

APA-1

TRANSMITTAL SHEET FOR
NOTICE OF INTENDED ACTION

Control No: 560 Department or Agency: Alabama Medicaid Agency

Rule No: 560-X-4-.03

Rule Title: Method

_____ New; X Amend; _____ Repeal; _____ Adopt by Reference

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety? _____

no

Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare? _____

yes

Is there another, less restrictive method of regulation available that could adequately protect the public? _____

no

Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree? _____

no

Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule? _____

no

Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public? _____

yes

Does the proposed action relate to or affect in any manner any litigation which the agency is a party to concerning the subject matter of the proposed rule? _____

no

Does the proposed rule have an economic impact? _____

no

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Services Agency.

Signature of certifying officer: _____

Stephanie Lindsay

Date: 7/17/2018

ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

AGENCY NAME: Alabama Medicaid Agency

RULE NO. & TITLE: 560-X-4-.03 Method

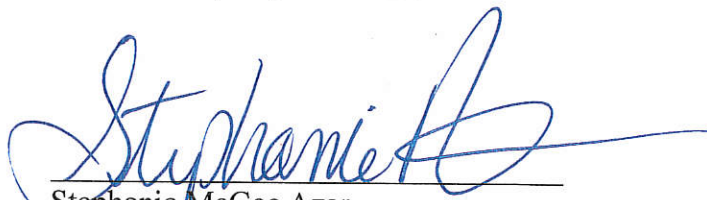
INTENDED ACTION: Amend 560-X-4-.03

SUBSTANCE OF PROPOSED ACTION: The above referenced rule is being amended to update terminology pertaining to Program Integrity to be more in line with terminology used by CMS.

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 September 4, 2018.

CONTACT PERSON AT AGENCY: Stephanie Lindsay, Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624. Phone: (334) 242-5833.


Stephanie McGee Azar
Commissioner

Rule No. 560-X-4-.03. Method.

- (1) Acquire, organize, and analyze data.
- (2) Present computer results through special reports that will enable Program Integrity to accomplish the following:
 - (a) Develop a comprehensive statistical profile of health care delivery and utilization patterns.
 - (b) Reveal suspected instances of potential fraud, waste, and-or abuse by individual practitioners, providers, recipients, or sponsors of recipients.
 - (c) Provide information indicating the existence of any potential defects-deficiencies in the level of care or quality of services provided under the Medicaid Program.
 - (d) Provide information indicating the existence of any potential defects-deficiencies in State resolution procedures.
- (3) Conduct in-house and on-site reviews/investigations to obtain additional facts and/or evidence to substantiate suspicions or allegations. Alabama Medicaid ~~Investigators-staff~~ shall properly identify themselves to providers or recipients as representing the Alabama Medicaid Agency. They shall request information that they consider pertinent to the audit/investigation. Requests shall be made directly to the provider, administrator, or person designated in charge.
- (4) Prepare and present reviews/investigation findings for prosecution, corrective action and/or sanction.
- (5) Provide information identifying defects-deficiencies in documented policy and intended application.
- ~~(5)~~(6) Assures that the Medicaid Agency complies with the process for screening providers in accordance with 42 CFR 455 Subparts B and E.

Author: Jacqueline G. Thomas, Director, Program Integrity Division

Authority: State Plan; Title XIX, Social Security Act, 42 C.F.R. §401, 431 et seq., 455 et seq., 456 et seq., State Medicaid Manual 11420.6M.

History: Rule effective October 1, 1982.

Amended November 10, 1988, and March 15, 1994. Effective date of this amendment March 26, 1996. **Amended:** Filed July 17, 2018.