MC-Review State User Manual

Updated: January 17, 2024

Purpose and scope

What is MC-Review

Managed Care Review (MC-Review) is an online managed care submission portal that streamlines and standardizes the submission of managed care health plan contracts and rates for states and facilitates CMS' intake and review of those submissions.

MC-Review replaces the need for states to complete the Contract and Rate Certification Cover Sheet document, as the information is collected through the online submission form instead.

What types of submissions and documents can be submitted in MC-Review

You can use MC-Review to submit Medicaid and CHIP managed care health plan contracts and rates to CMS. This portal accepts:

- Base contracts and amendments to base contracts
- Rate certifications and rate amendments
- Required supporting documents related to the above

Not accepted through MC-Review at this time:

- State directed preprints
- Rate-only submissions
- Submissions for programs related to dual-eligible beneficiaries, including Program of All-Inclusive Care for the Elderly (PACE), dual demonstration contracts, and Dual Eligible Special Needs Plans (D-SNPs)
- Non-health plan submissions such as External Quality Review Organization (EQRO), enrollment broker, and dual demonstration contract

Access and settings

How to access MC-Review to view or submit a submission

You can access MC-Review at https://mc-review.onemac.cms.gov/. You must have an account in order to use MC-Review. See section, "How to add or create a new user account" for more information.

We recommend accessing MC-Review through the following web browsers:

- Chrome
- Safari
- Edge
- Firefox

The current and previous two versions of these browsers are supported by MC-Review. While MC-Review may work on other browsers and versions, other browsers including Internet Explorer and Opera are not actively supported.

We recommend that you access MC-Review on a laptop or desktop, as mobile phones and tablets may not provide an optimal experience.

How to add or create a new user account

In order to create a user account to log in and access MC-Review, you must sign up through CMS's Identify Management (IDM) System. The IDM System provides the means for users to be approved to access MC-Review and many other CMS systems and applications. IDM governs access to CMS systems by managing the creation of user IDs and passwords, setting up multi-factor authentication (MFA), and the assignment of roles within CMS applications.

If you already have an IDM account, you simply need to submit a request for a state user account for MC-Review. Once your account creation request has been approved, you can log in with your IDM credentials to MC-Review at https://mc-review.onemac.cms.gov/.

For detailed information on how to log in to IDM and create a user account, please refer to the Identity Management System Instructions for State Users Guide.

User types and permissions

Currently, permissions for state users are the same for all users across a state.

As a state user, you can create new submissions for your state. You can also view, edit, or submit any submissions that you *or any other user in your state* has created.

You can have as many state user accounts in your state as needed. There is no limit on state user accounts per state.

How to request access be revoked for a user

If an individual with a user account for your state should no longer have access to MC-Review, you can request the account access be revoked by emailing mc-review-team@truss.works. Please include the name and email address of the user in your request.

Outside of ad hoc requests for user permissions to be revoked, the MC-Review Team will annually work with state staff to confirm and recertify the list of individuals with state user accounts to ensure the right individuals continue to have access.

Creating, submitting, viewing, and editing submissions

Creating a new submission

To create a new submission in MC-Review, log into your state dashboard by visiting https://mc-review.onemac.cms.gov/dashboard and selecting the "Start new submission".
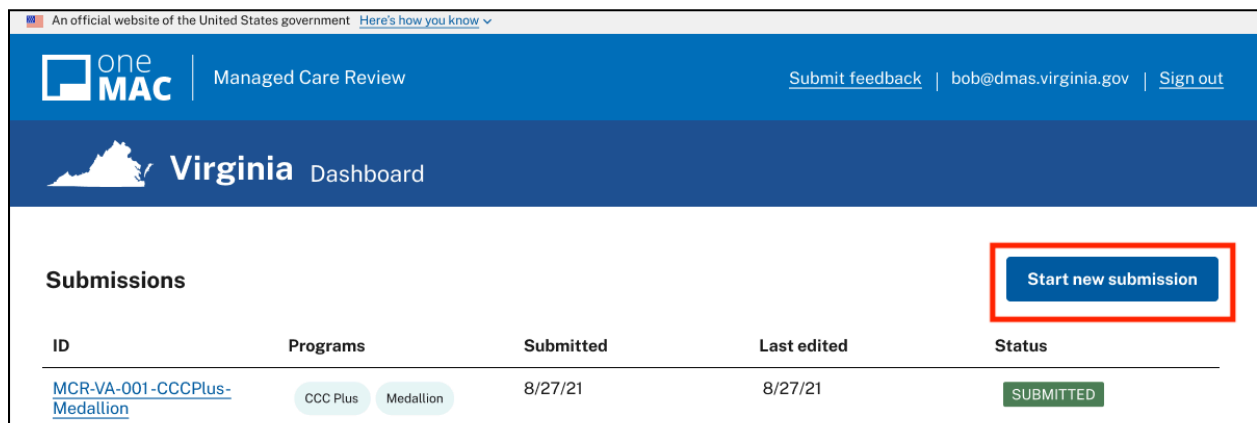
The number of sections in the submission form that you will be required to complete prior to submitting will depend on the type of submission you are making to CMS.

