TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	10-011- C	Arizona
STATE PLAN MATERIAL		
FOR: Centers for Medicare and Medicaid Services	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE AND MEDICAID SERVICES	April 1, 2011	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☐ AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440 Subpart A and B 42 CFR 447, Subpart F; 42 CFR 440.17; 42 CFR 440.167	7. FEDERAL BUDGET IMPACT: \$ (55,397,000)	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	EDED PLAN SECTION
	OR ATTACHMENT (If Applicable):	
Page 5(c); Attachment 4.19-B		
	N/A	
10. SUBJECT OF AMENDMENT:	•	
An update of the reimbursement rates for services, beginning April 1, 2011 to September 30, 2011, to reflect a rate		
reduction of 5%.		
11. GOVERNOR'S REVIEW (Check One):		
☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ OTHER, AS SPECIFIED:		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED		
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
12. SIGNATURE OF STATE AGENCY OFFICIAL.	16. RETURN TO.	
1.	Monica Coury	
Marion	801 E. Jefferson, MD#4200	
13. TYPED NAME:	Phoenix, Arizona 85034	
Monica Coury		
14. TITLE:	1	
Assistant Director		
15. DATE SUBMITTED:	1	
December 21, 2010		
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED:	18. DATE APPROVED: MAR 0	4 2011
December 21, 2010	PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OF	EICIAI ·
April 1, 2011	20. SIGNATURE OF REGIONALION	TICIAL.
21. TYPED NAME: Gloria Nagle	22. TITLE: Associate Regional Admir	istrator
		hildren's Health Operations
23. REMARKS:		
Box 6 – Pen & ink change made via email dated 3/1/11 per CMS request.		