

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-23-.01 Introduction

INTENDED ACTION: Amend 560-X-23-.01

SUBSTANCE OF PROPOSED ACTION: The above-referenced rule is being amended to change the method of reimbursement of hospitals for inpatient and outpatient treatment.

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 November 4, 2010.

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

Carol H. Steckel

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Commissioner