

**Federal Reporting Requirements**  
**1115 Research and Demonstration Waiver**  
**Extension Period: December 16, 2011 – June 30, 2014**

STC #	Subject	Reporting Requirement	Due Date	Status
19.	<b>Quarterly Reports</b>	The State must submit quarterly progress reports to present the State's analysis and the status of the various operational areas under the demonstration.	▲ <b>Submit to CMS 60 days after end of quarter</b>	➤ Q4, YR6 was submitted Aug 29, 2012.
20.	<b>Annual Report</b>	The State must submit an annual report documenting accomplishments, project status, quantitative and case study findings, interim evaluation findings, utilization data, and policy and administrative difficulties in the operation of the waiver.	▲ <b>Submit Oct 1 of each year to State officials and CMS</b>	➤ Annual reports DY1-DY5 have been submitted as required. ➤ DY 6 Annual report due Oct 1, 2012.
52	<b>LIP Funds Distributed</b>	LIP funds must be expended by 06/30/2014. LIP dollars that are lost as a result of penalties or recoupment are surrendered by the State and not recoverable.	▲ <b>06/30/2014</b> – Submit to CMS	➤ Roll-over authority for DY6 and DY7 only.
53.	<b>LIP Reconciliations Finalized DY1-DY3</b>	CMS and the State will finalize DY 1, 2, and 3 reconciliations within 60 days of the acceptance of STCs.	▲ <b>03/14/2012</b> – Final LIP DY1-DY3 Recs	➤ DY1-DY3 Recs submitted but not yet finalized. ➤ 8/29/2012 - State has met it's requirement but continues to work with CMS to finalize DY1-DY3 Recs.
53.	<b>DY4 LIP Reconciliations</b>	The State must submit the LIP reconciliations for DY4 to CMS by May 31, 2012. The DY 4 reconciliations may include "as filed cost report data" but will be considered the final reconciliation.	▲ <b>05/31/2012</b> – Submit to CMS	<b>COMPLETED – 05/30/2012</b> ➤ <b>05/30/2012</b> – Submitted DY4 Summary Cost Limit Report to CMS.
53.	<b>DY5 LIP Reconciliations</b>	The State must submit the LIP reconciliations for DY5 to CMS by May 31, 2013. The DY 5 reconciliations may include "as filed cost report data" but will be considered the final reconciliation.	▲ <b>05/31/2013</b> – Submit to CMS	
53.	<b>DY6 LIP Reconciliations</b>	The State must submit the LIP reconciliations for DY6 to CMS by May 31, 2014. The DY6 reconciliations may include "as filed cost report data" but will be considered the final reconciliation.	▲ <b>05/31/2014</b> – Submit to CMS	
53.	<b>DY7 LIP Reconciliations</b>	The State must submit the LIP reconciliations for DY7 to CMS by May 31, 2015. The DY7 reconciliations may include "as filed cost report data" but will be considered the final reconciliation.	▲ <b>05/31/2015</b> – Submit to CMS	
53.	<b>DY8 LIP Reconciliations</b>	The State must submit the LIP reconciliations for DY8 by May 31, 2016. The DY8 reconciliations may include "as filed cost report data" but will be considered the final reconciliation.	▲ <b>05/31/2016</b> – Submit to CMS	

