

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 and State Operations, CMSO**

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Charles J. Krogmeier, Director  
Department of Human Services  
Hoover State Office Building, 5<sup>th</sup> Floor  
1305 E. Walnut Street  
Des Moines, Iowa 50319-0114

**FEB 18 2010**

RE: IA 08-030

Dear Mr. Krogmeier:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 08-030. Effective January 1, 2009, this amendment modifies the IowaCare Prospective Interim Payment provisions within Attachment 4.19-A to comply with the terms and conditions of the 1115 Medicaid Demonstration project No. 11-W0189/7.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 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 08-030 is approved effective January 1, 2009. We are enclosing the HCFA-179 and the amended pages.

If you have any questions, please call Tim Weidler of the National Institutional Reimbursement Team at (816) 426-6429.

Sincerely,

  
Cindy Mann

Director

Center for Medicaid and State Operations (CMSO)

Enclosures