

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
1600 Broadway, Suite 700  
Denver, CO 80202-4967



## **Region VIII**

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May 31, 2012

Mary Dalton, Medicaid & Health Services Manager  
Montana Department of Health & Human Services  
1400 Broadway  
PO Box 202951  
Helena, MT 59620

Re: SPA MT-12-015

Dear Ms Dalton:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 12-015. This amendment is to clarify the State payment methodology for services billed on the CMS 1450 form (Rural Health Clinic, Outpatient Hospital and Outpatient Critical Assess Hospital). These services are paid the full deductible and coinsurance for Medicare Part B services.

Please be informed that this State Plan Amendment was approved on May 30, 2012 with an effective date of January 1, 2012. We will be sending the CMS-179 and the amended plan page(s) in a separate e-mail.

If you have any questions regarding this SPA please contact Cindy Smith at 303-844-7041.

Sincerely,

/s/

Richard C. Allen  
Associate Regional Administrator  
Division for Medicaid and Children's Health Operations

Cc: Anna Whiting Sorrell  
Duane Preshinger  
Jo Thompson