TO A MCRETTER AND MOREON ON AND ADDRESS.	T	Y
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	0 9 - 031	OHIO
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE & MEDICAID SERVICES	NOVEMBER 30, 2009	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
☐ NEW STATE PLAN ☐ AMENDMENT TO BE O	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate Transmittal for each	amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
42 CFR 440; 42 CFR 441; 42 CFR 447	a. FFY 2010	\$39.4 MILLION
	b. FFY 2011	\$41.7 MILLION
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	
ATTACHB ITAM 440	OR ATTACHMENT (If Applicable):	
ATTACHMENT 4.19-A, pages 31 and 32	}	
Ohio Administrative Code Rule 5101:3-2-52		
10. SUBJECT OF AMENDMENT: Supplemental inpatient hospital upper limit payments for private hospitals	j.	
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECI	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Governor has delegated	signature authority
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		aiPurera e manno 117
E STEEL STEEL WITHIN 45 DATS OF SODIMIT TAL	to ODJFS Director. Dir	ector has delegated
E T TIME T TEODITES WITHIN 45 BATS OF SOBINITIAL	to ODJFS Director. Dir signature authority to N	ector has delegated
	signature authority to N	ector has delegated
12. SIGNATURE OF STATE AGENCY OFFICIAL:		ector has delegated
12. SIGNATURE OFFICIAL:	signature authority to M	ector has delegated
12. SIGNATURE OF STATE AGENCY OFFICIAL:	signature authority to M 16. RETURN TO: Becky Jackson	ector has delegated Medicaid Director
12. SIGNATURE OF STATE AGENCY OFFICIAL: 13. TYPED NAME TRACY J. PLOUCK	signature authority to M 16. RETURN TO: Becky Jackson OHP/Bureau of Policy and Benefit Ma	ector has delegated Medicaid Director
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