



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

P.O. Box 712
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CHRIS CHRISTIE
Governor

ELIZABETH CONNOLLY
Acting Commissioner

KIM GUADAGNO
Lt. Governor

MEGHAN DAVEY
Director

February 22, 2016

Mehreen Hossain
Project Officer
Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
7500 Security Blvd., Mail Stop S2-26-12
Baltimore, MD 21244-1850
RE: Supports Program Amendment

Dear Ms. Hossain,

I am writing to accept the amendment to the Special Terms and Conditions (STCs) of the New Jersey Comprehensive Waiver Demonstration (Demonstration) that allows expanded financial eligibility and access to Private Duty Nursing services for certain individuals in the Supports Program.

New Jersey understands the conditions of the approval and is looking forward to working with the federal government in assuring continued compliance with the STCs.

Thank you for your time and effort during this process. We look forward to our continued collaboration throughout the implementation and evaluation of this Demonstration. If you have any questions, please contact me by calling 609-588-2600.

Sincerely,

A handwritten signature in black ink that reads "Meghan Davey".

Meghan Davey
Director

MD/sdm

cc: Elizabeth Connolly
Vikki Wachino
Valerie Harr
Liz Shea
Carol Grant
Eliot Fishman
Michael Melendez