

Changes Made Since Printing of 1976 Compilation

Page

- 15 - Region IX: Omit "Pharmacist Consultant" after Richard King, R.Ph.
- Add M.P.H. to name of James E. Knobon, Pharm.D.
- Change address from 50 Fulton Street to 50 United Nations Plaza, Room 318
- 16 - Delaware: Delete name of James Hudiburg
- Florida: Delete (Vacant) and insert: Robert P. Hurst, R.Ph. - 904/487-2380
- 17 - Maryland: Delete name of Sue B. Fine, R.Ph.
- Nebraska: Change phone number to 402/471-2385
- 18 - Wisconsin: Add Margaret Broady Card, R.Ph. (Part-time)
- Conn. 3 - D. Change "cost plus" to \$2.00 and \$2.20 respectively
- Conn. 100 - 1. Delete James F. Morrison
- Fla. 100 - 1. Insert: James F. Morrison, Administrator, Bureau of Medical Services
- 1. Change title of C. Wright Hollingsworth to: Assistant Program Administrator
- 1. Add: Robert P. Hurst, R.Ph.
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Bureau of Medical Services
1311 Winewood Boulevard
Building 5, Room 116
Tallahassee, Florida 32301
- Md. 100 - 1. Delete name of Sue B. Fine, R.Ph.
- Miss. 102 - 3.B. Delete name of Josephine Suber and substitute: Gary Wilkerson, R.Ph., J.D.
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Jackson, Mississippi 39201
(Phone) 601/353-9479
- Ohio 100 - 3.B. Delete name of Cameron M. Close and substitute that of Jerard Fee, Executive Director
- Ore. 103 - 4.B. Change address to 1460 State Street
- Pa. 103 - 3.B. Delete name of Arnon H. Lear and substitute that of Stanley T. Singer

Changes Made Since Printing of 1976 Compilation (continued):

Page

- 16 - District of Columbia: New phone number for James Harris, R.Ph., is 202/724-5300
- Ga. 2 - Delete 5% factor
- N.M. 100 - Substitute Robert Stevens, R.Ph., for Dwight Bartlett, R.Ph.

Georgia - * Department of Medical Assistance (Medicaid)

David Pythress
Commissioner

G. W. Hogan
Chairman of the Board

* Replaces Medicaid Program, formerly under the Department of Human Resources.

There are to be four more board members named by the Governor (necessary before they can make policy).

(December 1976)

NEW YORK

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

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J. Raymond Diehl, Jr. Associate Commissioner Div. of Medical Assistance	" "
(Vacant) Bureau of Program Development	" "
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Gerard F. Nelligan, R.Ph. Senior Social Services Medical Assistance Specialist	" "

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- b. The Pharmaceutical Society of the State of New York appoints a committee as needed, in accordance with the particular subject to be discussed, to meet with the State Department of Social Services.

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<p>Edward D. Coates, M.D. First Deputy Commissioner <i>Second</i></p>	<p>" "</p>
<p>Robert P. Whalen, M.D. Commissioner Medical Services</p>	<p>" "</p>

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Max Waldgeir
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" "

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PHARMACEUTICAL BENEFITS
UNDER
STATE MEDICAL ASSISTANCE PROGRAMS

Compiled

by the

NATIONAL PHARMACEUTICAL COUNCIL
1030 Fifteenth Street, N.W.
Washington, D.C. 20005

1976

Addenda
of
State
Medical Assistance Drug Program
(Title XIX)
Recipient and Drug Expenditure Data
FY-1975 1/

<u>State</u>	<u>Recipients</u> ^{2/}	(000) <u>Expenditures</u> ^{3/}
<u>Delaware</u>		
OAA	2,874	\$ 314
AB	264	30
APTD	2,539	309
AFDC	27,211	635
MN - Aged	318	45
MN - Blind	12	2
MN - Disabled	68	6
MN - Children	42	1
	<hr/>	<hr/>
Total	33,328	\$ 1,342
<u>Illinois</u>		
OAA	22,247	\$ 3,594
AB	1,162	156
APTD	63,101	11,790
AFDC	591,248	32,872
MN - Aged	53,267	10,132
MN - Blind	540	113
MN - Disabled	38,613	6,710
MN - AFDC	15,836	734
	<hr/>	<hr/>
Total	786,014	\$66,101
<u>Iowa</u>	99,537	-
<u>North Carolina</u>	183,520	-

Footnotes: 1/ Received after going to press.
2/ Unduplicated count.
3/ Data does not appear on Chart II.

Source: HEW - SRS/NCSS 2082 (FY-1975) (Preliminary)

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Charts

- I. Total Vendor Payments for Prescribed Drugs
(State-by-State) 1970-1975
- II. Vendor Payments for Prescribed Drugs by Category
of Aid (State-by-State) FY-1975
- III. Amounts of Medical Vendor Payments by Type of Service
and by HEW Region and State, FY-1975 (NCSS/DHEW)
- IV. Distribution of Amounts (Percentages) of Medical Vendor
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State, FY-1975 (NCSS/DHEW)
- V. Medicaid Services State by State (MSA/SRS/DHEW)
June 1, 1976

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(continued)

Medical Assistance Drug Programs

(Alphabetically state-by-state)

For each state submitting data direct to NPC:

1. Benefits Provided and Groups Eligible
2. Expenditures for Drugs by Fiscal Year
3. How Administered
4. Provisions Relating to Prescribed Drugs:
 - General Exclusions
 - Formulary
 - Prescribing or Dispensing Limitations
 - Prescription Charge Formula
5. Miscellaneous Remarks
6. Officials, Consultants and Committees
7. Executive Directors of State Medical and
Pharmaceutical Associations

The National Pharmaceutical Council is composed of companies engaged principally in the manufacturing of prescription pharmaceutical products. It was organized in 1953 with the objective of promoting optimum professional standards and assuring the public of high quality pharmaceutical products.

NPC recognizes the important place of medical assistance programs in the nation's health care and the significance of the levels of care made available to patients receiving benefits under such programs. The Council shares the prevailing view of public health and public assistance officials that these patients should receive the same quality of medical care as do other patients in the community. It is our view that this quality concept should apply equally to pharmaceutical products prescribed and administered under medical assistance programs.

We believe that we may be of some assistance by providing information and reference material in consolidated form on the existing programs. We also want to be of service to medical assistance program and public health officials in the development, implementation and operation of the soundest possible pharmaceutical programs in each state.

To this end, we continue to make state-by-state reviews of medical assistance programs which are reflected in the current compilation.

The revisions of "Pharmaceutical Benefits Under State Medical Assistance Programs" include many changes made since the implementation of Title XIX of PL 89-97 (enacted as the Social Security Act Amendments of 1965) and subsequent amendments to the Social Security Act relating to Medicaid as well as changes made in state programs. If any errors or omissions are noted we would appreciate being notified as we want the compilation to be as helpful as possible.

We acknowledge with appreciation the cooperation and assistance of the many state program officials and their staffs, state pharmaceutical associations, medical societies, and others in supplying data on their state programs.

The Council also recognizes the importance of liaison and cooperation among Medicaid program officials and executives of many professional associations, and offers its services in the furtherance of these relationships and our mutual objectives.

PHARMACEUTICAL BENEFITS

UNDER STATE MEDICAL ASSISTANCE PROGRAMS

(Provided under Title XIX of the Social Security Amendments)

This compilation of data on State Medical Assistance Programs (Title XIX) has been prepared to present a general overview of the characteristics of State programs together with more detailed information on the pharmaceutical benefits provided. This latter body of data is referred to in the compilation as the Medical Assistance Drug Program.

The following information is provided for each State:

1. Recipient groups eligible for benefits.
2. Brief description of the Medicaid Program.
3. Magnitude of the State Drug Program.
4. Existing restrictions or limitations on drugs.
5. Data, when available, on case load or persons eligible to receive health care benefits, including pharmaceutical benefits.
6. Medicaid or Public Health officials.
7. Pharmacy and medical consultants to the State program.
8. Pharmacy and medical advisory committees.
9. State Medical and Pharmaceutical Association executives.

As of July 1, 1975, 53 of the 54 jurisdictions had Title XIX programs in operation, with approved state plans. Three of the 53 jurisdictions with Title XIX programs do not currently provide pharmaceutical benefits through the vendor payment system. (See Chart V, Medicaid Services State by State.)

Medical Care and Services Provided:

The Federal law provides a comprehensive list of services that may be included in a State plan. The reader should refer to each individual State for the program benefits provided. (See Chart V.)

The full list of medical care services that may be provided under the current program is as follows:

- *1. Inpatient Hospital Services (excluded: tuberculosis and mental institutions)
- *2. Outpatient Hospital Services
- *3. Other Laboratory and X-Ray Services
- *4. (A) Skilled Nursing Facility Services
(B) Early and periodic Screening, Diagnosis, and Treatment for physical and mental defects for eligibles under 21
(C) Family Planning Services
- *5. Physicians' Services
6. Medical and Remedial Care recognized under State law and provided by licensed practitioners
7. Home Health Care Services
8. Private Duty Nursing Services
9. Clinic Services
10. Dental Services
11. Physical Therapy and related services
12. Prescribed Drugs, dentures and prosthetic devices, and eyeglasses prescribed by a physician skilled in diseases of the eye or an optometrist - whichever the individual may select
13. Other Diagnostic Screening, Preventive and Rehabilitative Services
14. Inpatient Hospital and Skilled Nursing Home Services for individuals 65 years of age or over in an institution for tuberculosis or mental diseases
15. Intermediate Care Facility Services, effective January 1, 1972
16. Inpatient psychiatric hospital services for individuals under 21
17. Other Medical or Remedial Care recognized under State law

For the Categorically Needy:

States participating in a Title XIX program must provide the basic services 1 through 5, as listed above.

