



CIVIL MONEY PENALTY REINVESTMENT PROGRAM STATE PLAN & PROJECT TRACKING HANDBOOK





Introduction

The Civil Money Penalty Reinvestment Program (CMPRP) State Plan and Project Tracking Handbook serves as a comprehensive guide for state agencies, healthcare providers, and stakeholders involved in administering and implementing CMP reinvestment activities. This handbook provides essential information, regulatory guidance, and practical tools to ensure effective utilization of CMP funds for improving nursing home care quality and protecting resident safety. Whether you are a state program administrator developing your annual State Plan, a healthcare provider seeking funding for quality improvement initiatives, or a stakeholder interested in understanding the program's impact, this handbook provides the essential information and tools needed to navigate the program effectively.

This handbook addresses the critical need for consistent, compliant, and effective management of CMP funds by providing a comprehensive framework that includes regulatory explanations of federal requirements under 42 CFR §488.433(e), step-by-step administrative guidance for plan development and reporting, proven best practices for project implementation, integrated compliance tools such as templates and monitoring frameworks, and a strong quality improvement focus that transforms civil money penalties into positive investments benefiting nursing home residents. This integrated approach ensures states have both the regulatory foundation and practical tools necessary to maximize CMP fund benefits while maintaining full compliance with federal requirements and accountability standards.

For questions about this handbook and the CMPRP, please contact the CMS CMPRP Team at CMP-info@cms.hhs.gov.

For questions regarding a State's State Plan, please contact the designated State Agency CMPRP representative for more information. See the "State Agency CMPRP Contacts" section for contact details.



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Background



Regulatory Framework –
The Centers for Medicare & Medicaid Services (CMS) developed this resource to support states in meeting their federal obligations under 42 CFR §488.433(e) while maximizing the beneficial impact of reinvested civil money penalties.



Mandatory State Participation –
All states participating in the Medicare and Medicaid programs must comply with CMPRP requirements, creating a nationwide framework for quality improvement. State compliance obligations include:



Annual submission of prospective state plans –
Forward-looking documents outlining planned use of CMP funds.



Retrospective reporting on fund utilization –
Detailed tracking of actual project outcomes and expenditures.



Compliance with federal regulations and acceptable use guidelines –
Adherence to 42 CFR §488.433(e), CMPRP policies, and State Operations Manual provisions (Chapter 7 (§ 7535)).

Program Overview

Administrative Framework

The Civil Money Penalty Reinvestment Program (CMPRP) operates through a **collaborative federal-state partnership** that balances oversight with flexibility to improve nursing home quality nationwide, ensuring effective implementation while addressing national standards and local priorities.













Federal Level: The CMS CMPRP Team provides program oversight through compliance monitoring, quality assurance, and standardization. They maintain uniform reporting documents, provide technical assistance to states, and coordinate national program management while facilitating interstate collaboration and knowledge sharing.

State Level: State Agencies maintain operational control while ensuring federal compliance through strategic planning tailored to state-specific needs. They manage project implementation, meet reporting requirements, and engage in stakeholder coordination to enhance program impact and sustainability.

Partnership: This model maintains federal standards while enabling state flexibility for regional challenges. It promotes accountability through clear reporting and performance metrics, while facilitating knowledge sharing and best practices to enhance quality improvement effectiveness.

The CMPRP program framework successfully balances federal oversight with state autonomy, ensuring CMPs are effectively reinvested into quality improvement initiatives that benefit residents while building sustainable improvement capacity at the state level.

Core Components

-  **State Plan (Prospective Planning)**
 -  **Purpose:** Forward-looking planning for upcoming year’s CMP fund utilization
 -  **Focus:** Planned improvements to nursing home care quality
 -  **Submission Deadline:** October 31st for following calendar year
 -  **Required Template:** State Plan Form
 -  **Key Elements:** Proposed project descriptions ~ Budget Allocations and Financial Plan ~ Expected outcomes and performance metrics
-  **Project Tracking: (Retrospective Reporting):**
 -  **Purpose:** Accountability mechanism for completed projects
 -  **Focus:** Documentation of actual project outcomes and fund utilization
 -  **Submission Deadline:** February 1st for previous calendar year
 -  **Required Template:** Project Tracking Spreadsheet
 -  **Key Elements:** Detailed project results and achievements – Actual financial expenditures and budget reconciliation – Performance outcomes

State Plan Submission Guidelines

To ensure a complete and well-structured submission, each **State Plan** must include all required information as outlined below. The guidelines are organized to align with the structure of the **State Plan Form** providing clear guidance for each section of the plan.

Note: For the fillable fields that require a dollar amount, the dollar sign (\$) will automatically appear once the numerical value is entered.

Section	Description
Introduction	
1. Timeline	<ul style="list-style-type: none">• Start (effective) and End Dates of the State Plan Specify the Start Date and End Date of the State Plan using the month-day, year format (e.g., January 1, 20XX – December 31, 20XX).• Operational Calendar Year Indicate the Operational Calendar Year for the State Plan (e.g., 20XX)• Date of Submission to CMS CMPRP Team Provide the date the State Plan was submitted to the CMS CMPRP Team for review (e.g., Month Day, 20XX).
2. State Points of Contact	<ul style="list-style-type: none">• Include a primary point of contact for the CMP Reinvestment State Plan.• Include a secondary point of contact, if available.• Provide the state point of contact information:<ul style="list-style-type: none">• Name: [Insert contact name]• Title: [Insert official job title]• Office: [Insert department/agency name]• Address: [Insert complete mailing address]• Phone Number: [Insert direct phone number with area code]• Email Address: [Insert official state email address]
Plan for the Use of CMP Funds	
3. Current CMP Balance	<ul style="list-style-type: none">• The Current CMP Balance includes amount of OFM payments received up until the date of submission. States must provide the total amount from all OFM payment notices received through the OFM mailbox at CMS_OFM_DPBC_CMP_Correspondence@cms.hhs.gov up to the date of balance calculation.• Provide the Actual CMP balance as of the date of submission for the calendar year covered by the plan. <p>Example: The State’s actual CMP balance as of date of submission for the calendar year covered by this plan is \$5,000,000.00.</p>

