

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>1 1 — 0 0 7</u>	2. STATE IOWA
	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 May 1, 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 <i>Qualifying Individual (QI) Program Supplemental Funding Act of 2008</i> 42 CFR 435.940 through 435.960	7. FEDERAL BUDGET IMPACT a. FFY '11 \$ 0 b. FFY '12 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 4.32, Page 79	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Section 4.32, Page 79

10. SUBJECT OF AMENDMENT
Iowa has implemented a system that provides for data matching through the Public Assistance Reporting Information system (PARIS), including matching with medical assistance programs of other states.

11. GOVERNOR'S REVIEW (Check One)
 GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL <i>Charles M. Palmer</i>	16. RETURN TO CHARLES M. PALMER DIRECTOR DEPARTMENT OF HUMAN SERVICES 1305 EAST WALNUT 5TH FLOOR DES MOINES IA 50319-0114
13. TYPED NAME CHARLES M. PALMER	
14. TITLE DIRECTOR	
15. DATE SUBMITTED 4-25-11	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED April 25, 2011	18. DATE APPROVED June 24, 2011
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL May 1, 2011	20. SIGNATURE OF REGIONAL OFFICIAL <i>Leticia Barraza</i>
21. TYPED NAME Leticia Barraza	22. TITLE Acting Associate Regional Administrator for Medicaid and Children's Health Operations

23. REMARKS
pen and ink change per e-mail from State on 6.9.11