

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-57-.02 – Eligibility

INTENDED ACTION: Amend 560-X-57-.02), (3)

SUBSTANCE OF PROPOSED ACTION: The above-referenced rule is being amended to accurately reflect the financial eligibility categories currently being served by the waiver. Also included is the Table of Contents page in order to update the name of the chapter and to renumber the pages.

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.

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