## TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control N	o: <u>560</u> Depa	rtment	or Agency:	Alabama	ı Medicaio	d Age	ency			
Rule No:	560-X-1001	<u>.</u>								
Rule Title	: <u>Definitions</u>									
	New Rule; _	<u>X</u> _A	mend;	Rep	oeal;		Adoption	n by Re	ference	
	e absence of the		osed rule si	gnificantly	/ harm or	endar	nger the p	oublic ——	No	
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?									Yes	
Is there are protect the	nother, less res	trictive	method of	regulation	ı available	e that	could ad	equately	No No	
Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?  No										
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?									No	
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?  Yes  *********************************									Yes	****
	proposed rule l									
note prepa	posed rule has ared in accorda	ance wi	ith subsection	on (f) of S	ection 41	-22-2	3, Code o	of Alaba	ama 1975.	
Certificati	ion of Authoriz	zed Of	ficial							
Chapter 2 the Admir	nat the attached 2, Title 41, <u>Co</u> nistrative Proc	ode of A edure I	Alabama 19 Division of	75 and the the Legisl	at it confo ative Refe	rms to	o all appl	icable f		
Signature	of certifying of	officer:	Steph	anu	Lind	Sau	×			
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## ALABAMA MEDICAID AGENCY

## NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-10-.01. Definitions

**INTENDED ACTION:** Amend 560-X-10-.01.

**<u>SUBSTANCE OF PROPOSED ACTION</u>**: The above referenced rule is being amended to update terminology used in the rule.

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.

<u>FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:</u> Written/Oral comments concerning this change must be received by the Alabama Medicaid Agency no later than January 4, 2017.

**CONTACT PERSON AT AGENCY:** Stephanie Lindsay, Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624. Phone: (334) 242-5833.

Stephanie McGee Azar

Commissioner

## Rule No. 560-X-10-.01. Definitions

- (1) Nursing Facility An institution which is primarily engaged in providing nursing care and related services for residents who require medical and nursing care, rehabilitation services for the rehabilitation of injured, disabled or sick persons, or on a regular basis health related care and services to individuals who because of their mental or physical condition require care and services which may be made available to them only through institutional facilities. A facility may not include any institution that is for the care and treatment of mental disease except for services furnished to individuals age 65 and over.
- (2) Intermediate Care Facility for Mentally Retarded Individuals with Intellectual Disabilities (ICF/MR IID) An institution that is primarily for the diagnosis, treatment or rehabilitation of the mentally retarded intellectually disabled or persons with related conditions and provides in a protected residential setting, ongoing evaluations, planning, 24 hour supervision, coordination and integration of health or rehabilitative services to help each individual function at their greatest ability.
- (3) Institution for Mental Disease (IMD)
  - (a) An institution that is licensed as a mental institution; or
- (b) More than fifty percent (50%) of the patients are receiving care because of disability in functioning resulting from a mental disease. Mental diseases are those listed under the heading of Mental Disease in the Diagnostic and Statistical Manual of Mental Disorders, Current Edition, International Classification of Diseases, adopted for use in the United States (ICD 9) or its successors, except for mental retardation. intellectual disability.

**Author:** Robin Arrington, Associate Director, LTC Provider Recipient/Services Unit. **Statutory Authority:** State Plan; Title XIX, Social Security Act; and 42 C.F.R. Section 431.1, et seq., Section 483.5 and Section 435.1009.

**History:** Rule effective October 1, 1982. Rule amended December 18, 1986. Emergency rule effective October 1, 1990. Amended February 13, 1991. **Amended:** Filed November 17, 2016.