

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, Maryland 21244-1850



Center for Medicaid and CHIP Services
Children and Adults Health Programs Group

JudyAnn Bigby, M.D.
Secretary
Massachusetts Executive Office of Health and Human Services
1 Ashburton Place, Room 1109
Boston, MA 02108

JUN 20 2012

Dear Dr. Bigby:

This letter is to inform you that the Signature Healthcare Brockton hospital-specific Delivery System Transformation Initiatives (DSTI) plan, as amended, has been approved by the Centers for Medicare & Medicaid Services (CMS). This plan is found to be in accordance with the Special Terms and Conditions (STCs) of the Commonwealth's section 1115 Medicaid Demonstration, entitled MassHealth, (11-W-00030/1), and with the Master DSTI Plan approved on May 17, 2012. This plan is approved for the period starting with the date of this approval letter through June 30, 2014.

As a reminder, in conformance with the requirements of this Demonstration as contained in the STCs, DSTI incentive payments are contingent upon a participating hospital achieving project metrics as defined in its approved hospital-specific DSTI plan. This approval is granted with the understanding that the Commonwealth and participating hospitals will adhere to the requirement that all DSTI initiatives must be new or reflect a significant enhancement to an existing health care initiative to ensure that there is no duplication of Federal funding in support of an initiative. Furthermore, all approved hospital-specific plans must be operated in accordance with the approved Master DSTI Plan and the STCs.

Your project officers are Ms. Jennifer Sheer and Ms. Lynn DelVecchio. They are available to answer any questions concerning your section 1115 Demonstration. Their contact information is as follows:

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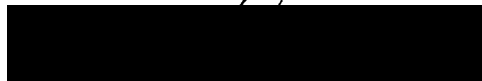
Lynn DelVecchio
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JFK Federal Building
Room 2325
Boston, MA 02203
Telephone: (617) 565-1201
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Official communications regarding program matters should be sent simultaneously to Ms. Sheer, Ms. DelVecchio and to Mr. Richard McGreal, Associate Regional Administrator, in our Boston Regional Office. Mr. McGreal's contact information is as follows:

Richard McGreal
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Room 2325
Boston, MA 02203
Telephone: (617) 565-1226
E-mail: Richard.McGreal@cms.hhs.gov

We commend the Commonwealth for its commitment to ensuring that the investment made herein is constructive and that meaningful transformation occurs within the Demonstration period. We look forward to working closely with the Commonwealth to monitor progress along the way.

Sincerely,

A black rectangular redaction box covers the signature of Allison Orris.

Allison Orris
Acting Director
Division of State Demonstrations and Waivers

Enclosure

cc: Julian Harris, M.D., M.B.A., M.Sc., Medicaid Director
Richard McGreal, ARA, Boston Regional Office
Julie McCarthy, Boston Regional Office