

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-16-.01 – Pharmacy Services-General

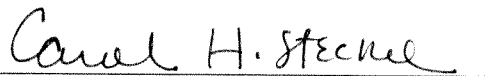
INTENDED ACTION: Amend 560-X-16-.01(9)

SUBSTANCE OF PROPOSED ACTION: The above-referenced rule is being amended to detail the designated amount of the original prescription to be utilized prior to dispensing a refill. For quantities up to a 34 day supply, the designated amount is 75% of the original days' supply. For quantities greater than a 34 day supply, the designated amount is 90%.

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, 2011.

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



Carol H. Steckel
Commissioner