



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Care Financing Administration

**Center for Medicaid and State Operations
7500 Security Boulevard
Baltimore, MD 21244-1850**

JAN 29 2001

Ms. Barbara Coulter Edwards
Deputy Director
Office of Ohio Health Plans
30 East Broad Street Columbus, Ohio 43266-0423

Dear Ms. Edwards:

I am pleased to inform you that your request to amend Ohio's Medicaid home and community-based services (HCBS) waiver that serves individuals with mental retardation and developmental disabilities, has been approved. This amendment has been assigned control number 0291.01 which should be used in all future correspondence regarding this amendment.

Specifically, you requested a technical amendment to require that, effective with the date of this amendment, individuals entering the waiver live in a facility licensed under ORC 5123.18 and 5123.19 and replace individuals living in those facilities in order to preclude new slots from being opened. Based upon the information you provided, I approve your amendment effective January 1, 2001, as requested.

The amendment request conforms fully to the requirements of the statute and Medicaid regulations. I appreciate the effort and cooperation provided by you and your staff.

Sincerely,

Mary Jean Duckett
Director
Division of Benefits, Coverage and Payment

cc:
Chicago Regional Office
Attn: Leslie Campbell