Section	Description
4. CMPs Returned to the State (Previous Year CMP Funds)	<p>States must report the total amount of CMS funds returned to the state during the previous applicable calendar year. This includes all Office of Financial Management (OFM) payment notices received through the OFM mailbox at CMS_OFM_DPBC_CMP_Correspondence@cms.hhs.gov, from January 1st through the date when the balance is calculated, prior to submitting the State Plan. States should document the specific date when the CMP balance was obtained using the format MM/DD/20XX (“as of” the date of submission).</p> <p>Example: The State Plan is submitted on October 31st. The amount entered should reflect the actual amount returned to the State (Medicaid portion) “as of” the date of submission.</p> <p>Entry:</p> <ul style="list-style-type: none">• Amount: \$1,200,239.75 <p>This dual reporting structure ensures accurate tracking of both historical CMP fund distributions and current available balances, providing CMS with comprehensive financial oversight of state CMP reinvestment activities. States should verify all amounts against official OFM correspondence before submission to ensure accuracy and compliance with federal reporting requirements.</p>
5. Emergency Reserve Fund	<p>For the plan year, states must reserve a portion (allocation) of their Current CMP Balance for emergency situations, including receiverships, natural disasters, and resident relocations resulting from involuntary terminations from Medicare and Medicaid programs. The allocated amount must demonstrate the state’s preparedness to respond effectively to emergencies while avoiding the maintenance of excessive unused CMP funds.</p> <ul style="list-style-type: none">• Amount Determination: States should provide the specific dollar amount from their Current CMP Balance that will be allocated for the Emergency Reserve Fund for the calendar year covered by this plan. The determination of this amount must be clearly justified through:<ul style="list-style-type: none">• Historical Analysis: Documentation of past emergency fund usage and corresponding expenses• Capacity Assessment: Consideration of the total number of certified beds within the state• Risk Evaluation: Implementation of an all-hazard approach that anticipates likely natural disasters and regional emergency scenarios• Cost Projections: Realistic estimates of potential emergency-related expenses• Example Emergency Reserve Fund Amount: \$1,000,000

Section	Description
5. Emergency Reserve Fund (con't)	<ul style="list-style-type: none">• Permitted Uses: States must describe how emergency reserve funds will be utilized, including but not limited to:<ul style="list-style-type: none">• Development and maintenance of temporary management or receivership capability, including recruitment, training, retention, or other system infrastructure expenses.• Other emergency response activities that protect resident health and safety• Important Restriction: CMP funds cannot be used to help facilities meet emergency preparedness requirements. The emergency reserve is specifically for state response activities and resident protection during actual emergency situations.• Justification Requirement: The state's allocation request must include clear documentation demonstrating how the requested amount was determined, ensuring it reflects both adequate emergency preparedness and responsible stewardship of CMP funds.
6. Annual Administrative Use	<p>States may voluntarily allocate Current CMP Balance funds for administrative purposes related to managing the program. [e.g., soliciting for projects, reviewing applications, monitoring/tracking of approved projects, and reporting requirements (annual State Plan and Project Tracking Sheet)]. States not using administrative funds should enter '\$0'; also, in the description field, enter 'N/A'. No additional requirements apply in this scenario.</p> <ul style="list-style-type: none">• Cost Estimation: Provide comprehensive estimates for all expected administrative costs for the calendar year<ul style="list-style-type: none">• Actual expenditures cannot exceed the estimated amount• Additional funds require an amended plan with CMS approval before expenditure• Justification Requirements: States requesting administrative funds must provide:<ul style="list-style-type: none">• Position Details: Specific job descriptions for CMP-funded staff• Cost Breakdown: Complete salary and benefits for each position• Program Connection: Clear link between administrative activities and CMP oversight• Refer to the Chapter 7 (§ 7535) of the State Operations Manual and 42 CFR §488.433 for more information the allowable uses of CMP funds.

NOTE: The State Agency must contact its respective CMS Location to request the use of CMP funds for emergency reserve funds.

Section	Description	
6. Annual Administrative Use (con't)	Permitted vs. Prohibited Uses	
	Permitted Activities	Prohibited Uses
	Administering CMP-funded projects	General agency overhead unrelated to CMP
	Monitoring project compliance	Administrative expenses beyond CMP program needs
	Evaluating project effectiveness	Costs not directly tied to CMP administration
	Reporting on program outcomes	
NOTE: Avoid potentially prohibited or problematic costs (e.g., administrative expenses beyond those necessary to administer, monitor, evaluate, or report on the effectiveness of projects utilizing CMP funds)	For states using CMP funds for administrative purposes: Provide the specific dollar amount from the Current CMP Balance in the amount field and include a detailed justification with position information in the description field. States must demonstrate that the requested amount is reasonable and has a direct connection to CMP program needs. This justification should include specific position descriptions, complete salary and benefits breakdowns for each funded position, and clear explanations of how the administrative activities support CMP program oversight and management.	
	\$150,000 will be used for administrative use during the 20XX calendar year, which will cover the salary and benefits for one part-time staff (0.5 FTE) and one full-time staff (1.0 FTE) to oversee the evaluation of 50 submitted CMP applications as well as the administration, monitoring, and results collection of approximately 15 CMP awards. The staff will focus on an in-depth solicitation strategy.	



Applicatio Section	Description
7. Obligated Funds	<p>States must identify and report all projects that are obligated to be funded during the plan year, including the implementation or ongoing implementation of continuing and/or new projects. This section ensures thorough tracking of committed CMP fund allocations.</p> <ul style="list-style-type: none">• Report the total amount of Obligated Funds for projects approved for the calendar year covered by this plan: \$1,705,000 (example amount)• For projects spanning multiple years or extending beyond calendar year boundaries (e.g., 11/05/20XX - 08/05/20XX), report only the funds obligated for the specific calendar year covered by this plan, not the amount approved for the entire project.• States may allocate funds to support the national Nursing Home Staffing Campaign through three partnership activities:<ul style="list-style-type: none">• Financial Incentives - Fund additional tuition reimbursement to recruit more RNs• Advertising Enhancement - Fund additional advertising to increase awareness campaign reach• Website Improvements - Use CMP funds to enhance state websites for Nurse Aide Training Competency and Evaluation Programs (NATCEPs) information and enrollment <p>Note: For Nursing Home Staffing Campaign allocations, start/end dates and recipient information are not required.</p> <p>Compliance Requirements</p> <ul style="list-style-type: none">• All obligated funds must be appropriately documented and justified• Project activities must align with acceptable CMP fund uses as defined in 42 CFR §488.433(e)• Multi-year projects require clear delineation of annual fund obligations• Total obligated amounts must be reconciled across all reporting sections <p>This comprehensive reporting ensures transparency in CMP fund commitments and supports effective program oversight and evaluation.</p>