For the Medically Needy (if included in State plan):

The states have choices. They must provide the "basic five" or any 7 of the first 16 services listed in Title XIX, Section 1905(a) of PL 89-97, as amended.

* Basic Service (1-5), minimum or "basic five").

Additional State Plan Requirements:

(which may impact on the utilization of drug products):

1. Utilization Review

Each hospital, mental hospital, skilled nursing facility, and intermediate care facility providing inpatient services must have in effect a written facility utilization review plan for the review of the need for services provided to eligible individuals.

For hospitals and SNFs the standards and procedures must be the same as required under Medicare.

The Social Security Act, Section 1902 (a)(3) states:

A state Medicaid plan must provide such methods and procedures relating to the utilization of, and payment for, covered care and services and to assure that payments, including payments for any drugs provided under the plan, are not in excess of reasonable charges consistent with efficiency, economy and quality of care.

2. Professional Standards Review Organizations (PSROs)

PSROs are a review mechanism established by the Social Security Amendments of 1972 through which physicians will assume the responsibility for reviewing the utilization of services provided under Medicaid (Title XIX) and Medicare (Title XVIII). PSROs will evaluate the appropriateness of medical determinations as they relate only to the medical necessity of the services provided, in accordance with professional standards.

The initial regulations concern themselves with the review of inpatient and outpatient care and services.

It should be noted that under this requirement, as spelled out in the Social Security Act, the Secretary of the Department of Health, Education, and Welfare may waive any or all other utilization requirements under Medicaid and Medicare in order to avoid duplication of functions and unnecessary review and control activities.

Additional State Plan Requirements (continued)

3. Family Planning Services

Any state which does not provide family planning services under the Aid to Families with Dependent Children (AFDC) to eligible persons of child-bearing age, will lose one percent of the Federal financial support available for such services.

4. AFDC Recipients (Aid to Families with Dependent Children)

- a. All individuals receiving aid under the state's AFDC plan
- b. All individuals under 21 who are (or would be, except for age or school attendance requirements) dependent children under the state's AFDC plan
- c. All families that were receiving assistance under the state's AFDC plan in at least three of the six months immediately preceding the month in which the family became ineligible for AFDC.

5. SSI Recipients (Supplemental Security Income - for the Aged, Blind, and Disabled)

A state must cover as a "categorically needy" person and furnish medical assistance to any individual receiving aid as a needy aged, blind or disabled adult if it would have been required to furnish such assistance to such individual under its state plan that was in effect on January 1, 1972.

Eligibles

- a. Essential Persons - any individual eligible as an "essential person" (the "essential spouse" of an aged, blind or disabled recipient) in relation to an eligible cash recipient in December 1973 will continue to be eligible thereafter for each month that he or she continues to meet the eligibility standards in effect in December 1973.

SSI Recipients (continued)

b. Blindness and Disability Standards

Under the new Federal blindness and disability standards, any individual who continues to meet blindness and disability standards in effect under state plans in December 1973, will continue to have Medicaid eligibility under SSI on each successive month, regardless of his conformity with the Federal standards.

c. Persons in Medical Institutions

As determined by eligibility standards.

d. Individuals Eligible for Assistance

Except for any eligibility condition or other requirement that is specifically prohibited under Federal Medicaid law.

Vendor Drug Program (Selected Federal Policy Statements):

1. Freedom of Choice^{1/} (Sec. 249.11, Title 45, Chapter 11, Code of Federal Regulations 6/7/70)

Sec. 1902(a)23, Social Security Act:

State plans for medical assistance under Title XIX "must provide that any individual eligible for medical assistance under the plan may obtain the services available under the plan from any institution, agency, pharmacy, or practitioner.....qualified to perform such services."

This policy includes qualified organizations which provide such services or arrange for their availability on a prepayment basis (e.g., Health Maintenance Organizations, Group Health Organizations, Foundations, etc.).

^{1/} DHEW Medical Assistance Manual 6-160-10.

Freedom of Choice (continued)

"This provision does not require an institution to allow a recipient a choice of drug provider if the institution (e.g., hospital or nursing home) customarily includes pharmaceuticals as part of its total package of services - just as it includes, for example, nursing services."

2. Drug Reimbursement - Upper Limits

- a. Cost as defined by the state agency plus a dispensing fee. In evaluating a dispensing fee by analysis of operational data, as required, the objective of the State agency should be to insure that the average prescription price paid by the state agency does not exceed the average prescription price paid by the general public.
- b. "Customary charges that are reasonable" within the locality for comparable services under comparable circumstances (usual and customary). In the case of drugs this includes the markup system provided the charge does not exceed the amount charged the general public.
- c. Excluded from the above are payments for drugs in institutions and those provided by a public agency which makes bulk purchases of drug products.

Note: Medical Assistance Manual, Part 6, General Administration, Reasonable Charges for Prescribed Drugs, 6-160-20 - Prescription Pricing Methods, states:

"Some state programs reimburse for the drug product on the basis of 'actual acquisition cost' to the dispensing pharmacist. Under the best of circumstances, it is nearly impossible to determine the actual acquisition cost at the time of dispensing. This method is also far more expensive to administer under Title XIX than 'average wholesale price'."

3. Regulation Sec. 250.30, Reasonable Charges under State Plan Requirements (Title XIX - Medical Assistance Programs)

As of the publication date of this compilation the HEW Maximum Allowable Cost (MAC), Estimated Acquisition Cost (EAC) regulations are scheduled to be implemented August 26, 1976.

4. Drug Formularies and Generic Drug Products

Under existing Federal policy the use of a formulary, or limited drug list, in a Title XIX program is optional with the State, as is the use of generically prescribed drug products. The policy states: "Where either is employed, there must be standards for quality, safety, and effectiveness....."

Implementation guidelines, as stated in the HEW Medical Assistance Manual, state "the list of drugs which may be dispensed to Medicaid patients and paid for by Title XIX is made by selecting through some process under the supervision of professional personnel, from all drugs available, a collection of those drugs that are better, more useful, more widely used, or that have some other comparative advantage over drugs omitted from the formulary.

"There must be standards for quality, safety and effectiveness."

Compilation - State Charts:

1. Vendor System

The state charts in this compilation refer only to vendor services and to drug expenditures under vendor systems/1/.

2. General Assistance

It will be noted only a few state charts reflect general assistance (GA) expenditures. General assistance programs are completely financed by states and lesser government instrumentalities.

/1/ Exceptions: Alaska. In the case of Puerto Rico and Virgin Islands - vendor payments in emergency situations only.

General Assistance (continued)

Since the states are not required to report GA expenditures to the Federal Government under the DHEW classification system, it is quite possible that some of the states do provide some general assistance services but failed to report them to the National Pharmaceutical Council.

Social and Rehabilitation Service
Medical Services Administration

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D H E W

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and/or
State Agency Contact
for
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Colorado	Douglas T. Margreiter, R.Ph., M.P.H.	303/892-3253
Connecticut	Meyer Rosenkrantz, R.Ph.	203/566-2747
Delaware	David Krigstein, R.Ph.	302/658-6873
	James Hudiburg c/o Utilization Review, Blue Cross	302/658-6940
Dist. of Columbia	James Harris, R.Ph.	202/629-6771
Florida	(Vacant)	904/725-3080
Georgia	Gilbert H. Buice, R.Ph.	404/894-5167
Idaho	James Collier, R.Ph. (Part-time)	208/342-5691 (Business phone)
Illinois	Douglas H. Clough, R.Ph.	217/782-0509
Indiana	Kenneth Browning, R.Ph. (Part-time)	317/831-4250 (Office) - OR 317/633-4283 (Medicaid office)

* For addresses refer to individual state program information.

