

June 8, 2009

Ann Berg, Acting State Medicaid Director  
Minnesota Department of Human Services  
P.O. Box 64998  
St. Paul, MN 55164-0998

Dear Ms. Berg:

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

Transmittal #08-006                      Chemical Dependency Treatment Services  
-- Effective Date: July 1, 2008

If you have any additional questions, please have a member of your staff contact Pamela Schmidt at (651) 290-8576 or by e-mail at [Pamela.Schmidt@cms.hhs.gov](mailto:Pamela.Schmidt@cms.hhs.gov).

Sincerely,

/s/

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

cc: Lisa Knazan, MDHS

Enclosure