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 State Operations (CMSO)

Ms. Tracy Plouck, Deputy Director Office of Ohio Health Plans Ohio Department of Job and Family Services P.O. Box 182709 50 West Town Street, Suite 400 Columbia, Ohio 43218

MAR 3 0 2010

RE: Ohio 09-024

Dear Ms. Plouck:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 09-024. Effective for services on or after October 16, 2009, this amendment contains a revision to the correction period for minimum data set (MDS) version 2.0 submissions from nursing facilities (NF). Specifically, this amendment shortens the time period, from 80 to 45 days, in which a provider must make corrections.

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 09-024 is approved effective October 16, 2009. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Todd McMillion at (608) 441-5344.

Sincerely,

Cindy Mann

Director

Center for Medicaid and State Operations