

ALABAMA MEDICAID AGENCY IN ALL DECEDENT'S ESTATES

ALABAMA ACT 2019-489

On June 10, 2019, Governor Ivey signed Act #2019-489 into law. As of **September 1, 2019**, the Alabama Medicaid Agency (Medicaid) must receive notice of all post-death probate estates. The personal representative, or the person filing an action under the Alabama Small Estates Act, is responsible for sending the notice. The notice must contain the information listed in section 1, paragraph (a) of the Act. The personal representative, or person filing the small estate, must mail the notice by United States Postal Service Certified Mail, return receipt requested, and file an affidavit of certified mailing with your Probate Court.

It is important to note, a distribution from the estate, or payment of any debts in the sixth class, cannot be made until 30 days have passed since Medicaid received notice. Requiring the personal representative, or person filing a small estate, to immediately provide notice to Medicaid will ensure proceedings are not delayed in the Probate Court.

ALABAMA MEDICAID ELECTRONIC SYSTEM:

The personal representative, or person filing to initiate a proceeding in accordance with the Alabama Small Estates Act, **shall** file the serialized certificate in the Probate Court if this electronic system is used for filing the Notice of Probate.

The Personal Representative or person filing **may choose to either provide notice through the electronic system** or in accordance with **subsection (c) of ACT 2019-489**. **Only one (1) is required for filing in the Probate Court case.**

This information is required by law for all estates as of September 1, 2019.

Instructions and sample forms can be found on the Cullman County Probate Court website at <http://cullmancourts.org/probatecourt.html>

THIS INFORMATION, WHICH IS BASED ON ALABAMA LAW, IS ONLY TO INFORM AND NOT TO ADVISE. NO PERSON SHOULD EVER APPLY OR INTERPRET ANY LAW WITHOUT THE AID OF A LAWYER WHO ANALYZES THE FACTS, BECAUSE THE FACTS MAY CHANGE THE APPLICATION OF THE LAW.

TAMMY BROWN
Judge of Probate
Cullman County

INSTRUCTIONS – NOTICE OF PROBATE

This packet applies to every post-death estate.

Alabama law (Act 2019-489) requires the personal representative or person filing the small estate case to provide notice of the estate to the Alabama Medicaid Agency. Please follow the instructions below to provide the notice.

1. Fill out the “Notice of Probate” form.
2. Make a copy of the form.
3. Fill out a United States Postal Service Return Receipt (green card). The Return Receipt (green card) is available at the post office.

A. In the box labeled, “1. Article Addressed to:” write.

Alabama Medicaid Agency
Attn: Estate Notice Office
P.O. Box 5624
Montgomery, AL 36103-5624

B. Write the probate case number in the box labeled, “1. Article Addressed to:”.

C. In the box labeled “3. Service Type” select “Certified Mail®” and “Return Receipt for Merchandise.”

D. On the back of the Return Receipt, write the probate court address in the box labeled “Sender”. Write the probate court address in this box so the Return Receipt is returned to the probate court.

4. Mail the original “Notice of Probate” to the Alabama Medicaid Agency at the address in step 3.A. Make sure the Return Receipt is attached to the envelope and proper postage is paid.
5. Fill out the “Affidavit of Certified Mailing.” Write the Certified Mail tracking number and the copy of the “Notice of Probate” form.
6. File the “Affidavit of Certified Mailing” with the probate court with a copy of the “Notice of Probate” attached.

NOTICE OF PROBATE

INFORMATION ABOUT THE DECEASED PERSON		
Full Legal Name		
Date of Birth	Date of Death	Social Security Number
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Single		
INFORMATION ABOUT THE SPOUSE OF THE DECEASED PERSON (complete even if marital status is "Divorced" or "Widow/Widower")		
Spouse's (former spouse's) Full Legal Name		
Spouse's (former spouse's) Address		Spouse's (former spouse's) Phone Number
INFORMATION ABOUT THE PROBATE COURT CASE		
County Where the Case was Filed	Probate Case Number	
Montgomery		
Type of Probate Case	Date Petition Filed or Letters Granted	
INFORMATION ABOUT THE PERSON COMPLETING THIS FORM		
Full Legal Name	Phone Number	
Address		

IN THE PROBATE COURT OF MONTGOMERY COUNTY, ALABAMA

IN RE: THE ESTATE OF _____)
(name of the deceased))
DECEASED,)
CASE NO.: _____ - _____)

AFFIDAVIT OF CERTIFIED MAILING OF NOTICE OF PROBATE

I, _____, do say and verify that on _____ I personally
(name) (date)
mailed the attached Notice of Probate by United States Postal Service Certified Mail, return
receipt requested. The Notice of Probate was mailed to the following address:

Alabama Medicaid Agency
ATTN: Estate Notice Office
P.O. Box 5624
Montgomery, AL 36103-5624

The certified mail tracking number is: _____. I have
attached a copy of the Notice of Probate to this affidavit.

_____)
(signature)
_____)
(printed name)

STATE OF ALABAMA)
)
_____ COUNTY)

I, _____, a notary, hereby certify that _____,
whose name is signed to the foregoing Affidavit of Certified Mailing of Notice of Probate, and
who is known to me, acknowledged before me on this day that he/she affirms that the statements
above are true and correct.

Given under my hand on this the _____ day of _____, 20____.

(seal)

_____)
Notary Public

IT'S LIVE!

As required by Act 2019-489, the Alabama Medicaid Agency (Medicaid) must receive notice of all post-death probate estates. The Alabama Medicaid Agency has created an electronic system for persons to provide notice in accordance with this law. The electronic system will issue a serialized certificate as proof of notice. The personal representative, or person filing to initiate a proceeding in accordance with the Alabama Small Estates Act, shall file the serialized certificate in the probate court if this system is utilized. The personal representative, or person filing to initiate a proceeding in accordance with the Alabama Small Estates Act, may choose to either provide notice through the electronic system or in accordance with subsection (c), but shall not be required to do both.

The electronic system is now live and can be viewed at
<https://estatenotice.medicaid.alabama.gov>.



Alabama Medicaid Agency Estate Notice Office



Date of Notice:

Alabama Medicaid Agency has received the Notice of Probate for the decedent below:

Full Legal Name:

Date of Birth:

Date of Death:

Social Security Number:

Marital Status:

Spouse's (former spouse's) Full Legal Name:

Spouse's (former spouse's) Address:

Spouse's (former spouse's) Phone Number:

County Where the Case was Filed:

Probate Case Number:

Type of Probate Case:

Date Petition Filed or Letters Granted:

Full Legal Name of Person Submitting Notice:

Address of Person Submitting Notice:

Phone Number of Person Submitting Notice:

Serialized Certificate Number:

Please reference the above serialized certificate number for inquiries about this notice.