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To: LME-MCOs

From: Mabel McGlothlen, LME System Performance Team Leader, DMH/DD/SAS, and Kathy Nichols, Lead Waiver Program Manager, Contracts Section, DMA

Subject: 2014 Medicaid Waiver Provider Satisfaction Survey Report

Enclosed please find the 2014 Medicaid Waiver Provider Satisfaction Survey Report. The completion of the attached survey satisfies 42 CFR 438.358(b)(2) and the terms of the Managed Care Organization contract related to the completion of a Provider Satisfaction survey.

If you have questions regarding this report, please send them via electronic mail to: Adolph.simmons@dhhs.nc.gov

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