



BOB RILEY  
Governor

# Alabama Medicaid Agency

501 Dexter Avenue  
P.O. Box 5624  
Montgomery, Alabama 36103-5624

www.medicaid.alabama.gov  
e-mail: [almedicaid@medicaid.alabama.gov](mailto:almedicaid@medicaid.alabama.gov)

Telecommunication for the Deaf: 1-800-253-0799  
334-242-5000 1-800-362-1504



CAROL H. STECKEL, MPH  
Commissioner

November 30, 2010

**PN- 10 - 17**

## PUBLIC NOTICE

SUBJECT: AMENDMENT TO ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective March 1, 2011, the Alabama Medicaid Agency is proposing to amend Attachment 4.19-B, Page 2a of the Alabama State Plan for Medical Assistance.

The purpose for amending Attachment 4.19-B, Page 2a is to add a professional service reimbursement option to pharmacy providers that participate in the long term drug maintenance program and those who utilize tablet splitting.

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.

Carol H. Steckel, Commissioner

CHS:brt