

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-7-.16. Utilization Control.

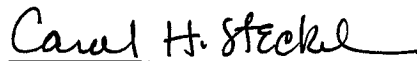
**INTENDED ACTION:** Amend 560-X-7-.16.

**SUBSTANCE OF PROPOSED ACTION:** The above-referenced rule is being amended to clarify utilization review practices for inpatient hospital admissions and concurrent stay reviews, MCE studies, and UR plans. This will also allow reporting dates of service on a claim that a patient met InterQual® with Medicaid Local Policy. The rule title will change to 'Utilization Review for Inpatient Hospital Admissions and Concurrent Stays'.

**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 May 5, 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