EXHIBIT 1: 1915(c) Rate Methodology and Performance Measure Technical Assistance (TA) Request Form

Introduction: This form is reserved for State Medicaid Agency employees. Rate Methodology and Performance Measure TA is available to states for 1915(c) Waiver Application submissions. Please complete this form in its entirety and e-mail it to HCBSRATETA@Guidehouse.com. Once the request is submitted, Lewis and Ellis / Guidehouse or Korn Ferry (the Rate Review Contractors) will contact the state to discuss the details of the request.

·			
Contact Information (*are required information)			
*First Name:			
*Last Name:			
*Organization / Agency Name:			
Title:			
*Phone Number:			
*E-mail Address:			
TA Topic (Select all that apply) ☐ Request review of proposed language for 1915(c) Waiver Application, Appendix I ☐ Request assistance with developing QIS performance measures (specify which Appendices in "Other" below) ☐ Request review of proposed health and welfare language for 1915(c) Waiver Application, Appendix G-1 ☐ Request review of proposed language for 1915(c) Waiver Application, Appendix J ☐ Request a review of rate methodology and/or waiver service rate models ☐ Request assistance with the CMS Cost Factors and Rate Assumptions Template ☐ Request guidance regarding rate review and rate sufficiency strategies and activities ☐ Other			
If Other, provide a brief description here:			
Additional Requested Information			
1. Please provide a detailed description of the state's TA request.			

2. What is your state's preferred timeline for completing the TA?

3.	Have you explored any TA or resources available from a national association regarding this request?		
	Yes	□ No	
4.	If yes, please provide the name of the association(s) and a brief description of the TA are or resources received.		