

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, Maryland 21244-1850



**Center for Medicaid and CHIP Services**

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DEC - 2 2011

Ms. Mary E. Dalton  
State Medicaid Director  
Department of Public Health & Human Services  
P.O. Box 4210  
Helena, MT. 59604

Re: Montana 11-028

Dear Ms. Dalton:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 11-028. Effective for services on or after August 1, 2011, this amendment (1) implements legislative funding for nursing facility reimbursement; (2) updates references to reflect the current fiscal year; (3) updates the current statewide median price; (4) incorporates the funding level for the direct care wage component of the rate; and, (5) provides for other minor clarifications.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. We are pleased to inform you that Medicaid State plan amendment TN 11-028 is approved effective August 1, 2011. The HCFA-179 and the amended plan pages are attached.

If you have any questions, please contact Christine Storey at (303) 844-7044.

Sincerely,

A handwritten signature in black ink that reads "Cindy Mann". The signature is written in a cursive, flowing style.

Cindy Mann  
Director, CMCS