

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
61 Forsyth St., Suite 4T20  
Atlanta, Georgia 30303-8909



Division of Medicaid & Children's Health Operations

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July 13, 2012

Mr. Justin Senior  
Deputy Secretary for Medicaid  
Agency for Health Care Administration  
2727 Mahan Drive, Mailstop #20  
Tallahassee, Florida 32308

RE: Florida Title XIX State Plan Amendment, Transmittal # FL 11-010

Dear Mr. Senior:

We have reviewed the proposed amendment to the Florida State Plan (State Plan Amendment FL 11-010). The Request for Additional Information (RAI) response was received in the Regional Office on April 20, 2012. This SPA was initially submitted on September 23, 2011 with a stated purpose of amending the Title XIX Outpatient Hospital Reimbursement Plan payment methodology, effective July 1, 2011. Based on the HCFA 179 submitted by the State, Federal budget impact would be \$23,043,000 in FFY 2010-11 and \$69,128,000 in FFY 2011-12.

Based on the information provided, we are now ready to approve Medicaid State Plan Amendment FL 11-010. This SPA was approved on July 12, 2012. The effective date of this amendment is July 1, 2011. We are enclosing the approved form HCFA-179 and the approved plan pages.

If you have any questions or need further assistance, please contact Darlene Noonan at 404-562-2707.

Sincerely,

/s/

Jackie Glaze  
Associate Regional Administrator  
Division of Medicaid and Children's Health Operations

Enclosures