| TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL SC 11-003 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) 10. REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF PLAN MATERIAL (*Check One): NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment) 6. FEDERAL STATUTE/REGULATION CITATION: Section 1902(a)(42)(B)(i) of the Act section 115 of MIPPA 8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Basic Text, Page 53a.1 10. SUBJECT OF AMENDMENT: GOVERNOR'S REVIEW (*Check One): GOVERNOR'S REVIEW (*Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT OR ATTACHMENT: GOVERNOR'S OFFICE REPORTED NO COMMENT OR ATTACHMENT (*If Applicable): 11. GOVERNOR'S REVIEW (*Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT OR ATTACHMENT OR ATTACHMENT (*If Applicable): 12. SIGNATURE OF STATE AGENCY OFFICIAL: 13. TYPED NAME: Anthony F. Keck 14. TILLE: Director 15. DATE SUBMITTED: March 4, 2011 FOR REGIONAL OFFICE USE ONLY 17. DATE RECEIVED: 18. DATE APPROVED PLAN APPROVED—ONE COPY ATTACHED 19. EFFECTIVE DATE OF APPROVED MATERIAL: 10. SUBMATURE OF REGIONAL OFFICIAL: 10. ATTACHMENT (*II) 10. SUBMATURE OF REGIONAL OFFICIAL: 11. GOVERNOR S REVIEW (*Check One): GOVERNOR S REVIEW (*C | TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF PLAN MATERIAL (Check One): NEW STATE PLAN COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMER 6. FEDERAL STATUTE/REGULATION CITATION: Section 1902(a)(42)(B)(i) of the Act section 115 of MIPPA 8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Basic Text, Page 53a.1 10. SUBJECT OF AMENDMENT: Limitations on Estate Recovery — Medicare Cost Sharing. | 3. PROGRAM SOCIAL SE 4. PROPOSED 01/01/11 CONSIDERED A NDMENT (Sepa 7. FEDERAL a. FFY b. FFY 9. PAGE NUM OR ATTAC | AS NEW PLAN BUDGET IMPACT: 2011 2012 MBER OF THE SUPE | South Carolina TITLE XIX OF THE DICAID) AMENDMENT ach amendment) FMAP \$N/A \$N/A \$RSEDED PLAN SECTION |
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