Application Section	Description				
7. Obligated Funds (con't)	Project Reporting Examples				
	Unique Identifier	Project Title	Amount Approved for Plan Year	Start and End Dates	Recipient of Funds
	XX-0123-XYZ-522	Resident and Family Council Program	\$150,000	11/1/20XX - 10/31/20XX	ABC Nursing and Rehab Center
		CMS Nurse Staffing Campaign – LPN/RN Financial Incentives	\$1,700,000	N/A	N/A
8. Available Funds	<p>Determine the state’s net Available Funds (as of January 1 of the calendar year covered by this plan) after subtracting Emergency Reserve Fund, Annual Administrative Use, and Obligated Funds from the Current CMP Balance.</p> <ul style="list-style-type: none">• Automated Calculation: The State Plan Form auto-populate data from Sections 3 (Current CMP Balance), 5 (Emergency Reserve Fund), 6 (Annual Administrative Use), and 7 (Obligated Funds). Row 5 (Available Funds) auto-calculates.• Manual Verification Calculation: Verify accuracy or manually enter amounts if needed. Formula: Section 3 total minus the sum of sections 5, 6, and 7 <p>Fund Allocation Summary</p>				
Row	Description			Amount	
1.	Current CMP Balance (from Section 3)			\$5,000,000.00	
2.	Emergency Reserve Fund (from Section 5)			\$1,000,000.00	
3.	Annual Administrative Use (from Section 6)			\$150,000.00	
4.	Obligated Funds (from Section 7)			\$1,850,000	
5.	Available Funds (automatically calculated)			\$2,000,000.00	

Application Section	Description
8. Available Funds (con't)	<p>Calculation Verification: \$5,000,000.00 - (\$1,000,000.00 + \$150,000.00 + \$1,850,000) = \$\$2,000,000 ✓</p> <ul style="list-style-type: none">States must award a reasonable amount of Available Funds annually for projects that benefit nursing home residents and improve their quality of care or quality of lifeAll projects must comply with the Social Security Act and CMS regulationsNo Statutory Caps: States should not impose statutes that limit federal CMP fund awards, as this can cause funds to accumulate unused in state accounts*CMS Benchmark: CMS strongly encourages that States should allocate at minimum, 50% of Available Funds (excluding Emergency Reserve) to projects benefiting nursing home residents
Plan for Public Posting, Solicitation and Review Methods, Monitoring and Tracking Methods	
9. Public Posting of Funded CMP Projects	<p>States must annually post comprehensive information about each funded CMP project to a publicly available location. This ensures transparency and accountability in the use of CMP funds while allowing stakeholders to track project outcomes and effectiveness.</p> <ul style="list-style-type: none">States must provide the following seven key elements for each funded CMP project:<ul style="list-style-type: none">Project titleDuration (project start and end dates)Awarded project dollar amountProject summary including purpose, quantifiable goals and/or objectivesAwardee name (entity approved to receive funding)Results (description of outcomes, including goals/objectives achieved or not achieved)Additional key information (such as whether improvements have been institutionalized)Public Disclosure Options: States have two primary options for meeting public disclosure requirements:<p>Option 1: Reference CMS CMPRP Website</p><ul style="list-style-type: none">States may direct stakeholders to the CMS webpage on CMS.gov, where all state-reported project information is posted annually.Example statement for state websites: “CMP funded project information can be found on the CMS CMPRP website.”<p>Option 2: State-Specific Website</p><ul style="list-style-type: none">States may choose to post the required project information directly on their own state-specific websites.

IMPORTANT: CMS Fund Allocation Benchmark

Application Section	Description
9. Public Posting of Funded CMP Projects (con't)	<p>Data Collection and Posting Process</p> <ul style="list-style-type: none">State Responsibility: Provide complete project information annuallyCMS Collection: Information obtained through Project Tracking SpreadsheetCMS Posting: Project information posted to the CMS CMPRP website annuallyUpdate Requirement: Project information must be updated annually <p>Example:</p> <p>You can find our list of funded projects on CMS's Long Term Care Facility Civil Money Penalty Reinvestment Program Resource webpage: https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificati onGenInfo/LTC-CMP-Reinvestment.html</p> <p>We also reference this website on state webpage, available at: https://www.stateX.cmp_reinvestment.gov</p>
10. Solicitation Methods	<ul style="list-style-type: none">Describe how the state will solicit CMP projects that benefit nursing home residents and how often. States must solicit CMP projects at least annually (42 CFR §488.433(e)). Examples of solicitation methods include, but are not limited to, websites, notices to the Ombudsman's office, presentations to the nursing home provider community, and conferences.Include relevant details for each solicitation method. For example, who is responsible for conducting the solicitation notice, the general timing of when it will occur, where it will occur, and the target audience.<p>If applicable:</p><ul style="list-style-type: none">Provide information on the types of projects intended to be solicited (e.g., dementia care, music, and memory).Describe any standard language or requirements that will be included in each solicitation notice.

Application Section	Description
11. Review Methods	<p>Describe how the state will objectively and consistently review and evaluate incoming CMP applications to determine if the proposal meets the criteria for acceptable uses of CMP funds. Please include the following:</p> <ul style="list-style-type: none">• Who is responsible for reviewing the applications?• Frequency Application are Reviewed.• Criteria the state will use to evaluate applications.• The expected timeframe for the state to either review and approve or deny applications.• The state’s process for submitting a CMPRP application to the CMS Team <p>Example:</p> <p>Application Reviewer: The Assistant Director of the LTC Policy Unit will intake and review applications with their 1.5 FTE support team of LTC Policy staff.</p> <p>Expected Timeframe to Review and Either Approve or Deny Applications: On a monthly basis, the team will present projects to a review committee, which includes the Director of the LTC Policy Unit in addition to a clinical advisor.</p> <p>Criteria Used to Evaluate Applications: The team will review the applications against the state X regulations (stateXregulations/website/.gov) and the federal CMP regulations (https://www.ecfr.gov/cgi-bin/text-idx?</p> <p>Process for Submitting Applications to the CMS CMPRP Team: When an application does not meet federal and state criteria, the Assistant Director of LTC Policy reaches out to the applicant to notify them of any corrective action they can take to revise the application to meet requirements. The team then reviews the updated application. This process is performed a maximum of two times before the application is rejected. Applications are typically reviewed and approved or denied in a month timeframe.</p>

