TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control No: <u>560</u> . Department or Age	ency: Alabama Medicaid Agency	***
Rule No: <u>560-X-121 (2),(3),(4)</u>		Manifestation residence and the second secon
Rule Title: Provider Medicaid Records New Rule; X Amen	Inspection/Audit nd; Repeal; Adoption	on by Reference
Would the absence of the proposed rule health, welfare, or safety?	significantly harm or endanger the public	c no
Is there a reasonable relationship between of the public health, safety, or welfare?	en the state's police power and the protect	tion yes
Is there another, less restrictive method protect the public?	of regulation available that could adequat	tely no
Does the proposed rule have the effect of any goods or services involved and,	of directly or indirectly increasing the cosif so, to what degree?	ts no
Is the increase in cost, if any, more harn result from the absence of the proposed	nful to the public than the harm that migh rule?	t no
	s designed solely for the purpose of, and sortection of the public?	
Does the proposed rule have any econor		********
note prepared in accordance with subsec	npact, the proposed rule is required to be a ction (f) of Section 41-22-23, <u>Code of Ala</u>	abama 1975.
Chapter 22, Title 41, <u>Code of Alabama</u> the Administrative Procedure Division of		h the requirements of e filing requirements of
Signature of certifying officer: $2 - 8 - 12$		
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PUBLISHED IN VOLUME	ISSUE NO	
EDITED AND APPROVED BY	DOCUMENT NO	

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: Rule No. 560-X-1-.21--Provider Medicaid Records Inspection/Audit

INTENDED ACTION: Amend Rule No. 560-X-1-.21 (2),(3),(4)

SUBSTANCE OF PROPOSED ACTION: The above-referenced chapter is being amended to clarify that all physician orders must be written according to practice guidelines and state/federal law and must include the date and signature of the provider, the service(s) ordered and the recipient's name. Providers are also referred to individual provider manual chapters for detailed description of what must be included in an order.

TIME, PLACE, MANNER OF PRESENTING VIEWS: Written or oral comments may be submitted to the Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624. Agency business hours are 8:00 a.m. to 5:00 p.m. Monday through Friday.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE: Written/Oral comments concerning this change must be received by the Alabama Medicaid Agency no later than April 4, 2012.

<u>CONTACT PERSON AT AGENCY:</u> Stephanie McGee Azar, Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624.

R. Bob Mullins, Jr., MD

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Commissioner

Rule No. 560-X-1-.21. Provider Medicaid Records Inspection/Audit.

- (1) Alabama Medicaid providers shall keep detailed records in Alabama, except as provided in subparagraph (5) Rule No. 560-X-16-.02, that will fully disclose the extent and cost of services, equipment, or supplies furnished eligible recipients. These records will be retained for a period of three (3) years plus the current year.
- (2) All orders must be written according to practice guidelines and state/federal law and must include the date and signature of the provider, the service(s) ordered and the recipient's name. Refer to the individual provider manual chapters for detailed description of what must be included in an order.
- (2)(3) Providers shall make all such records available for inspection and audit by authorized representatives of the Secretary of Health and Human Services, Alabama Medicaid Agency and other agencies of the State of Alabama. Provider records and operating facilities shall be made available for inspection during normal business hours.
- (3)(4) All providers shall, upon either verbal or written request from any agencies listed above, furnish free of charge a copy of any requested record. If the provider has no copies, the provider must allow the person requesting the copy to check out the original for copying. The provider may require that a receipt be given for any original record removed from his premises.

Authority: State Plan, Attachment 4.19 A & D: Alabama State Records Commission: 42 C.F.R. Section 433.32. Rule effective October 1, 1982. Amended May 15, 1983 & October 7, 1983. Effective date of this amendment January 1, 1984.

Author: Jerri Jackson, Associate Director, Institutional Services Unit **Authority:** State Plan, Attachment 4.19-A & D; Alabama State Records Commission; 42 C.F.R. Section 433.32.

History: Rule effective October 1, 1982. Amended May 15, 1983, October 7, 1983, and January 1, 1984. Amendment filed February 21, 2012.