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State Name: Pennsylvania

State Plan Amendment (SPA) #12-024

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 150 S. Independence Mall West Suite 216, The Public Ledger Building Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT #080920124039

OCT -5 2012

Gary D. Alexander, Secretary Commonwealth of Pennsylvania Department of Public Welfare P.O. Box 2675 Harrisburg, Pennsylvania 17105-2675

Dear Secretary Alexander:

We are pleased to inform you of the approval of Pennsylvania State Plan Amendment (SPA) 12-024. This SPA deletes limits to payment for all single entity and multiple vitamins. Enclosed are the approved SPA page and the signed CMS-179 form. The effective date of this SPA is June 1, 2012. This SPA was approved by the Pharm Team on September 20, 2012. You should have received a letter from Larry Reed, Director of the Division of Pharmacy.

Please note that accompanying this approval of SPA 12-024 there is an enclosed companion letter addressing unrelated issues that arose in review of this SPA.

If you have any questions regarding this amendment or the accompanying companion letter, please contact Rosemary Feild at (215) 861-4278.

Sincerely.

Trancis McCullough
Associate Regional Administrator

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE		
STATE PLAN MATERIAL		Pennsylvania		
	12-024			
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TIT	LE XIX OF THE		
FOR HEALTH CARE FINANCING ADMINISTRATION	SOCIAL SECURITY ACT (MEDICA	AID)		
TO, DECIONAL ADMINISTRATOR	A PROPOSED PERFORMED ATT			
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE			
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	June 1, 2012			
5. TYPE OF PLAN MATERIAL (Check One):				
3. I THE 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 AME	NDMENT (Separate Transmittal for each	amendment)		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:			
Section 1927 of the Social Security Act				
	a. FFY 2012 \$0.00			
	b. FFY 2013 \$0.00			
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS			
	OR ATTACHMENT (If Applicable)	:		
Dec 6 6 A 4 1 4 2 1 A	D 5 CAN 1 1214			
Page 5cc of Attachment 3.1A	Page 5cc of Attachment 3.1A			
10 OVIDIFOT OF AMENDMENT				
10. SUBJECT OF AMENDMENT:	·i			
Changes to the list of drugs with limits to payment for pharmacy serv	rices			
11. GOVERNOR'S REVIEW (Check One):				
GOVERNOR'S OFFICE REPORTED NO COMMENT				
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	approval authority has been delegated			
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	to the Department	of Public Welfare		
12. SIGNATURE OF STADE AGENCY OFFICIAL:	16. RETURN TO:			
12. SIGNATURE OF SPACE ACTIONS OFFICIAL.	Commonwealth of Pennsylvania			
	Department of Public Welfare			
13. TYPED NAME:	Office of Medical Assistance Progr	ams		
Gary D. Alexander	Bureau of Policy, Analysis and Plan			
14. TITLE:	P.O. Box 8046			
Secretary of Public Welfare	Harrisburg, Pa.17105			
15. DATE SUBMITTED: JUN 2 5 2012				
FOR REGIONAL OF	FICE USE ONLY			
17. DATE RECEIVED:		2040		
JUNE 26,2012	18. DATE APPROVED: UCT - 5	2012		
PLAN APPROVED – ONE COPY-ATTACHED				
19. EFFECTIVE DATE OF APPROVED MATERIAL:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
JUNE 1, 2012				
21 TYPED NAME:	(22 MT) RASTOCIATE RAGION	THE ADMINISTRATOR		
FRANCIS MECULOUGH		EALTH OPENATIONS		
23. REMARKS:				

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE: COMMONWEALTH OF PENNSYLVANIA

ATTACHMENT 3.1A Page 5cc

Effective Date: June 1, 2012

DESCRIPTION OF LIMITS

プログロス (基本) Experience are the first monthly and a control of the control of the

	SERVICE		LIMITATIONS	
12.	Prescribed Drugs, Dentures, And Prosthetic Devices, and Eyeglasses	, , , , , , , , , , , , , , , , , , , ,		
12.a.	Prescribed Drugs (continued)	6.	Reserved	
		7. the F	 Drugs and devices classified as experimental by the FDA. 	
		8.	Drugs and devices not approved by the FDA.	
		9.	Placebos.	
		agen	10. Nonlegend soaps, cleansing agents, dentifrices, mouthwashes, douche solutions, diluents, ear wax removal agents, deodorants, liniments, antiseptics, irrigants, and other personal care and medicine chest items.	
		11.	Nonlegend aqueous saline solutions.	
		12.	Nonlegends water preparations.	