

MBES CBES Category of Service Line Definitions for the 64.10 Base form

Line	Line - Form Display	Line - Definition
1	Family Planning	Line 1 - Family Planning.--Enter in Column (a) the total computable administrative expenditures for family planning. The MBES will automatically enter in Columns (b) and (d) 90 percent of the amount reported in Column (a).
2A	MMIS - Inhouse Activities	Line 2.A - Costs Of In-house Activities Plus Other State Agencies And Institutions.--Enter in Column (a) the total computable amount of expenditures directly attributable to the design, development, installation, or enhancement of the MMIS. The MBES system will provide a POP-UP APD selection list of all approved MMIS APD's that are on a table maintained by Central Office. Total Computable should be entered in column E of the table. The Federal Share will be calculated at the rate that APD has assigned to it.
2B	MMIS - Private Sector	Line 2.B - Costs Of Private Sector Contractors.--Enter in Column (a) the total computable amount of expenditures for the costs of private sector contractors directly attributable to the design, development, installation, or enhancement of the MMIS. The MBES system will provide a POP-UP APD selection list of all approved MMIS APD's that are on a table maintained by Central Office. Total Computable should be entered in either column F of the table. The Federal Share will be calculated at the rate that APD has assigned to it.
3A	Skilled Professional Medical Personnel - Single State Agency	Line 3A – Skilled Professional Medical Personnel – Single State Agency – Enter in Column (A) the total computable administrative expenses for Skilled Professional Medical Personnel and directly supporting staff of the Single State Medicaid Agency as defined in 42 CFR 432.2. The MBES will automatically enter in Columns (B) and (D) 75 percent of the amount reported in Column (A).
3B	Skilled Professional Medical Personnel - Other Agency	Line 3B – Skilled Professional Medical Personnel – Other Agency – Enter in Column (A) the total computable administrative expenses for Skilled Professional Medical Personnel and directly supporting staff of the state (other than the Single State Medicaid Agency) and local public agencies as defined in 42 CFR 432.2. These costs must be supported by a written interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 75 percent of the amount reported in Column (A).
4A	Approved MMIS: Inhouse	Line 4.A - Costs Of In-house Activities Plus Other State Agencies And Institutions.--Enter in Column (a) the total computable amount of expenditures directly attributable to the operation of the MMIS. The MBES will automatically enter in Columns (C) and (f) 75 percent of the amount reported in Column (a). NOTE: If subject to a §1903(r) penalty, FFP at the appropriate reduced rate should be reported in Column (e), not in Column (c). The MBES will not generate this entry.
4B	Approved MMIS: Private	Line 4.B - Costs Of Private Sector Contractors.--Enter in Column 9(a) the total computable amount of expenditures for the costs of private sector contractors directly attributable to the operation of the MMIS. The MBES will automatically enter in Columns (C) and (f) 75 percent of the amount reported in Column (a). NOTE: If subject to a §1903(r) penalty, FFP at the appropriate reduced rate should be reported in Column (e), not in Column (c). The MBES will not generate this entry. Where your fiscal agent performs MMIS and other functions (e.g., provider audits), report the payments to the fiscal agent attributable to the non-MMIS functions on Line 7 (Other Financial Participation).

