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State/Territory Name: Mississippi

State Plan Amendment (SPA) #: 13-011

This file contains the following documents in the order listed:

- 1) RO Follow-Up Approval Letter
- 2) Pharmacy Approval Letter
- 3) CMS 179 Form
- 4) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Atlanta Regional Office
61 Forsyth Street, Suite 4T20
Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

April 23, 2013

David J. Dzielak, Ph.D.
Executive Director
Division of Medicaid, Office of the Governor
550 High Street, Suite 1000
Jackson, Mississippi 39201

Re: Title XIX State Plan Amendment, MS 13-011

Dear Dr. Dzielak:

This is to affirm approval of the above referenced State Plan Amendment which was submitted to the Regional Office on March 25, 2013. The State's requested effective date of January 1, 2013 has been accepted.

Enclosed for your records are:

1. a copy of the approval letter dated April 19, 2013 that was submitted to the State by Larry Reed, Director, Division of Pharmacy;
2. the original signed 179; and
3. the approved plan pages.

If you have any additional questions regarding this amendment, please contact Carolyn Brown, State Coordinator for Mississippi, at 404-562-7421.

Sincerely,

//s//

Jackie Glaze
Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosure(s)

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-14-26
Baltimore, Maryland 21244-1850



Disabled & Elderly Health Programs Group

APR 19 2013

David J. Dzielak, Executive Director
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, Mississippi 39201-1399

Attention: Kristi Plotner

Dear Mr. Dzielak:

We have reviewed Mississippi State Plan Amendment (SPA) 2013-011 received in the Atlanta Regional Office on March 25, 2013. Under this SPA, the state proposes changes in pharmacy coverage as required by Section 175 of the Medicare Improvement for Patients and Providers Act of 2008 which amended section 1860D-2(e)(2)(A) of the Act to include barbiturates "used in the treatment of epilepsy, cancer, or a chronic mental health disorder" and benzodiazepines in Part D drug coverage effective as of January 1, 2013.

We are pleased to inform you that Mississippi SPA 2013-011 is approved, effective January 1, 2013. The Atlanta Regional Office will forward to you a copy of the CMS-179 form, as well as the pages approved for incorporation into the Mississippi Medicaid State Plan. If you have any questions regarding this amendment, please contact Bernadette Leeds at (410) 786-9463.

Sincerely,

//s//

Larry Reed
Director
Division of Pharmacy

cc: Jackie Glaze, ARA, Atlanta Regional Office
Carolyn Brown, Atlanta Regional Office
Judith Clark, Mississippi Division of Medicaid
Margaret Wilson, Mississippi Division of Medicaid

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 2013-011	2. STATE MS
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2013	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: Section 175 of the Medicare Improvement for Patients and Providers Act of 2008 (MIPPA) amended section 1860D-2(e)(2)(A).	7. FEDERAL BUDGET IMPACT: a. FFY 2013 \$0 b. FFY 2014 \$0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A Exhibit 12A Page 1 and 2	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-A Exhibit 12A Page 1 and 2

10. SUBJECT OF AMENDMENT:

As of January 1, 2013, the Division of Medicaid (DOM) will only provide coverage for branded and generic benzodiazepines and barbiturates for Medicaid only beneficiaries with the usual limitations and prior authorization. For the dually eligible during CY2013, DOM will provide limited coverage of barbiturates with coverage ceasing January 1, 2014. Medicaid will no longer provide coverage for branded or generic benzodiazepines for the dually eligible beneficiary effective January 1, 2013, as drug coverage will be provided through Medicare Part D.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: //s//	16. RETURN TO: David J. Dzielak Miss Division of Medicaid Attn: Kristi Plotner 550 High Street, Suite 1000 Jackson, MS 39201-1399
13. TYPED NAME: David J. Dzielak	
14. TITLE: Executive Director	
15. DATE SUBMITTED: 03/25/13	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 03/25/13	18. DATE APPROVED: 04/19/13
PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: 01/01/13	20. SIGNATURE OF REGIONAL OFFICIAL: //s//
21. TYPED NAME: Jackie Glaze	22. TITLE: Associate Regional Administrator Division of Medicaid & Children Health Opns
23. REMARKS:	

State of Mississippi

DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND SERVICES PROVIDED

12a. **Prescribed Drugs:**

- (1) Covered outpatient drugs are those produced by any manufacturer which has entered into and complies with an agreement under Section 1927 (a) of the Act which are prescribed for a medically acceptable indication. Compounded prescriptions (mixtures of two (2) or more ingredients) except for hyperalimentation are not covered.
- (2) All Medicaid beneficiaries age 21 and older are limited to five (5) prescriptions per month with no more than two (2) brand name (single source or innovator multiple source) drugs per month for each non-institutionalized Medicaid beneficiary.
- (3) As provided in Section 1935 (d) (1) of the Act, effective January 1, 2006, the Medicaid agency will not cover any Part D drug for full-benefit dual eligible cover any Part D drug for full-benefit dual eligible under Part A or Part B.
- (4) As provided by Sections 1927 (d)(2) and 1935 (d)(2) of the Act, the Medicaid agency provides coverage for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses, to all Medicaid beneficiaries including full benefit dual eligible beneficiaries under the Medicare prescription Drug Benefit-Part D.
 - (a) Agents when used for anorexia, weight loss or weight gain;
 - (b) Agents when used to promote fertility;
 - (c) Agents when used for cosmetic purposes or hair growth;
 - (d) Covered outpatient drugs which the manufacturer seeks to require as a condition of sale that associated tests or monitoring services be purchased exclusively from the manufacturer or its designee;
 - (e) Those drugs designated less than effective by the FDA as a result of the Drug Efficacy Study Implementation (DESI) program;
 - (f) Nonparticipating rebate manufacturers;
 - (g) Select agents when used for symptomatic relief of cough and colds: antihistamines, decongestants, antihistamine/decongestant combination products; legend antitussive benzonate;
 - (h) Agents when used to promote smoking cessation (except dual eligibles as Part D)

MEDICAL ASSISTANCE PROGRAM

State of Mississippi

will cover):

FDA approved smoking cessation and nicotine replacement products

- (i) Select prescription vitamins and mineral products, except prenatal vitamins and fluoride:
vitamin K, cyanocobalamin injection, vitamin D, folic acid as a single entity;
- (j) Select nonprescription (OTC) drugs:
Insulin, allergy and sinus products, analgesics/antipyretics, antitussives, antitussive/expectorants, digestive medications, ophthalmic drugs, topical antibiotics, topical antiparasitics, topical antifungals, and vaginal antifungals;
- (k) Barbiturates:
Except for dual eligible individuals effective January 1, 2013 when used in the treatment of epilepsy, cancer or a chronic mental health disorder as Part D will cover those indications;
- (l) Benzodiazepines:
Except for dual eligible individuals effective January 1, 2013 as Part D will cover all indications.