Application Section	Description
12. Monitoring and Tracking Methods	<ul style="list-style-type: none">• Describe how the state will monitor and track projects that use CMP funds, as well as funds expended for administrative use (Section 6).• Provide information about how the state will verify that the monies paid out for CMP projects were spent on the items identified by the CMP fund recipient. For example, compliance monitoring may include site visits, invoices, timecards, and receipts for supplies and travel.• Describe how the state will track project results. For example, project tracking activities may include periodic or standard reporting deadlines, deliverables, final reports, and the inclusion of metrics. <p>Example:</p> <p>Monitoring/Verification: To ensure that monies paid out for CMP projects are spent on the items identified by the CMP funds recipient, State X will track all project invoices, timecards, and receipts and will conduct a progress check-in with the project lead to ensure they are measuring results of the CMP project. A check-in will occur before invoices are paid/funds are distributed. Staff salaries paid through CMP Administrative Use are recorded throughout the year. Administrative hours and activities are monitored to measure workflow surges and drop offs to better align staff to CMP application tasks and to continually evaluate staffing needs.</p> <p>Reporting Timeline (e.g., periodic or standard deadlines): To track results of each CMP project, State X will require that project leads submit a quarterly and final report for all projects with durations greater than 11 months, and a mid-way and final report for all projects with duration less than 11 months.</p> <p>Final Report (including metrics): The report will detail the progress made on the measures originally outlined by the applicant to evaluate success, emphasizing quantitative measures whenever possible.</p>



State Plan – Tips for Success

Successful completion and approval of the State Plan requires more than regulatory compliance—it involves a strategic approach focused on meaningful improvements in nursing home care quality. This includes timely and accurate submissions, balanced and strategic fund allocation, thorough documentation, proactive communication with the CMS CMPRP Team, (States will contact the CMS Locations only for Emergency Fund use) and a commitment to continuous improvement informed by prior year outcomes. The accompanying table offers a quick reference guide to help State Agencies avoid common pitfalls and meet these success factors effectively.

Section	Key Requirements	Common Issues to Avoid	Success Tips
Section 1: Timeline	<ul style="list-style-type: none"> Calendar year dates (not fiscal) Include submission date to CMS 	<ul style="list-style-type: none"> Using fiscal year instead of calendar year Blank submission date 	<ul style="list-style-type: none"> Always use January 1 - December 31 format Enter actual submission date when submitting
Section 2: Contact Info	<ul style="list-style-type: none"> At least one state point of contact Full name and email required 	<ul style="list-style-type: none"> Missing contact information Incomplete contact details 	<ul style="list-style-type: none"> Provide complete contact information Include backup contact if possible
Section 3: Current Balance	<ul style="list-style-type: none"> Accurate CMP balance reporting Must match CMS records 	<ul style="list-style-type: none"> Blank balance fields Inaccurate calculations 	<ul style="list-style-type: none"> Verify balance against CMS records Document source of balance information
Section 4: CMPs Returned	<ul style="list-style-type: none"> Report actual/projected CMPs returned Include “as of” date Match OFM notifications 	<ul style="list-style-type: none"> \$0 when CMPs were (deposited) returned Missing “as of” dates Discrepancies with CMS records 	<ul style="list-style-type: none"> Check OFM_DPBC_CMP_Correspondence@cms.hhs.gov Report total from 1/1 to 12/31 of relevant year
Section 5: Emergency Reserve	<ul style="list-style-type: none"> Medicare/dual-certified facilities only Certified beds (not residents) Allowable emergency uses only 	<ul style="list-style-type: none"> Including Medicaid-only facilities Using resident count vs. bed count Prohibited uses listed 	<ul style="list-style-type: none"> Including Medicaid-only facilities Using resident count vs. bed count Prohibited uses listed
Section 6: Administrative Use	<ul style="list-style-type: none"> Detailed salary/benefit breakdown Position descriptions Workload estimates CMP-related activities only 	<ul style="list-style-type: none"> Missing salary breakdowns Non-allowable activities Vague descriptions 	<ul style="list-style-type: none"> Include FTE allocations Provide specific workload examples Enter “O” and “N/A” if not using

Section	Key Requirements	Common Issues to Avoid	Success Tips
Section 7: Obligated Funds	<ul style="list-style-type: none"> List all new or ongoing CMS-approved CMP projects with funds obligated during the relevant calendar year with funds obligated during plan year CMS Nurse Staffing Campaign opportunities 	<ul style="list-style-type: none"> Including projects with \$0 obligated Projects from wrong calendar year 	<ul style="list-style-type: none"> Do not include projects that have ended prior to the year of the relevant State Plan. Consider nurse staffing campaign partnership Contact Nhstaffing@cms.hhs.gov for estimates
Section 8: Available Funds	<ul style="list-style-type: none"> Accurate calculation: <ul style="list-style-type: none"> Current Balance - Emergency Reserve - Admin Use - Obligated Funds 	<ul style="list-style-type: none"> Mathematical errors Inconsistent totals 	<ul style="list-style-type: none"> Double-check all calculations Ensure totals match across sections Do not modify/alter formulas in the form
Section 9: Posting Projects	<ul style="list-style-type: none"> Public posting of funded projects Update at least annually 	<ul style="list-style-type: none"> Missing posting frequency 	<ul style="list-style-type: none"> Specify update frequency
Section 10: Solicitation	<ul style="list-style-type: none"> Responsible parties identified Methods specified Timing (at least annually) 	<ul style="list-style-type: none"> Missing responsible parties Vague solicitation methods Including prohibited topics 	<ul style="list-style-type: none"> Focus on generic allowable topics Include target audience (e.g., nursing home provider associations, conference attendees, state Ombudsman) Solicitation must occur at least annually
Section 11: Review Methods	<ul style="list-style-type: none"> Provide personnel responsible for reviewing CMP applications., criteria used to evaluate applications, expected review timeframe, and process for submitting to CMP team for review 	<ul style="list-style-type: none"> Missing review timeframes Unclear evaluation process Responsible party/personnel for application reviews is missing. 	<ul style="list-style-type: none"> Provide specific review timeline Document objective criteria
Section 12: Monitoring	<ul style="list-style-type: none"> Administrative use tracking Project expenditure verification Results tracking methods 	<ul style="list-style-type: none"> Missing admin use monitoring No expenditure verification process Unclear results tracking 	<ul style="list-style-type: none"> Describe verification methods Include site visits, invoices, receipts Set reporting deadlines

Submission Timeline and Process

Each state shall submit its plan using the **CMPRP State Plan Form** to the CMS CMPRP Team at CMP-info@cms.hhs.gov, no later than **October 31st** annually for the upcoming calendar year.

