

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-41-.02. Conditions of Participation

**INTENDED ACTION:** Amend 560-X-41-.02 (3) (b) and (c), (4) (a), (c), and (f), and (5)

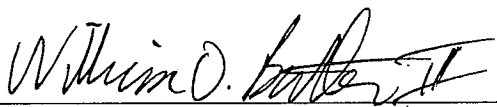
**SUBSTANCE OF PROPOSED ACTION:** The above-mentioned rule is being amended based on the following:

1. Change the address for submission of census reports, due to the Agency having contracted out its Prior Approval process;
2. Allow participation of federally recognized Indian tribes as Residential Treatment Facility (RTF) providers;
3. Require RTFs to submit yearly on or before July 21 a written attestation of compliance with the requirements of 42 CFR, Part 483, Subpart G, regarding the reporting of serious occurrences and the use of restraint and seclusion; and
4. Require RTFs to send a copy of its certification letters to Medicaid within 45 business days.

**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 December 5, 2007.

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

*FOR*   
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Carol H. Steckel  
Commissioner