Drug Program Administrators and/or State Agency Contacts (continued)

<u>State</u>	<u>Contact</u>	<u>Telephone Number</u>
Iowa	Ronald J. Mahrenholz, R.Ph.	515/281-5755
Kansas	Gene Hotchkiss, R.Ph.	913/296-3981
Kentucky	(Miss) Gene A. Thomas, R.Ph.	502/564-7287
Louisiana	Walter S. McLean, Jr., R.Ph.	504/389-5316
Maine	Michael O'Donnell, R.Ph.	207/289-2311
Maryland	(Mrs.) Sue B. Fine, R.Ph.	301/383-2658
Massachusetts	Nat Carpenter	617/727-6090
Michigan	James L. Hall, R.Ph.	517/373-7623
Minnesota	John T. Bush, R.Ph.	612/296-2363
Mississippi	William R. Allen, R.Ph. (Deputy Director)	601/354-7464
	Emmet Berry, R.Ph.	601/354-7464
Missouri	Gerald L. Washburn, R.Ph.	314/751-3399
	George E. Mallams, R.Ph.	314/751-3399
Montana	Neal Ostby, R.Ph.	406/449-3952
Nebraska	Tom R. Dolan, R.Ph.	402/471-2387
Nevada	Steven P. Bradford, Pharm.D.	702/885-4775
New Hampshire	Maurice E. Goulet, M.S., R.Ph.	603/271-3706
New Jersey	Sanford Luger, R.Ph.	609/292-3756
New Mexico	Dwight Bartlett, R.Ph.	505/827-2401
New York City	Harry Habler, R.Ph.	212/790-3931
New York State	Gerard F. Nelligan, R.Ph.	518/457-5550
North Carolina	Benny Ridout, R.Ph.	919/829-2060
North Dakota	Chuck Gress, R.Ph.	701/224-2321

Drug Program Administrators and/or State Agency Contacts (continued)

<u>State</u>	<u>Contact</u>	<u>Telephone Number</u>
Ohio	David M. Stuart, R.Ph. c/o Ohio Northern Univ. College of Pharmacy	614/466-6282 419/634-3015 (University)
Oklahoma	J. C. Cobb, R.Ph.	405/521-3804
Oregon	George H. Swartsley, R.Ph. (Part-time)	503/378-0160 (Business phone)
Pennsylvania	William G. Shoemaker, R.Ph.	717/787-3455
Rhode Island	John A. Pagliarini, R.Ph.	401/464-2183
South Carolina	John F. Riley, R.Ph. Horace M. Kaiser, R.Ph. (Part-time)	803/758-2170 803/758-2170
South Dakota	Willis Hodson, R.Ph.	605/224-3495
Tennessee	Herbert Bates, R.Ph.	615/741-7221
Texas	Roy Wiese, Jr., R.Ph.	512/475-6321
Utah	John D. Hunter, R.Ph.	801/533-6183
Vermont	Robert Webster, R.Ph. (Part-time)	802/828-3441
Virginia	(Mrs.) Mary Ann Johnson, R.Ph.	804/786-7933
Washington	William P. Pace, R.Ph.	206/753-7313
West Virginia	Bernard Schlact, R.Ph.	304/348-8990
Wisconsin	W. Allen Daniels, R.Ph. c/o Wisconsin Pharmaceutical Assoc.	608/238-5515
Wyoming	Harold Prael, R.Ph.	307/777-7275

Not included: Guam, Hawaii, Puerto Rico, Virgin Islands.

Vendor Payments for Prescribed Drugs
Under Title XIX of the Social Security Act, Medical Assistance Programs
for Fiscal Years Ended June 30, 1970-1975^{1/}
(Amounts in Thousands)

<u>State</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>
<u>Total</u>	<u>\$401,128</u>	<u>\$473,020</u>	<u>\$548,764</u>	<u>\$612,326</u>	<u>\$706,746</u>	<u>\$816,453</u>
Alabama	4,579	15,213	9,214	10,451	12,123	15,643
Arkansas	-	-	-	-	6,321	11,960
California	75,198	82,808	76,548	77,308	87,957	96,156
Colorado	5,322	7,045	7,577	7,253	6,856	7,458
Connecticut	4,820	5,410	5,880	6,007	7,124	9,079
Delaware	563	767	1,006	1,209	1,248	1,342
Dist. of Col.	1,385	2,423	3,187	3,904 ^{2/}	4,843	5,779
Florida	9,153	11,682	11,143	11,696	11,764	18,878
Georgia	7,653	15,087	14,112	17,795	16,753	25,929
Guam	-	3/ ^{3/} - 9	- 21	- 45	-	- 3/ ^{3/}
Hawaii ^{4/}	628	373	1,560	1,875	2,372	2,747
Idaho	-	-	724	1,280	1,331	1,503
Illinois	22,175	25,890	34,639	43,656	56,945	64,907
Indiana	5,706	7,858	10,812	12,672	11,416	12,505
Iowa	5,207	5,357	5,225	5,309	5,260	6,607
Kansas	6,459	5,194	8,161	7,183	7,415	8,364
Kentucky	10,917	12,486	11,687	12,129	10,698	12,009
Louisiana	8,166	8,706	9,456	10,199	10,931	25,755
Maine	218	1,656	2,098	2,626 ^{2/5/}	3,745	3,825
Maryland	9,408	10,119	12,581	14,838	15,869	17,282
Massachusetts	22,743	26,160	27,073	23,989	24,157	28,776
Michigan	12,488	17,611	21,868	30,976	36,933	43,713
Minnesota	10,395	11,503	12,643	13,196	13,160	12,831
Mississippi	-	8,393	10,790	12,603	16,256	19,677
Missouri	8,993	9,363	9,792	10,572	11,685	12,923
Montana	1,097	952	964	1,027	1,135	1,706 ^{6/}
Nebraska	2,930	3,582	3,870	4,134	4,528	4,709
Nevada	562	652	751	876	916	1,165
New Hampshire	1,230	1,316	1,582	1,856	2,071	2,738 ^{7/}
New Jersey	8,055	10,998	13,925	16,924	19,725	24,509
New Mexico	2,204	2,832	2,544	2,381	2,828	3,130
New York	58,904	56,615	66,330	62,364	86,851	86,183
North Carolina	7,465	14,545	18,093	20,253	16,599	18,281
North Dakota	1,410	1,469	1,712	1,743 ^{2/}	1,766	2,146
Ohio	16,107	17,455	20,929	24,396	38,351	34,339

Chart I
(continued)

Vendor Payments for Prescribed Drugs
Under Title XIX of the Social Security Act, Medical Assistance Programs
for Fiscal Years Ended June 30, 1970-75^{1/}
(Amounts in Thousands)

State	1970	1971	1972	1973	1974	1975
Oklahoma ^{8/}	99	124	172	168	90	14
Oregon	1,953	2,239	2,462	2,797 ^{2/}	3,180	4,174
Pennsylvania	16,969	20,923	24,874	26,358	29,664	24,853
Puerto Rico	9,718	- ^{3/}	7,036	15,378	16,884	21,862
Rhode Island	3,699	4,320	4,548	4,586 ^{2/}	4,876	5,304
South Carolina	4,134	3,319	3,804	4,740	4,569	7,371
South Dakota	-	-	-	-	-	1,560
Tennessee	6,369	9,583	10,557	10,823	12,439	17,853
Texas	- ^{3/}	- ^{3/}	21,518	30,855	32,224	37,468
Utah	1,176	1,374	1,677	1,997	2,286	2,424
Vermont	1,225	1,441	1,713	2,088	2,103	2,414
Virgin Islands	2	- ^{3/}	239	325	326	301
Virginia	3,579	7,215	11,451	13,293	14,224	13,911
Washington	5,663	7,671	7,124	8,907	10,448	11,891
West Virginia	3,700 ^{9/}	2,939 ^{9/}	3,262	3,786	3,256	3,710
Wisconsin	9,717	10,345	9,827	11,501	12,245	16,788

^{1/} Source: National Center for Social Statistics, Social and Rehabilitation Service, Department of Health, Education and Welfare (NCSS/SRS/DHEW).

^{2/} Does not include payment to vendors by health-insuring or health maintenance organizations.

^{3/} No data reported.

^{4/} Includes general assistance medical vendor payments.

^{5/} Partly estimated.

^{6/} Includes \$36,611 not distributed by type of service.

^{7/} Includes \$165,319 not distributed by type of service.

^{8/} Oklahoma money payments include \$17 per month for drugs for all adult public assistance programs. (Title XIX Vendor Drug Program not implemented until FY-1976 - July 1, 1975.)

^{9/} Includes State Pharmacy Program payments made without Federal participation.

Note: In some states, two or more types of services may be grouped under one class, such as Connecticut where Other Care includes other practitioners, clinic, laboratory and radiological, home health and family planning services; and such as South Carolina, where skilled nursing facility services include payments to state mental institutions.