The submission form includes the following sections:

- Submission type (required for all submissions)
- Contract details (required for all submissions; all submissions must include an executed or unexecuted contract)
- Rate details (only required for contract actions that require new or amended rate certifications)
- Contacts (required for all submissions)
- Supporting documents (optional)

Saving a draft submission

You do not need to complete the entire submission form at one time. You can start a submission, save it as a draft, and revisit it later. (Draft submissions cannot be viewed by CMS.)

In order to save a submission to return to it later, you must at a minimum complete the first page of the submission form: the "Submission type" page.

Once you complete the "Submission type" page, you can save your submission as a

draft from any other page of the submission form by selecting "Save as draft" on the bottom left of the screen.
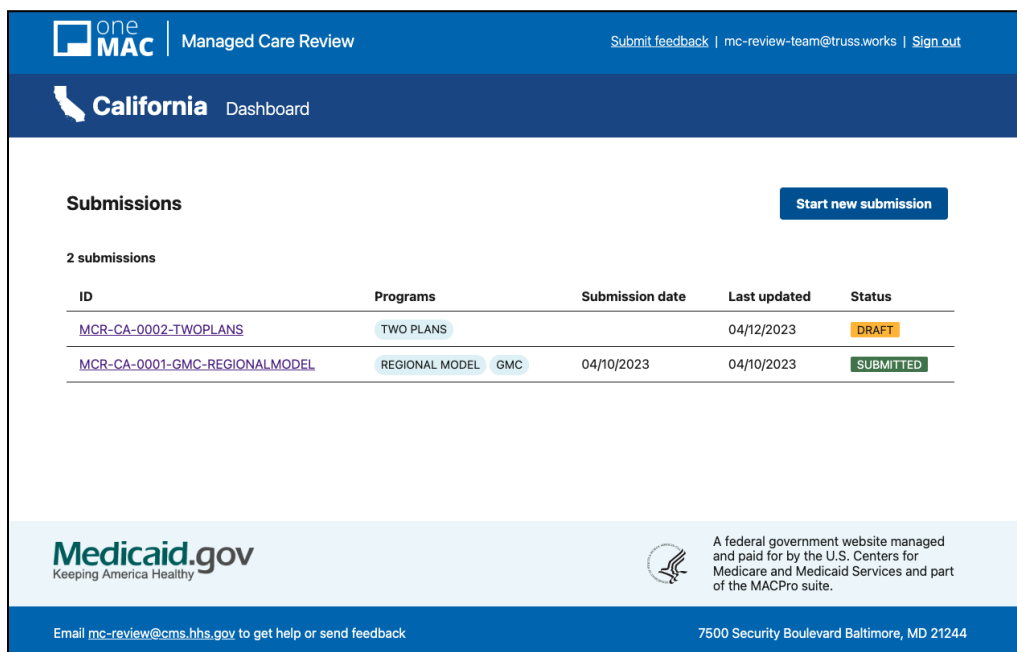
If you exit the application without saving, your submission will be saved automatically and will be available as a draft on your state dashboard.

ID	Programs	Submission date	Last updated	Status
MCR-CA-0002-TWOPLANS	TWO PLANS		04/12/2023	DRAFT

At this time, each page of the submission form must be filled out sequentially. This means you will be required to fill out information in the first sections of the form to progress to subsequent sections. However, states may fill out the form with placeholder information and go back to previous for editing while in draft mode at any time.

Viewing and finding submissions in MC-Review

Once a submission is created, it will be available for viewing on your state dashboard at https://mc-review.onemac.cms.gov/dashboard. Regardless of who started the submission, all draft or submitted submissions in your state will appear on the dashboard.

