

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
1600 Broadway, Suite 700  
Denver, Colorado 80202-4967



## Region VIII

July 25, 2011

Mary Dalton  
State Medicaid Director  
Department of Public Health and Human Services  
P.O. Box 4210  
Helena, MT 59604-4210

RE: Montana #11-018

Dear Ms. Dalton,

This letter is to inform you that the State Plan Amendment (SPA) submitted under transmittal number MT-11-018 has been approved. The SPA serves to terminate its Program of All-Inclusive Care for the Elderly, effective July 1, 2011. We enclosed the CMS-179 form and the amended plan pages.

If you have any questions, please feel free to contact Di Friedli at (303) 844-7112 or via e-mail at [Diana.Friedli@cms.hhs.gov](mailto:Diana.Friedli@cms.hhs.gov).

Sincerely,

/s/

Richard C. Allen  
Associate Regional Administrator  
Division of Medicaid, CHIP and Survey & Certification

C: Jo Thompson, MT  
Kelly Williams, MT  
Angela Taube, CMS