If a state is unable to submit its State Plan due to extenuating circumstances, please contact the CMS CMPRP Team at CMP-Info@cms.hhs.gov at least 14 days before the deadline to request approval of an extended submission date.

Important: The State may submit an amended State Plan to the CMS CMPRP Team for review. CMS must approve the amended plan before any additional CMP funds are expended.



Project Tracking Spreadsheet Overview

NOTE: The Project Tracking Spreadsheet is separate from the State Plan Form.

■ Annual State Plan and Tracking Requirements

State Plan Submission: States must annually submit a State Plan for the effective use of CMP funds to be reviewed and approved by the Centers for Medicare & Medicaid Services (CMS). The CMS CMPRP Team utilizes the annual CMPRP Project Tracking Spreadsheet to capture the information required for each state to meet the requirements of **42 CFR §488.433(e)**.

Project Tracking Sheet Purpose: The Project Tracking Spreadsheet (PTS) is required to enable CMS to provide a comprehensive list of all CMP funded projects and their results annually. CMP regulations mandate that all projects be evaluated and that project results be reported. States, communities, and organizations can utilize the PTS to identify projects that could be modeled or replicated in their communities to support nursing home residents.

■ PTS Structure and Completion Requirements

File Format and Content: The PTS is a pre-populated Excel file sent to states by the CMS CMPRP Team, listing all CMP-funded projects and containing a financial summary table. States are required to complete all areas of the project table, including the project summary that encompasses the project’s goals and objectives, project results and outcomes (interim or final results), and the total amount of CMP funds expended during both the prior year and current year.

Financial Summary Requirements: In the financial summary table, states are required to provide the CMP funds balance as of January 1st, CMP funds expended for Administrative Uses, CMP funds expended for Emergency Uses, and CMP funds added during the calendar year (January 1 – December 31), noting that reporting is based on calendar year rather than fiscal year periods.

■ Financial Reporting and OFM Coordination

CMP Funds Added Calculation: States are required to complete and submit the financial summary table with comprehensive information. CMS requires states to provide the CMP funds balance as of January 1st, CMP funds expended for Administrative Uses, CMP funds expended for Emergency Uses, and CMP funds added during the calendar year, which is calculated as a tally of all CMS Office of Financial Management (OFM) payment notification emails received from the OFM mailbox - CMS OFM DPBC CMP Correspondence for the relevant calendar year (1/1/20XX-12/31/20XX).

OFM Mailbox Access: To get added to the OFM mailbox to receive OFM payment notification emails, states should contact OFM_DPBC_CMP_Correspondence@cms.hhs.gov for any OFM-related questions. The designated OFM representative should be able to assist with access and technical issues.

■ Administrative Use Monitoring and Compliance

State Flexibility and CMS Oversight: CMP funds may not be used for survey and certification operations or State expenses, except that reasonable expenses necessary to administer, monitor, or evaluate the effectiveness of projects utilizing civil money penalty funds may be permitted. CMS does not have a recommended method for states to monitor and track CMP funds allocated and expended for Administrative Use purposes, as each state determines this and may vary based on state-specific systems and processes. However, CMP funds expended for administrative purposes must be approved by CMS and reported in the state’s annual tracking spreadsheet submission.

Continuous Monitoring Requirements: Expenditures need to be monitored and tracked throughout the calendar year to ensure compliance with approved allocations. Additional funds beyond those allocated must not be expended without the prior approval of CMS, ensuring proper oversight and accountability in the use of administrative funds while maintaining program integrity.

■ Submission Timeline and Process

Distribution and Deadlines: The CMS CMPRP Team will provide **pre-populated tracking spreadsheet by December 31st of each year.** By February 1st annually, states must complete and submit the CMP Project Tracking Sheet (Excel spreadsheet) to the CMS CMPRP Team mailbox at CMP-info@cms.hhs.gov. The CMP Project Tracking Sheet must contain information on projects that took place during the previous year.

Example: For a PTS with a due date of February 1, 2025, the report should include information pertaining to CY 2024.

Extension Requests: If a state is unable to submit its tracking sheet by February 1st due to extenuating circumstances, it must contact the CMS CMPRP Team at CMP-Info@cms.hhs.gov at least 14 days before the deadline to request approval of an extended submission date. The PTS must be submitted before the submission is considered received by the CMS CMPRP Team.

Tip: The Project Tracking Spreadsheet is closely tied to your approved State Plan. To promote consistency and accuracy, refer to the applicable State Plan for the corresponding year when completing both the Projects and Financial Summary tabs.

Project Tracking Spreadsheet includes the following key information sections:

Tab 1: Instructions	
Tab 2: CMP Project Tracking Spreadsheet	
Calendar Year:	The relevant CY
Column A	State
Column B	States CMS Location
Column C	Project Identifier
Column D	Project’s Start Date
Column E	Project’s End Date
Column F	Total amount of CMP funds awarded to the project, as indicated in the CMS CMP project approval letter
Column G	Project title as it appears in the CMS CMP project approval letter.
Column H	Project description with the project’s measurable goals or objectives related to the intent of the project.
Column I	The entity that received the CMP project funding is indicated in the CMS CMP project approval letter.
Column J	The project’s measurable goal(s)/objective(s), including the specific metrics used to measure the success of the project.
Column K	The amount of CMP funds expended on the project during the prior CY.
Column L	The amount of CMP funds expended on the project during the current CY.
Column M	Notes for the CMS CMPRP
Tab 3: Financial Summary	
Column A	State
Column B	The amount that was obligated and available for the state at the start of the calendar year (January 1).
Column C	The amount of CMP Funds Expended during the relevant CY for Administrative Uses
Column D	The amount of Emergency Use funds expended during the relevant CY
Column E	The total amount of CMP funds spent on CMP projects during the relevant CY
Column F	The actual amount of CMP funds that were added to the state’s total balance during the calendar year.
Column G	The state’s remaining CMP balance as of January 1 of the following calendar year
Tab 4: Example of a Completed Project	
Tab 5: Example of a Complete Financial Summary	

Project Tracking Spreadsheet – Tips for Success

Effective use of the Project Tracking Spreadsheet is essential for maintaining compliance, ensuring transparency, and demonstrating the impact of CMP-funded initiatives. The spreadsheet is more than a reporting tool—it serves as a key instrument for tracking project progress, documenting fund usage, and supporting the overall program goals.

To assist State Agencies in completing the spreadsheet accurately and efficiently, the tips in this section are organized into three key phases: Before Submission, During Preparation, and Quality Control. Following these practices can help prevent common errors, support timely approvals, and strengthen the overall integrity of your State Plan reporting.

