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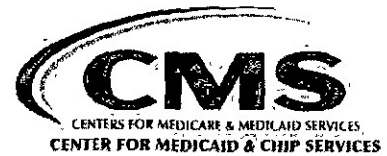
State/Territory Name: North Dakota

State Plan Amendment (SPA) #: ND-13-002

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

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

April 5, 2013

Maggie D. Anderson, Director
Division of Medical Services
ND Department of Human Services
600 East Boulevard Avenue, Dept. 325
Bismarck, ND 58505

Dear Ms. Anderson:

We have reviewed North Dakota's State Plan Amendment (SPA) 13-002, received in the Denver Regional Office on March 19, 2013. This amendment proposes to exclude from coverage benzodiazepines for all conditions and barbiturates for the treatment of epilepsy, cancer and chronic mental health disorders for full benefit dual eligibles as Medicare Part D will provide this coverage.

Based on the information provided, we are pleased to inform you that SPA 13-002 is approved with an effective date of January 1, 2013. A copy of the signed CMS-179 form, as well as the pages approved for incorporation into the Florida state plan will be forwarded by the Denver Regional Office.


If you have any questions regarding this amendment, please contact Jessica Walker at (410) 786-2457.


Sincerely,

/s/

Larry Reed
Director
Division of Pharmacy

cc: Richard C. Allen, ARA, Denver Regional Office
Rebecca Burch Mack, Denver Regional Office

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 13-002	2. STATE North Dakota
FOR: HEALTH CARE FINANCING ADMINISTRATION		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE January 1, 2013	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 1927 of the Social Security Act		7. FEDERAL BUDGET IMPACT: a. FFY <u>2013</u> \$ <u>-70,875</u> b. FFY <u>2014</u> \$ <u>-94,500</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment to Page 5 of Attachment 3.1-A Attachment to Page 4 of Attachment 3.1-B		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment to Page 5 of Attachment 3.1-A Attachment to Page 4 of Attachment 3.1-B	
10. SUBJECT OF AMENDMENT: Amends the State Plan to comply with MIPPA and ACA Medicare Part D prescription drug coverage for Barbiturates and Benzodiazepines.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Maggie D. Anderson, Director, Medical Services Division			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Maggie D. Anderson, Director Division of Medical Services ND Department of Human Services 600 East Boulevard Avenue Dept 325 Bismarck ND 58505-0250	
13. TYPED NAME: Maggie D. Anderson			
14. TITLE: Director, Division of Medical Services			
15. DATE SUBMITTED: March 19, 2013 REVISED 3-28-13			

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: March 19, 2013	18. DATE APPROVED: April 5, 2013
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: January 1, 2013	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Richard C. Allen	22. TITLE: Associate Regional Administrator, DMCHO
23. REMARKS:	

effective by the physician (e.g. ibuprofen prescription versus non-prescription ibuprofen):

- 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 are not covered.
 - h. Barbiturates are covered (all) except for dual eligible individuals effective January 1, 2013 when used in the treatment of epilepsy, cancer, or a chronic mental health disorder as Medicare Part D will cover those indications, and except for dual eligible individuals effective January 1, 2014 when used for all indications as Medicare Part D will cover all indications.
 - i. Benzodiazepines are covered (all) except for dual eligible individuals effective January 1, 2013 as Medicare Part D will cover all indications.
 - j. Agents when used to promote smoking cessation. (Restricted to the prescription drugs, bupropion and varenicline, and over-the-counter nicotine patches, lozenges, and gum. Prescription drugs are covered for Medicaid recipients who are not full-benefit dual eligible individuals. Over-the-counter drugs are covered for all populations. Coverage of all prescription and over-the-counter agents is available to only those Medicaid recipients that are enrolled with and actively participating in the North Dakota Tobacco Quitline.)
10. Active Pharmaceutical Ingredients (APIs) will not be allowed for payment except select APIs used in extemporaneously compounded prescriptions when dispensed by a participating pharmacy provider pursuant to a prescription issued by a licensed prescriber following all state and federal laws. The select APIs will only include those that are determined by the State to be cost effective compared to other covered alternatives. APIs that have been identified as being cost effective are identified at <http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/covered-APIs.pdf>.

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- 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 are not covered.
 - h. Barbiturates are covered (all) except for dual eligible individuals effective January 1, 2013 when used in the treatment of epilepsy, cancer, or a chronic mental health disorder as Medicare Part D will cover those indications; and except for dual eligible individuals effective January 1, 2014 when used for all indications as Medicare Part D will cover all indications.
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