

APA-1

TRANSMITTAL SHEET FOR  
NOTICE OF INTENDED ACTION

Control No: 560 Department or Agency: Alabama Medicaid Agency

Rule No: 560-X-35-.05

Rule Title: Qualifications of Staff Who Will Serve As Review Team for Medical Assistance

\_\_\_\_\_ New Rule; X Amend; \_\_\_\_\_ Repeal; \_\_\_\_\_ Adoption 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

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Does the proposed rule have any 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.

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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 Reference Service.

Signature of certifying officer: Stephanie Lindsay

Date: May 22, 2017

**ALABAMA MEDICAID AGENCY**

**NOTICE OF INTENDED ACTION**

**RULE NO. & TITLE:** 560-X-35-.05 – Qualifications of Staff Who Will Serve As Review Team for Medical Assistance

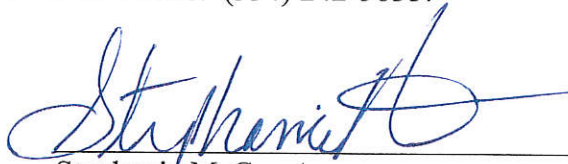
**INTENDED ACTION:** Amend 560-X-35-.05

**SUBSTANCE OF PROPOSED ACTION:** The above referenced rule is being amended to change all references to “mental retardation” to “intellectual disability” and to change all references to a “mentally retarded individual” to “an individual with an intellectual disability.”

**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 July 5, 2017.

**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-35-.05 Qualifications of Staff Who Will Serve As Review Team for Medical Assistance**

(1) The nurse shall be a graduate of a licensed school of nursing with a current state certification as a Licensed Practical Nurse (LPN) or Registered Nurse (RN). This person shall have knowledge and training in the area of ~~mental retardation or related disabilities~~ intellectual disabilities with a minimum of two (2) years' experience.

(2) The social worker shall be a graduate of a four-year college with an emphasis in social work. This person shall have knowledge and training in the area of ~~mental retardation or related disabilities~~ intellectual disabilities with a minimum of two (2) years' experience.

(3) The psychologist shall be a PH.D. in Psychology. This person shall be a licensed psychologist with general knowledge of test instruments used ~~with the mentally retarded or related disabilities~~ for individuals with intellectual disabilities with a minimum of two (2) years' experience.

(4) Other professional disciplines which may be represented on the assessment team as necessary depending on the age, functional level, and physical disability of the clients are as follows:

- (a) Special Education
- (b) Speech Pathologist
- (c) Audiologist
- (d) Physical Therapist
- (e) Optometrist
- (f) Occupational Therapist
- (g) Vocational Therapist
- (h) Recreational Specialist
- (i) Pharmacist
- (j) Doctor of Medicine
- (k) Psychiatrist
- (l) Other skilled health professionals

**Author:** Samantha McLeod, Associate Director, LTC Specialized Waiver Programs

**Authority:** 42 C.F.R. Section 441, Subpart G, and the Home- and Community-Based Waiver for Persons with Intellectual Disabilities and Developmentally Disabled.

**History:** Rule effective July 9, 1985. Effective date of this amendment November 18, 1987.

**Amended:** Filed May 22, 2017