Revision: HCFA-PM-91-4

August 1991

(BPD)

ATTACHMENT 4.18-E

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OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Alabama

Optional Sliding Scale Premiums Imposed on Qualified Disabled and Working Individuals

The following method is used to determine the monthly premium Α. imposed on qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act:

A description of the billing method used is as follows (include В. due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):

TN No. New

<sup>\*</sup> Description provided on attachment.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	e/Territ	tor	у:	Alal	oama_							
C.	State o			funds	under	other	programs	are	used	to	pay	for
			Yes			/_/	No					

D. The criteria used for determining whether the agency will waive payment of a premium because it would cause an undue hardship on an individual are described below:

<sup>\*</sup> Description provided on attachment.