

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Division of Medicaid & Children's Health Operations
61 Forsyth Street, Suite 4T20
Atlanta, Georgia 30303



June 29, 2010

Dr. Robert L. Robinson, Executive Director
Division of Medicaid
550 High Street
Walter Sillers Building, Suite 1000
Jackson, MS 39201

RE: Mississippi Title XIX State Plan Amendment, Transmittal #10-019

Dear Dr. Robinson:

We have reviewed the proposed amendment to the Mississippi Medicaid State Plan that was submitted under transmittal number 10-019 and received in the Regional Office on March 31, 2010. This amendment establishes a new reimbursement rate by removing the 5% rate reduction language currently in place and implemented by MS State Legislature in 2002. The services as described on 4.19B pages 4c and 5 as approved with this state plan will be reimbursed at 90% of the current Medicare fee schedule.

Based on the information provided, we are pleased to inform you that Mississippi Medicaid State Plan Amendment 10-019 was approved on June 28, 2010. The effective date of this amendment is January 1, 2010. We are enclosing the approved form HCFA-179 and plan page.

If you have any questions or need any further assistance, please contact Yvette Moore at (404) 562-7327.

Sincerely,

/s/

Jackie Glaze
Associate Regional Administrator

Enclosures