

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-13-.01 (5) (6) (7) – Supplies, Appliances, and Durable Medical Equipment- General

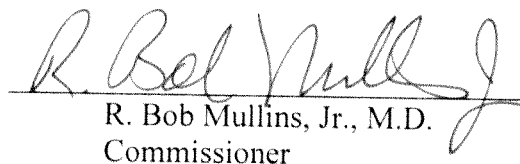
INTENDED ACTION: Amend 560-X-13-.01 (5) (6) (7)

SUBSTANCE OF PROPOSED ACTION: The above-mentioned rule is being amended to change the division's name from Long Term Care Division to Clinical Services and Support Division due to Agency's reorganization and add language informing providers that recipients may not be billed for an item for which a prior authorization has been denied due to provider error or failure to submit information in the PA process.

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 4, 2012.

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


R. Bob Mullins, Jr., M.D.
Commissioner