Collaborating on or sharing a draft submission

If you would like to collaborate on completing the submission form, all collaborators must have accounts in MC-Review. Once a user has an account in your state, they will be able to view, modify, or submit a draft submission in MC-Review.

For the best experience, we recommend that each user editing a submission in MC-Review does so one at a time. MC-Review is not optimized for multiple users to edit the same submission simultaneously.

Selecting your managed care state programs

When making a submission in MC-Review, you will be required to select from a pre-set list which managed care state programs are applicable to your contract action on the "Contract details" page, and which programs are applicable to your rate certifications on the "Rate details" page.

If you do not see the correct state programs in these lists, contact the help desk at MC_Review_HelpDesk@cms.hhs.gov with the name of the state program and the action to be taken (i.e. to add the program, remove the program, or edit the name of an existing program).

State programs will **not** appear in the pre-set list if their corresponding submission types are out of scope (see section, "What types of submissions and documents can be submitted in MC-Review".)

Uploading submission documents to MC-Review

You will upload documents to MC-Review as part of your submission. Unless otherwise specified, the following document types are accepted: csv, doc, docx, pdf, xls, xlsx, pdf.

There are no file size limitations for the files you upload.

Upon upload, all documents will go through a security scan for viruses or security vulnerabilities. The security scan process can take several seconds or even up to a minute, depending on the file size.

If your files are failing security scan in error or you are experiencing upload errors, contact the help desk at MC_Review_HelpDesk@cms.hhs.gov.

Submitting to CMS in MC-Review

After completing all required sections of the submission form, you have an opportunity to review the entire submission prior to submitting on the "Review and submit" page.

Here you can easily revisit previous sections of the form and edit.

Once you have verified that all information has been entered correctly, you will select "Submit" at the bottom of the page.

After a submission has been submitted to CMS, it will be locked for editing. To make changes to the submission, you can contact CMS (via your primary CMS contact or MCOGDMCOActions@cms.hhs.gov) and request they unlock the submission.

All state contacts listed on the submission will receive a confirmation email that the submission was sent.

The confirmation email will contain a direct link to the submission and basic details about the submission, including the **submission ID** and the **rate name** for any rate

packages, which CMS will use to reference your submission. (You can also view the submission ID and rate name by revisiting the submission from your dashboard at (https://mc-review.onemac.cms.gov/dashboard.)

How to submit draft, partial, and unexecuted submissions

Partial and incomplete submissions

CMS requires that states submit complete submissions, per the requirements identified in the Medicaid Managed Care Rate Development Guide and the

State Guide to CMS for Medicaid Managed Care Contract Review and Approval.

This means states must complete all required sections of the submission form. This also means states must upload final contracts and signed rate certifications, if applicable, and any required supporting documentation into MC-Review prior to submitting. CMS will accept contracts that are final but unexecuted through MC-Review. **No draft or partial submissions will be accepted.**

Draft and/or unexecuted contracts

While CMS may occasionally conduct preliminary review of draft contracts under certain special circumstances, draft contracts for preliminary review should **not** be submitted through MC-Review.

CMS **will** accept contracts that are final but unexecuted through MC-Review. When submitting an unexecuted contract, you should select "unexecuted by some or all parties" for the "Contract Status" the Contract Details section of the submission form.

Please note: if you have submitted an unexecuted contract, **you will be required to upload an executed contract before the submission can be approved by CMS**.

When you are ready to submit the executed contract, you must request for CMS to unlock your submission for editing. Once it is unlocked, you can remove the unexecuted contract and add the executed copy in its place. You should also update the "Contract Status" to be "fully executed". (See section below on "Making Edits to a Submission" for more information.)

Filling out the submission form

Submission description examples

Example #1

This amendment revises calendar year (CY) 2019 capitation rates, adds new language concerning capitation payments related to a program no longer authorized by law, and changes the requirement that the MCO pay or deny clean paper claims within thirty (30), rather than twenty-one (21) calendar days of receipt.

Example #2

Amendment 8 adds SUPPORT Act DUR provisions effective 10/1/19; reinvestment account language to comply with Nebraska Rev. Stat §71-831; and a high cost drug pool risk corridor. This amendment also modifies the capitation rates; the capitation rate determination process; administrative expense rate calculation time frames; the CY 20 Quality Performance Program measures; and general reporting requirements to remove duplicates.

Effective date guidance

Contract effective dates

These dates should reflect the full length of your initial base contract, which may span multiple years.

