

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**

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Mr. John R. Guhl  
Director  
Department of Human Services  
Division of Medical Assistance and Health Services  
State of New Jersey  
P.O. Box 712  
Trenton, New Jersey 08625-0712

MAY 1 1 2010

RE: New Jersey 09-08

Dear Mr. Guhl:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 09-08. Effective July 1, 2009 this amendment continues a higher level of reimbursement to those nursing facilities with a Medicaid patient occupancy level of 75% or more.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act and the regulations at 42 CFR 447 Subpart C. We are pleased to inform you that New Jersey 09-08 is approved effective July 1, 2009.

I have enclosed the approved State plan pages. If you have any questions, please call Tom Brady at 518-396-3810 x109 or Rob Weaver at 410-786-5914.

Sincerely,

  
Cindy Mann

Director

Center for Medicaid, CHIP, and Survey & Certification (CMCS)