

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-13-02.(3)(c);(4); (9); (14) – Participating Agencies and Suppliers

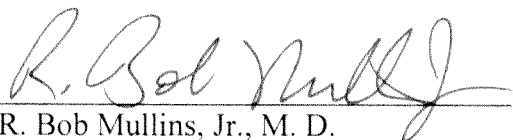
INTENDED ACTION: Amend 560-X-13-.02(3)(c) (4); (9); (14)

SUBSTANCE OF PROPOSED ACTION: The above-mentioned rule is being amended to show the following changes: 1) To clarify that DME providers can serve recipients in all counties adjoining the county in which they have a business license and where business is physically located; 2) To clarify that DME providers must have DME supplies stocked in the physical store location that are readily available to Medicaid recipients; 3) To change the division's name from Long Term Care Division to Clinical Services and Support Division; and 4) To clarify that Pharmacy/ DME providers enrolled with Alabama Medicaid are required to submit their Medicare enrollment letter only and are not required to have a Medicaid Surety Bond.

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