

Table of Contents

State/Territory Name: Pennsylvania

State Plan Amendment (SPA)#: PA-26-0003

This file contains the following document in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Page

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



Center for Medicaid and CHIP Services

Medicaid Benefits and Health Programs Group

March 04, 2026

Valerie A. Arkoosh, MD, MPH
Secretary of Human Services
Commonwealth of Pennsylvania
Department of Human Services Office of Medical Assistance Programs
Bureau of Policy, Analysis, and Planning
P.O. Box 2675
Harrisburg, PA 17105-2675

re: Pennsylvania State Plan Amendment (SPA) 26-0003

Dear Secretary Arkoosh,

The CMS Division of Pharmacy team has reviewed Pennsylvania's SPA 26-0003, received in the CMS Division of Program Operations on December 30, 2025. This amendment will allow Pennsylvania to update their coverage limitations of weight loss agents.

Based on the information provided and consistent with the regulations at 42 CFR 447.20, we are pleased to inform you PA-26-0003 is approved with an effective date of January 1, 2026. We are attaching a copy of the signed CMS-179 form, as well as the page approved for incorporation into Pennsylvania's state plan.

If you have any questions regarding this state plan amendment, please contact Desiree Elekwa Izuakor at 667-290-9590 or desiree.elekwaizuakor@cms.hhs.gov.

Sincerely,



Mickey Morgan
Deputy Director, Division of Pharmacy

cc: Margaret Kosherzenko, Pennsylvania State Lead, CMS
Sally Kozak, Commonwealth of Pennsylvania, DHS OMAP
Eve Lickers, Commonwealth of Pennsylvania, DHS OMAP
Pamela Machamer-Peechatka, Commonwealth of Pennsylvania, DHS OMAP
Lacey Walker, Commonwealth of Pennsylvania, DHS OMAP

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 6 — 0 0 0 3

2. STATE

PA

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2026

5. FEDERAL STATUTE/REGULATION CITATION

Sections 1927(d)(2) and 1935(d)(2) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2026 \$ (379,520,729)
b. FFY 2027 \$ (569,281,091)

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1A/3.1B, Page 5cc

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 3.1A/3.1B, Page 5cc

9. SUBJECT OF AMENDMENT

Updated Limitations to Coverage of Weight Loss Agents

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

12. TYPED NAME
Valerie A. Arkoosh, MD, MPH

13. TITLE
Secretary of Human Services

14. DATE SUBMITTED
December 30, 2025

15. RETURN TO
Commonwealth of Pennsylvania
Department of Human Services
Office of Medical Assistance Programs
Bureau of Policy, Analysis and Planning
P.O. Box 2675
Harrisburg, Pennsylvania 17105-2675

FOR CMS USE ONLY

16. DATE RECEIVED
December 30, 2025

17. DATE APPROVED
March 04, 2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
January 1, 2026

20. TYPED NAME OF APPROVING OFFICIAL
Mickey Morgan

21. TITLE OF APPROVING OFFICIAL
Deputy Director, Division of Pharmacy

22. REMARKS

MEDICAID PROGRAM: REQUIREMENTS RELATING TO
COVERED OUTPATIENT DRUGS FOR THE CATEGORICALLY AND MEDICALLY NEEDY

SERVICES

Provision(s) (1927(d)(2) and 1935(d)(2))

7. The Medicaid agency provides coverage for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses to all Medicaid recipients, including full benefit dual eligible beneficiaries under the Medicare Prescription Drug Benefit – Part D.

The following drugs are covered:

- (a) agents when used for anorexia, weight loss, weight gain
 - i. Payment for weight loss drugs is limited to the following:
 - A. Agents covered for weight loss are listed on the Department’s website. Agents containing a glucagon-like peptide-1 (GLP-1) receptor agonist are not covered for weight loss.
- (b) agents when used to promote fertility
- (c) agents when used for symptomatic relief of cough and colds, excluding mouthwashes, lozenges, troches, throat sprays, and rubs
- (d) prescription vitamins and mineral products, including prenatal vitamins and fluoride
- (e) nonprescription drugs
 - i. Payment for non-legend drugs is limited to the following:
 - A. Those drug products marketed by drug companies which have entered into rebate agreements with the federal government as provided under Section 4401 of the Omnibus Budget Reconciliation Act of 1990.
 - B. Non-legend drug products when prescribed by a licensed prescriber within the scope of the prescriber’s practice listed on the Department’s website.