

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young St., Room 833
Dallas, TX 75202



DIVISION OF MEDICAID AND CHILDREN'S HEALTH

September 14, 2012

Our Reference: SPA LA 12-13

Ms. Ruth Kennedy, State Medicaid Director
Department of Health and Hospitals
Bienville Building
628 North 4th Street
Post Office Box 91030
Baton Rouge, LA 70821-9030

Attn: Keydra Singleton

Dear Ms. Kennedy:

We have reviewed the proposed amendment to your Medicaid State Plan submitted under Transmittal Number 12-13. This state plan amendment allows Louisiana to comply with the federal requirements for tribal consultation for state plan amendments, waiver amendments and CHIP amendments.

Transmittal Number 12-13 is approved with an effective date of April 1, 2012 as requested. A copy of the HCFA-179, Transmittal No. 12-13 dated June 19, 2012 is enclosed along with the approved plan pages.

If you have any questions, please contact Ford Blunt III at ford.blunt@cms.hhs.gov or by phone at (214) 767-6381.

Sincerely,

Bill Brooks
Associate Regional Administrator

Enclosures