

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-20-.03 – Documentation of Third Party Resources

INTENDED ACTION: Amend 560-X-20-.03

SUBSTANCE OF PROPOSED ACTION: The above referenced rule is being amended to add clarification to the proper application of third party payments and the procedure for refunding duplicate payments to Medicaid. Wording has also been removed that made reference to obsolete forms and procedures.

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. 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 2, 2015.

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

A handwritten signature in black ink, appearing to read "Stephanie A", written over a horizontal line.

Stephanie McGee Azar
Acting Commissioner