	11/27/2013 11:57:10
Service Area	11/27/2013 11:57:10
CMS Provider Participation Contracts & Agreements	11/27/2013 11:57:10
Contracts for Administrative & Management Services	11/27/2013 11:57:11
Health Services Management & Delivery	11/27/2013 11:57:11
Quality Improvement Program	11/27/2013 11:57:11
Medicare Operations	11/27/2013 11:57:12
Communication between MAO and CMS	11/27/2013 11:57:12
Grievances	11/27/2013 11:57:12
Appeals	11/27/2013 11:57:12
HIPAA	11/27/2013 11:57:12
Continuation Area	11/27/2013 11:57:12

• MA Supporting Files Uploads

Section	Last Updated
Experience & Organization History	11/27/2013 12:24:12 PM
State Licensure	11/27/2013 12:11:16 PM
Key Management Staff	11/27/2013 12:11:16 PM
Fiscal Soundness	11/27/2013 12:11:16 PM
Service Area	11/27/2013 12:11:16 PM
Provider Contracts & Agreements	11/27/2013 12:24:12 PM
Contracts for Administrative & Management Services	11/27/2013 12:24:12 PM
Quality Improvement Program	11/27/2013 12:11:16 PM
Part C Application Certification	11/27/2013 12:11:16 PM

View Submission History

- ◆ Once you have Final Submitted an application and received a confirmation number for that submission, you can view the submission data/uploads at a later date.
- ◆ From the Online Application Page, click on the “View Confirmation History” link.
- ◆ From the View Submission Confirmation History Page, select a Confirmation Number and then click Next.

View Submission History

- ◆ On the Submission Confirmation History page, you may do the following activities.
 - review the information submitted for the particular confirmation number you selected
 - print the history by clicking the Print button at the bottom of the page
 - click on the links to view attestation answers and uploads
 - print copies of your attestation/upload data
- ◆ NOTE: You will only have multiple confirmation numbers if you are required to resubmit information during the course of the application season.

View Submission History

Select Confirmation Number for Z0001

Select a confirmation number from the list below:

3000 (12/16/2013 11:03:06 AM)
3001 (11/27/2013 12:50:30 PM)

[Back](#) [Next](#)

Go To: [Online Application Start Page](#) | [Contract Management Start Page](#)

Contact Information

- ◆ For technical assistance with the HPMS Basic Contract Management Module/Online Applications (email preferred):
Greg Buglio at 410-786-6562 / gregory.buglio@cms.hhs.gov
- ◆ For technical assistance with HPMS (how to complete something or assistance with creating zipped uploads):
1-800-220-2028 / hpms@cms.hhs.gov
Note: email is the quickest way to get in touch with the HPMS help desk.
- ◆ For questions related to HPMS user access:
hpms_access@cms.hhs.gov
- ◆ For questions beyond technical assistance (policy related), access the DMAO web portal at dmao.lmi.org and select PACE.