Amendment effective dates

These dates should reflect the length of your contract amendment, which could be for a subset of your base contract, for the entire remaining length of the base contract, or an extension beyond the original end date of your base contract.

Rate certification type definitions

New rate certification

This should be selected for all rate certifications for initial base contracts and rate certifications for required annual rate updates. If you do not have existing rates for the 12-month rating period on your certification, it is considered new.

Amendment to prior rate certification

This should be selected for any rate certifications that are making changes to capitation rates in your current 12-month rating period.

Document definitions and requirements

Required documents for contract action and rate certification submissions

- **Base contract**
  - **Definition:** The final language agreed to by all parties.
  - **Regulatory reference:**
    - Medicaid: § 438.3(a)
    - CHIP: § 457.1201
- **Contract amendment**
  - **Definition:** The final language agreed to by all parties for a change to the base contract.
  - **Regulatory reference:**
    - Medicaid: § 438.3(a)
    - CHIP: § 457.1201
- **Contract appendix**
  - **Definition:** All appendices and attachments to the contract document. Please note: Adding a new appendix during the course of a contract period requires an executed "amendment to base contract" submission.
  - **Regulatory reference:** 11.8.2019 CMCS Informational Bulletin

- **Rate certification**
    - **Definition:** The actuary's certification of the rates or rate ranges, along with the report from the actuary describing the development of the rates or rate ranges.
    - **Regulatory reference:** Medicaid: § 438.7
- **Signature pages**
    - **Definition:** Contract pages that are signed and dated by all parties. These can be part of the base contract/contract amendment document, or can be attached separately.
    - **Regulatory reference:**
        - Medicaid: § 438.3(a)
        - CHIP:§ 457.1201

Required documents for contract only submissions

- **Base contract**
    - **Definition:** The final language agreed to by all parties.
    - **Regulatory reference:**
        - Medicaid: § 438.3(a)
        - CHIP: § 457.1201
- **Contract amendment**
    - **Definition:** The final language agreed to by all parties for a change to the base contract.
    - **Regulatory reference:**
        - Medicaid: § 438.3(a)
        - CHIP: § 457.1201
- **Contract appendix**
    - **Definition:** All appendices and attachments to the contract document. Please note: Adding a new appendix during the course of a contract period requires an executed "amendment to base contract" submission.
    - **Regulatory reference:** 11.8.2019 CMCS Informational Bulletin
- **Signature pages**
    - **Definition:** Contract pages that are signed and dated by all parties. These can be part of the base contract/contract amendment document, or can be attached separately.
    - **Regulatory reference:**
        - Medicaid: § 438.3(a)
        - CHIP:§ 457.1201

Supporting documents

- **Redlined contract changes/Contract change document**
    - **Definition:** States who have significant changes between one contract verizon and the next will sometimes submit redlined or contract

change documents to CMS in order to clearly outline the changes between each version.
- ○ **Required:** Optional
- ○ **Regulatory reference:** 11.8.2019 CMCS Informational Bulletin
- ○ **MC-Review category:** Contract - supporting
- **Readiness review results**
    - ○ **Definition:** The state's assessment of the ability and capacity of the managed care plan to satisfactorily perform operations/administration, service delivery, and financial management functions per 42 CFR 438.66(d)(4)(i) - (iii)
    - ○ **Required:** For all "contract action" submissions where a state implements in Medicaid 1) a new managed care program, 2) a new managed care plan not previously contracted with the state, or 3) the provision of covered benefits to new eligibility groups.
    - ○ **Regulatory reference:** Medicaid: § 438.66(d)(2)(iii)
    - ○ **MC-Review category:** Contract - supporting
- **MH/SUD Parity Analysis**
    - ○ **Definition:** Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that generally prevents group health plans and health insurance issuers that provide mental health or substance use disorder (MH/SUD) benefits from imposing less favorable benefit limitations on those benefits than on medical/surgical benefits. This analysis supports the parity of those benefits.
    - ○ **Required:** For all "contract action" submissions where a state provides any services to MCO enrollees using a delivery system other than the MCO and 1) a change in benefits provided by the MCO, PIHP, PAHP or FFS is occurring or 2) the State is contracting with a new MCO(s).
    - ○ **Regulatory reference:**
        - ■ Medicaid: § 438.3(n)(2), § 438.920
        - ■ CHIP: § 457.496(f), § 457.1201(l)
    - ○ **MC-Review category:** Contract - supporting
- **Rate development index**
    - ○ **Definition:** The rate certification must include an index that identifies the page number or the section number for each item described within this guidance. In cases where not all sections of this guidance are relevant for a particular rate certification (i.e., a rate amendment that adds a new benefit for part of the year), inapplicable sections of the guidance must be included and marked as "Not Applicable" in the index.
    - ○ **Required:** For all "contract action and rate certification" submissions. All rate certifications must be accompanied by an index and this index should also follow the structure of the most recent Rate Development Guide from CMS.
    - ○ **Regulatory reference:** § 438.7(a), § 438.7(d) Section 1. Item 1.B.v. of the Medicaid Managed Care Rate Development Guide
    - ○ **MC-Review category:** Rate - supporting

