

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: Florida Agency for Health Care Administration

MEDICAID PROGRAM: REQUIREMENTS RELATING TO
COVERED OUTPATIENT DRUGS FOR THE MEDICALLY NEEDY

Citation (s)	Provision (s)
1935(d)(1)	Effective January 1, 2006, the Medicaid agency will not cover any Part D drug for full-benefit dual eligible individuals who are entitled to receive Medicare benefits under Part A or Part B.

TN No.: 05-006

Supersedes

TN No.: NEW

Approval Date: 10/07/05

Effective Date: 01/01/06

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: Florida Agency for Health Care AdministrationMEDICAID PROGRAM: REQUIREMENTS RELATING TO PAYMENT FOR COVERED
OUTPATIENT DRUGS FOR THE MEDICALLY NEEDY

Citation (s)	Provision (s)
1927(d)(2) and 1935(d)(2)	<p>1. The Medicaid agency provides coverage for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses to all Medicaid recipients, including full benefit dual eligible beneficiaries under the Medicare Prescription Drug Benefit –Part D.</p> <p><input checked="" type="checkbox"/> The following excluded drugs are covered:</p> <p><input type="checkbox"/> (a) agents when used for anorexia, weight loss, weight gain (see specific drug categories below)</p> <p><input type="checkbox"/> (b) agents when used to promote fertility (see specific drug categories below)</p> <p><input type="checkbox"/> (c) agents when used for cosmetic purposes or hair growth (see specific drug categories below)</p> <p><input type="checkbox"/> (d) agents when used for the symptomatic relief cough and colds (see specific drug categories below)</p> <p><input checked="" type="checkbox"/> (e) prescription vitamins and mineral products, except prenatal vitamins and fluoride (see specific drug categories below)</p> <p><input checked="" type="checkbox"/> (f) nonprescription drugs (see specific drug categories below)</p>

TN No.: 05-006

Supersedes

TN No.: NEWApproval Date: 10/07/05Effective Date: 01/01/06

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: Florida Agency for Health Care AdministrationMEDICAID PROGRAM: REQUIREMENTS RELATING TO PAYMENT FOR COVERED
OUTPATIENT DRUGS FOR THE MEDICALLY NEEDY

Citation (s)	Provision (s)
1927(d)(2) and 1935(d)(2)	<input type="checkbox"/> (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 (see specific drug categories below)
	<input checked="" type="checkbox"/> (h) barbiturates (see specific drug categories below)
	<input checked="" type="checkbox"/> (i) benzodiazepines (see specific drug categories below)
	(The Medicaid agency lists specific category of drugs below)
	Benzodiazepines – all Barbiturates – all
	Other excluded drugs that are covered are referenced in Attachment 3.1-A and Attachment 3.1-B of the State Plan
	<u> </u> No excluded drugs are covered.

TN No.: 05-006

Supersedes

TN No.: NEWApproval Date: 10/07/05Effective Date: 01/01/06