

February 28, 2012

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

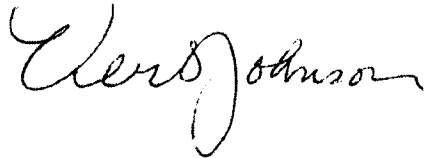
Dear Mr. Godfrey:

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

Transmittal #11-004 - Miscellaneous Mental Health Rate Methodology Changes –
Effective Date: June 28, 2011

If you have any additional questions, please have a member of your staff contact Courtenay Savage at (312) 353-3721 or by e-mail at Courtenay.Savage@cms.hhs.gov.

Sincerely,



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

cc: Lisa Knazan, MDHS

Enclosure