- **Accelerated rate review -- rate development summary**
  - **Definition:** In order to receive an accelerated rate review, states must submit a Rate Development Summary that includes all elements listed in the most recent Rate Development Guide from CMS.
  - **Required:** For all "contract action and rate certification" submissions where states elect to use the accelerated rate review process.
  - **Regulatory reference:** § 438.7(d) Appendix A of the Medicaid Managed Care Rate Development Guide
  - **MC-Review category:** Rate-supporting
- **Rate appendix/exhibit**
  - **Definition:** Supplementary material related to a rate certification. Appendices can be included within the rate certification itself or submitted as separate documents.
  - **Required:** For all "contract action and rate certification" submissions. All documents attached to a rate certification must be submitted.
  - **Regulatory reference:** § 438.7(a)
  - **MC-Review category:** Rate-supporting
- **MLR report**
  - **Definition:** The Affordable Care Act requires health insurance issuers to submit data on the proportion of premium revenues spent on clinical services and quality improvement, also known as the Medical Loss Ratio (MLR).
  - **Required:** For all "contract action and rate certification" submissions where states implement capitation rates for the state's annual rating period.
  - **Regulatory reference:**
    - Medicaid: § 438.74(a)
    - CHIP: § 457.1203(e)`
  - **MC-Review category:** Rate-supporting
- **Other contract documentation**
  - **Definition:** A document that relates to the contract action, but is not described by the other available document types.
  - **Required:** Optional
  - **Regulatory reference:**
    - Medicaid: § 438.3(a)
    - CHIP: § 457.1201
  - **MC-Review category:** Contract - supporting
- **Other rate documentation**
  - **Definition:** A document that relates to the rate certification, but is not described by the other available document types.
  - **Required:** Optional
  - **Regulatory reference:** § 438.7(a)
  - **MC-Review category:** Rate -supporting

Post-submission activities

Submission review and approval

Once CMS begins to review your submission, they may reach out to you via email to ask questions about your submission or to communicate approval decisions.

They will reference the submission ID or rate name when they communicate to you about your submission. These can be found on your submission and within system notification emails related to your submission.

State submission confirmation email

As CMS conducts their review, they may require additional documentation be submitted as part of your submission. If so, you will receive an email notification that your submission has been unlocked and a change has been requested. This will require you to log in and edit the submission (see section, "Making changes to a submission that has been sent to CMS" for details).

MC-Review does not yet provide updates on the status of submission review. For an update on the status of a submission review, please contact your CMS reviewer directly.

Receiving, viewing, and responding to CMS questions

CMS analysts may require the state to answer questions about the submission as they conduct their review.