No Title XIX vendor drug program in FY-1975:
Alaska, Arizona, Oklahoma, Wyoming

Vendor Payments for Prescribed Drugs
By Category of Aid
Under Public Assistance Medical Care, Medical Assistance (Title XIX)
and General Assistance Programs for
Fiscal Year Ended June 30, 1975^{1/}
(Dollars in Thousands)

State	Type of Program						
	OAA	AFDC	AB	APTD	MAA	GA	MN
Total	\$245,242	\$180,293	\$6,729	\$138,431	\$15,037	\$25,756	\$60,555
Alabama	10,301	2,391	166	3,447	-	-	-
Alaska ^{2/}	56	206	1	72	-	-	3
Arkansas	7,913	1,950 ^{3/}	157	2,563	-	-	77
California	27,096	23,812	1,177	27,489	-	7,689	15,639
Colorado	3,720	1,557	23	2,140	-	-	19
Connecticut	676	2,981	18	1,058	-	-	4,307
Delaware ^{4/}	359	636	32	315	-	-	-
D.C.	315	2,888	16	914	-	29	1,618
Florida	12,736	4,338	203	5,703	-	-	-
Georgia	8,799	6,143	201	5,504	-	-	4,369
Hawaii	427	2,149	404	1,309	9	-	-
Idaho	577	473	6	447	-	-	-
Indiana	6,624	4,769	164	4,769	-	-	-
Iowa	3,418	2,066	125	1,085	79	-	-
Kansas	1,520	1,810	50	1,324	3,834	599	-
Kentucky	4,984	2,561	129	2,693	-	-	1,642
Louisiana	16,506	4,282	222	4,808	-	893 ^{5/}	-
Maine	1,996	1,806	19	1,157	-	-	-
Maryland	944	4,602	31	2,307	-	3,106	5,441
Michigan	6,434	15,868	148	8,729	11,092	-	-
Minnesota	1,770	3,038	117	1,380	-	-	6,565
Mississippi	11,222	4,017	180	4,258	-	-	-
Missouri	6,850	2,983	281	2,301	-	829	-
Montana	752	462	16	505	-	11	-
Nebraska	988	853	27	925	-	-	1,923 ^{6/}
Nevada	488	425	15	245	-	-	-
New Hampshire	996	788	38	398	-	-	515
New Jersey	6,182	13,387	108	4,402	15	1,738	-
New Mexico	803	1,223	22	1,081	-	-	-

Vendor Payments for Prescribed Drugs
By Category of Aid
Under Public Assistance Medical Care, Medical Assistance (Title XIX)
and General Assistance Programs for
Fiscal Year Ended June 30, 1975^{1/}
(Dollars in Thousands)

State	Type of Program						
	OAA	AFDC	AB	APTD	MAA	GA	MN
North Carolina	9,153	4,022	479	7,174	-	-	1,580
North Dakota	532	360	3	402	-	10	862
Ohio	19,856	12,865	63	1,588	-	-	-
Oregon	1,605	1,292	77	1,236	-	431	-
Pennsylvania	9,546	15,959	1,115	8,317	-	9,526	-
Puerto Rico	-	2,373	2	235	-	-	11,887
Rhode Island	1,041	1,253	22	994	-	469	2,049
South Carolina	2,991	3,416	85	1,708	-	-	342
South Dakota	973	270	8	297	-	13	-
Tennessee	9,043	3,353	121	5,326	8	-	-
Texas	24,563	7,812	294	5,700	-	-	-
Utah	779	878	20	748	-	-	-
Virgin Islands	14	32	-	3	-	-	252
Virginia	6,063	4,227	181	3,263	-	-	-
Washington	4,476	2,890	49	3,677	-	413	261
West Virginia	1,195	1,209	33	1,117	-	-	5
Wisconsin	7,960	3,618	81	3,318	-	-	1,199

1/ Category of Aid data submitted by individual jurisdiction directly to NPC except those states noted.

2/ Alaska does not have a Title XIX Vendor Drug Program.

3/ Foster Care and Children Under 21.

4/ Source of data: DHEW - SRS/NCSS 2082 B (2&3) FY-1975.

5/ Includes \$10 - Cuban Refugees.

6/ Includes \$33 - "Others".

Note: Jurisdictions not reporting have been omitted: Arizona, Guam, Illinois, Massachusetts, New York, Oklahoma, Vermont, Wyoming.
(Underlined states did not have Title XIX vendor drug program as of June 30, 1975.)

Amounts of Medical Vendor Payments by Type of Service
and by HEW Region and State
Fiscal Year 1975

HEW REGION AND STATE	TOTAL	INPATIENT HOSPITAL SERVICES		SKILLED NURSING FACILITY SERVICES	INTERMEDIATE CARE FACILITY SERVICES IN INSTITUTIONS		
		TOTAL	IN GENERAL HOSPITAL		IN MENTAL HOSPITAL	TOTAL	FOR MENTALLY RETARDED
TOTAL, REPORTING STATES 1/	\$12,318,467,814	\$3,914,552,581	\$3,464,260,788	\$450,331,793	\$2,471,207,260	\$2,179,118,182	\$361,854,541
REGION I.....	881,223,359	313,126,783	289,424,962	23,701,821	200,574,354	140,368,642	5,131,907
CONNECTICUT 2/.....	161,075,281	39,874,513	39,417,166	457,347	74,995,189	6,475,053	---
MAINE.....	63,305,061	18,395,205	18,395,205	---	1,459,674	21,987,274	---
MASSACHUSETTS.....	524,705,703	208,296,377	190,559,964	17,736,413	112,534,289	74,501,910	---
NEW HAMPSHIRE 1/.....	28,236,561	5,153,055	5,148,711	4,344	1,990,444	10,799,873	---
RHODE ISLAND.....	72,078,823	32,083,420	28,936,842	3,146,578	7,468,520	15,888,855	5,131,907
VERMONT.....	31,421,930	9,324,213	6,567,074	2,357,139	2,126,038	10,715,877	---
REGION II.....	3,438,220,576	1,274,774,357	1,029,749,474	245,024,882	750,824,806	440,031,940	86,926,270
NEW JERSEY.....	368,129,606	125,458,333	86,229,666	39,228,667	8,273,797	107,058,866	---
NEW YORK.....	2,954,621,930	1,109,717,478	903,921,262	205,796,216	742,551,005	332,973,074	86,926,270
PUERTO RICO.....	113,080,000	38,484,314	38,484,314	---	---	---	---
VIRGIN ISLANDS.....	2,181,040	1,114,232	1,114,232	---	---	---	---
REGION III.....	1,256,637,781	417,438,468	408,024,002	9,414,466	339,192,420	193,553,572	64,092,270
DELAWARE.....	14,625,785	5,092,872	4,532,620	560,252	595,722	3,246,314	---
DIST. OF COLUMBIA.....	52,654,753	46,554,347	46,554,347	---	2,738,505	7,458,261	---
MARYLAND.....	204,141,454	78,655,356	78,655,356	---	25,454,026	22,800,407	---
PENNSYLVANIA.....	727,874,700	213,350,649	213,350,649	---	305,004,124	91,012,177	42,509,213
VIRGINIA.....	183,640,499	58,957,629	50,143,415	8,854,214	4,985,453	62,419,709	21,583,157
WEST VIRGINIA.....	33,460,590	14,787,615	14,787,615	---	414,590	6,616,704	---
REGION IV.....	1,123,544,714	298,366,773	279,764,574	18,621,799	265,620,669	162,141,061	29,086,248
ALABAMA.....	131,105,383	26,552,020	26,547,944	4,076	41,506,102	19,233,813	---
FLORIDA.....	172,619,713	49,054,156	44,387,932	4,666,264	63,447,101	5,180,266	---
GEORGIA.....	254,668,945	58,434,109	58,434,109	---	66,777,894	33,608,565	5,600,541
KENTUCKY.....	107,292,828	36,901,357	32,410,621	4,490,776	20,010,598	12,455,107	---
MISSISSIPPI.....	93,742,165	22,416,180	22,416,180	---	26,505,109	4,087,668	10,108
NORTH CAROLINA.....	164,876,951	58,853,370	52,453,060	6,400,310	26,357,411	23,394,835	8,275,321
SOUTH CAROLINA 2/.....	75,690,567	22,112,481	19,064,703	3,047,778	20,177,840	7,441,454	308,454
TENNESSEE.....	123,548,162	24,063,020	24,050,425	12,555	834,614	56,139,353	14,891,864
REGION V.....	2,511,565,058	731,550,777	667,932,773	63,618,004	407,634,310	563,858,124	87,976,773
ILLINOIS.....	713,654,134	255,528,526	241,914,286	13,614,240	52,602,360	137,293,522	---
INDIANA.....	172,433,949	34,616,492	34,616,492	---	23,754,005	65,053,872	---
MICHIGAN.....	639,387,578	214,521,208	178,422,758	36,108,410	122,218,731	90,721,184	3,424,128
MINNESOTA.....	259,197,483	49,257,470	44,793,440	4,464,030	54,565,318	98,012,345	41,702,046
OHIO.....	366,325,052	122,538,911	116,182,415	6,356,496	63,738,753	49,040,701	28,572
WISCONSIN.....	360,570,902	55,078,170	52,003,342	3,074,828	90,755,139	123,776,500	42,812,007
REGION VI.....	860,343,594	171,430,589	166,276,732	5,054,257	53,771,153	404,271,702	51,537,656
ARKANSAS.....	92,631,805	12,494,330	12,161,799	332,531	21,028,910	33,279,408	5,887,494
LOUISIANA.....	145,033,439	31,754,500	31,426,737	327,763	1,802,924	65,742,555	11,550,551
NEW MEXICO.....	29,564,386	9,460,101	9,460,101	---	86,523	8,237,681	1,364,519
OKLAHOMA.....	140,647,244	39,737,083	38,737,083	---	523,238	77,454,135	8,237,018
TEXAS.....	452,466,720	78,984,975	74,591,012	4,393,963	30,329,558	219,217,883	24,097,674
REGION VII.....	335,212,392	55,603,709	89,463,809	6,139,900	16,615,656	115,483,769	14,867,138
IOWA.....	81,891,998	15,015,230	15,015,230	---	441,262	42,662,904	---
KANSAS.....	101,566,017	29,080,216	24,958,830	4,121,386	3,752,578	37,948,181	8,813,746
MISSOURI.....	99,284,414	40,474,366	38,885,069	1,589,297	10,258,221	10,151,321	---
NEBRASKA.....	52,069,963	11,033,957	10,604,680	429,277	2,163,195	24,721,363	6,053,392
REGION VIII.....	210,590,659	48,831,951	41,768,862	7,063,129	46,220,481	59,338,703	3,909,325
COLORADO.....	98,029,807	24,437,918	20,098,439	4,339,479	17,792,531	31,537,951	1,464,619
MONTANA 1/.....	29,244,683	6,461,505	5,761,148	700,357	6,662,019	6,115,329	845,724
NORTH DAKOTA.....	22,994,403	5,877,232	4,708,559	1,168,273	7,521,790	3,725,559	---
SOUTH DAKOTA.....	22,145,804	3,869,937	3,869,937	---	5,720,069	7,689,554	---
UTAH.....	33,098,337	7,043,764	6,188,744	855,020	7,265,661	8,344,565	1,558,562
WYOMING.....	5,477,625	1,141,635	1,141,635	---	1,258,411	1,925,745	---
REGION IX.....	1,418,624,203	494,283,318	425,299,642	68,883,676	325,566,554	41,974,821	---
CALIFORNIA.....	1,365,528,714	480,739,673	412,079,745	68,659,928	311,431,360	37,991,585	---
HAWAII.....	36,522,966	8,395,583	8,395,583	---	10,302,206	2,711,623	---
NEVADA.....	16,142,523	5,148,062	4,924,314	223,748	3,832,988	1,271,623	---
REGION X.....	282,101,438	69,165,416	66,355,558	2,809,858	65,186,857	58,055,638	18,326,714
ALASKA.....	8,730,485	1,702,935	1,702,935	---	1,732,640	3,328,744	301,593
IDAHO.....	24,460,126	3,842,232	3,842,232	---	3,440,821	10,541,032	3,831,931
OREGON.....	76,761,915	16,522,133	16,736,317	1,785,816	1,304,340	38,551,777	14,120,966
WASHINGTON.....	172,148,912	47,058,116	46,074,074	1,024,042	58,709,056	5,634,085	72,224

