



ROBERT BENTLEY
Governor

Alabama Medicaid Agency

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STEPHANIE MCGEE AZAR
Acting Commissioner

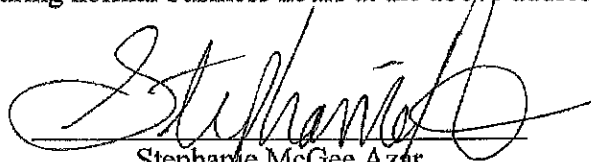
PUBLIC NOTICE

SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

The Alabama Medicaid Agency is proposing to amend its State Plan for Medical Assistance. This amendment will remove the geographic limitation in the Personal Choices Program. Personal Choices is a self-directed option provided through the Elderly and Disabled (E&D) Waiver, State of Alabama Independent Living (SAIL) Waiver, and the Alabama Community Transition (ACT) Waiver. Currently, the ACT Waiver is the only waiver that operates Personal Choices state-wide. The Alabama Medicaid Agency will also add the HIV/AIDS (530) Waiver and the Technology Assisted (TA) Waiver for Adults to the Personal Choices Program. The Personal Choices option will be offered state-wide for all of Alabama's HCBS waivers.

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and the State Office of the Alabama Medicaid Agency.

Written comments concerning these changes are welcome and should be mailed to Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, P. O. Box 5624, Montgomery, Alabama 36103-5624. All written comments will be available for review by the public during normal business hours at the above address.


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PUBLIC NOTICE

SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

The Alabama Medicaid Agency is proposing to amend its State Plan for Medical Assistance through a State Plan Amendment. This amendment will remove the language in Section One which refers to the Tribal Chairman as Buford Rolin and replace this language with "Tribal Chair".

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and the State Office of the Alabama Medicaid Agency.

Written comments concerning these changes are welcome and should be mailed to Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, P.O. Box 5624, Montgomery, Alabama 36103-5624. All written comments will be available for review by the public during normal business hours at the above address.

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PUBLIC NOTICE

SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

The Alabama Medicaid Agency is proposing to amend its State Plan for Medical Assistance for certified emergency room visits through a State Plan Amendment. This amendment will allow emergency medical services provided in the hospital emergency room to be certified and signed by the attending licensed Physician, Nurse Practitioner or Physician Assistant at the time the service is rendered and documented in the medical record.

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and the State Office of the Alabama Medicaid Agency.

Written comments concerning these changes are welcome and should be mailed to Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, P. O. Box 5624, Montgomery, Alabama 36103-5624. All written comments will be available for review by the public during normal business hours at the above address.


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