

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>  <b>FOR: Centers for Medicare and Medicaid Services</b>	1. TRANSMITTAL NUMBER: 10-006	2. STATE Arizona
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 1, 2010	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:  Section 1905(a) of the Social Security Act 42 CFR Part 440	7. FEDERAL BUDGET IMPACT:  FFY 2011: (\$18,441,900) FFY 2012: (\$18,650,200) <i>gm</i>
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  Attachment 3.1-A, page 2 Attachment 3.1-A Limitations, pages 5, 6, 8, 9, 9(a) Attachment 3.1-E, page 1 Attachment 4.19-A, page 6(a) <i>gm</i>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):  Same
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10. SUBJECT OF AMENDMENT:  
  
Implements reductions and limitations in optional services to the adult benefit package.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO:  Monica Coury 801 E. Jefferson, MD#4200 Phoenix, Arizona 85034
13. TYPED NAME: Monica Coury	
14. TITLE: Assistant Director	
15. DATE SUBMITTED: May 21, 2010	

<b>FOR REGIONAL OFFICE USE ONLY</b>	
17. DATE RECEIVED: May 21, 2010	18. DATE APPROVED: <b>AUG 11 2010</b>
<b>PLAN APPROVED - ONE COPY ATTACHED</b>	
19. EFFECTIVE DATE OF APPROVED MATERIAL: October 1, 2010	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Gloria Nagle	22. TITLE: Associate Regional Administrator Medicaid & Children's Health Operations

23. REMARKS:  
Box 8 changes made by State on 7/19/10 per CMS request.  
Box 7 changes made by State on 7/26/10 per CMS request.