



Center for Medicaid and CHIP Services

SEP 28 2012

Mr. Michael Hales
Director, Utah Medicaid and Health Financing
P.O. Box 143101
Salt Lake City, UT 84114-3101

Dear Mr. Hales:

This letter is to inform you that the Centers for Medicare & Medicaid Services (CMS) is approving your request to amend Utah's section 1115 demonstration project, entitled Primary Care Network (11-W-00145/8 and 21-W-00054/8). This amendment increases the income eligibility level for demonstration populations III and V from 150 percent of the Federal Poverty Level (FPL) to 200 percent of the FPL. This amendment is effective as of the date of this letter.

CMS approval of this section 1115 demonstration amendment is subject to the limitations specified in the approved waiver and expenditure authorities and not applicables list. The State may deviate from the Medicaid State plan requirements only to the extent those requirements have been specifically listed as waived or not applicable to the expenditure authorities. All requirements of the Medicaid program as expressed in law, regulation, and policy statement not expressly waived or identified as not applicable shall apply to Utah's Primary Care Network Demonstration. This approval is also conditioned upon continued compliance with the enclosed special terms and conditions (STCs) defining the nature, character, and extent of Federal involvement in this project.

These approvals are conditioned upon written acceptance from the State that it agrees with the amendments, expenditure authorities, and STCs. This written acceptance is needed for our records within 30 days of the date of this letter.

Your project officer is Mr. Robert Nelb. He is available to answer any questions concerning your section 1115 demonstration. Mr. Nelb's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Division of State Demonstrations and Waivers
7500 Security Boulevard, Mail Stop: S2-01-16
Baltimore, MD 21244-1850
Telephone: (410) 786-1055
Facsimile: (410) 786-8534
E-mail: robert.nelb@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Mr. Nelb and to Mr. Richard Allen, Associate Regional Administrator in our Denver Regional Office. Mr. Allen's address is:

Centers for Medicare & Medicaid Services
Division of Medicaid and Children's Health
Colorado State Bank Building
1600 Broadway, Suite 700
Denver, Colorado 80202-4367

If you have questions regarding this approval, please contact Ms. Victoria Wachino, Director, Children and Adults Health Programs Group, Center for Medicaid and CHIP Services, at (410) 786-5647

Sincerely,

/Cindy Mann/

Cindy Mann
Deputy Director

Enclosures

cc: Victoria Wachino, CMCS
Richard Allen, Associate Regional Administrator, Region VIII