J C LOVE, III
PROBATE JUDGE
Montgomery County

# NOTICE OF ALABAMA ACT 2019-489

Effective September 1, 2019, the Alabama Medicaid Agency (Medicaid) must receive notice of all post-death probate estates as required by Act 2019-489. The personal representative, or the person filing an action under 543-2-690, the Alabama Small Estates Act, (Petition for Summary Distribution) is responsible for sending the notice. The notice must contain the information listed in section 1, paragraph (a) of said Act. To see a complete copy of this new act, go to: https://legiscan.com, then choose: Alabama, SB76, then click on "Text: Latest Bill text (Enrolled) PDF."

The personal representative, or person filing the small estate, has two options to submit the information to Medicaid: (Pick one of the following options)

1) The person can mail the notice by United States Postal Service Certified Mail, return receipt requested, and file an affidavit of certified mailing with this Court, along with a copy of the Notice of Probate and a filing fee of $7.50. These forms can be found on the Montgomery County Probate Court's website at: www.mc-ala.org, OR:

2) The person can visit: https://estatenotice.medicaid.alabama.gov and complete the required notice on Medicaid's website. If the notice is submitted via Medicaid's website, 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 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 the subsection (c), but shall not be required to do both. The serialized certificate is then filed with the Court, along with a filing fee of $3.00 per page.

If you do not give the required notice electronically, Medicaid has created instructions and sample forms that can be used to provide notice, which are attached hereto, along with a

sample of a properly completed return receipt. These forms can be found on the Court's website at: www.mc-ala.org.

If you have questions about the filing fee, please contact the Probate Court at (334) 832-1244. If you have any questions about this new law or the attached forms, please contact Alabama Medicaid Agency, Estate Notice Office at (334) 242-4097.

# 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.

l. 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, "l. 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, "l. 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 O Married O Divorced O Widow/Widower O Single

INFORMATION ABOUT THE SPOUSE OF THE DECEASED [redacted]PERSON
[redacted] (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 |
| | |

[redacted]INFORMATION ABOUT THE PERSON COMPLETING THIS FORM [redacted]

| Full Legal Name | Phone Number |
|---|---|
| | |

Address

IN THE PROBATE COURT OF MONTGOMERY COUNTY, ALABAMA

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

AFFIDAVIT OF CERTIFIED MAILING OF NOTICE OF PROBATE

1, _____, 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 )
_____

_____ 1, , 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