Section	Common Issues	Required Actions	Success Tips
Section 1: Pre-populated Projects	Adding irrelevant projects to tracker	Only include projects relevant to the calendar year	<ul style="list-style-type: none">Review project dates carefullyRemove projects that ended before the relevant calendar yearCross-reference with approved State Plan
Section 2: Start/End Dates	Missing or blank project dates	Enter complete project start and end dates	<ul style="list-style-type: none">Use MM/DD/YYYY formatEnsure dates align with project approval lettersInclude projected end dates for ongoing projects
Section 3: Total CMP Funds	Amount doesn't match CMP records	Enter exact amount from CMS approval letter	<ul style="list-style-type: none">Reference original CMS approval letterDouble-check all numerical entriesContact CMS if discrepancies exist
Section 4: Project Title	Title missing or doesn't match records	Use exact title from CMS approval letter	<ul style="list-style-type: none">Copy title exactly as it appears in approval letterInclude “also known as” title if differentMaintain consistency across all documents
Section 5: Project Summary	Missing quantifiable goals/objectives	Include specific, measurable project goals	<ul style="list-style-type: none">Describe realistic, actionable goalsInclude specific metrics for measurementAlign summary with original project proposal
Section 6: Funded Entities	Column I blank	Enter entity name from CMS approval letter	<ul style="list-style-type: none">Use exact entity name from approval letterInclude full organization nameVerify spelling and accuracy

Section	Common Issues	Required Actions	Success Tips
Section 7: Results	Results don't reflect established goals	Describe quantifiable outcomes with metrics	<ul style="list-style-type: none">Use specific numbers and percentagesAlign results with original objectivesInclude both quantitative and qualitative outcomes
Section 8: Expended Funds (Column K)	Missing expenditure amounts for prior year	Enter actual CMP funds spent during prior calendar year	<ul style="list-style-type: none">Review financial records carefullyInclude all expenditures for the projectEnsure amounts don't exceed approved totals
Section 8: Expended Funds (Column L)	Missing current year expenditures or exceeding approved amounts	Enter accurate expenditure amounts within approved limits	<ul style="list-style-type: none">Track expenditures throughout the yearNever exceed approved project amountsMaintain detailed financial documentation



