

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	1. TRANSMITTAL NUMBER: 11-09-MA	2. STATE New Jersey
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE September 1, 2011		

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

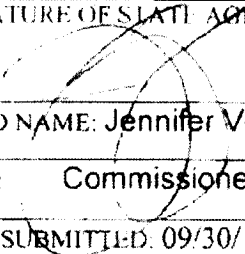
6. FEDERAL STATUTE/REGULATION CITATION: Social Security Act Section 1905a4 and 42 CFR 440.230(b) & 42 C.F.R. 440.210(a)	7. FEDERAL BUDGET IMPACT a. FFY 2011 \$3,469 (cost) b. FFY 2012 \$43,306 (cost) (See attachment)
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1A page 2; Attachment 3.1B page 1a; Attachment 3.1B page 1b Addendum to Attachment 3.1A page 4e; Addendum to Attachment 3.1B page 4e; ** SEE REMARKS	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1A page 2; Attachment 3.1B page 1a; Attachment 3.1B page 1b New New

10. SUBJECT OF AMENDMENT:

Tobacco Cessation Services for Pregnant Women

11. GOVERNOR'S REVIEW (Check One):

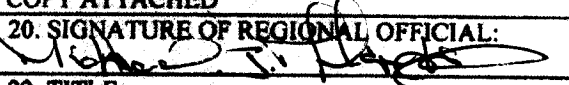
GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Not required, pursuant to 7.4 of the Plan
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Valerie Harr, Director Division of Medical Assistance and Health Services P O. Box 712, #26 Trenton, NJ 08625-0712
13. TYPED NAME: Jennifer Velez	
14. TITLE: Commissioner, DHS	
15. DATE SUBMITTED: 09/30/11	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:	18. DATE APPROVED: December 16, 2011
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: September 1, 2011	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Michael Melendez	22. TITLE: Associate Regional Administrator Division of Medicaid and State Operations

23. REMARKS:

****This SPA implements section 4107 of the Affordable Care Act, tobacco cessation services for pregnant women.**