

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Center for Medicaid, CHIP, and Survey & Certification

MAR 16 2011

MA Theresa L. Arcangel
Health Services Administrator
Department of Public Health and Social Services
Bureau of Health Care Financing
123 Chalan Kareta
Mangilao, Guam 96913-6304

RE: Guam SPA 10-002A

Dear Ms. Arcangel:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 10-002A. This amendment, effective January 1, 2011, updates Guam's State plan language to reflect current inpatient hospital reimbursement.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. We are pleased to inform you that Medicaid State plan amendment 10-002A is approved effective January 1, 2011. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Mark Wong at (415) 744-3561.

Sincerely,


Cindy Mann
Director, CMCS

Enclosures

cc: Mary Rydell, CMS Pacific Area Representative