

Department of Health & Human Services
Centers for Medicare & Medicaid Services
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519



MAY 17 2010

Ms. Patricia Casanova
Director of Medicaid
402 W. Washington Street, Room W382
Indianapolis, IN 46204-2739

ATTN: Ms. Bridget McLaughlin

Dear Ms. Casanova:

Enclosed for your records is an approved copy of the following State Plan Amendment (SPA).

Transmittal # 10-003 Reducing Medicaid reimbursement for dental services by 5%.
--Effective Date: April 1, 2010

If you have any questions, please have a member of your staff contact Catherine Leonis at 312-886-5211 or Catherine.Leonis@cms.hhs.gov.

Sincerely,

A handwritten signature in black ink that reads "Verlon Johnson". The signature is written in a cursive style with a long horizontal flourish at the end.

Verlon Johnson
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

Enclosure