See footnotes at end of table.

Source: U.S. Department of Health, Education, and Welfare
Social and Rehabilitation Service
Office of Information Sciences
National Center for Social Statistics
March 1976

Chart III
(Continued)

Amounts of Medical Vendor Payments by Type of Service

and by HEW Region and State

Fiscal Year 1975

HEW REGION AND STATE	TOTAL	INTERMEDIATE CARE FACILITY SERVICES IN ALL OTHER INSTITUTIONS	PHYSICIANS' SERVICES	DENTAL SERVICES	OTHER PRACTITIONERS' SERVICES	OUTPATIENT HOSPITAL SERVICES	CLINIC SERVICES
TOTAL, REPORTING STATES 1/	\$12,318,467,814	\$1,817,263,641	\$1,236,087,270	\$341,140,355	\$120,227,554	\$347,657,390	\$351,907,102
REGION I.....	881,023,355	135,236,935	66,551,893	34,361,056	7,837,441	34,545,792	7,636,821
CONNECTICUT 2/.....	161,075,281	6,475,053	11,972,708	3,252,691	---	8,630,910	---
MAINE.....	63,305,061	21,987,274	11,362,122	1,796,567	---	2,767,740	---
MASSACHUSETTS.....	524,705,703	74,501,910	31,120,002	24,406,815	7,115,671	18,673,805	7,631,669
NEW HAMPSHIRE 1/.....	28,236,561	10,759,873	3,713,542	1,802,457	372,574	771,944	3,544
RHODE ISLAND.....	72,078,823	10,756,948	4,537,680	2,144,287	249,657	2,776,413	---
VERMONT.....	31,621,930	10,715,877	4,245,439	958,239	99,539	924,980	1,588
REGION II.....	3,438,020,576	353,105,670	221,297,655	64,389,925	25,855,690	26,000,057	309,277,944
NEW JERSEY.....	368,129,606	107,058,866	45,597,055	18,295,727	2,313,279	23,822,907	1,661,583
NEW YORK.....	2,954,621,930	246,046,804	148,011,157	45,288,033	23,582,411	2,152,807	307,616,361
PURTO RICO.....	113,088,000	---	27,658,497	796,357	---	---	---
VIRGIN ISLANDS.....	2,181,040	---	30,946	9,808	---	624,343	---
REGION III.....	1,256,637,781	129,461,202	103,577,374	27,419,945	6,923,633	40,530,586	21,429,661
DELAWARE.....	14,625,785	3,246,314	2,622,236	---	58,468	1,106,707	62,160
DIST. OF COLUMBIA.....	92,894,753	7,458,261	12,666,164	495,952	1,243,204	7,820,273	3,069,155
MARYLAND.....	204,141,454	22,800,467	18,457,026	12,452,720	---	22,245,704	---
PENNSYLVANIA.....	727,874,700	48,502,964	42,819,590	9,554,564	3,135,957	2,292,825	25,938,384
VIRGINIA.....	183,640,499	43,836,552	22,192,365	4,078,875	1,448,314	9,128,077	2,359,962
WEST VIRGINIA.....	33,460,590	6,616,704	4,619,593	837,754	1,037,650	---	---
REGION IV.....	1,123,944,714	133,054,713	143,687,059	35,177,156	4,152,694	42,392,219	5,110,358
ALABAMA.....	131,105,383	19,233,813	16,352,705	2,403,913	1,029,385	3,612,400	---
FLORIDA.....	172,619,713	5,180,266	18,756,583	3,967,675	732,149	6,908,575	34,333
GEORGIA.....	254,668,945	28,008,026	35,344,004	15,860,638	---	11,711,726	---
KENTUCKY.....	107,292,828	12,455,167	12,902,472	3,457,034	576,950	4,183,543	2,697,356
MISSISSIPPI.....	93,742,165	4,677,560	15,423,799	1,480,071	248,957	2,305,243	286
NORTH CAROLINA.....	164,676,951	15,119,514	19,441,157	5,796,851	1,352,742	6,188,512	2,270,687
SOUTH CAROLINA 2/.....	75,690,567	7,132,960	9,940,900	2,210,970	212,511	2,198,542	---
TENNESSEE.....	123,548,162	41,247,469	15,525,039	---	---	5,283,678	107,656
REGION V.....	2,511,569,056	475,921,351	299,927,331	86,456,825	42,346,212	90,181,335	27,607,563
ILLINOIS.....	173,654,134	137,293,522	93,861,237	25,441,550	12,836,724	23,791,443	23,260,314
INDIANA.....	712,433,949	65,053,872	13,713,543	4,012,238	1,656,102	5,928,844	2,278,785
MICHIGAN.....	639,387,578	87,287,056	94,234,297	24,987,914	10,320,366	23,952,354	760,456
MINNESOTA.....	259,197,482	56,310,259	18,666,815	6,787,879	1,620,343	5,061,389	---
OHIO.....	366,325,052	49,012,129	44,669,055	14,922,423	6,607,396	23,372,545	1,307,568
WISCONSIN.....	360,570,902	80,964,473	34,782,384	10,304,761	9,265,281	8,074,760	---
REGION VI.....	660,343,594	352,734,006	100,046,878	5,149,471	3,408,204	15,940,587	3,057,222
ARKANSAS.....	92,631,805	27,651,914	8,520,023	2,644,273	108,210	987,948	---
LOUISIANA.....	145,033,439	53,791,604	10,696,127	28,358	---	3,413,492	2,457,589
NEW MEXICO.....	29,564,386	6,873,162	4,302,939	963,939	395,574	1,235,860	599,743
OKLAHOMA.....	140,647,244	69,257,117	15,902,273	1,496,088	188,384	205,214	---
TEXAS.....	452,466,720	155,120,209	60,225,516	16,773	2,715,636	10,118,673	---
REGION VII.....	335,212,392	100,616,631	40,241,369	11,333,300	3,386,865	10,705,967	1,081,750
IOWA.....	81,851,958	42,662,904	8,883,319	3,425,522	1,373,530	2,229,588	40,120
KANSAS.....	101,966,017	29,134,435	10,571,539	3,395,143	1,342,035	3,042,376	1,005,273
MISSOURI.....	99,284,414	10,151,321	16,615,547	3,055,075	269,378	4,168,272	---
NEBRASKA.....	52,069,963	18,667,971	4,170,964	1,457,568	401,922	1,265,731	36,357
REGION VIII.....	210,590,659	55,425,378	21,763,667	4,282,806	1,635,349	7,304,424	---
COLORADO.....	98,029,807	30,073,332	9,770,998	---	---	4,648,019	---
MONTANA.....	29,244,683	5,269,605	4,386,381	1,423,179	771,104	814,018	---
NORTH DAKOTA.....	22,994,403	3,725,559	1,562,199	633,171	413,538	236,835	---
SOUTH DAKOTA.....	22,145,804	7,689,554	2,122,577	262,943	406,788	329,993	---
UTAH.....	33,098,337	6,745,583	3,230,446	1,711,861	---	1,360,055	---
WYOMING.....	5,477,625	1,925,745	490,666	251,652	43,919	115,504	---
REGION IX.....	1,418,624,202	41,974,831	206,136,814	58,623,416	22,396,639	70,561,102	5,538,255
CALIFORNIA.....	1,365,528,714	37,951,585	198,106,149	54,839,007	21,925,062	67,745,452	5,535,428
HAWAII.....	36,552,966	2,711,623	5,684,221	2,852,296	250,323	2,029,093	---
NEVADA.....	16,142,523	1,271,623	2,346,444	932,113	221,254	786,557	2,867
REGION X.....	282,101,438	39,728,924	32,457,230	13,946,407	2,244,827	8,875,321	767,378
ALASKA.....	8,730,485	3,027,151	1,353,148	203,087	---	245,747	---
IDAHO.....	24,460,126	6,709,101	3,326,183	644,131	124,712	695,308	---
OREGON.....	76,761,915	24,430,811	6,444,346	2,889,920	541,139	2,990,373	---
WASHINGTON.....	172,148,912	5,561,861	21,333,553	10,209,269	1,578,576	4,943,893	767,378