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5A	Mechanized Systems - In-House	Line 5.A - Costs Of In-house Activities Plus Other State Agencies And Institutions.--Enter in Column (a) the total computable amount of expenditures directly attributable to the design, development, installation, improvement, or operation of a mechanized claims processing and information retrieval system not approved under MMIS procedures. The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column (a).
5B	Mechanized Systems: Private Sector	Line 5.B - Costs Of Private Sector Contractors.--Enter in Column (a) the total computable amount of expenditures for the costs of private sector contractors directly attributable to the design, development, installation, improvement, or operation of a mechanized claims processing and information retrieval system not approved under MMIS procedures. The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column (a)
5C	Mechanized Systems - Not Approved under MMIS Procedures: Interagency	Line 5C – Mechanized Systems – Not Approved under MMIS Procedures: Interagency - Enter in Column (A) the total computable amount of expenditures for the costs related to the design, development, installation, improvement or operation of a mechanized claims processing and information retrieval system of a state-level public agency other than the Single State Agency and not approved under MMIS procedures. These costs must be supported by a written interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 50 percent of the amount reported in Column (A).
6	Quality Improvement Organizations (QIO)	Line 6 – Quality Improvement Organizations (QIO).--Enter in Column (A) the total computable amount of expenditures associated with medical and utilization reviews performed by an approved QIO under a contract entered into under §1902(d). The MBES will automatically enter in Columns (B) and (D) 75 percent of the amount reported in Column (a).
7A	TPL - Recovery Procedure	Line 7.A - Third Party Liability Recovery (OFFSETS) can be positive or negative. Line 7.A - Third Party Liability Recovery Procedure - Billing Offset.--Enter in Column (a) the total computable amount of the billing for the third party liability recovery procedure. Enter in Columns (d) and (f) 50 percent of the amount reported in Column (a). NOTE: CMS recognizes your claim on the finalization of expenditures on the next grant award and makes a funding adjustment to collect your share of the billing. For example, SSA bills CMS \$10,000 for you. The Federal share claimed by you is \$5,000. CMS approves the \$5,000 claim but enters a negative \$10,000 funding adjustment, in effect recovering your share of the billing. (See '2500.) If you pay the bill, the recovery procedure is not used. Report payments as Other Financial Participation on Line 15. of Form CMS-64.10.
7B	TPL - Assignment Of Rights	Line 7.B - Assignment of Rights-Billing Offset.--Enter in Column (a) the total computable amount of the billing for the assignment of rights. The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column (a). See note for Line 7.A.

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8	Immigration Status	Line 8 - Immigration Status Verification System Costs.--Enter in Column (a) the total computable amount of the reasonable and necessary expenditures directly attributable to the immigration status verification system described in §1137 of the Act in accordance with the allocation methodology approved by the RO. Only reasonable and necessary, direct and indirect, costs of activities directly related to the exchange of information necessary to verify Immigration and Naturalization Service (INS) is reimbursed at 100 percent. The MBES will enter in Column (f) the amount reported in Column (a). NOTE: Reimbursement at 100 percent FFP is available only for expenditures incurred on or after October 1, 1987.
9	Nurse Aide Training Costs	Line 9 - Nurse Aide Training and Competency Evaluation Programs Costs.--Enter in Column (a) the total computable amount of expenditures for nurse aide training and competency evaluation program costs. The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column (a).
10	Preadmission Screening	Line 10 - Preadmission Screening Costs.--Enter in Column (a) the total computable amount of expenditures for preadmission screening costs. The MBES will automatically enter in Columns (c) and (f) 75 percent of the amount reported in Column (a).
11	Resident Review	Line 11 - Resident Review Activities Costs.--Enter in Column (a) the total computable amount of expenditures for resident review activities costs. The MBES will automatically enter in Columns (c) and (f) 75 percent of the amount reported in Column (a).
12	Drug Use Review	Line 12 - Drug Use Review Program.--Enter in Column (a) the total computable amount of expenditures for drug use review program costs. The MBES will automatically enter in Columns (c) and (f) 50 percent of the amount reported in Column (a).
13	Outstationed Eligibility	Line 13 - Outstationed Eligibility Workers.--Enter in Column (a) the total computable amount of expenditures for outstationed eligibility workers. The MBES will automatically enter in Columns (c) and (f) 50 percent of the amount reported in Column (a).
14	TANF Base	Line 14 - TANF Base Allocation 90% matching Line 14 is the total computable and Federal share (90%) costs for Medicaid administrative Temporary Assistance for Needy Families (TANF) activities allowable against the base allocation. (See Federal Register notice MB-103-NC, May 14, 1997.) (see below for instructions.)
15	TANF Secondary 90%	Line 15 - TANF Secondary Allocation 90% matching Line 15 is the total computable and Federal share (90%) costs for Medicaid administrative TANF activities allowable at the 90% Federal share rate against the secondary allocation. (See Federal Register notice MB-103-NC, May 14, 1997.) (see below for instructions)

