

APA-2

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-18-.22 – NET Covered Services

**INTENDED ACTION:** Amend Rule 560-X-18-.22 and amending title of Rule.

**SUBSTANCE OF PROPOSED ACTION:** The above-mentioned rule is being changed to align the title with the subject discussed in the rule. This section identifies the various modes of transportation covered by NET. Sections (g), (h) and (i) have been deleted as this is discussed in Rule No. 560-X-18-.20.

**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 August 4, 2010.

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



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Carol H. Steckel  
Commissioner