BOB RILEY Governor

## **Alabama Medicaid Agency**

501 Dexter Avenue P.O. Box 5624 Montgomery, Alabama 36103-5624

www.medicaid.alabama.gov e-mail: almedicaid@medicaid.alabama.gov Telecommunication for the Deaf: 1-800-253-0799 334-242-5000 1-800-362-1504



CAROL H. STECKEL, MPH
Commissioner

June 21, 2010

PN-10-09

## PUBLIC NOTICE

SUBJECT: AMENDMENT TO ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective July 1, 2010, the Alabama Medicaid Agency is proposing to amend Attachment 3.1-D, Page 1, of the Alabama State Plan for Non-Emergency Transportation Services.

The purpose of the amendment to Attachment 3.1-D, Page 1, is to change the Non-Emergency Transportation Services terminology from a voucher system which has been converted to an Electronic Benefit Transfer (EBT) system for recipients requesting transportation reimbursements. The EBT system replaced the paper-based voucher system effective March 1, 2010. The NET payment methodology and reimbursement rates were not affected by this change.

A copy of the proposed changes will be made available upon request for public review at the State Office of the Alabama Medicaid Agency.

Written comments concerning this change 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.

Carol H. Steckel, Commissioner

CHS/dpp