

## Table of Contents

State/Territory Name: Missouri

State Plan Amendment (SPA)#: MO-24-0009

This file contains the following document in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 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



**Center for Medicaid and CHIP Services**

**Medical Benefits Health Programs Group**

July 11, 2024

Todd Richardson  
Director  
MO HealthNet Division  
Missouri Department of Social Services  
P.O. Box 6500  
Jefferson City, Missouri 65102-6500

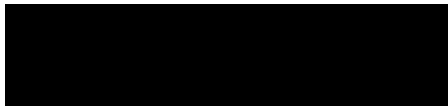
Dear Todd Richardson,

The CMS Division of Pharmacy team has reviewed Missouri State Plan Amendment (SPA) 24-0009 received in the CMS Medicaid Services OneMAC application on May 23, 2024. This SPA proposes to add coverage of prescribed drugs that are not covered outpatient drugs in cases of a drug shortage.

Based on the information provided and consistent with the regulations at 42 CFR 430.20, we are pleased to inform you that SPA 24-0009 is approved with an effective date of April 1, 2024. Our review was limited to the materials necessary to evaluate the SPA under applicable federal laws and regulations.

We are attaching a copy of the signed CMS-179 form, as well as the page approved for incorporation into Missouri's state plan. If you have any questions regarding this amendment, please contact Lisa Shochet at (410) 786-5445 or [lisa.shochet@cms.hhs.gov](mailto:lisa.shochet@cms.hhs.gov).

Sincerely,



Cynthia R. Denemark, R.Ph.  
Director  
Division of Pharmacy

cc: Josh Moore, PharmD, Director of Pharmacy, MO HealthNet Division  
Marissa Crump, CAPM, Executive Assistant, MO HealthNet Division  
Mandy Strom, Missouri State Lead, Medicaid Program Operations, CMS

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER 2 4 0 0 0 9	2. STATE MO
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
5. FEDERAL STATUTE/REGULATION CITATION Sections 1902 (a)(54) and 1927 of the Social Security Act		4. PROPOSED EFFECTIVE DATE 04/01/2024	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Page 15aa of Attachment 3.1-A		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2024 \$ 0 b. FFY 2025 \$ 0	
9. SUBJECT OF AMENDMENT This State Plan Amendment proposes to add coverage of prescribed drugs that are not covered outpatient drugs in cases of a drug shortage, where the state determines coverage of the drug (including a drug authorized for import by the FDA) is medically necessary.			
10. GOVERNOR'S REVIEW (Check One) <input checked="" type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <span style="margin-left: 20px;">SLV</span> <input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input type="radio"/> OTHER, AS SPECIFIED:			
11.	AGENCY OFFICIAL [REDACTED]	15. RETURN TO MO HealthNet Division Post Office Box 6500 Jefferson City, MO 65102-6500	
12.	TYPED NAME Robert Knodell	16. DATE RECEIVED May 23, 2024	
13.	TITLE Director		
14.	DATE SUBMITTED 5-22-24		
FOR CMS USE ONLY			
16. DATE RECEIVED May 23, 2024		17. DATE APPROVED July 11, 2024	
PLAN APPROVED - ONE COPY ATTACHED			
18. EFFECTIVE DATE OF APPROVED MATERIAL April 1, 2024		19. SIGNATURE OF APPROVING OFFICIAL [REDACTED]	
20. TYPED NAME OF APPROVING OFFICIAL Cynthia R. Denemark, R.Ph.		21. TITLE OF APPROVING OFFICIAL Director, Division of Pharmacy	
22. REMARKS			

The following drugs or classes of drugs, or their medical uses, are excluded from coverage pursuant to 1927(d)(2):

1. Agents when used for the treatment of sexual or erectile dysfunction, unless such agents are being used to treat a condition, other than sexual or erectile dysfunction, for which the agents have been approved by the Food and Drug Administration.
2. Agents when used to promote fertility.
3. Prescription vitamins and mineral products, except prenatal vitamins fluoride preparations, and for adults with documented vitamin deficiency.
4. 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.

Drug Shortages: Prescribed drugs that are not covered outpatient drugs (including drugs authorized for import by the Food and Drug Administration) are covered when medically necessary during drug shortages identified by the Food and Drug Administration.

State Plan TN# MO 24-0009  
Supersedes TN# MO 22-0023

Effective Date April 1, 2024  
Approval Date July 11, 2024