

DESCRIPTION OF LIMITATIONS

SERVICE	LIMITATIONS
12. <u>Prescribed Drugs, Dentures, and Prosthetic Devices, and Eyeglasses</u>	
12.a. Prescribed Drugs (continued)	<p data-bbox="600 388 828 420"><u>Limitations on Payment</u></p> <ol style="list-style-type: none"><li data-bbox="600 462 1455 514">3. Drugs not included on the Preferred Drug List, and designated as non-preferred.<li data-bbox="682 514 941 535">4. Botulinum Toxins<li data-bbox="682 535 876 556">5. <i>Reserved</i><li data-bbox="682 556 844 577">6. Synagis<li data-bbox="682 577 812 598">7. Xolair<li data-bbox="682 598 844 619">8. Tysabri<li data-bbox="600 619 1455 703">9. Early Refills – a request for a refill when more than 15 percent of an earlier-dispensed medication would remain when taken in compliance with the directions and quantity prescribed.<li data-bbox="682 703 876 724">10. <i>Reserved</i><li data-bbox="600 724 1455 777">11. Legend and non-legend cough and cold medications when prescribed for children under 6 (six) years of age.<li data-bbox="682 777 876 798">12. <i>Reserved</i><li data-bbox="682 798 876 819">13. <i>Reserved</i><li data-bbox="682 819 1455 850">14. Benzodiazepines when prescribed for children under age 21.<li data-bbox="682 850 876 871">15. <i>Reserved</i><li data-bbox="682 871 876 892">16. Nuedexta<li data-bbox="682 892 876 913">17. Makena <p data-bbox="600 945 941 976">(f) Drug Rebate Agreements</p> <ol style="list-style-type: none"><li data-bbox="600 997 1455 1144">1. The Commonwealth is in compliance with section 1927 of the Social Security Act. The state will cover drugs of federal rebate participating manufacturers. The state is in compliance with reporting requirements for utilization and restrictions to coverage. Pharmaceutical manufacturers can audit utilization data. The unit rebate amount is confidential and cannot be disclosed for purposes other than rebate invoicing and verification.<li data-bbox="600 1165 1455 1239">2. The Commonwealth will be negotiating supplemental rebates in addition to the federal rebates provided for in Title XIX. Rebate agreements between the state and a pharmaceutical manufacturer will be separate from the federal rebates.<li data-bbox="600 1260 1455 1354">3. A rebate agreement between the state and a drug manufacturer for drugs provided to Medicaid recipients, submitted to CMS on October 1, 2005, and entitled "State of Pennsylvania Department of Public Welfare Supplemental Rebate Agreement" has been authorized by CMS.<li data-bbox="600 1375 1455 1575">4. The Commonwealth will continue state-specific supplemental rebates and will also participate in a multi-state pooling program that will negotiate supplemental rebates in addition to federal rebates provided for in Title XIX. This multi-state pooling program is known as The Optimal PDL Solution (TOP\$sm). TOP\$sm rebate agreements will be separate from the federal rebates. TOP\$sm supplemental rebates received by the Commonwealth in excess of those required under the federal drug rebate agreement will be shared with the federal government on the same percentage basis as applied under the federal rebate agreement.<li data-bbox="600 1596 1455 1701">5. CMS has authorized the state of Pennsylvania to enter into "The Optimal PDL Solution (TOP\$sm). The TOP\$sm supplemental rebate agreement was authorized by CMS on 3/13/2007 and is effective January 1, 2007 for the state of Pennsylvania.

Note: See the revised Drug Rebate approval letter from CMS (dated 3/2/10) and the full agreement text at the end of this section by clicking here.

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