Source: U.S. Department of Health, Education, and Welfare
 Social and Rehabilitation Service
 Office of Information Sciences
 National Center for Social Statistics
 March 1976

Amounts of Medical Vendor Payments by Type of Service

and by HEW Region and State

Fiscal Year 1975

HEW REGION AND STATE	TOTAL	LABORATORY AND RADIOLOGICAL SERVICES	HOME HEALTH SERVICES	PRESCRIBED DRUGS	FAMILY PLANNING SERVICES	OTHER CARE
TOTAL, REPORTING STATES 1/	\$12,318,467,814	\$104,390,557	\$ 68,656,704	\$816,452,597	\$ 72,615,416	\$254,612,908
REGION I.....	881,023,359	1,616,814	5,109,431	52,135,772	2,361,023	14,231,967
CONNECTICUT 2/.....	161,075,281	---	---	9,079,093	---	2/ 6,795,124
MAINE.....	63,305,061	---	488,433	3,824,740	606,531	616,573
MASSACHUSETTS.....	524,705,703	1,161,753	3,910,390	28,775,921	1,194,674	5,382,408
NEW HAMPSHIRE 1/.....	28,236,561	65,207	269,654	2,737,525	2	390,981
RHODE ISLAND.....	72,078,823	240,421	211,380	5,304,010	356,655	817,515
VERMONT.....	31,621,930	149,433	229,574	2,414,483	203,161	229,366
REGION II.....	3,438,020,576	7,369,274	49,258,803	132,855,270	7,656,947	127,787,908
NEW JERSEY.....	368,129,606	2,549,074	692,472	24,509,476	2,475,704	5,421,333
NEW YORK.....	2,554,621,930	---	48,563,688	86,183,383	5,181,243	102,801,886
PUERTO RICO.....	113,088,000	4,819,150	---	21,861,735	---	19,467,947
VIRGIN ISLANDS.....	2,181,040	1,050	3,243	300,676	---	96,742
REGION III.....	1,256,637,781	7,522,881	4,180,764	66,877,356	6,133,335	11,857,804
DELAWARE.....	14,625,785	144,606	61,189	1,341,661	284,787	9,063
DIST. OF COLUMBIA.....	92,894,753	517,192	1,479,373	5,779,154	1,342,133	1,711,000
MARYLAND.....	204,141,454	---	364,211	17,282,144	2,654,016	3,775,862
PENNSYLVANIA.....	727,674,700	6,743,001	1,700,089	24,853,274	1,284,864	2,245,762
VIRGINIA.....	183,640,499	118,082	575,902	13,911,038	487,435	2,937,658
WEST VIRGINIA.....	33,460,590	---	---	3,710,085	58,100	1,178,459
REGION IV.....	1,123,544,714	5,151,459	2,786,226	135,641,106	7,866,244	15,791,640
ALABAMA.....	131,105,383	2,738,206	386,600	15,643,187	1,390,280	256,772
FLORIDA.....	172,619,713	745,146	96,173	18,877,659	586,227	4,233,186
GEORGIA.....	254,668,945	369,079	226,530	25,929,399	725,065	5,681,926
KENTUCKY.....	107,292,828	120,633	893,033	12,008,780	600,135	465,790
MISSISSIPPI.....	93,742,165	135,343	121,885	19,677,445	560,675	175,504
NORTH CAROLINA.....	164,876,951	1,382	392,695	18,280,518	2,275,237	271,554
SOUTH CAROLINA 2/.....	75,690,567	1,066,935	462,219	7,370,658	888,145	1,607,912
TENNESSEE.....	123,548,162	14,775	207,091	17,853,460	840,480	3,078,996
REGION V.....	2,511,569,058	14,596,444	3,707,348	185,084,466	9,683,070	48,855,293
ILLINOIS.....	713,654,134	3,588,106	1,310,989	64,907,309	---	14,232,014
INDIANA.....	172,433,949	1,777,198	804,891	12,505,161	646,668	5,646,146
MICHIGAN.....	639,387,578	2,820,136	679,685	43,713,380	6,864,166	3,583,661
MINNESOTA.....	259,197,483	557,204	283,719	12,830,805	271,296	11,282,896
OHIO.....	366,325,052	724,990	607,347	34,339,413	432,176	4,023,374
WISCONSIN.....	360,570,902	128,810	20,717	16,788,394	1,468,764	10,127,202
REGION VI.....	660,343,554	12,565,189	343,941	78,325,659	3,679,764	8,312,665
ARKANSAS.....	92,631,805	130,684	40,558	11,959,600	166,704	571,157
LOUISIANA.....	145,033,439	1,931,042	203,163	25,754,912	84,377	1,164,320
NEW MEXICO.....	29,564,386	710,014	40,293	3,129,905	173,024	228,390
OKLAHOMA.....	140,647,244	1,058,876	---	13,745	542,675	5,438,533
TEXAS.....	452,466,720	9,707,573	59,927	37,467,537	2,712,984	910,285
REGION VII.....	335,212,392	2,855,669	134,211	32,603,033	2,321,596	2,845,488
IOWA.....	81,851,998	44,925	30,804	6,606,713	530,339	607,742
KANSAS.....	101,966,017	1,859,943	53,749	8,364,480	599,042	951,062
MISSOURI.....	99,284,414	79,179	41,781	12,922,839	1,098,456	151,999
NEBRASKA.....	52,069,963	871,622	7,877	4,709,001	95,719	1,134,685
REGION VIII.....	210,990,659	1,840,340	287,477	15,294,780	384,570	3,769,459
COLORADO.....	98,029,807	1,479,260	175,269	7,458,397	212,169	517,195
MONTANA 1/.....	29,244,683	11,396	80,556	1,705,741	54,074	922,770
NORTH DAKOTA.....	22,994,403	338,741	16,508	2,145,811	51,867	471,152
SOUTH DAKOTA.....	22,145,804	---	8,917	1,560,421	33,438	140,767
UTAH.....	33,098,337	---	---	2,424,410	---	1,717,575
WYOMING.....	5,477,625	10,943	6,127	---	33,022	---
REGION IX.....	1,418,624,203	44,262,783	1,659,052	100,067,916	30,102,342	17,451,139
CALIFORNIA.....	1,365,528,714	43,338,269	1,463,923	96,156,029	29,616,147	16,640,628
HAWAII.....	36,552,966	889,277	120,768	2,746,548	474,312	496,716
NEVADA.....	16,142,523	35,237	74,361	1,165,339	11,883	313,795
REGION X.....	282,101,438	6,549,664	1,189,451	17,567,155	2,426,525	3,669,525
ALASKA.....	8,730,485	13,245	9,000	---	72,565	69,374
IDAHO.....	24,460,126	71,745	58,073	1,502,886	132,176	80,827
OREGON.....	76,781,915	1,050,709	117,218	4,173,651	557,222	1,619,087
WASHINGTON.....	172,148,512	5,413,565	1,005,160	11,890,662	1,664,562	1,900,237

1/ Totals include \$201,930 not distributed by type of service: New Hampshire, \$165,319; and Montana, \$36,611.
2/ In some States, two or more types of services may be grouped under one class, such as Connecticut where other care includes other practitioners', clinic, laboratory and radiological, home health and family planning services, and such as South Carolina, where skilled nursing facility services include payments to State mental institutions.

