Table of Contents

State/Territory Name: Alabama

State Plan Amendment (SPA) #: 23-0011

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



June 9, 2023

Stephanie McGee Azar Commissioner Alabama Medicaid Agency 501 Dexter Avenue Post Office Box 5624 Montgomery, AL 36103-5624

Re: Alabama State Plan Amendment (SPA) AL-23-0011

Dear Commissioner Azar:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) AL-23-0011. This amendment proposes to continue to allow telehealth services to continue until May 31, 2023, originally approved in Disaster Relief SPA TN 20-0004.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Alabama's Medicaid SPA Transmittal Number AL-23-0011 is approved, effective May 12, 2023.

If you have any questions, please contact Rita Nimmons at (404) 562-7415 or via email at Rita.Nimmons@cms.hhs.gov.

Sincerely,

Alissa Mooney DeBoy
On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL O	1. TRANSMITTAL NUMBER 2. STATE
STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	$\frac{1}{2} \frac{3}{3} - \frac{0}{0} \frac{0}{1} \frac{1}{1} \frac{1}{A} \frac{A}{L}$
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
	SECURITY ACT XIX XXI
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	May 12, 2023
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
Section 1135(b) of the Social Security Act Title 19 of the Social Security	B. FFT
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Section 7.4.B Temporary Extension to the Disaster Relief Policies for COVID-19 National Emergency Page 3	es
A CURLECT OF AMENDMENT	
9. SUBJECT OF AMENDMENT	
continue until May 31, 2023. After May 31, 2023 telehealth will chttps://medicaid.alabama.gov/content/4.0_Programs/4.1_Covere	
10. GOVERNOR'S REVIEW (Check One)	
OGOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED: Governor's designee
O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	on file via letter with
O NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	CMS
11. SCHATURE OF STATE AGENCY OFFICIAL	15. RETURN TO
	Stephanie McGee Azar
12. TYPED NAME	Commissioner
Stephanie McGee Azar	Alabama Medicaid Agency 501 Dexter Avenue
13. TITLE	Post Office Box 5624
Commissioner	Montgomery, Alabama 36103-5624
14. DATE SUBMITTED 05/31/2023	1954 65
The state of the s	USE ONLY
16. DATE RECEIVED May 31, 2023	17. DATE APPROVED June 9, 2023
PLAN APPROVED - C	NE COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL May 12, 2023	19 SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Alissa Mooney DeBoy On Behalf of Anne Marie Costello	Deputy Director, Center for Medicaid and CHIP Services
22. REMARKS	
Box #5 - pen & ink change per email from state on June 7, 2023	
per et mit enunge per emun nom omite on june 7, 2020	

7.4.B. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective May 12, 2023 until May 31, 2023, the agency temporarily extends the following elections(s) of section 7.4 (approved 04/02/20 in SPA number AL-20-0004) of the state plan:

Section D – Benefits

Telehealth:

5. X The agency utilizes telehealth in the following manner, which may be different than outlined in the state's approved state plan:

In addition to the use of an interactive audio and video telecommunication system which permits two-way communication between the distant site physician and the recipient, during the emergency, physicians and other licensed practitioners covered by the state plan may perform evaluation and management services, therapies, and other medically necessary services as appropriate utilizing telephone communications.

TN: <u>AL-23-0011</u> Approval Date: <u>06/09/23</u>

Supersedes

TN: NEW Effective Date: 05/12/23