



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



CAROL HERRMANN STECKEL, MPH
Commissioner

September 17, 2007

PN-07-04

PUBLIC NOTICE

SUBJECT: AMENDMENT TO ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective January 1, 2008, the Alabama Medicaid Agency is proposing to amend Attachment 4.19-B pages 3 and 4, of the Alabama State Plan for Medical Assistance.

The purpose of the change to Attachment 4.19-B is to add Medicare pricing to the lower of methodology for blood clotting factor pricing, in addition to implementing minimum standards of care.

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/snf