

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, M/S S2-26-12
Baltimore, MD 21244-1850

CMS

CENTERS for MEDICARE & MEDICAID SERVICES

Center for Medicaid , CHIP, and Survey & Certification

JUN 29 2010

Ms. Barbara Langner, PhD, RN
Kansas Health Policy Authority
Landon State Office Building
900 SW Jackson Room 900-N
Topeka, Kansas 61626-2102

RE: TN 10-06

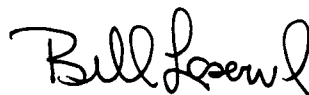
Dear Dr. Langner,

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 10-006. This amendment provides for per diem reimbursement for class I and class II psychiatric residential treatment facilities.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30) and 1923 of the Social Security Act and implementing Federal regulations at 42 CFR 447 Subpart C. We are pleased to inform you that Medicaid State plan amendment 10-06 is approved effective April 1, 2010.

If you have any questions, please call Tim Weidler at (816) 426-6429.

Sincerely,



Cindy Mann
Director

Center for Medicaid, CHIP, and Survey & Certification

cc: Rita Haverkamp

bcc: Mark Cooley (email)