Notifications about CMS questions

When CMS sends a new round of questions, all state contacts included on the submission will receive an email notification. Click "Open the submission in MC-Review to answer questions" to view and download the questions.
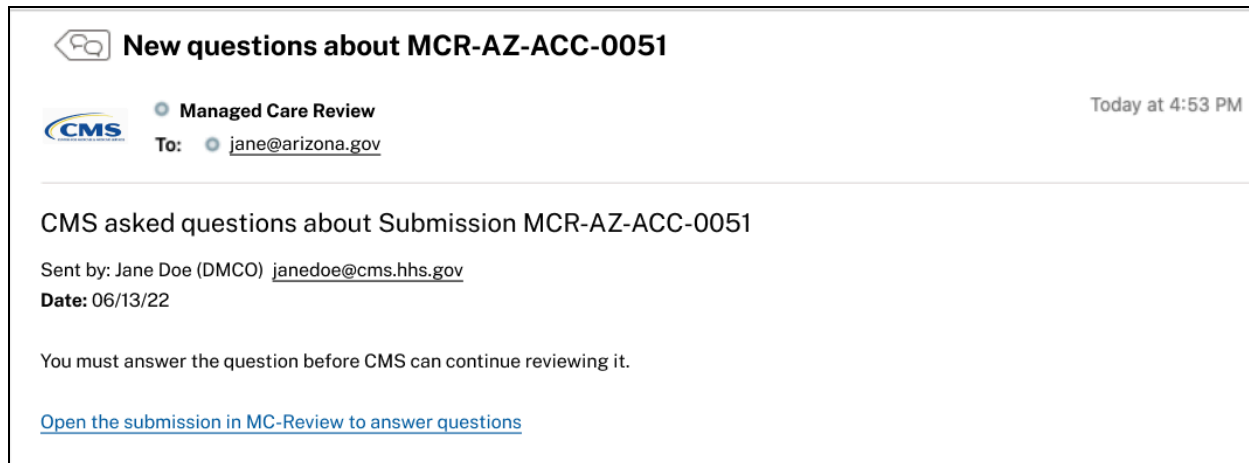
Viewing Q&A

There are two ways to view Q&A:

- **From automated notification emails:** Each notification email contains a link to view Q&A. You will be required to log in to MC-Review to view and download questions sent by CMS.

- **From the state dashboard:** Log in to MC-Review and select a submission from the dashboard: https://mc-review.onemac.cms.gov/dashboard. From the submission summary, click "Q&A" in the sidebar.

Responding to questions

To respond to a round of questions, you must upload a document containing your answers. On the submission's Q&A page, select "Upload response". This will take you to a form where you can upload your response document.

New response

Questions from DMCO

Upload response
Required
This input only accepts PDF, CSV, DOC, DOCX, XLS, XLSX, XLSM files.

Drag files here or choose from folder

0 files added

Cancel   **Send response**

You can upload your responses as a PDF, CSV, DOC, DOCX, XLS, or XLSX file. There is no limit to the number of files you can upload. Once you have uploaded all files for the round, click "Send response" to submit your response to CMS.

You can view all your responses on the submission's Q&A page.

Questions about rate certifications

CMS will continue to send questions about rates via email at this time. We will notify you when this functionality becomes available in MC-Review.

Making changes to a submission that has been submitted to CMS

Editing a submission sent to CMS

Once a submission has been submitted to CMS, it is locked for editing. CMS will unlock a submission if they require you to make changes to your submission. If you need to make a change to a locked submission, you can also request an unlock from your CMS reviewer via email or phone.

If CMS unlocks a submission, you will receive an email notifying you that the submission has been unlocked, with a description of the required changes and a direct link to go edit.

From your state dashboard (https://mc-review.onemac.cms.gov/dashboard), a submission with a status of "Unlocked" indicates the submission requires editing by the state.
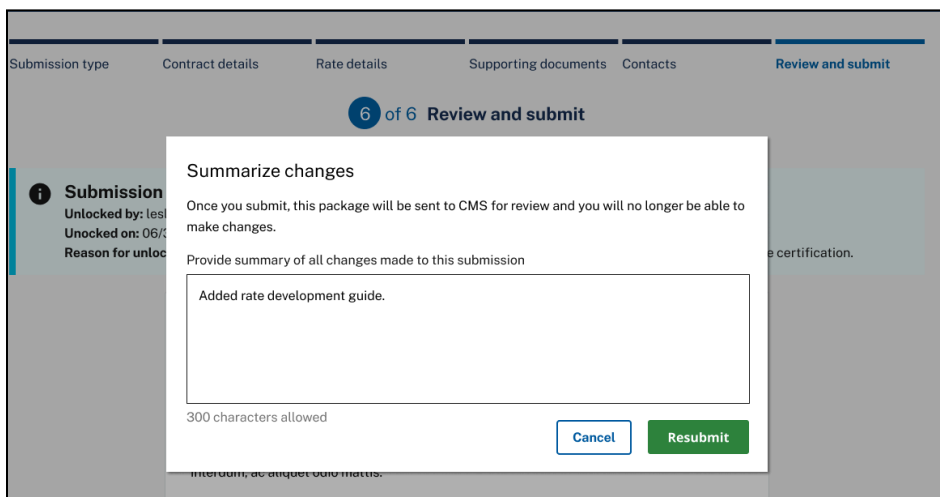
Once your submission is unlocked, you can edit any section of your submission.

