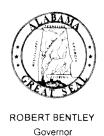
Alabama Medicaid Agency



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



STEPHANIE MCGEE AZAR
Acting Commissioner

PUBLIC NOTICE

SUBJECT: <u>AMENDMENT TO THE ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE</u>

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.

Stephanie McGee Azar Acting Commissioner