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Governor

Alabama Medicaid Agency

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CAROL HERRMANN STECKEL, MPH
Commissioner

September 21, 2009

PN-09-05

PUBLIC NOTICE

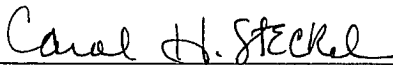
SUBJECT: AMENDMENT TO ALABAMA STATE PLAN FOR MEDICAL ASSISTANCE

Effective October 1, 2009, the Alabama Medicaid Agency is proposing to amend Attachment 4.19-A and Attachment 4.19-B of the Alabama State Plan for Medical Assistance.

The purpose of the amendment to Attachment 4.19-A and Attachment 4.19-B is to change the inpatient and outpatient hospital reimbursement methodology.

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

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