When you have finished editing your submission, you will need to submit your changes to CMS by navigating through the form to the "Review and Submit" section and selecting "Submit". CMS will **not** be able to view any changes you make to a submission until you submit again.

When you submit, you will be asked to summarize the changes you made to the submission.

Once you submit your changes to CMS, the submission will be locked for editing.

Adding or replacing documents

If you are adding a document or replacing a previously submitted document on a section of the submission form, you should remove any documents that are outdated or being deprecated.

You can do this by clicking "remove" next to the file and uploading the updated version of the file. Removed documents will still be viewable in the change history but will be archived from the most current version of the submission.
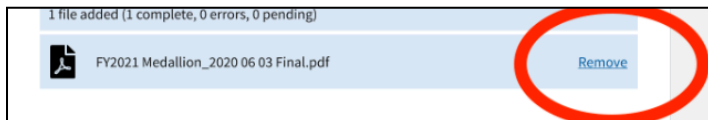
Note: If you are replacing a file or adding additional files, you may also need to update fields within the submission form itself to reflect the changes made. For example, if your rate certification needed to be revised and re-certified, you should also update the form fields on the Rate Details section with the updated information. Similarly, if your contract has been revised, you should revisit the form fields on the Contract Details page and update any previously entered information about your contract that may have changed.

Viewing the change history and previous versions of a submission

You can view the change history and any previous versions of your submission by navigating to submission and scrolling to the bottom of the page.

Submission notifications

How to update state contact information and email settings

Anyone listed as a state contact on the submission can expect to receive communications about the submission. Currently, the state contact information is set per submission, not globally for all submissions. if you need to change the state contact information for a submission, you must request that CMS unlock the submission for editing. (See section, "Making changes to a submission that has been sent to CMS" for details.)

How to rescind a submission

If you need to rescind a submission that has been submitted to CMS, please notify your CMS reviewer directly via email. Be sure to include the submission id and rate name (if applicable) in your email and the reason for rescinding.

How to delete a draft submission

There is not currently a way to delete a draft submission in MC-Review. However, all sections and form fields of a draft submission can be edited. If you have created a draft submission and it is no longer needed, you can always repurpose the draft you have started for a future submission.

CMS cannot view draft submissions.

