

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-35-.15 – Application Process

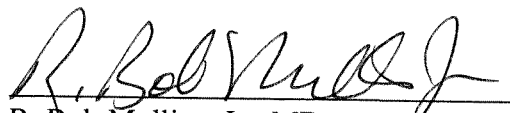
**INTENDED ACTION:** Amend 560-X-35-.15(9), (10), (11), (12), (13), (15), (17), (18), (19), (20).

**SUBSTANCE OF PROPOSED ACTION:** The above-referenced rule is being amended to change the name of the Mental Retardation Waiver to the Intellectual Disabilities Waiver, delete Mental Retardation from the name of the Department of Mental Health and Mental Retardation, change the name of the Waiver Quality Assurance Unit, and change the name of Electronic Data Systems.

**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, 2012.

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

  
R. Bob Mullins, Jr., MD  
Commissioner