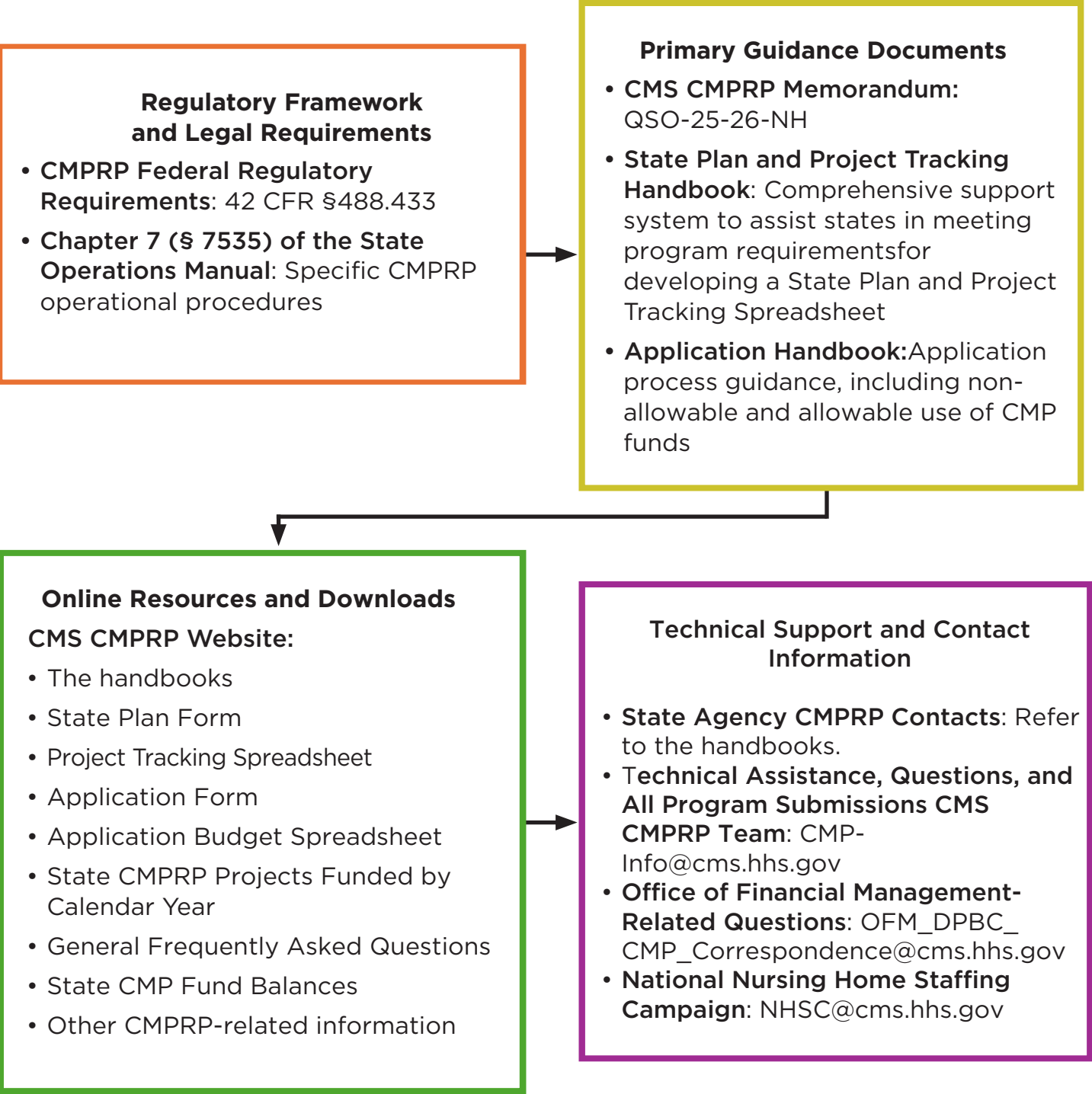
Financial Summary

Column	Requirement	Common Issues	Success Actions
Column B: CMP Balance 1/1	Enter balance as of January 1st	Blank or shaded field	<ul style="list-style-type: none">• Use exact balance from previous year-end• Cross-reference with prior tracker• Ensure accuracy of starting balance
Column C: Admin Use	Report administrative expenditures	Blank field or exceeding State Plan allocation	<ul style="list-style-type: none">• Track admin expenses throughout year• Stay within approved State Plan limits• Provide detailed breakdown if requested
Column D: Emergency Use	Report emergency fund expenditures	Missing CMS approval documentation	<ul style="list-style-type: none">• Obtain CMS approval before using emergency funds• Submit all approval documentation• Track emergency expenditures separately
Column E: Project Funds	Total project expenditures	Blank or inaccurate totals	<ul style="list-style-type: none">• Sum all project expenditures accurately• Cross-check with individual project amounts• Verify calculations before submission
Column F: Funds Added	Report the total amount of OFM deposit email notifications received during the relevant CY	Amount doesn't match State Plan or OFM records	<ul style="list-style-type: none">• Tally all OFM payment notifications• Use emails from OFM_DPBC_CMP_Correspondence@cms.hhs.gov• Include all payments from January 1 - December 31
Column G: Balance 1/1/XX	Calculate remaining balance	\$0 or blank balance	<ul style="list-style-type: none">• Use formula: Starting Balance + Funds Added - All Expenditures• Verify calculation accuracy• Ensure positive balance



Resources

The Civil Money Penalty Reinvestment Program provides states with comprehensive resources and support systems to ensure successful program implementation and compliance with federal requirements. These resources include detailed handbooks, regulatory guidance, technical assistance, and downloadable templates that collectively create a multi-layered support framework for state partners.



Thank You

Thank you to all state agencies for their exceptional collaboration and dedication in completing the State Plan and Project Tracking Spreadsheet for the Civil Money Penalty Reinvestment Program.

The success of CMPRP relies entirely on thoughtful planning, diligent implementation, and transparent reporting that state agencies provide through their State Plans and Project Tracking Spreadsheet submissions. Your efforts to meet the October 31st deadline for prospective planning and the February 1st deadline for retrospective reporting showcase your dedication to accountability and continuous improvement in nursing home care.

Through your collaborative efforts, civil money penalties are being effectively transformed into meaningful quality improvement initiatives that directly benefit nursing home residents. This collaborative spirit ensures that the CMPRP continues to evolve and improve, creating lasting positive impacts for nursing home residents nationwide.

The CMS CMPRP Team



State Agency CMPRP Contacts

NOTE: State names are hyperlinked to their respective website

State Agency	Email	Phone	Address
Alabama	ALCMP@adph.state.al.us	(334) 206-5709	Alabama Department of Public Health Division of Health Care Facilities RSA Tower 201 Monroe Street, Suite 700 Montgomery, AL. 36130-301
Alaska	doh.hflc.info@alaska.gov	(907) 334-2483	Health Facilities Licensing & Certification 4601 Business Park Blvd, Building K Anchorage, Alaska 99503
Arizona	LTC.licensing@azdhs.gov	(602) 364-2690	Arizona Department of Health Services 150 N. 18th Avenue, Suite 440 Phoenix, AZ 85007
Arkansas	arcmpfundprojects@dhs.arkansas.gov	(501) 910-6525	Arkansas Department of Health and Human Services Office of Long-Term Care DHS Program Administrator 700 Main Street Little Rock, AR 72203
California	CMPSGrantApplications@cdph.ca.gov	(279) 667-2365	California Department of Public Health P.O. Box 997434, MS 3202 Sacramento, CA 95899-7434
Colorado	cdphe_nhiv_grants@state.co.us	(720) 450-6588	Colorado Department of Public Health and Environment Health Facilities and Emergency Medical Services Division 4300 Cherry Creek Drive South, Building A, Floor 5 Denver, CO 80246-1530
Connecticut	dph.flisadmin@ct.gov	(860) 509-7400	CT Department of Public Health 410 Capitol Avenue Hartford, CT 06134
Delaware	DHSS_DHCQ_CMPPreinvestment@delaware.gov	(302) 421-7448	Delaware Health and Social Services Division of Healthcare Quality 263 Chapman Road, Suite 200 Newark, DE 19702
District of Columbia	DC.CMP@dc.gov	(202) 683-7267	Office of Health Facilities 2201 Shannon Place, SE Washington, D.C. 20020
Florida	CMS_CMP_Applications@ahca.myflorida.com	(850) 228-7109	Agency for Health Care Administration 2727 Mahan Drive, MS 59 Tallahassee, FL 32308
Georgia	CMPSGrant.HFRD@dch.ga.gov	(404) 293-7741	Georgia Department of Community Health Healthcare Facility Regulation Division 2 Martin Luther King Jr Dr. SE, East Tower, 17th Fl Atlanta, GA 30334
Hawaii	doh.hawaii cmpgrants@doh.hawaii.gov	(808) 692-7420	Hawaii State Department of Health Office of Health Care Assurance 601 Kamokila Blvd, Room 337 Kapolei, HI 96707
Idaho	fsb@dhw.idaho.gov	(208) 334-6626	Bureau of Facility Standards 450 W State Street, Floor 7 Boise, ID 83702

State Agency	Email	Phone	Address
Illinois	DPH.HCR.CMPGRANT@illinois.gov	(217) 782-5180	Office of Health Care Regulation Bureau of Long-Term Care Illinois Department of Public Health 525 West Jefferson, 5th Floor Springfield, IL 62761
Indiana	INCMP@health.in.gov	(317) 233-7442 (Option 6, then option 4)	Consumer Services and Health Care Regulation Commission Indiana State Department of Health 2 North Meridian, Selig 4th Floor Indianapolis, IN 46204
Iowa	imecmp@dhs.state.ia.us	(515) 321-7247	Iowa Medicaid Department of Health and Human Services 321 East 12th Street Des Moines, IA 50319-0114
Kansas	KDADS.CMPRP@ks.gov	(785) 296-6867	Kansas Department for Aging and Disability Services 503 S Kansas Avenue Topeka, KS 66603
Kentucky	CMPPAPPLICATION_OIG@ky.gov	(502) 564-5771	Cabinet for Health and Family Services 275 East Main St. 5E-A Frankfort, KY 40621
Louisiana	HSS-CMP-Fund@la.gov	(225) 432-0099	Louisiana Department of Health Health Standards Section P.O. Box 3767 Baton Rouge, LA 70821-0629
Maine	dlrs.info@maine.gov	(207) 287-9300	Division of Licensing and Certification 41 Anthony Avenue, 11 State House Station Augusta, ME 04333-0011
Maryland	HCQA.Grants@maryland.gov	(410) 402-8190	Office of Health Care Quality 7120 Samuel Morse Drive, 2nd Fl Columbia, Maryland 21046-3422
Massachusetts	DPH-MA-CMPRP@mass.gov	(857) 329-4132	Massachusetts Department of Public Health 250 Washington Street, 4th Fl Boston, MA 02108
Michigan	MDHHS-CMPGrants@michigan.gov	(517) 582-1210	Bureau of Aging, Community Living and Supports Michigan Department of Health and Human Services Capitol Commons Center 400 S. Pine Street, 6th Floor P.O. Box 30479 Lansing, MI 48909-7979
Minnesota	munna.yasiri@state.mn.us	(651) 431-2264	Minnesota Department of Human Services Nursing Facility Rates & Policy Division Attn: Munna Yasiri P.O. Box 64973 St Paul, MN 55164-0973
Mississippi	CMPSGrants@medicaid.ms.gov	(601) 359-6141	Mississippi Division of Medicaid P.O. Box 2222 Jackson, MS 39225
Missouri	SLCRCMP@health.mo.gov	(573) 751-6402	Department of Health and Senior Services PO Box 570 Jefferson City, MO 65102-0570