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16	TANF Secondary 75%	Line 16 - TANF Secondary Allocation 75% matching Line 16 is the total computable and federal share (75%) costs for Medicaid administrative TANF activities allowable at the 75% Federal share rate against the secondary allocation. (See Federal Register notice MB-103-NC, May 14, 1997.) (see below for instructions) STATE REPORTING OF EXPENDITURES AND BUDGET PROJECTIONS RELATING TO \$500 MILLION ENHANCED FEDERAL MATCHING FUND States must include and report all allowable TANF expenditures on lines 14, 15, or 16, TANF BASE or SECONDARY ALLOCATIONS, of the Form CMS-64.10. Include and enter the total computable portion in either column A B and/or C and the Federal share will be computed in column B C and/or D.
17	External Review	Line 17 - External Quality Reviews.-- Enter in column (a) the total computable amount of any expenditures attributable to the performance of independent external reviews conducted under section 1932(c)(2). Section 4705 (b) of the Balanced Budget Act of 1997 (BBA) created this 75% matching category. Line 17 is the total computable and Federal share (75%) costs attributable to the performance of independent external reviews of Medicaid managed care activities conducted under section 1932(c)(2). (See section 1903(a)(3)(C)(ii).) The MBES will automatically enter in Columns (c) and (f) 75 percent of the amount reported in Column (a).
18	Enrollment Brokers	Line 18 – Enrollment Brokers. --Enter in column (a) the total computable amount of expenditures attributable to enrollment brokers. Section 4707 (b) of the Balanced Budget Act of 1997 (BBA) established some criteria that must be met to claim expenditures for enrollment brokers. Line 18 is the total computable and Federal share (50%) amounts expended on or after October 1, 1997 for the use of an enrollment broker in marketing Medicaid managed care organizations and other managed care entities to eligible individuals under title XIX. (See section 1903(b)(4).) The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column (a).
19	School Based Administration	Line 19 – School Based Administration – Enter in Column (A) the total computable school-based Medicaid administrative costs incurred under the authority of an approved Medicaid Administrative Claiming Plan as required in the Claiming Guide issued by CMS in May 2003. These costs must be supported by a written interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 50 percent of the amount reported in Column (A)
20	Program Integrity/Fraud, Waste, and Abuse Activities	Line 20 – Program Integrity / Fraud, Waste, and Abuse Activities – Enter in Column (A) the total computable administrative expenses for program integrity administration costs. These costs include activities of the Surveillance and Utilization Review Units or other similar units of the State Agency. These costs may also include the costs of special provider audits (does not include routine audits of providers for cost-settlement purposes), data mining, and other administrative and legal costs related to program integrity activities. Any costs incurred by public agencies other than the single State Agency must be supported by an interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 50 percent of the amount reported in Column (A).

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21	County/Local ADM Costs	Line 21 – County / Local Administration Costs - Enter in Column (A) the total computable Medicaid administrative costs of a county or other local public agency. These costs must be in accordance with cost principles contained in OMB Circular A-87 and must be supported by a written interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 50 percent of the amount reported in Column (A).
22	Interagency Costs (State Level)	Line 22 – Interagency Costs (State Level) - Enter in Column (A) the total computable Medicaid administrative costs of a state-level public agency other than the Single State Agency. These costs must be in accordance with cost principles contained in OMB Circular A-87 and must be supported by a written interagency agreement in accordance with 45 CFR 95.507(b)(6). The MBES will automatically enter in Columns (B) and (D) 50 percent of the amount reported in Column (A).
23	Translation and Interpretation	Line 23 – Translation and Interpretation Translation may be allowable as an administrative activity if it is not included and paid for as part of a direct medical service and if it is necessary for the proper and efficient administration of the State plan. However, in order for translation to be claimable as administration, it must be provided either by separate units or separate employees performing solely translation activities and it must facilitate access to Medicaid covered services.
24	Health Information Technology Administration	Line 24 - Health Information Technology Administration: Health Information Technology - Administration: (Section 4201: ARRA) Medicaid provider HIT Adoption and Operation Payments:
24A	HIT: Planning: Cost of In-house Activities	Line 24A - HIT: Planning: Cost of In-house Activities. Planning Activities for administrative expenses to oversee the Medicaid EHR incentive payments made to eligible providers: Enter in Column (A) the total computable amount of expenditures directly attributable to the design, development, and installation of the planning activities related to the administration of the Medicaid EHR incentive payment program. The MBES will automatically enter in Columns (B) and (D) 90 percent of the amount reported in Column (A).
24B	HIT: Planning: Cost of Private Contractors	Line 24B - HIT: Planning: Cost of Private Sector Contractors. Planning Activities for administrative expenses to oversee the Medicaid EHR incentive payments made to eligible providers: Enter in Column (A) the total computable amount of expenditures directly attributable to the design, development, and installation of the planning activities related to the administration of the Medicaid EHR incentive payment program. The MBES will automatically enter in Columns (B) and (D) 90 percent of the amount reported in Column (A).
24C	HIT: Implementation and Operation: Cost of In-house Activities	Line 24C - HIT: Implementation and Operation: Cost of In-house Activities - Implementation Activities for administrative expenses to oversee the Medicaid EHR incentive payments made to eligible providers: Enter in Column (A) the total computable amount of expenditures directly attributable to the design, development, and installation of the planning activities related to the administration of the Medicaid EHR incentive payment program. The MBES will automatically enter in Columns (B) and (D) 90 percent of the amount reported in Column (A)

