

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-35-.02 – Description of Services

INTENDED ACTION: Amend 560-X-35-.02(3)(b), (9)(a)-(f), and 12(e).

SUBSTANCE OF PROPOSED ACTION: The above-referenced rule is being amended to increase the number of levels for Day Habilitation services from three to eight; to clarify the definition for behavior therapy, revise the provider qualifications, modify the units of service for billing purposes from 1 hour to 15 minute increments, increase the allowable number of units for Behavior Therapy services and allow flexibility in their usage; and to incorporate a new level of personal care provided at the worksite in the HCBS Waiver for Persons with Mental Retardation.

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 January 4, 2008.

CONTACT PERSON AT AGENCY: William O. Butler, III, Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624.



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Carol H. Steckel  
Commissioner