How to print and save to PDF

If you need to print or save your completed submission to PDF, you can do so in your web browser settings. Navigate to your browser's settings menu and select print. If you would like to save the page as a PDF instead of printing, change the print destination to "Save as PDF", then click save. You should now have a PDF of your submission to share with your colleagues.
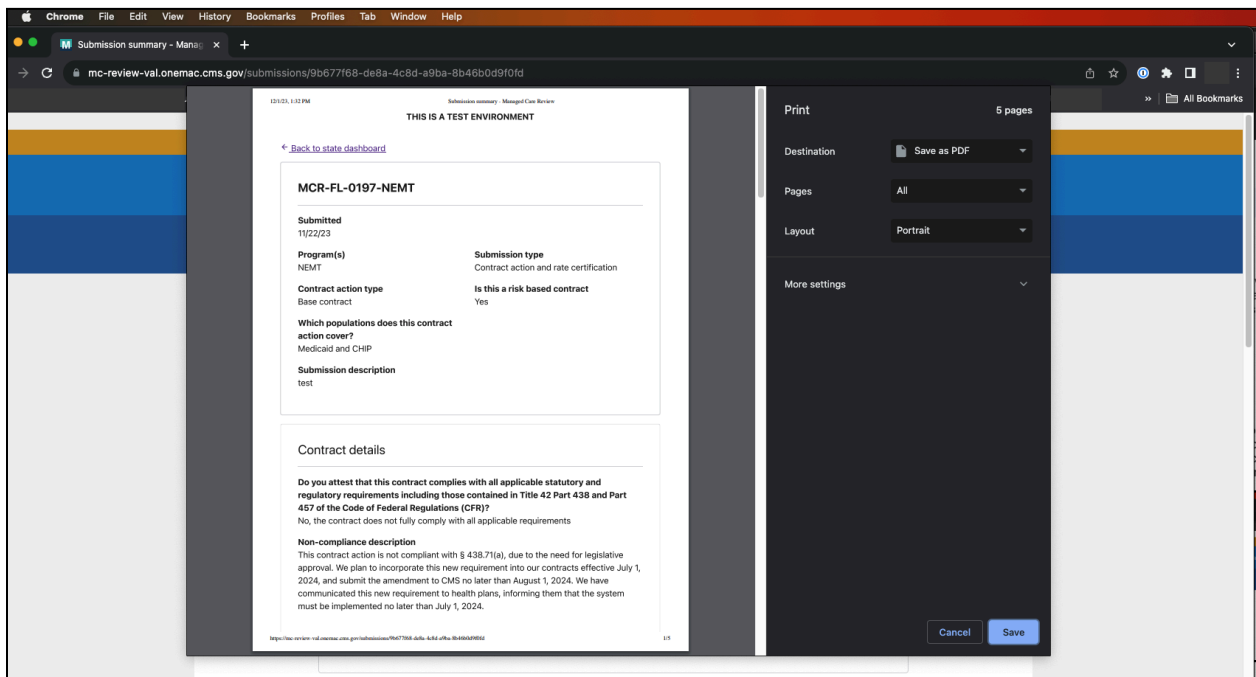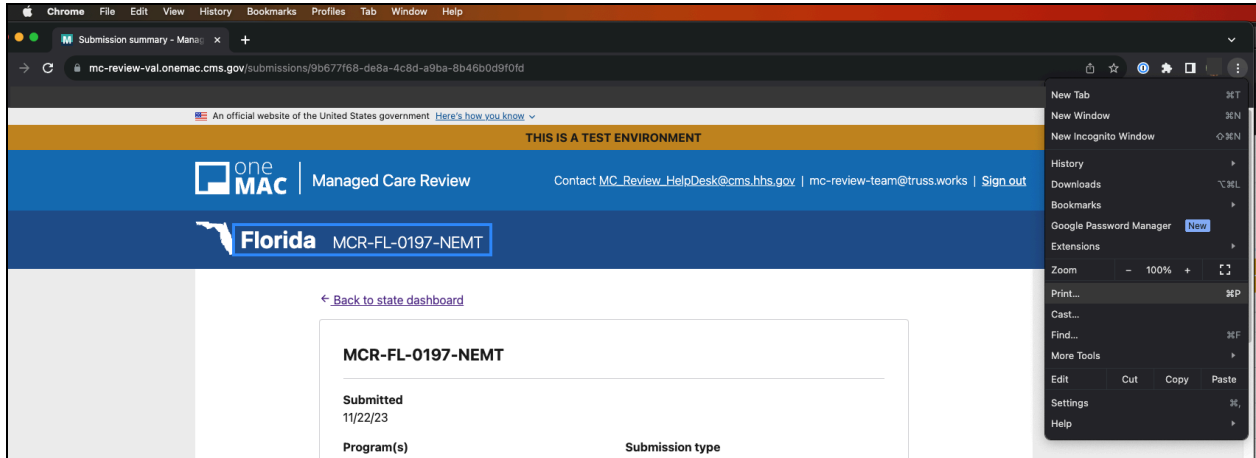
What's next

Upcoming features in MC-Review

New functionality and enhancements to current functionality will be added on an ongoing basis. Here is some of what is planned next for 2024:

- **Improved experience for submitting rate packages**: We understand that in some states, a rate package may be linked with multiple contracts a state is submitting. We will be rolling out an improved experience for how states can

submit and link rates across contracts to avoid redundant work for states and increase the clarity of your submission for your CMS reviewers.

- **Centralized CMS questions & state answers**: CMS will be able to send rounds of questions to states about a submission and states will be able to respond to those questions by uploading documents into MC-Review so that there is a centralized and transparent record.

For questions about upcoming features, to make a feature request, or to sign up for the MC-Review monthly newsletter to stay abreast of product updates, contact MC_Review_HelpDesk@cms.hhs.gov.

How to get help and give feedback

MC-Review is currently in a pilot program and is being beta tested with a subset of states. This allows us to gather feedback on what is working and not working so that we can improve the portal and ensure it meets states' needs. We'd love to hear feedback. You can send feedback to the help desk at MC_Review_HelpDesk@cms.hhs.gov or to the MC-Review team at mc-review-team@truss.works.

If you need assistance or to make changes to your submission:

- For assistance with programmatic, contractual, or operational issues, please reach out to MCOGDMCOActions@cms.hhs.gov and/or your CMS primary contact.
- For assistance on policy and actuarial issues, please reach out to MMCratesetting@cms.hhs.gov.
- For issues related to MC-Review or all other inquiries, please reach out to MC_review_HelpDesk@cms.hhs.gov.