

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
150 S. Independence Mall West
Suite 216, The Public Ledger Building
Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

13 December 2010

John G. Folkemer
Deputy Secretary
Health Care Financing
MD Department of Health and Mental Hygiene
201 West Preston Street, Suite 525
Baltimore, MD 21201

Dear Mr. Folkemer:

Enclosed is a copy of the approved State Plan Amendment (SPA), Transmittal Number 10-11. This SPA defines the State's coinsurance payment for Part B claims for all dual Medicare and full Medicaid covered individuals and Qualified Medicare Beneficiary-only individuals.

The effective date for this amendment is July 1, 2010. The signed CMS-179 form and the approved State Plan pages are enclosed. If you have questions about this SPA, please contact Rosemary Feild at (215) 861-4278.

It has been determined that this SPA does not have a direct impact on Indians or the Maryland Urban Indian Organization (which is the only Indian health program in the State); however, the State is reminded to continue following agreed-upon procedures for seeking advice from the Maryland Urban Indian Organization in advance of submitting any SPA or Waiver having a direct impact on Indians or the Urban Indian Organization.

Sincerely,

/s/
Ted Gallagher
Associate Regional Administrator

Enclosure

cc: Susan Tucker
Debbie Ruppert
Lisa Fassett