

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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**APR 13 2012**

Vivianne M. Chaumont, Director  
Division of Medicaid and Long-Term Care  
Nebraska Department of Health and Human Services  
301 Centennial Mall South  
Lincoln, Nebraska 68509

RE: Nebraska State Plan Amendment TN: 11-24

Dear Ms. Chaumont:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 11-24. This amendment proposes a 2.5% rate reduction for nursing facility payment rates and provides that intermediate care facility for the mentally retarded (ICF/MR) payment will not receive an inflation adjustment. This amendment also removes obsolete language and adds clarifying language enabling the State plan to flow from year-to-year eliminating the need for certain annual updates.

We conducted our review of your submittal according to the statutory requirements at sections 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 is to inform you that Medicaid State plan amendment 11-24 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 style.

Cindy Mann  
Director, CMCS

Enclosures