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24D	HIT: Implementation and Operation: Cost of Private Contractors	Line 24D - HIT: Implementation and Operation: Cost of Private Contractors - Implementation Activities for administrative expenses to oversee the Medicaid EHR incentive payments made to eligible providers: Enter in Column (A) the total computable amount of expenditures directly attributable to the design, development, and installation of the planning activities related to the administration of the Medicaid EHR incentive payment program. The MBES will automatically enter in Columns (B) and (D) 90 percent of the amount reported in Column (A).
24E	HIT – Incentive Payments – Eligible Professionals	Line 24E - HIT Incentive Payments - Eligible Professionals - Section 4201 of ARRA provides for 100% Federal Share match for EHR (Electronic Health Records) Incentive Payment for Eligible Professions. These professionals sub-classified on the 64.10 are PHYSICIANS, PEDIATRICIANS, NURSE-PRACTITIONERS, CERTIFIED NURSE-MIDWIVES, DENTISTS, and PHYSICIANS ASSISTANTS.
24F	HIT – Incentive Payments – Eligible Hospitals	Line 24F - HIT Incentive Payments - Eligible Hospitals Section 4201 of ARRA provides for 100% Federal Share match for EHR (Electronic Health Records) Incentive Payment for Eligible Hospitals.
25	Citizenship Verification Technology - CHIPRA	Line 25 - Citizenship Verification Technology (Section 211 CHIPRA)
25A	CVT Development - CHIPRA	Line 25A - CVT Development (Section 211 CHIPRA)--Enter in Column (a) the total computable amount of expenditures for the design, development, or installation of Citizenship Verification technology. The MBES will automatically enter in Columns (b) and (e) 90 percent of the amount reported in Column (a).
25B	CVT Operation - CHIPRA	Line 25B - CVT Operation (Section 211 CHIPRA)--Enter in Column (a) the total computable amount of expenditures for the operation of Citizenship Verification technology. The MBES will automatically enter in Columns (b) and (e) 75 percent of the amount reported in Column (a).
26	Planning for Health Homes for Enrollees with Chronic Conditions	Line 26 - Planning for Health Homes for Enrollees with Chronic Conditions - Planning activities for the development of a health home SPA
27	Recovery Audit Contractors State Administration	Line 27 - Recovery Audit Contractors State Administration - Section 1902(a)(42)(B)(ii)(IV)(aa) of the Act provides that amounts spent by a State to carry out the administration of the program are to be reimbursed at the 50 percent administrative claiming rate.

