

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, CHIP, and Survey & Certification

NOV 15 2010

Michael J. Willden, Director
Department of Health and Human Services
4126 Technology Way, Suite 100
Carson City, Nevada 89706-2009

RE: Nevada State Plan Amendment TN: 10-009

Dear Mr. Willden:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 10-009. This amendment provides for a technical correction of State plan language regarding the version of Resource Utilization Group/Minimum Data Set used as part of Nevada's nursing facility rate-setting.

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. We are pleased to inform you that Medicaid State plan amendment 10-009 is approved effective October 1, 2010. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Mark Wong at (415) 744-3561.

Sincerely,


Cindy Mann
Director, CMCS

Enclosures

cc: Charles Duarte, Administrator, DHCFP
Elizabeth Aiello, Deputy Administrator, DHCFP
Lynn Carrigan, ASP IV, DHCFP
Marta Stagliano, Chief, Compliance, DHCFP
Jan Prentice, MA IV, Rates and Cost Containment, DHCFP