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State/Territory Name: Alabama

State Plan Amendment (SPA) #:13-020

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Pharmacy 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

September 29, 2015

Ms. Stephanie Azar, Acting Commissioner
Alabama Medicaid Agency
501 Dexter Avenue
Post Office Box 5624
Montgomery, Alabama 36103-5624

Re: Alabama Title XIX State Plan Amendment, Transmittal #13-020

Dear Ms. Azar:

This is to affirm approval of the above referenced State Plan Amendment, which was submitted to the Regional Office on September 17, 2015. The State's requested effective date of January 1, 2014 has been accepted.

Enclosed for your records are:

1. a copy of the approval letter dated September 25, 2015 that was submitted to the State by John M. Coster, 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 Alice Hogan, State Coordinator for Alabama, at 404-562-7432 or Wendy Tuttle, Center Office Coordinator for Alabama at 410-786-8690.

Sincerely,

//s//

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

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

September 25, 2015

Stephanie McGee Azar
Acting Commissioner
Alabama Medicaid Agency
501 Dexter Avenue
Post Office Box 5624
Montgomery, AL 36103-5324

Dear Ms. McGee Azar:

We have reviewed Alabama State Plan Amendment (SPA) 13-020, Prescribed Drugs, received in the Atlanta Regional Office on December 3, 2013. This amendment proposes to remove barbiturates, benzodiazepines, and agents used to promote smoking cessation from the list of drugs the state Medicaid program may exclude from coverage or otherwise restrict in order to comply with the requirements of Section 2502(a) of the Affordable Care Act. Based on the information provided, we are pleased to inform you that consistent with the regulations at 42 CFR 430.20, SPA 13-020 is approved with an effective date of January 1, 2014. A copy of the signed CMS-179 form, as revised, as well as the pages approved for incorporation into the Alabama state plan will be forwarded by the Atlanta Regional Office.

If you have any questions regarding this SPA, please contact Wendy Tuttle at (410) 786-8690.

Sincerely,

/s/

John M. Coster, Ph.D., R.Ph.
Director
Division of Pharmacy

cc: Jackie Glaze, ARA, Atlanta Regional Office
Alice Hogan, Atlanta Regional Office
Stephanie Lindsay, Administrative Procedures Officer, Alabama Medicaid Agency

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: AL-13-020	2. STATE Alabama
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: HEALTH CARE FINANCING ADMINISTRATION		4. PROPOSED EFFECTIVE DATE January 1, 2014
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION 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: Title XIX, Social Security Act, Sec. 1927	7. FEDERAL BUDGET IMPACT: a. FFY 2014 \$92,853.09 b. FFY 2015 \$93,016.66
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A Page 5.12.1	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Attachment 3.1-A Page 5.12.1

10. SUBJECT OF AMENDMENT:

The primary purpose for this amendment is to remove barbiturates, benzodiazepines and agents used to promote smoking cessation from the list of drugs the Medicaid program may exclude or restrict from coverage. These changes are being made in accordance with Centers for Medicare and Medicaid Services (CMS) Program Notices.

11. GOVERNOR'S REVIEW (*Check One*):

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Governor's designee on file
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL via letter with CMS

12. SIGNATURE OF STATE AGENCY OFFICIAL: <u>//s//</u>	16. RETURN TO: Stephanie McGee Azar Acting Commissioner Alabama Medicaid Agency 501 Dexter Avenue Post Office Box 5624 Montgomery, Alabama 36103-5624
13. TYPED NAME: Stephanie McGee Azar	
14. TITLE: Acting Commissioner	
15. DATE SUBMITTED: <u>12-03-13</u>	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: <u>12-03-13</u>	18. DATE APPROVED: <u>09-25-15</u>
PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: <u>01-01-14</u>	20. SIGNATURE OF REGIONAL OFFICIAL: <u>//s//</u>
21. TYPED NAME: <u>Jackie Glaze</u>	22. TITLE: <u>Associate Regional Administrator</u> <u>Division of Medicaid & Children's Health Opns</u>

23. REMARKS: Approved with the following changes to items 6 and 7 as authorized by state on emails dated 1/21/14 and 09/17/15.

Block # 6 changed to read: Title XIX, Social Security Act Section 1927 (d)(2).

Block #7 changed to read: FFY 2014 \$2,994,373 and FFY 2015 \$2,999,668

Limitation of Services

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

12. a. **Prescribed Drugs**

- (e) Prescription vitamins and mineral products, except prenatal vitamins and fluoride preparations and others as specified by the Alabama Medicaid Agency.
 - Legend renal vitamins and vitamin preparations used in Total Parenteral Nutrition are covered.
- (f) Non-prescription drugs except for those specified by the Alabama Medicaid Agency.
 - Second generation antihistamines are covered
- (g) 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.