

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

November 24, 2009

Refer to:
DMCH: GBS
NE.4154.R04.01

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. This waiver amendment has been assigned control number 4154.R04.01. 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 April 1, 2010 as requested. 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>
4/1/2009-5/31/2010	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

We conclude that the information provided in your amendment request conforms to the requirements of statute and regulation. We appreciate the effort and cooperation provided by your staff and we wish to express our sincere appreciation for all who assisted with the preparation of this renewal request. 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: Kay Wenzl
Pam Hovis

bcc: Claire Hardwick
Gail Brown Stevenson
Stephanie Watson
Rhonda Wells
Jackie Glaze

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