## ALABAMA MEDICAID AGENCY

## NOTICE OF INTENDED ACTION

**RULE NO. & TITLE:** 560-X-58-.05 Application Process

**INTENDED ACTION:** Amend Rule 560-X-58-.05

SUBSTANCE OF PROPOSED ACTION: The above referenced rule is being amended to remove language regarding targeted case management. This language will be changed to "case management" since this is now a waiver service instead of a state plan service.

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 March 7, 2007.

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

Carol H. Steckel Commissioner