CERTIFICATION OF EMERGENCY RULES FILED WITH LEGISLATIVE SERVICES AGENCY OTHNI LATHRAM, DIRECTOR

Pursuant to Code of Alabama 1975, §§41-22-5 (b) and 41-22-6 (c) (2) a. and b.

I certify that the attached emergency rule is a correct copy as promulgated and adopted on the 6^{th} day of April, 2020.

AGENCY NAME: Alabama Medicaid Agency

RULE NO. AND TITLE: 560-X-1-.29 ER COVID-19 Emergency Rule

EFFECTIVE DATE OF RULE: April 6, 2020

EXPIRATION DATE (If less than 120 days):

NATURE OF EMERGENCY:

The above-referenced rule is being added to address program changes in accordance with the time prescribed by the governor as a State of Emergency due to the COVID-19 (Coronavirus) pandemic.

STATUTORY AUTHORITY: Social Security Act, Title XIX; State Plan

SUBJECT OF RULE TO BE ADOPTED ON PERMANENT BASIS __YES X NO

NAME, ADDRESS, AND TELEPHONE NUMBER OF PERSON TO CONTACT FOR COPY OF RULE:

Administrative Secretary Alabama Medicaid Agency 501 Dexter Avenue Montgomery, Alabama 36103 (334) 242-5833

Stephanie McGee Azar

Commissioner

REC'D& FILED

APR 6 2020

I FOT TIVE SVC AGENCY

Rule No. 560-X-1-.29ER COVID-10 Emergency Rule – NEW RULE

Nothwithstanding the rules of the Alabama Medicaid Administrative Code, while the State of Alabama is under a state of emergency proclamation related to the COVID-19 pandemic, any Alabama Medicaid Agency Provider ALERT specifically related to COVID-19 and the COVID-19 emergency shall supersede the Administrative Code where the COVID-19 ALERT may contradict a covered service or delivery of a covered service described within the Code.

Author: Kathy Hall, Deputy Commissioner, Department of Program Administration

Statutory Authority: Social Security Act, Title XIX; State Plan

Emergency Rule: Filed and effective April 6, 2020.