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State Name: Virginia

State Plan Amendment (SPA) #: 11-09

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 Page

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#082420114018

NOV 3 0 2011

Cynthia B. Jones, Director Department of Medical Assistance Services 600 East Broad Street, #1300 Richmond VA 23219

Dear Ms. Jones:

We have reviewed the Virginia State Plan Amendment (SPA) #11-09, which decreases the estimated acquisition cost (EAC) from average wholesale price (AWP) minus 10.25 percent to AWP minus 13.1 percent for dates of service beginning on July 1, 2011. The Pharmacy Team at the Centers for Medicare & Medicaid Services approved this SPA on November 2, 2011. The effective date of the SPA is July 1, 2011.

Enclosed are the approved State Plan page and the signed CMS-179 form.

If you have any questions regarding this amendment, please contact Melanie Benning at (215) 861-4267, or via e-mail at melanie.benning@cms.hhs.gov.

Sincerely,

/S/

Erincis McCullough)
Acting Associate Regional Administrator

Enclosures

cc: Madlyn Kruh, CMS

Are you uninsured? Do you have a pre-existing condition? If so, you may be eligible for the new Pre-Existing Condition Insurance Plan. Call toll free 1-866-717-5826 (TTY 1-866-561-1604) or visit www.pcip.gov and click on "Find Your State" to learn more.

DEPARTMENT	OFF	EALTH	AND	HUMAN	SERVICES
CENTERS FOR	ME	NCARE	& LAI	=rucam	SERVICES

FORM APPROVED

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TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2011
5. TYPE OF PLAN MATERIAL (Check One)	
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONS	SIDERED AS NEW PLAN
	ENDMENT (Separate transmittal for each amendment)
8. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT
42 CFR Part 440	a. FFY 2011 \$ [819,000.00] b. FFY 2012 \$ [927,000.00]
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
Attach. 4.19-B, Page 7.6 of 15	OR ATTACHMENT (If Applicable) Same page
10. SUBJECT OF AMENDMENT	
2011 Pharmacy Reimbursement Change	
11. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF COMMENTS OF THE COMMENTS	☑ OTHER, AS SPECIFIED
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATE-OTHER TYPES OF CARE

8. An EAC of AWP minus 13.1% shall become effective July 1, 2011.

The dispensing fee for brand name and generic drugs of \$3.75 shall remain in effect, creating payment methodology based on the previous algorithm (least of the subdivisions of this section) plus a dispensing fee where applicable.

TN No. 11-09 Approval Date 11/03/AOII Effective Date 07-01-11
Supersedes
TN No. 10-07