

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 235
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

September 28, 2010

CORRECTED

Refer to:
DMCH: GBS
NE.4154.R04.02

Vivianne Chaumont, Director
Nebraska Department of Health & Human Services
Finance & Support
301 Centennial Mall S., 5th Floor
Lincoln NE 68509

Dear Ms. Chaumont:

We are pleased to inform you that your request for amending Nebraska's HCBS Waiver for Children with Developmental Disabilities and their Families (DD) has been approved. The approval of this amendment is based on the State's request to update the information related to Nebraska DHHS certification and complaint activities. This amendment has been assigned control number **4154.R04.02**. This number should be used in any subsequent correspondence.

Based on the assurances and information you provided, CMS approves the waiver amendment request, with an effective date of October 1, 2010. The following estimates of unduplicated waiver recipients and the average per capita cost of waiver services have been approved:

<u>Period</u>	<u>Year</u>	<u>Unduplicated Recipients</u>		<u>Factor D</u>	<u>TOTAL</u>
6/1/2009-5/31/2010	3	425	X	\$55,675.22	\$23,661,968.50
6/1/2010-5/31/2011	4	450	X	\$58,503.44	\$26,326,548.00
6/1/2011-5/31/2012	5	500	X	\$61,393.39	\$30,696,695.00

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We conclude that the information provided in your waiver amendment request is within federal statutes and regulations. We appreciate the time and effort your staff put into this revised amendment. If you have any questions, please contact Gail Brown Stevenson at (816) 426-5925.

Sincerely,

/s/

James G. Scott
Associate Regional Administrator
for Medicaid and Children's Health Operations

cc: Kathie Lueke
Tricia Mason
Pam Hovis

bcc: Claire Hardwick
Gail Brown Stevenson
Stephanie Watson
Mandy Hanks

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