STATE OF RHODE ISLAND EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

9/10/19 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID STATE PLAN

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

Drug Reimbursement

During the approval process of SPA TN# 17-011, page 2d of Attachment 4.19-B was inadvertently dropped from the Rhode Island State Plan. EOHHS is proposing to submit a technical correction amendment to the Medicaid State Plan to reinsert the page. This page outlines the reimbursement methodology for certain outpatient and specialty drugs. This change is projected to have no budgetary impact and there are no programmatic changes. The proposed effective date of this change is October 1, 2019.

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-6348 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by October 11, 2019 to Gretchen Bell, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or <u>Gretchen.Bell@ohhs.ri.gov</u>.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within thirty (30) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

- (1) Outpatient and Specialty Drugs Dispensing Fee and Ingredient Cost
 - a. Payment for covered outpatient and specialty drugs dispensed to beneficiaries residing in the community includes the drug's ingredient cost plus an \$8.96 professional dispensing fee. For drugs reimbursed at the providers' usual and customary charge to the public, there will be no professional dispensing fee added.
 - b. Payment for outpatient and specialty drugs dispensed to beneficiaries residing in an institutional long-term care facility will include the drug ingredient cost plus a \$7.90 professional dispensing fee. For drugs reimbursed at the providers' usual and customary charge to the public, there will be no professional dispensing fee added.
 - c. The drug ingredient cost reimbursement shall be the lowest of:
 - i. The National Average Drug Acquisition Cost (NADAC); or
 - ii. Wholesale Acquisition Cost (WAC) + 0%; or
 - iii. The Federal Upper Limit (FUL); or
 - iv. The State Maximum Allowed Cost (SMAC); or
 - v. First Data Bank Consolidated Price 2 (SWD) 19%; or
 - vi. Submitted price; or
 - vii. The providers' usual and customary (U & C) charge to the public, as identified by the claim charge.
- (2) Clotting factor from specialty pharmacies, hemophilia treatment centers (HTC) and Centers of Excellence.
 - a. Payment for clotting factor from specialty pharmacies, hemophilia treatment centers (HTC) and Centers of Excellence will include the drug ingredient cost plus \$8.96 professional dispensing fee. For drugs reimbursed at the providers' usual and customary charge to the public, there will be no professional dispensing fee included.

TN # 19-013 Supersedes TN# <u>17-011</u>

Approved:_____

Effective: October 1, 2019