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53	Claiming LIP Payments	The State may claim LIP payments based on the existing Methodology during the 60 day reconciliation finalization period. Claims after that period can only be made on the modified final RFMD approved by <b>March 1, 2012</b> . Changes to the RFMD requested by the State must be approved by CMS and are only approved for DY 6 LIP expenditures.	▲ 03/01/2012	➤ 08/29/2012 – State continues to work with CMS to finalize the RFMD for DY6.
53	Modifications to RFMD	Any required modifications to the DY7 annual RFMD must be approved by CMS before FFP will be made available for DY7 LIP payments.	TBD – Based on comments from CMS	
53.	LIP RFMD Protocol Submission	The State shall by <b>February 1, 2012</b> and each successive February 1st of the renewal period, submit a protocol to ensure that the payment methodologies for distributing LIP funds to providers supports the goals of the LIP as described in paragraph 51 and that providers receiving LIP payments do not receive payments in excess of their cost of providing services. FFP is not available for LIP payments until the protocol is finalized and approved by CMS.	<p style="text-align: center;"><b>Revised RFMD – DY6 thru DY8</b></p> ▲ 01/31/2012 – Submitted to CMS ▲ 02/01/2013 – Submit to CMS ▲ 02/01/2014 – Submit to CMS	➤ 01/31/2012 – submitted to CMS the RFMD for DY6. ➤ 08/29/2012 – State continues to work with CMS to finalize the RFMD for DY6.
60	Aggregate LIP Funding	At the beginning of each DY, \$1 billion in LIP funds will be available to the State. These amounts will be reduced by any milestone penalties that are assessed by CMS.  <i>(Note: Penalties will be determined by Dec 31<sup>st</sup> of each DY and assessed to the State in the following DY.)</i>	TBD	➤ Releasing payments is contingent upon state shares availability.
61.a.	LIP Tier-One Milestone – Allocation of Funds and Program Development for DY7 and DY8	<p>Development and implementation of a State initiative that requires Florida to <b>allocate \$50 million</b> in total LIP funding in DY7 and DY8 to establish new, or enhance existing, innovative programs that meaningfully enhance the quality of care and the health of low income populations. Initiatives must broadly drive from the three overarching goals of CMS’ Three-Part Aim.</p> <ul style="list-style-type: none"> <li>i. Better care for individuals including safety, effectiveness, patient centeredness, timeliness, efficiency, and equity;</li> <li>ii. Better health for populations by addressing areas such as poor nutrition, physical inactivity, and substance abuse; and,</li> <li>iii. Reducing per-capita costs.</li> </ul> <p>Expenditures incurred under this program must be permissible LIP expenditures as defined under Section XIII, LIP. The State will utilize DY6 to develop the program.</p>		

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61.a.	LIP Tier-One Milestone – Program Implementation DY7-DY8	The program described above must be implemented with LIP funds allocated and expenditures incurred in DY7 and DY8.	<ul style="list-style-type: none"> <li>▲ <b>07/02/2012</b> – Post Bid Application for \$35M</li> <li>▲ <b>07/31/2012</b> – Application Due to Agency</li> <li>▲ <b>09/2012</b> – Agency to Award STC #61a funds.</li> </ul>	<b>6/27/2012</b> - \$15M will be released on quarterly basis. The distribution process is dependent on provider submission of IGTs and federal approval of RFMD for DY6, DY7 and DY8. The first distribution for DY7 is scheduled to occur October 2012.
61.b.	LIP Tier-One Milestone – Proposed Schedule for LIP Recs DY6-DY8	Timely submission of all hospital, FQHC, and CHD LIP reconciliations in the format required per the LIP RFMD protocol. The State shall submit to CMS, within 30 days from the date of formal approval of the waiver extension request, a schedule for the completion of the LIP PAS reconciliations for the 3-year extension period.	<ul style="list-style-type: none"> <li>▲ <b>01/14/2012</b> – Submit proposed schedule for LIP Tier One Milestone to CMS</li> </ul>	<b>COMPLETED – 01/14/2012</b> <ul style="list-style-type: none"> <li>➤ <b>01/14/2012</b> – Submitted proposed schedule to CMS.</li> </ul>
61.b.	LIP Tier-One Milestone – Final Schedule for LIP Recs DY6-DY8	CMS will provide comments to the State on the reconciliation schedules within 30 days. The State will submit the final reconciliation schedule to CMS within <b>60 days</b> of the original submission date.	<ul style="list-style-type: none"> <li>▲ <b>01/14/2012</b> – Submit proposed LIP reconciliation schedule for DY6-DY8</li> </ul>	<b>COMPLETED – 01/14/2012</b> <ul style="list-style-type: none"> <li>➤ <b>01/14/2012</b> – Proposed LIP DY6-DY8 schedule sent to CMS.</li> <li>➤ <b>02/27/2012</b> – CMS acceptance of proposed LIP Rec schedule for DY6-DY8.</li> </ul>
61.c.	Timely Submission of Deliverables	Timely submission of all Demonstration deliverables as described in the STCs including the submission of Quarterly and Annual Reports.	<b>If due date cannot be met, we must notify CMS in writing and request extension.</b>	<ul style="list-style-type: none"> <li>➤ <b>08/29/2012</b> – All deliverables submitted to CMS on time as of 8/29/2012.</li> </ul>
61.d.	LIP Tier-One Milestone – Reporting Templates	Development and submission of an annual “Milestone Statistics and Findings Report” and a “Primary Care and Alternative Delivery Systems Expenditure Report”. Within <b>60 days</b> following the acceptance of STCs, the State must submit templates for these reports and anticipated timelines for report submissions.	<ul style="list-style-type: none"> <li>▲ <b>03/14/2012</b> – Submit to CMS</li> </ul>	<b>COMPLETED – 03/13/2012</b> <ul style="list-style-type: none"> <li>➤ <b>02/09/2012</b> – Draft templates to CMS.</li> <li>➤ <b>02/23/2012</b> – CMS had no comments.</li> <li>➤ <b>03/13/2012</b> – Emailed final templates.</li> <li>➤ <b>03/14/2012</b> – The templates were posted to the Agency’s website.</li> </ul>
61.	Penalties Determined	Penalties will be determined by December 31 <sup>st</sup> of each DY and assessed to the State in the following DY. LIP dollars that are lost as a result of tier-one penalties not being met, are surrendered by the State.	<ul style="list-style-type: none"> <li>▲ <b>12/31/12</b> – Submit to CMS</li> <li>▲ <b>12/31/13</b> – Submit to CMS</li> </ul>	<ul style="list-style-type: none"> <li>➤ This requirement corresponds with STC #61.a.</li> </ul>
62.	LIP Tier-Two Milestones – Plan and Procedures for Health Care Initiatives	Within <b>90 days</b> following the acceptance of STCs, CMS and the State will, through a collaborative process, finalize the plan and procedures including the specific health care initiatives, investments, and activities, and the applicable standards, measures, and evaluation measures and protocols that will allow for the implementation and monitoring of tier-two milestones and evaluation of the impact of these initiatives.	<ul style="list-style-type: none"> <li>▲ <b>01/19/2012</b> – Submit draft template and protocols to CMS</li> <li>▲ <b>02/23/2012</b> – Template to 15 hospitals</li> <li>▲ <b>04/09/2012</b> – 15 Hospitals to submit 3 quality</li> </ul>	<b>COMPLETED – 04/09/2012</b> <ul style="list-style-type: none"> <li>➤ <b>01/18/2012</b> – Initial template to CMS.</li> <li>➤ <b>02/22/2012</b> – CMS approved template &amp; rev hospital submission date 04/09/2012.</li> <li>➤ <b>03/02/2012</b> –CMS held call with Hospitals to review template. Agency coordinated call.</li> </ul>

