

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-51-.10 – Reimbursement for Levels of Care

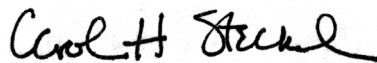
INTENDED ACTION: Amend 560-X-51-.10(5)

SUBSTANCE OF PROPOSED ACTION: The above-referenced rule is being amended to advise hospice providers that drugs related to the recipient's terminal illness as well as drugs on the Hospice Palliative Drug List are included in the per diem rate paid for hospice covered services. These drugs will not be reimbursed through the Medicaid Pharmacy program.

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, 334-242-5833. 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 June 5, 2007.

CONTACT PERSON AT AGENCY: William O. Butler, III,
Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue,
Post Office Box 5624, Montgomery, Alabama 36103-5624.



Carol H. Steckel
Commissioner