

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-16-.06 – Reimbursement for Covered Drugs and Services

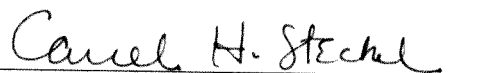
**INTENDED ACTION:** Amend 560-X-16-.06 (5), (7), (8), (9), and (10)

**SUBSTANCE OF PROPOSED ACTION:** The above-referenced rule is being amended to 1). allow pharmacy providers to dispense a 90-day supply for maintenance therapies as designated by the Agency, 2). clarify the day supply allowances and 3). include the pharmacy professional services reimbursement program language.

**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