

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
1301 Young Street, Room 833
Dallas, Texas 75202



Division of Medicaid & Children's Health, Region VI

June 29, 2011

Our Reference: SPA TX 11-21

Mr. Billy Millwee
Associate Commissioner for Medicaid & CHIP
Health and Human Services Commission
Post Office Box 13247
Mail Code: H100
Austin, Texas 78711

Dear Mr. Millwee:

We have reviewed the State's proposed amendment to the Texas State Plan submitted under Transmittal Number 11-21, dated June 20, 2011. This state plan amendment adds language from Section 6505 of the Affordable Care Act (ACA), prohibiting payments for items or services under the State plan or waiver to any financial institution or entity outside of the United States.

Based on the information submitted, we have approved the amendment for incorporation into the official Texas State Plan with an effective date change of June 1, 2011. A copy of the CMS-179 and the approved plan pages are enclosed with this letter.

If you have any questions, please contact Cheryl Rupley at (214) 767-6278.



Sincerely,

A large black rectangular redaction box covering the signature of the Associate Regional Administrator.

Dir. Brown
Associate Regional Administrator

Enclosures

cc: Emily Zalkovsky, Policy Development Support

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 11-021	2. STATE: TEXAS
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE: June 1, 2011	
5. TYPE OF PLAN MATERIAL (<i>Circle One</i>):			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (<i>Separate Transmittal for each amendment</i>)			
6. FEDERAL STATUTE/REGULATION CITATION: Section 1902(a)(80) of the Social Security Act, P.L. 111-148 (Section 6505)		7. FEDERAL BUDGET IMPACT: SEE ATTACHMENT a. FFY 2011 \$0 b. FFY 2012 \$0 c. FFY 2013 \$0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: SEE ATTACHMENT TO BLOCKS 8 & 9		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): SEE ATTACHMENT TO BLOCKS 8 & 9	
10. SUBJECT OF AMENDMENT: The proposed amendment provides a statement of compliance with the prohibition on payments to any financial institution or entity located outside of the U.S. for any items or services provided under the State Plan or under a waiver.			
11. GOVERNOR'S REVIEW (<i>Check One</i>):			
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Sent to Governor's Office this date. Comments, if any, will be forwarded upon receipt.	
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Billy R. Millwee State Medicaid Director Post Office Box 13247, MC: H-100 Austin, Texas 78711	
13. TYPED NAME: Billy R. Millwee			
14. TITLE: State Medicaid Director			
15. DATE SUBMITTED: June 20, 2011			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 20 June, 2011		18. DATE APPROVED: 29 June 2011	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1 June, 2011		20. SIGNATURE OF REGIONAL ADMINISTRATOR: 	
21. TYPED NAME: Bill Brooks		22. TITLE: Associate Regional Administrator Division of Medicaid & Children's Health	
23. REMARKS:			

Attachment to Blocks 8 & 9 of CMS Form 179

Transmittal Number 11-021

**Number of the
Plan Section or Attachment**

Basic State Plan
Table of Contents
Page 79z

**Number of the Superseded
Plan Section or Attachment**

Basic State Plan
N/A – new page
N/A – new page

State of Texas
Table of Contents (continued)

<u>Section</u>	<u>Page Numbers</u>
4.35 Enforcement of Compliance for Nursing Facilities79c.1
4.36 Required Coordination Between the Medicaid and WIC Programs79d
4.38 Nurse Aide Training and Competency Evaluation for Nursing Facilities79n
4.39 Preadmission Screening and Annual Resident Review in Nursing Facilities79s
4.40 Survey & Certification Process79u
4.41 Resident Assessment for Nursing Facilities79x
4.43 Cooperation with Medicaid Integrity Efforts79y
4.44 Medicaid Prohibition on Payments to Institutions or Entities Located Outside of the United States79z

STATE <u>Texas</u>	A
DATE REC'D <u>6-20-11</u>	
DATE APPV'D <u>6-29-11</u>	
DATE EFF <u>6-1-11</u>	
HCFA 179 <u>11-21</u>	

TN 11-21 Approval 6-29-11 Effective Date 6-1-11

Supersedes TN ~~9~~ **SUPERSEDES: NONE - NEW PAGE**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State of Texas

Citation

4.44 Medicaid Prohibition on Payments to Institutions or
Entities Located Outside of the United States

Section 1902(a)(80)
of the Social Security
Act,
P.L. 111-148 (Section
6505)

X The State shall not provide any payments for
items or services provided under the State Plan or under
a waiver to any financial institution or entity located
outside of the United States.

STATE <u>Texas</u>	A
DATE REC'D <u>6-20-11</u>	
DATE APPV'D <u>6-29-11</u>	
DATE EFF <u>6-1-11</u>	
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TN 11-21 Approval 6-29-11 Effective Date 6-1-11

Supersedes TN SUPERSEDES: NONE - NEW PAGE