

JUL 29 2010

Jason A. Helgeson, Administrator  
Division of Health Care Access and Accountability  
Wisconsin Department of Health Services  
1 West Wilson Street  
P. O. Box 309  
Madison, Wisconsin 53701-0309

Dear Mr. Helgeson:

Enclosed for your records is an approved copy of the following State Plan Amendment:

Transmittal #09-020 Tribal Consultation Requirements  
-- Effective October 1, 2009

If you have any additional questions, please have a member of your staff contact Cynthia Garraway at (312) 353-8583 or [Cynthia.Garraway@cms.hhs.gov](mailto:Cynthia.Garraway@cms.hhs.gov).

Sincerely,



Verlon Johnson  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Enclosure

Cc: Al Matano, Wisconsin Department of Health Services

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:  
09-020

2. STATE  
Wisconsin

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE  
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
10/01/2009

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:  
Section 1902(a)(73) SSA

7. FEDERAL BUDGET IMPACT:  
a. FFY 2010 .....\$0K  
b. FFY 2011 .....\$0K

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  
Page 9. ....

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (If Applicable):  
Same

10. SUBJECT OF AMENDMENT:

Tribal consultation requirements.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:  
*Krista Willing*

16. RETURN TO:  
Jason A. Helgeson  
State Medicaid Director  
Division of Health Care Access and Accountability  
1 W. Wilson St.  
P.O. Box 309  
Madison, WI 53701-0309

13. TYPED NAME:  
Jason A. Helgeson

14. TITLE:  
State Medicaid Director

15. DATE SUBMITTED:  
December 21, 2009

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:  
December 21, 2009

18. DATE APPROVED: JUL 29 2010

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL:  
October 1, 2009

20. SIGNATURE OF REGIONAL OFFICIAL:  
*Verlon Johnson*

21. TYPED NAME:  
Verlon Johnson

22. TITLE:  
Associate Regional Administrator

23. REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

Citation 1.4 State Medical Care Advisory Committee  
 42 CFR  
 431.12(b) There is an advisory committee to the Medicaid agency director on health and medical  
 AT-78-90 care services established in accordance with and meeting all the requirements of 42  
 CFR 431.12.

42 CFR X The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State  
 438.104 assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care  
 Advisory Committee in the review of marketing materials.

1902(a)(73) Tribal Consultation Requirements  
 SSA Section 1902(a)(73) of the Social Security Act requires a State in which one or more  
 Indian Health Programs or Urban Indian Organizations furnish health care services to  
 establish a process for the State Medicaid agency to seek advice on a regular, ongoing  
 basis from designees of the Indian Health Service (IHS), including programs operated  
 by Indian tribes under P.L. 93-638, and Urban Indian Organizations concerning  
 Medicaid matters having a direct impact on these IHS and Urban Indian Organizations.  
 Please indicate below whether the State, as part of its consultation process, appoints an  
 advisory committee or appoints a designee of the IHS and Urban Indian Organizations  
 to the State medical care advisory committee, both of these, or something else.

State appoints a tribal advisory committee.

State appoints a designee of the IHS and Urban Indian Organizations to the  
 State medical care advisory committee.

Other. Specify:

**Wisconsin Department of Health Services staff will meet with tribal Health  
 Directors and designees of Indian Health Service and Urban Indian  
 Organizations during the last month in each quarter to discuss state plan  
 amendments before they are submitted to CMS. A Consultation  
 Implementation Plan is maintained which documents what the State and the  
 tribes have agreed to do for the next period.**

Not applicable because the State does not have at least one Indian Health  
 Program or Urban Indian Organization furnishing health care services.