

## **Region VIII**

September 20, 2012

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

Re: SPA MT-12-019

Dear Ms Dalton:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 12-019. This State Plan Amendment is updating rates and the date reimbursement rates are set for Optometrist Services.

Please be informed that this State Plan Amendment was approved on September 19, 2012 with an effective date of July 1, 2012. We are enclosing the CMS-179 and the amended plan page(s).

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