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	<b>Milestone Plan Submitted by Facilities</b>	CMS must approve the final plan and procedures which will require that tier-two facilities receiving funds in SFY 2011-2012 must submit its milestone plan <b>by March 31, 2012, including baseline data</b> and outcome targets, to meet their DY 6 (SFY 2011-2012) tier-two milestone.	<p>initiatives each that will include baseline data.</p> <ul style="list-style-type: none"> <li>▲ <b>05/09/2012</b> – CMS to notify the Agency of their approval or disapproval of the proposals.</li> <li>▲ <b>CMS Approved 6/29/2012</b></li> </ul>	<p><b>COMPLETED – 06/29/2012</b></p> <ul style="list-style-type: none"> <li>➤ <b>04/09/2012</b> – 44 received; 1 proposal under consideration for exemption.</li> <li>➤ <b>04/10/2012</b> – Initial proposals to CMS.</li> <li>➤ <b>04/27/2012</b> –proposals with Agency recommendations to CMS.</li> <li>➤ <b>05/09/2012</b> – CMS concurred with Agency’s recs, with a few proposals remaining under review.</li> <li>➤ <b>6/29/2012</b> – CMS approved all LIP Tier 2 hospital proposals.</li> </ul>
<b>80.</b>	<b>Draft Evaluation Design</b>	The State must submit to CMS for approval, within 120 days from the award of the Demonstration, a draft evaluation design.	<ul style="list-style-type: none"> <li>▲ <b>04/13/2012</b> – Submit to CMS</li> </ul>	<p><b>COMPLETED – 04/13/2012</b></p> <ul style="list-style-type: none"> <li>➤ 04/13/2012 – Submitted draft evaluation design to CMS.</li> </ul>
<b>81.</b>	<b>Final Evaluation Design/ Implementation</b>	CMS shall provide comments on the draft design within 60 days of receipt, and the State shall submit a final design within 60 days of receipt of CMS’s comments.	<ul style="list-style-type: none"> <li>▲ <b>08/11/2012</b> – Submit to CMS</li> </ul>	<p><b>COMPLETED – 08/09/2012</b></p> <ul style="list-style-type: none"> <li>➤ Received CMS comments on the draft evaluation on June 12, 2012.</li> <li>➤ <b>08/09/2012</b> – Submitted final evaluation design to CMS as required.</li> </ul>