

**ALABAMA MEDICAID AGENCY
ADMINISTRATIVE CODE**

**CHAPTER 560-X-7
HOSPITALS**

560-X-7-.01

Hospital Program - General.

(1) The Title XIX (Medicaid) Plan for Alabama provides for inpatient care for adults and children in accordance with 42 C.F.R. §440.10 and for preventive, diagnostic, therapeutic, rehabilitative, or palliative outpatient services in accordance with 42 C.F.R. §440.20. Inpatient hospital days will be reimbursed as described in Chapter 23, Hospital Reimbursement.

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Statutory Authority: State Plan; Attachment 3.1-A, pp 1 & 1.1; 42 C.F.R. §§440.10, 440.20, 441.57; Omnibus Budget Reconciliation Act of 1985 (COBRA, Public Law 99-272); Medicare Catastrophic Coverage Act of 1988 (Public Law 100-360); Omnibus Budget Reconciliation Act of 1990 (Public Law 101-508).

History: Rule effective October 1, 1982. Amended effective July 8, 1983; February 8, 1984. **Emergency rule** effective March 12, 1984. Amended effective March 12, 1984; June 8, 1984; October 9, 1984; June 8, 1985; September 9, 1985; October 11, 1986; September 9, 1987. **Emergency rule** effective July 1, 1988. Amended effective October 12, 1988. **Emergency rule** effective January 1, 1989. Amended effective March 14, 1989; July 1, 1989; January 12, 1990.

Emergency rule effective October 1, 1990. Amended effective January 15, 1991; July 1, 1991. Amended effective January 14, 1992. **Amended:** Filed March 7, 1997; effective April 11, 1997.

Amended: Filed March 12, 2004; effective April 16, 2004.

Amended: Filed June 11, 2004; effective July 16, 2004. **Amended:** Filed November 10, 2010; effective December 15, 2010. **Amended:** Filed June 11, 2015; effective July 16, 2015.