Source: U.S. Department of Health, Education, and Welfare
Social and Rehabilitation Service
Office of Information Sciences
National Center for Social Statistics
March 1976

Distribution of Amounts of Medical Vendor Payments by Type of Service
and by Region and State

Fiscal Year 1975

NEW REGION AND STATE	TOTAL	INPATIENT HOSPITAL SERVICES			SKILLED NURSING FACILITY SERVICES	INTERMEDIATE CARE FACILITY SERVICES IN INSTITUTIONS	
		TOTAL	IN GENERAL HOSPITAL	IN MENTAL HOSPITAL		TOTAL	FOR MENTALLY RETARDED
TOTAL, REPORTING STATES 1/..							
NUMBER.....	\$12,318,467,814	\$3,914,592,581	\$3,464,260,788	\$450,331,793	\$2,471,207,260	\$2,179,118,182	\$361,854,541
PERCENT.....	100.0	31.8	28.1	3.7	20.1	17.7	2.9
REGION I.....	881,023,359	35.5	32.9	2.7	22.8	15.9	0.6
CONNECTICUT 2/.....	161,075,281	24.8	24.5	0.3	46.6	4.0	---
MAINE.....	63,305,061	29.1	29.1	---	2.3	34.7	---
MASSACHUSETTS.....	524,705,703	39.7	36.3	3.4	21.4	14.2	---
NEW HAMPSHIRE 1/.....	28,236,561	18.2	18.2	(2)	7.0	38.2	---
RHODE ISLAND.....	72,078,823	44.5	40.1	4.4	10.4	22.0	7.1
VERMONT.....	31,621,930	29.5	22.0	7.5	6.7	33.9	---
REGION II.....	3,438,020,576	37.1	30.0	7.1	21.8	12.8	2.5
NEW JERSEY.....	368,129,406	34.1	23.4	10.7	2.2	29.1	---
NEW YORK.....	2,554,621,930	37.6	30.6	7.0	25.1	11.3	2.9
PUERTO RICO.....	113,088,000	34.0	34.0	---	---	---	---
VIRGIN ISLANDS.....	2,181,040	51.1	51.1	---	---	---	---
REGION III.....	1,256,637,781	33.2	32.5	0.7	27.0	15.4	5.1
DELAWARE.....	14,625,785	34.8	31.0	3.8	4.1	22.2	---
DIST. OF COLUMBIA.....	92,894,753	50.1	50.1	---	2.9	8.0	---
MARYLAND.....	204,141,454	38.5	38.5	---	12.5	11.2	---
PENNSYLVANIA.....	727,874,700	29.3	29.3	---	41.9	12.5	5.8
VIRGINIA.....	183,640,495	32.1	27.3	4.8	2.7	34.0	11.8
WEST VIRGINIA.....	33,460,590	44.2	44.2	---	1.2	15.8	---
REGION IV.....	1,123,944,714	26.5	24.9	1.7	23.6	14.4	2.6
ALABAMA.....	131,105,383	20.3	20.2	(2)	31.7	14.7	---
FLORIDA.....	172,615,713	28.4	25.7	2.7	36.8	3.0	---
GEORGIA.....	254,668,945	22.9	22.9	---	26.2	13.2	2.2
KENTUCKY.....	107,292,829	34.4	30.2	4.2	18.7	11.6	---
MISSISSIPPI.....	93,742,165	23.9	23.9	---	28.3	5.0	(2)
NORTH CAROLINA.....	164,876,951	35.7	31.8	3.9	16.0	14.2	5.0
SOUTH CAROLINA 2/.....	75,690,567	29.2	25.2	4.0	2/ 26.7	9.8	0.4
TENNESSEE.....	123,948,162	19.4	15.4	(2)	0.7	45.3	12.0
REGION V.....	2,511,569,058	29.1	26.6	2.5	16.2	22.5	3.5
ILLINOIS.....	713,654,134	35.8	33.9	1.9	7.4	19.2	---
INDIANA.....	172,433,949	20.1	20.1	---	13.8	37.7	---
MICHIGAN.....	639,387,578	33.6	27.9	5.6	19.1	14.2	0.5
MINNESOTA.....	259,197,483	19.0	17.3	1.7	21.1	37.8	16.1
OHIO.....	366,325,052	33.5	31.7	1.7	17.4	13.4	(2)
WISCONSIN.....	360,570,902	15.3	14.4	0.9	25.2	34.3	11.9
REGION VI.....	860,343,554	19.9	15.3	0.6	6.2	47.0	6.0
ARKANSAS.....	92,631,805	13.5	13.1	0.4	22.7	36.3	6.4
LOUISIANA.....	145,033,439	21.9	21.7	0.2	1.2	45.3	8.2
NEW MEXICO.....	29,564,386	32.0	32.0	---	0.3	27.9	4.6
OKLAHOMA.....	140,647,244	27.5	27.5	---	0.4	55.1	5.5
TEXAS.....	452,466,720	17.5	16.5	1.0	6.7	48.4	5.3
REGION VII.....	335,212,392	28.5	26.7	1.8	5.0	34.5	4.4
IOWA.....	81,891,998	18.3	18.3	---	0.5	52.1	---
KANSAS.....	101,966,017	28.5	24.5	4.0	3.7	37.2	8.6
MISSOURI.....	99,284,414	40.8	39.2	1.6	10.3	10.2	---
NEBRASKA.....	52,069,963	21.2	20.4	0.8	4.2	47.5	11.6
REGION VIII.....	210,990,659	23.1	15.8	3.3	21.9	28.1	1.9
COLORADO.....	98,029,807	24.9	20.5	4.4	18.2	32.2	1.5
MONTANA 1/.....	29,244,683	22.1	19.7	2.4	22.8	20.9	2.9
NORTH DAKOTA.....	22,994,403	25.6	20.5	5.1	32.7	16.2	---
SOUTH DAKOTA.....	22,145,804	17.5	17.5	---	25.8	34.7	---
UTAH.....	33,098,337	21.3	18.7	2.6	22.0	25.2	4.8
WYOMING.....	5,477,625	20.8	20.8	---	23.0	35.2	---
REGION IX.....	1,418,624,203	34.8	30.0	4.9	22.9	3.0	---
CALIFORNIA.....	1,365,528,714	35.2	30.2	5.0	22.8	2.8	---
HAWAII.....	36,552,966	22.7	22.7	---	27.9	7.3	---
NEVADA.....	16,142,523	31.9	30.5	1.4	23.7	7.9	---
REGION X.....	282,101,438	24.5	23.5	1.0	23.1	20.6	6.5
ALASKA.....	8,730,985	19.5	19.5	---	19.8	38.1	3.5
IDAH0.....	24,460,126	15.7	15.7	---	14.1	43.1	15.7
OREGON.....	76,761,915	21.5	15.2	2.3	1.7	50.2	18.4
WASHINGTON.....	172,148,912	27.4	26.8	0.6	34.1	3.3	(2)

See footnotes at end of table.

Source: U.S. Department of Health, Education, and Welfare
Social and Rehabilitation Service
Office of Information Sciences
National Center for Social Statistics
March 1976

Chart IV
(Continued)

