DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, Maryland 21244-1850

State Demonstrations Group

MAR 2 2 2016

Mary E. Dalton
State Medicaid Director
Montana Department of Public Health and Human Services
P.O. Box 4210
Helena, MT 59604-4210

Dear Ms. Dalton:

Thank you for your recent request to amend the state of Montana's section 1115 demonstration, entitled "Basic Medicaid for Able Bodied Adults" (Project No. 11-W-00181/8). We have completed a preliminary review of the amendment in accordance with the amendment process special terms and conditions (STCs) and have determined that the state's amendment application has met the required elements.

CMS acknowledges receipt of the state's amendment application. The amendment application will now be posted on Medicaid.gov. The state's application is available at http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/Waivers.html.

We look forward to working with you and your staff to amend the state's demonstration. If you have additional questions or concerns, please contact your project officer Ms. Valisha Andrus, Division of Medicaid Expansion Demonstrations, at (410) 786-2613, or at valisha.andrus@cms.hhs.gov.

Sincerely,

Andrea J. Casart
Acting Director
Division of Medicaid Expansion Demonstrations

cc: Richard Allen, Associate Regional Administrator, Denver Regional Office