Revised 6.16.11

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

Attachment 1.1.-A

State of Kansas

ATTORNEY GENERAL'S CERTIFICATION

I certify that:

Kansas Department of Health and Environment, Division of Health Care Finance is the single state agency responsible for:

X administering the plan.

The legal authority under which the agency administers the plan on a Statewide basis is:

Executive Reorganization Order No. 38
(statutory citation)

___ supervising the administration of the plan by local political subdivisions.

The legal authority under which the agency supervises the administration of the plan on a Statewide basis is contained in

(statutory citation)

The agency's legal authority to make rules and regulations that are binding on the political subdivisions administering the plan is

(statutory citation)

4/12/2011
DATE

Signature

Attorney General, State of Kansas
Title

TN # 11-03 Approval Date APR 28 2011 Effective Date 07/01/11 Supersedes #TN #05-04