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28A	Design Development/Installation of Medicaid Elig. Determ. Sys. – Cost of In-house Activities	<p>Line 28A - Design Development/Installation of Medicaid Eligibility Determination System – Cost of In-house Activities Plus Other State Agencies And Institutions.--Enter in Column (a) the total computable amount of expenditures directly attributable to the design, development, installation, or enhancement of the Medicaid Eligibility Determination System.</p> <p>The MBES system will provide a POP-UP APD selection list of all approved MMIS APD's that are on a table maintained by Central Office. Total Computable should be entered in either column E of the table. The Federal Share will be calculated at the rate that APD has assigned to it.</p>
28B	Design Development/Installation of Medicaid Elig. Determ. Sys. – Cost of Private Sec. Contractors	<p>Line 28B - Design Development/Installation of Medicaid Eligibility Determination System – Cost of Private Sector Contractors -- Enter in Column (a) the total computable amount of expenditures for the costs of private sector contractors directly attributable to the design, development, installation, or enhancement of the Design Development/Installation of the Medicaid Eligibility Determination System.</p> <p>The MBES system will provide a POP-UP APD selection list of all approved MMIS APD's that are on a table maintained by Central Office. Total Computable should be entered in either column E or F of the table. The Federal Share will be calculated at the rate that APD has assigned to it.</p>
28C	Operation of an Approved Medicaid Eligibility Determination Systems – Cost of In-house Activities	<p>Line 28C - Operation of an Approved Medicaid Eligibility Determination System – Cost of In-house Activities Plus Other State Agencies And Institutions. --Enter in Column (a) the total computable amount of expenditures directly attributable to the operation of the Medicaid Eligibility Determination System.</p> <p>The MBES will automatically enter in Columns (b) and (d) 75 percent of the amount reported in Column (a).</p>
28D	Operation of an Approved Medicaid Eligibility Determination Sys. – Cost of Private Sec. Contractors	<p>Line 28D - Operation of an Approved Medicaid Eligibility Determination System. – Cost of Private Sector Contractors. --Enter in Column (a) the total computable amount of expenditures for the costs of private sector contractors directly attributable to the design, development, installation, improvement, or operation of a Medicaid Eligibility Determination System not approved under Medicaid Eligibility Determination System procedures.</p> <p>The MBES will automatically enter in Columns (b) and (d) 75 percent of the amount reported in Column (a).</p>
28E	Eligibility Determination Staff – Cost of In-House Activities	<p>Line 28E - Eligibility Determination Staff- Cost of In-House Activities- Enter in column (a) the total computable amount of expenditures for the costs of in house eligibility determination staff performing application, on-going case maintenance and renewal activities. The MBES will automatically enter in columns (b) and (d) 75% of the amount reported in Column (a). States must have an approved APD for this line item to be active and Total Computable Expenditures claimed.</p>

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28F	Eligibility Determination Staff – Cost of Private Sector Contractors	Line 28F - Eligibility Determination Staff- Private Sector Contractors- Enter in column (a) the total computable amount of expenditures for the costs of contractor staff, including allocations from a State Based Marketplace, performing application, on-going case maintenance and renewal activities. The MBES will automatically enter in columns (b) and (d) 75% of the amount reported in Column (a). States must have an approved APD for this line item to be active and Total Computable Expenditures claimed.
28G	Eligibility Determination Staff – Cost of In-House Activities – 50% FFP	Line 28G - Eligibility Staff- Cost of in house activities- Enter in column (a) the total computable amount of expenditures for the costs of in-house staff performing policy, outreach and post-eligibility activities. The MBES will automatically enter in columns (b) and (d) 50% of the amount reported in Column (a).
28H	Eligibility Determination Staff – Cost of Private Sector Contractors – 50% FFP	Line 28H - Eligibility Staff- Cost of Private Sector Contractors- Enter in column (a) the total computable amount of expenditures for the costs of contractor staff, including allocations from a State Based Marketplace, performing policy, outreach and post-eligibility activities. The MBES will automatically enter in columns (b) and (d) 50% of the amount reported in Column (a).
29	Non-Emergency Medical Transportation	<p>Line 29 - Non-Emergency Medical Transportation. - (see 42CFR431.53; 440.170; 440.170(a); 440.170(a)(4))--A ride, or reimbursement for a ride, provided so that a Medicaid beneficiary with no other transportation resources can receive services from a medical provider. (NEMT does not include transportation provided on an emergency basis, such as trips to the emergency room for life-threatening situations.)</p> <p>NOTE: Transportation provided via the State is consider an administrative cost and should be reported on the form CMS-64.10.</p>
49	Other Financial Participation	<p>Line 49 - Other Financial Participation Line --Enter in Column (a) the total computable amount of other administrative expenditures necessary for the proper and efficient administration of the State plan, and the total computable amount of training cost of personnel other than skilled professional medical personnel and their direct supporting staff, personnel involved in the operation of an approved MMIS, and personnel involved in family planning.</p> <p>NOTE: Drug implementation costs are no longer matched at an enhanced rate and will be reported as Other Financial Participation at 50 percent.</p> <p>The MBES will automatically enter in Columns (d) and (f) 50 percent of the amount reported in Column A.</p>
50	Total	Line 50 - Total.—The MBES automatically enters the sum of Columns (a) - (f) for each of the line items 1 through 49.