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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 18-0008

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved 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**

Disabled and Elderly Health Programs Group

June 27, 2018

Becky Pasternik-Ikard, Chief Executive Officer Oklahoma Health Care Authority 4345 N. Lincoln Blvd. Oklahoma City, OK 73105

Dear Mrs. Pasternik-Ikard:

We have reviewed Oklahoma State Plan Amendment (SPA) 18-0008, received in the Dallas Regional Office on March 29, 2018. This amendment proposes to revise the Oklahoma State plan to incorporate language that authorizes the state to negotiate supplemental rebate agreements for pharmaceuticals involving value-based purchasing arrangements with drug manufacturers.

Based on the information provided, we are pleased to inform you that, consistent with the regulations at 42 CFR 430.20, SPA 18-0008 is approved with an effective date of January 1, 2018. A copy of the signed CMS-179 form, as well as the pages approved for incorporation into the Oklahoma state plan will be forwarded by the Dallas Regional Office.

If you have any questions regarding this amendment, please contact Mickey Morgan at (410) 786-4048 or <a href="mickey.morgan@cms.hhs.gov">mickey.morgan@cms.hhs.gov</a>.

Sincerely,

/s/

John M. Coster, PhD, RPh Director, Division of Pharmacy

CC: Tywanda Cox, Oklahoma Health Care Authority Sandra Puebla, Oklahoma Health Care Authority Keri Wade, Oklahoma Health Care Authority Kasie Wren, Oklahoma Health Care Authority Bill Brooks, CMS Associate Regional Administrator Stacey Shuman, CMS Regional Office

	1. TRANSMITTAL NUMBER	2. STATE			
TRANSMITTAL AND NOTICE OF APPROVAL OF	1 8 - 0 8	Oklahoma			
STATE PLAN MATERIAL	3. PROGRAM IDENTIFICATION: TITLE				
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	SECURITY ACT (MEDICAID)				
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE				
CENTERS FOR MEDICARE & MEDICAID SERVICES	January 4, 2040				
DEPARTMENT OF HEALTH AND HUMAN SERVICES  5. TYPE OF PLAN MATERIAL (Check One)	January 1, 2018				
o. The distribute (onesh one)					
■ NEW STATE PLAN    ■ AMENDMENT TO BE CONSIDERED AS A NEW PLAN    ▼ AMENDMENT					
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)					
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT				
42 CFR 440.120; 42 CFR 447 Subpart I	a. FFY <u>2018</u> \$ <u>\$0</u> b. FFY <u>2019</u> \$ <u>\$0</u>				
PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSED	ED PLAN SECTION			
Attachment 3.1-A, Page 5a-1a	OR ATTACHMENT (If Applicable)  Attachment 3.1-A, Page 5a-1a;	TN # 16-30			
10. SUBJECT OF AMENDMENT					
10. SUBJECT OF AMENDMENT					
Incorporating value-based purchasing contract for pharmaceuticals language to State Plan					
11. GOVERNOR'S REVIEW (Check One)					
GOVERNOR'S OFFICE REPORTED NO COMMENT	X OTHER, AS SPECIFIED				
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	ew State				
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	Plan material.				
12. SIGNATURE OF STATE AGENCY OFFICIAL	16. RETURN TO				
13. TYPED NAME	Oklahoma Health Care Authority				
Becky Pasternik-Ikard	Attn: Tywanda Cox				
14. TITLE	4345 N. Lincoln Blvd.				
Chief Executive Officer	Oklahoma City, OK 73105				
15. DATE SUBMITTED					
March 29, 2018					
17. DATE RECEIVED 18. DA	E USE ONLY TE APPROVED				
PLAN APPROVED - ONE CO	June 27, 2018 OPY ATTACHED				
19. EFFECTIVE DATE OF APPROVED MATERIAL 20.					
January 1, 2018					
21. TYPED NAME 22. TI	TLE Associate Regional Administrator				
Bill Brooks	Division of Medicaid and Children's H	ealth (DMCH)			
23. REMARKS c: Becky Pasternik-Ikard Tywanda Cox  FORM CMS-179 (07/92)					

State <u>OKLAHOMA</u> 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, and 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 is part of the Sovereign States Drug Consortium (SSDC). SSDC will negotiate 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 March 29, 2018 supersedes the SSDC rebate agreement approved in OK SPA 16-030. CMS has authorized the updated agreement. The updated agreement applies to drugs dispensed effective January 1, 2019.

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 March 29, 2018 and authorized for use beginning January 1, 2018.

State: Oklahoma
Date Received: 29 March, 2018
Date Approved: 27 June, 2018
Effective Date: 1 January, 2018
Transmittal Number: 18-08

Revised 01-01-18

TN# <u>18-08</u>		Approval Date	06/27/18	Effective Date _	01/01/18
Supersedes TN#	16-30				