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State/Territory Name:

New York

State Plan Amendment (SPA) #:

14-037

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179 like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services New York Regional Office 26 Federal Plaza, Room 37-100 New York, NY 10278



DIVISION OF MEDICAID AND CHILDREN'S HEALTH OPERATIONS

February 17, 2015

Medicaid Director, Deputy Commissioner Office of Health Insurance Programs NYS Department of Health Corning Towers (OCP-1211) Albany, New York 12237

Dear Mr. Helgerson:

We have completed our review of New York's State Plan amendment (SPA) 14-37 received in our office on December 31, 2014 and find it acceptable for incorporation into New York's Medicaid State Plan. This SPA proposes to add seven western New York counties to the state Medicaid transportation management initiative effective November 1, 2014.

Please note the approval date of this SPA is February 17, 2015. Copies of the approved State Plan pages and the signed CMS-179 are enclosed.

Should you have any questions or concerns please contact Tara Porcher at (212) 616-2418.

Sincerely,

Michael Melendez Associate Regional Administrator Division of Medicaid & Children's Health

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF		FORM APPROVAL	
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TN#: #14-037 Approval Date: FEBRUARY 17. 2015

Supersedes TN#: #13-23 Effective Date: NOVEMBER 01.2014