<table>
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<th>STATUS¹</th>
<th>DOCUMENT REVISION²</th>
<th>EFFECTIVE DATE</th>
<th>DESCRIPTION³</th>
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<td>Baseline</td>
<td>1.0</td>
<td>November 15, 2005</td>
<td>Initial version Uniform Managed Care Manual Chapter 7.1, Joint Interface Plans</td>
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¹ Status should be represented as “Baseline” for initial issuances, “Revision” for changes to the Baseline version, and “Cancellation” for withdrawn versions.

² Revisions should be numbered in accordance according to the version of the issuance and sequential numbering of the revision—e.g., “1.2” refers to the first version of the document and the second revision.

³ Brief description of the changes to the document made in the revision.
7.1 Joint Interface Plans

The MCO must comply with the following Joint Interface Plans, as modified or amended:

- HHSC JIP
- Medicaid Claims Administrator Contractor JIP
- CHIP Eligibility and Enrollment Contractor JIP
- Medicaid Enrollment Broker JIP
- EQRO JIP

These plans will be posted in TexMedCentral under the MCPLAYUT folder. See 7.2 for information on TexMedCentral.