



ROBERT BENTLEY  
Governor

# Alabama Medicaid Agency

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STEPHANIE MCGEE AZAR  
Acting Commissioner

**PN-12-012**

## PUBLIC NOTICE

SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

The Alabama Medicaid Agency is proposing to amend its State Plan for Medical Assistance through State Plan Amendment AL 12-012. This amendment will allow the Medicaid Agency to discontinue coverage of legend (prescription only) brand and generic agents used for symptomatic relief of cough and cold. The Agency will continue to cover certain over-the-counter (OTC) cough and cold products in an effort to provide cost effective alternatives to recipients.

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and the State Office of the Alabama Medicaid Agency.

Written comments concerning these changes 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.

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### SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective June 1, 2012, the Alabama Medicaid Agency is proposing to amend Attachment 3.1-A, pages 2.5a, 5.12a and 5.12c of the Alabama State Plan for Medical Assistance.

The purpose of the amendment is to implement the following reductions in services to adults:

- Change coverage of routine eye exams to one every three years;
- End coverage of eyeglasses as a benefit;
- Limit drugs to one brand-name drug per month; generics and covered OTCs remain unlimited. Allowances will remain for up to 10 brands per month for antipsychotics, antiretrovirals, and switchovers. In addition to children, LTC recipients are excluded;
- Reduction of cough/cold covered drugs for all recipients: Legend generic cough/cold drugs will no longer be covered (legend brand drugs are currently non-covered). Certain OTC drugs will remain covered.

Prescriptions for Medicaid eligible recipients under age 21 in the Child Health Services/EPSDT Program and prescriptions for Medicaid eligible nursing facility residents are excluded from these limitations. These reductions will be effective June 1, 2012.

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and 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, AL 36103-5624. All written comments will be available for review by the public during normal business hours at the above address.

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### SUBJECT: AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective June 1, 2012, the Alabama Medicaid Agency is proposing to amend Attachment 4.19-B, pages 4 and 7 of the Alabama State Plan for Medical Assistance.

The purpose of the amendment is to decrease Durable Medical Equipment (DME) provider reimbursement by 10% and to remove language regarding percentage of established usual and customary price for orthotics and prosthetics.

A copy of the proposed changes will be made available upon request for public review at each county office of the Department of Human Resources and 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, AL 36103-5624. All written comments will be available for review by the public during normal business hours at the above address.

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