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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 23-0026

This file contains the following documents 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

October 06, 2023

Traylor Rains Oklahoma Health Care Authority 4345 N. Lincoln Blvd. Oklahoma City, OK 73105

re: Oklahoma State Plan Amendment (SPA) 23-0026

Dear Traylor Rains:

The CMS Division of Pharmacy team has reviewed Oklahoma's SPA 23-0026, received in the CMS Division of Program Operations on July 31, 2023. This amendment proposes to revise the State's Supplemental Rebate Agreement to update the applicable date of the new Sovereign States Drug Consortium (SSDC) rebate agreement.

Based on the information provided and consistent with the regulations at 42 CFR 447.20, we are pleased to inform you OK-23-0026 is approved with an effective date of January 1, 2024. We are attaching a copy of the signed CMS-179 form, as well as the page approved for incorporation into Oklahoma'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,

Cynthia R Denemark R Ph

Cynthia R. Denemark, R.Ph. Director, Division of Pharmacy

cc: Heather Cox, Oklahoma Health Care Authority Kasie McCarty, Oklahoma Health Care Authority Sandra Puebla, Oklahoma Health Care Authority Stacey Steiner, Oklahoma State Lead, CMS

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	2 3 — 0 0 2 6 O K
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2024
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
Section 1927 of the Social Security Act	a FFY 2024 \$ 0 b. FFY 2025 \$ 0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A, Page 5a-1a	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-A, Page 5a-1a; TN # 22-0010
9. SUBJECT OF AMENDMENT Amending the State Plan to revise the State's Supplemental Rebate Agreement to update the applicable date of the new Sovereign States Drug Consortium (SSDC) rebate agreement. 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: The governor's office does not review state plan material.
11. S CY OFFICIAL	15. RETURN TO
	Oklahoma Health Care Authority
12. TYPED N TE Traylor Rains	Attn: Traylor Rains 4345 N. Lincoln Blvd.
13. TITLE	Oklahoma City, OK 73105
State Medicaid Director	100 SHOOTH 35 8 100 HOVE
14. DATE SUBMITTED 07/31/2023	cc: Sandra Puebla; Kasie McCarty; Heather Cox
The state of the s	USE ONLY
16. DATE RECEIVED 7/31/2023	17. DATE APPROVED 10/06/2023
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 1/1/2024	19. SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL Cynthia R. Denemark, R.Ph.	21. TITLE OF APPROVING OFFICIAL Director, Division of Pharmacy
22. REMARKS	

State: OKLAHOMA Attachment 3.1-A
Page 5a-1a

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED CATEGORICALLY NEEDY

12a. Prescribed drugs, dentures, prosthetic devices, and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist (continued)

Tiered Drug List

The DUR Board will determine medical necessity for drugs covered under the Oklahoma tiered drug list and establish criteria for any prior authorization process. A preferred product, tiered drug list is utilized for certain categories of drugs. Drugs included in Tier One are generally available without additional documentation. A prior authorization process is available for drugs not included in Tier One.

Supplemental Drug Rebate

Pursuant to Section 1927 of the Act, the State has the following policies for Medicaid supplemental rebates:

A model agreement between the State and a drug manufacturer for drugs provided to the Medicaid population, submitted to CMS on January 2, 2004, and entitled "State of Oklahoma, Oklahoma Health Care Authority Supplemental Rebate Agreement" and subsequent revisions have been authorized by CMS.

Supplemental rebates received by the State in excess of those required under the national rebate agreement will be shared with CMS on the same percentage basis as applied under the national rebate agreement.

Drugs of manufacturers who do not participate in the supplemental rebate program will still be available to Medicaid recipients.

Beginning January 1, 2017, Oklahoma became part of the Sovereign States Drug Consortium (SSDC). SSDC negotiates supplemental rebates for Oklahoma. The State retains all options to accept or reject offers. Drugs of manufacturers who do not participate in the supplemental rebate program will still be available to Medicaid recipients. The updated SSDC rebate agreement between the State and participating manufacturers for drugs provided to the Medicaid program, submitted to CMS on July 31, 2023, supersedes the SSDC rebate agreement approved in OK SPA 22-0010. CMS has authorized the updated agreement. The updated agreement applies to drugs dispensed effective January 1, 2024.

Products for which a signed Medicaid State Supplemental Rebate Agreement is on file will have preferred status. This status may be reflected in the product's placement in lower tiers of the Tiered Drug List, inclusion on a Preferred Drug List, or by removing a prior authorization requirement from the product.

The State may enter into value-based contracts with manufacturers on a voluntary basis. These contracts will be executed on the model agreement entitled "Value-Based Supplemental Rebate Agreement" submitted to CMS on November 4, 2019 and authorized for use beginning January 1, 2020.

Approval Date: 10/06/23

Revised 01-01-24