DEPARTMENT OF HEALTH & HUMAN SERVICES



Region IX

Division of Medicaid & Children's Health Operations
90 Seventh Street, Suite 5-300 (5W)

San Francisco, CA 94103-6706

JUN 26 2012

Antere'a Puletasi Medicaid Program Director L.B.J. Tropical Medical Center Pago Pago, American Samoa 96799

Dear Mr. Puletasi:

I am writing to inform you that American Samoa's State Plan Amendment (SPA) No. 12-001 has been approved. This SPA was submitted to my office on March 29, 2012, and elaborates upon the amount, duration and scope of services provided to beneficiaries as part of the American Samoa State Medicaid Plan. The approval is effective January 1, 2012 as requested.

Attached are copies of the new State Plan pages to be incorporated within your approved State plan:

- Section 3.1, page 1
- Attachment 3.1-A, pages 1-15
- Attachment 3.1-D, pages 1-2

If you have any questions, please contact Tom Schenck at (415) 744-3589, or tom.schenck@cms.hhs.gov.

Sincerely,

/s/ Gloria Nagle, Ph.D., MPA Associate Regional Administrator Division of Medicaid & Children's Health Operations

cc: Mary Rydell, CMS Pacific Area Representative