

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
JFK Federal Building, Government Center
Room 2275
Boston, Massachusetts 02203



CENTERS for MEDICARE & MEDICAID SERVICES

Division of Medicaid and Children's Health Operations / Boston Regional Office

July 18, 2011

Roderick L. Bremby, Commissioner
Department of Social Services
25 Sigourney Street
Hartford, Connecticut 06106

Dear Mr. Bremby:

We are pleased to enclose a copy of approved Connecticut State Plan Amendment (SPA) No. 11-019, submitted to my office on June 28, 2011. This SPA transmitted a proposed revision to Connecticut's approved Title XIX State Plan in order to describe and assure its compliance with Section 6505 of the Patient Protection and Affordable Care Act (Pub. L. 111-148, enacted March 23, 2010). This section prohibits payments by the state Medicaid agency for services provided under the state plan or a waiver to financial institutions or entities located outside the United States. This SPA has been approved effective June 1, 2011, as requested by the State.

Changes are reflected in the following sections of your approved State Plan:

- Section 4.44

If you have any questions regarding this matter you may contact Marie Montemagno at (617) 565-9157 or by e-mail at Marie.Montemagno@cms.hhs.gov.

Sincerely,

/s/

Richard R. McGreal
Associate Regional Administrator

Enclosure

cc: Mark Schaefer, Director, Medical Care Administration

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER 11-019	2. STATE CT
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE 06/01/2011	
5. TYPE OF PLAN MATERIAL (Check One)			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION Section 1902(a)(80) of the Social Security Act		7. FEDERAL BUDGET IMPACT	
		a. FFY 2012 \$ 0.00	
		b. FFY 2013 \$ 0.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 4.44 (NEW)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable) -	
10. SUBJECT OF AMENDMENT The Department of Social Services is proposing to revise its Medicaid State Plan effective June 1, 2011, in order to describe and assure its compliance with Section 6505 of the Patient Protection and Affordable Care Act (Pub. L. 111-148, enacted on March 23, 2010). This section prohibits payments by the state Medicaid agency for services provided under the state plan or a waiver to financial institutions or entities located outside of the United States.			
11. GOVERNOR'S REVIEW (Check One)			
<input checked="" type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL		18. RETURN TO State of Connecticut Department of Social Services 25 Sigourney Street Hartford, CT 06106-5033 Attention: Ginny Mahoney	
13. TYPED NAME Roderick L. Bremby			
14. TITLE Commissioner			
15. DATE SUBMITTED June 28, 2011			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED June 28, 2011		18. DATE APPROVED July 18, 2011	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL June 1, 2011		20. SIGNATURE OF REGIONAL OFFICIAL	
21. TYPED NAME Richard R. McGreal		22. TITLE Associate Regional Administrator Div. of Medicaid & Children's Health Operations	
23. REMARKS			

State Connecticut

4.44 Medicaid Prohibition on Payments to Institutions or Entities Located Outside of the United States

Citation

Section 1902(a)(80) of the Social Security Act, P.L. 111-148 (Section 6505)

X The state shall not provide any payments for items or services provided under the State plan or under a waiver to any financial institution or entity located outside of the United Staets.

TN#: 11-019
Supersedes
TN#: NEW

Approval Date: 7/18/11

Effective Date: 6/01/2011