

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



OCT 7 2010

Brian Osberg
State Medicaid Director
Minnesota Department of Human Services
P.O. Box 64983
St. Paul, MN 55164-0983

Dear Mr. Osberg:

Enclosed for your records is an approved copy of the following State Plan Amendment:

Transmittal #10-014b - Dental Services
--Effective Date: July 1, 2010

If you have any additional questions, please have a member of your staff contact Charles Friedrich at (608) 442-9125 or by e-mail at Charles.Friedrich@cms.hhs.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Verlon Johnson". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

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

cc: Lisa Knazan, MDHS