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State/Territory Name: Utah

State Plan Amendment (SPA) #: UT-13-001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179
- 3) Approved SPA Pages

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



Disabled & Elderly Health Programs Group

February 22, 2013

W. David Patton, Ph:D. Executive Director
Utah Department of Health
P.O. Box 143102
Salt Lake City, UT 84114-3102

Dear Dr. Patton:

We have reviewed the Utah State Plan Amendment (SPA) 13-001 received in the Denver Regional Office on December 31, 2013. The State of Utah proposes to discontinue covering claims for dual eligible beneficiaries when prescribed barbiturates for the treatment of epilepsy, cancer or a chronic mental health disorder and benzodiazepines for all indications as Medicare Part D will provide this coverage effective January 1, 2013. Based on the information provided, we are pleased to inform you that SPA 13-001 is approved with an effective date of January 1, 2013.

A copy of the CMS-179 form as well as the pages approved for incorporation into the state plan will be forwarded by the Denver Regional Office. If you have any questions regarding this amendment, please contact Madlyn Kruh at (410) 786-3239.

Sincerely.

/s/

Larry Reed Director Division of Pharmacy

cc: Richard C. Allen, ARA, Denver Regional Office Diane Dunstan-Murphy, Denver Regional Office

PRESCRIBED DRUG SERVICES

LIMITATIONS (cont.)

- c. all barbiturates except butalbital containing products and, 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.
- d. all benzodiazépines except for dual eligible individuals effective January 1, 2013, as Part D will cover all indications.
- e. smoking cessation drugs.
- 3. Drug Efficacy Study Implementation Project Drugs (DESI Drugs) as determined by the FDA to be less-than-effective are not a benefit of the Medicaid program.
- 4. Other drugs and/or categories of drugs as determined by the Utah State Division of Health Care Financing and listed in the Pharmacy Provider Manual are not a benefit of the Medicaid program.
- In accordance with Utah Code 58-17b-606(4), when a multi-source legend drug is available in the generic form, reimbursement for the generic form of the drug will be made unless the treating physician demonstrates a medical necessity for dispensing the non-generic, brand-name legend drug. However, the Department of Health pharmacists may override the generic mandate provisions if a financial benefit will accrue to the state (See Utah Code 58-17b-606(5)).
- The Division shall implement a preferred drug list for selected therapeutic drug classes beginning August 1, 2007. The therapeutic classes will be selected and a preferred drug or drugs for each therapeutic class implemented at the discretion of the Division.

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Approval Date 2 22 13

Effective Date __ 1-1-13

PRESCRIBED DRUG SERVICES

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- 5. In accordance with Utah Code 58-17b-606(4), when a multi-source legend drug is available in the generic form; reimbursement for the generic form of the drug will be made unless the treating physician demonstrates a medical necessity for dispensing the non-generic, brand-name legend drug. However, the Department of Health pharmacists may override the generic mandate provisions if a financial benefit will accrue to the state (See Utah Code 58-17b-606(5)).
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Supersedes T.N.#	11-014	Effective Date	1-1-13