State Agency	Email	Phone	Address
Montana	mtcmp@mt.gov	(406) 444-4077	Montana Department of Public Health and Human Services/Senior and Long-Term Care PO Box 4210 Helena, MT 59604
Nebraska	DHHS.NebraskaCMP@nebraska.gov	(402) 471-9678	Medicaid & Long-Term Care Nebraska Department of Health and Human Services 301 Centennial Mall South P.O. Box 95026 Lincoln, NE 68509
New Hampshire	cmp@dhhs.nh.gov	(603) 271-9645	Department of Health & Human Service 129 Pleasant Street, Brown BLDG Concord, NH 03301-3857
New Jersey	CMPRP@doh.nj.gov	(609) 633-8977	Health Facility Survey & Field Operations State of New Jersey Department of Health P.O. Box 367 Trenton, NJ 08625-0367
New Mexico	CMPgrant@hca.nm.gov	(505) 476-9099	New Mexico Health Care Authority 2040 S Pacheco. PO Box H Sante Fe, NM 87504
New York	LTC.CMPfunding@health.ny.gov	(518) 408-9218	Civil Monetary Penalty Reinvestment Program Bureau of Administrative Services Division of Residential Support Center for Residential Surveillance Office of Aging & Long-Term Care New York State Department of Health 875 Central Avenue Albany, NY 12206
Nevada	DPBHCMP@nvha.nv.gov	(775) 684-1030	Nevada Health Authority Division of Purchasing and Compliance 727 Fairview Drive, Suite E Carson City, NV 89701
North Carolina	DHSR.CMS.CMP.ReinvestmentProgram@dhhs.nc.gov	(919) 937-7459	North Carolina DHSR/Nursing Home Licensure and Certification Section; NCDHHS 2711 Mail Service Center Raleigh, NC 27699
North Dakota	ndcmp@nd.gov	(701) 328-2352	North Dakota Department of Health and Human Services Health Facilities Unit 1720 Burlington Dr Suite A Bismarck, ND 58504-7736
Ohio	NFCMP@medicaid.ohio.gov	(614) 466-6742	Bureau of Long-Term Services and Supports Ohio Department of Medicaid 50 West Town Street, Suite 400 Columbus, OH 43215
Oklahoma	CMP@health.ok.gov	(405) 426-8998	Oklahoma State Department of Health 123 Robert S. Kerr Avenue, 12th floor, Rm 1248 Oklahoma City, OK 73102
Oregon	nf.licensing@odhs.oregon.gov	(503) 910-9069	Department of Human Services, Aging and People with Disabilities Safety, Oversight and Quality P.O. Box 14530 Salem, OR 97309

State Agency	Email	Phone	Address
Pennsylvania	ra-pwcmpgrants@pa.gov	1 (800) 932-0939 (Option 2)	Department of Human Services Office of Long-Term Living 555 Walnut Street, Sixth Floor Harrisburg, PA 17101
Rhode Island	ohhs.cmp@ohhs.ri.gov	(401) 462-5274	Rhode Island Executive Office of Health and Human Services 3 West Road, Vicks Building Cranston, RI 02920
South Carolina	CMPFunds@dph.sc.gov	(803) 545-4252	S.C. Department of Public Health Healthcare Quality P.O. Box 2046 West Columbia, SC 29171
South Dakota	DOHOLCLicensing@state.sd.us	(605) 773-3356	South Dakota Department of Health 600 E Capitol Pierre, SD 57501
Tennessee	HFC.CMP@tn.gov	(615) 406-5891	Tennessee Health Facilities Commission 665 Mainstream Drive 2nd Floor Nashville, TN 37243
Texas	CmpApplication@hhs.texas.gov	(512) 438-2973	Health and Human Services Commission Regulatory Services, Operational Support 701 W. 51st St, 1075, Mail Code 1075 Austin, TX 78751
Utah	LTCCMP@utah.gov	(801) 538-4242	Department of Health and Human Services, Division of Licensing and Background Checks 195 N 1950 W Salt Lake City, UT 84116
Vermont	AHS.DAILDLPSurveyandCertification@vermont.gov	(802) 241-0344	Division of Licensing and Protection HC 2 South 280 State Drive Waterbury, VT 05671
Virginia	CMPFunds@dmas.virginia.gov	(804) 629-1172	Virginia Department of Medical Assistance Services 600 East Broad Street Richmond, VA 23219
Washington	cmpapplications@dshs.wa.gov	(360) 725-3204	Department of Social & Health Services Aging & Long-Term Support Administration P.O. Box 45600 Olympia, WA 98504-5600
West Virginia	ohflacadmin@wv.gov	(304) 558-0050	Office of Health Facility Licensure and Certification 1 Players Club Dr., Suite 301 Charleston, WV 25311
Wisconsin	DHSDQACMPRP@dhs.wisconsin.gov	(608) 266-8481	Division of Quality Assurance Wisconsin Department of Health Services 201 E. Washington Ave. Madison, WI 53703
Wyoming	wdh-ohls-cmp@wyo.gov	(307) 777-7123	Aging Division, Healthcare Licensing and Surveys Wyoming Department of Health Hathaway Building 2300 Capitol Avenue Suite 510 Cheyenne, WY 82002

**CIVIL MONEY PENALTY REINVESTMENT PROGRAM (CMPRP)
STATE PLAN & PROJECT TRACKING HANDBOOK**



September 2025