sion: HCFA-PM-91-

(BPD)

1991

SUPPLEMENT 3 TO ATTACHMENT 2.2-A

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OMB NO.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: WYOMING

Method for Determining Cost Effectiveness of Caring for Certain Disabled Children At Home

NOT APPLICABLE

TN No. <u>91-14</u> Supersedes

Approval Date 12 19 91

Effective Date

MY NO. NEW

HCFA ID: 7983E