

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, Maryland 21244-1850



**Center for Medicaid and CHIP Services**

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MAY 17 2012

Ms. Barbara Langner, PhD, RN  
Medicaid Director  
Division of Health Care Finance  
Landon State Office Building  
900 SW Jackson, Room 900N  
Topeka, Kansas 66612-1220

RE: KS 11-010:

Dear Dr. Langner:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 11-010. Effective July 1, 2011, this amendment modifies the rate setting methodology for nursing facility services. Specifically, this amendment updates all components of the rate setting methodology by one year and updates numerous charts and exhibits within the State plan that demonstrate the revised factors and limits applicable to the new rate period.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. This letter informs you that Medicaid State plan amendment 11-010 is approved effective July 1, 2011. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Tim Weidler at (816) 426-6429.

Sincerely,

A handwritten signature in black ink that reads "Cindy Mann". The signature is written in a cursive, flowing style.

Cindy Mann  
Director, CMCS

Enclosures