Distribution of Amounts of Medical Vendor Payments by Type of Service

And by Region and State

Fiscal Year 1975

NEW REGION AND STATE	TOTAL	INTERMEDIATE CARE FACILITY SERVICES IN ALL OTHER INSTITUTIONS	PHYSICIANS' SERVICES	DENTAL SERVICES	OTHER PRACTITIONERS' SERVICES	OUTPATIENT HOSPITAL SERVICES	CLINIC SERVICES
TOTAL, REPORTING STATES 1/ ..							
NUMBER.....	\$12,318,467,814	\$1,817,283,641	\$1,236,087,270	\$341,140,355	\$120,227,554	\$347,657,390	\$391,507,102
PERCENT.....	100.0	14.8	10.0	2.8	1.0	2.8	3.2
REGION I.....	881,023,355	15.3	7.6	3.9	0.9	3.9	0.9
CONNECTICUT 2/.....	161,075,281	4.0	7.4	2.0	---	5.4	---
MAINE.....	63,305,061	34.7	17.9	2.8	---	4.4	---
MASSACHUSETTS.....	524,705,703	14.2	5.5	4.7	1.4	3.6	1.5
NEW HAMPSHIRE 1/.....	28,236,561	38.2	13.2	6.4	1.3	2.7	(Z)
RHODE ISLAND.....	72,078,823	14.9	6.3	3.0	0.3	3.9	---
VERMONT.....	31,621,930	33.9	13.4	3.0	0.3	2.9	(Z)
REGION II.....	3,438,020,576	10.3	6.4	1.9	0.8	0.8	9.0
NEW JERSEY.....	368,129,606	29.1	12.4	5.0	0.6	4.5	0.5
NEW YORK.....	2,954,621,930	8.3	5.0	1.5	0.8	0.1	10.4
PURTO RICO.....	113,088,000	---	24.5	0.7	---	---	---
VIRGIN ISLANDS.....	2,181,040	---	1.4	0.4	---	28.6	---
REGION III.....	1,256,637,781	10.3	8.2	2.2	0.6	3.2	2.5
DELAWARE.....	14,425,785	22.2	17.9	---	0.4	7.6	0.4
DIST. OF COLUMBIA.....	92,894,753	8.0	13.6	0.5	1.3	8.4	3.3
MARYLAND.....	204,141,454	11.2	9.0	6.1	---	10.9	---
PENNSYLVANIA.....	727,874,700	6.7	5.9	1.3	0.4	(Z)	3.6
VIRGINIA.....	183,640,495	22.2	12.1	2.2	0.8	5.0	1.3
WEST VIRGINIA.....	33,460,590	19.8	14.4	2.5	3.1	---	---
REGION IV.....	1,123,944,714	11.8	12.8	3.1	0.4	3.8	0.5
ALABAMA.....	131,105,383	14.7	12.5	1.8	0.8	2.8	---
FLORIDA.....	172,619,713	3.0	10.5	2.3	0.4	4.0	(Z)
GEORGIA.....	254,668,945	11.0	13.9	6.2	---	4.6	---
KENTUCKY.....	107,292,828	11.6	12.0	3.2	0.5	3.9	2.5
MISSISSIPPI.....	93,742,165	5.0	16.5	1.6	0.3	2.5	(Z)
NORTH CAROLINA.....	164,676,951	9.2	11.8	3.5	0.8	3.8	1.4
SOUTH CAROLINA 2/.....	75,690,567	9.4	13.1	2.9	0.3	2.9	---
TENNESSEE.....	123,948,162	33.3	12.5	---	---	4.3	0.1
REGION V.....	2,511,569,058	18.9	11.9	3.4	1.7	3.6	1.1
ILL. INDIS.....	713,654,134	19.2	13.2	3.6	1.2	3.3	3.3
INDIANA.....	172,433,949	37.7	6.0	2.3	1.0	3.4	1.3
MICHIGAN.....	639,387,578	13.7	14.7	3.9	1.6	3.7	0.1
MINNESOTA.....	299,197,483	21.7	7.2	2.6	0.6	2.0	---
OHIO.....	366,325,052	13.4	12.2	4.1	1.8	6.4	0.4
WISCONSIN.....	360,570,902	22.5	9.6	2.9	2.6	2.2	---
REGION VI.....	860,343,554	41.0	11.6	0.6	0.4	1.9	0.4
ARKANSAS.....	92,631,805	29.9	9.6	2.9	0.1	1.1	---
LOUISIANA.....	145,033,439	37.1	7.4	(Z)	---	2.4	1.7
NEW MEXICO.....	29,564,386	23.2	14.6	3.3	1.3	4.2	2.0
OKLAHOMA.....	140,647,244	49.2	11.3	1.1	0.1	0.1	---
TEXAS.....	452,466,720	43.1	13.3	(Z)	0.6	2.2	---
REGION VII.....	335,212,392	30.0	12.0	3.4	1.0	3.2	0.3
IOWA.....	81,891,998	52.1	10.8	4.2	1.7	2.7	(Z)
KANSAS.....	101,966,017	28.6	10.4	3.3	1.3	3.0	1.0
MISSOURI.....	99,284,414	10.2	16.7	3.1	0.3	4.2	---
NEBRASKA.....	52,069,963	35.9	8.0	2.8	0.8	2.4	0.1
REGION VIII.....	210,990,659	26.3	10.3	2.0	0.8	3.5	---
COLORADO.....	98,029,807	30.7	10.0	---	---	4.7	---
MONTANA 1/.....	29,244,683	18.0	15.0	4.9	2.6	2.1	---
NORTH DAKOTA.....	22,994,403	16.2	6.8	2.8	1.8	1.0	---
SOUTH DAKOTA.....	22,145,804	34.7	9.6	1.2	1.8	1.5	---
UTAH.....	33,098,337	20.4	9.8	5.2	---	4.1	---
WYOMING.....	5,477,625	35.2	12.6	4.6	0.8	2.1	---
REGION IX.....	1,418,624,203	3.0	14.5	4.1	1.6	5.0	0.4
CALIFORNIA.....	1,365,528,714	2.8	14.5	4.0	1.6	5.0	0.4
HAWAII.....	36,952,966	7.3	15.4	7.7	0.7	5.5	---
NEVADA.....	16,142,523	7.9	14.5	5.8	1.4	4.9	(Z)
REGION X.....	282,101,438	14.1	11.5	4.9	0.8	3.1	0.3
ALASKA.....	8,730,485	34.7	15.5	2.3	---	2.8	---
IDAHO.....	24,460,126	27.4	13.6	2.6	0.5	2.8	---
OREGON.....	76,781,915	31.8	8.4	3.8	0.7	3.9	---
WASHINGTON.....	172,148,912	3.2	12.4	5.9	0.9	2.9	0.4

See footnote at end of table.

Source: U.S. Department of Health, Education, and Welfare
Social and Rehabilitation Service
Office of Information Sciences
National Center for Social Statistics
March 1976

Distribution of Amounts of Medical Vendor Payments by Type of Service

and by Region and State

Fiscal Year 1975

NEW REGION AND STATE	TOTAL	LABORATORY AND RADIOLOGICAL SERVICES	HOME HEALTH SERVICES	PRESCRIBED DRUGS	FAMILY PLANNING SERVICES	OTHER CARE
TOTAL, REPORTING STATES ^{1/} --						
NUMBER.....	\$12,318,467,814	\$104,390,557	\$ 68,656,704	\$816,452,597	\$ 72,615,416	\$254,612,908
PERCENT.....	100.0	0.8	0.6	6.6	0.6	2.1
REGION I.....	881,023,359	0.2	0.6	5.9	0.3	1.6
CONNECTICUT ^{2/}	161,675,281	---	---	5.6	---	2/4.2
MAINE.....	63,305,061	---	0.8	6.0	1.0	1.0
MASSACHUSETTS.....	524,705,703	0.2	0.7	5.5	0.2	1.0
NEW HAMPSHIRE ^{1/}	28,236,561	0.2	1.0	9.7	(2)	1.4
RHODE ISLAND.....	72,678,822	0.3	0.3	7.4	0.5	1.1
VERMONT.....	31,621,930	0.5	0.7	7.6	0.6	0.7
REGION II.....	3,438,620,576	0.2	1.4	3.9	0.2	3.7
NEW JERSEY.....	368,129,606	0.7	0.2	6.7	0.7	1.5
NEW YORK.....	2,554,621,930	---	1.6	2.9	0.2	3.5
PUERTO RICO.....	113,088,000	4.3	---	19.3	---	17.2
VIRGIN ISLANDS.....	2,181,040	(2)	0.1	13.8	---	4.4
REGION III.....	1,256,637,781	0.6	0.3	5.3	0.5	0.9
DELAWARE.....	14,625,785	1.0	0.4	9.2	1.9	0.1
DIST. OF COLUMBIA.....	92,894,753	0.6	1.6	6.2	1.5	1.8
MARYLAND.....	204,141,454	---	0.2	8.5	1.3	1.8
PENNSYLVANIA.....	727,874,700	0.9	0.2	3.4	0.2	0.3
VIRGINIA.....	183,640,499	0.1	0.3	7.6	0.3	1.6
WEST VIRGINIA.....	33,460,590	---	---	11.1	0.2	3.5
REGION IV.....	1,123,944,714	0.5	0.2	12.1	0.7	1.4
ALABAMA.....	131,105,383	2.1	0.3	11.9	1.1	0.2
FLORIDA.....	172,619,713	0.4	0.1	10.9	0.3	2.5
GEORGIA.....	254,668,945	0.1	0.1	10.2	0.3	2.2
KENTUCKY.....	107,292,828	0.1	0.8	11.2	0.6	0.5
MISSISSIPPI.....	93,742,165	0.1	0.1	21.0	0.6	0.2
NORTH CAROLINA.....	164,676,951	(2)	0.2	11.1	1.4	0.2
SOUTH CAROLINA ^{2/}	75,690,567	1.4	0.6	9.7	1.2	2.1
TENNESSEE.....	123,948,162	(2)	0.2	14.4	0.7	2.5
REGION V.....	2,511,565,098	0.6	0.1	7.4	0.4	1.9
ILLINOIS.....	713,654,134	1.2	0.2	9.1	---	2.0
INDIANA.....	172,433,949	1.0	0.5	7.3	0.4	3.3
MICHIGAN.....	639,387,578	0.4	0.1	6.8	1.1	0.6
MINNESOTA.....	259,197,483	0.2	0.1	5.0	0.1	4.4
OHIO.....	366,325,052	0.2	0.2	9.4	0.1	1.1
WISCONSIN.....	360,570,902	(2)	(2)	4.7	0.4	2.8
REGION VI.....	860,343,554	1.5	(2)	9.1	0.4	1.0
ARKANSAS.....	92,631,805	0.1	(2)	12.9	0.2	0.6
LOUISIANA.....	145,033,439	1.3	0.1	17.8	0.1	0.8
NEW MEXICO.....	29,564,386	2.4	0.1	10.6	0.6	0.8
OKLAHOMA.....	140,647,244	0.1	---	(2)	0.4	3.9
TEXAS.....	452,466,720	2.1	(2)	8.3	0.6	0.2
REGION VII.....	335,212,392	0.9	(2)	9.7	0.7	0.8
IOWA.....	81,891,998	0.1	(2)	8.1	0.6	3.7
KANSAS.....	101,566,017	1.8	0.1	8.2	0.6	0.9
MISSOURI.....	99,284,414	0.1	(2)	13.0	1.1	0.2
NEBRASKA.....	52,069,963	1.7	(2)	9.0	0.2	2.2
REGION VIII.....	210,990,659	0.9	0.1	7.2	0.2	1.8
COLORADO.....	98,029,807	1.5	0.2	7.6	0.2	0.5
MONTANA ^{1/}	29,244,683	(2)	0.3	5.8	0.2	3.2
NORTH DAKOTA.....	22,994,403	1.5	0.1	9.3	0.2	2.0
SOUTH DAKOTA.....	22,145,804	---	(2)	7.0	0.2	0.6
UTAH.....	33,098,337	---	---	7.3	---	5.2
WYOMING.....	5,477,625	0.2	0.1	---	0.6	---
REGION IX.....	1,418,624,203	3.1	0.1	7.1	2.1	1.2
CALIFORNIA.....	1,365,528,714	3.2	0.1	7.0	2.2	1.2
HAWAII.....	36,952,966	2.4	0.3	7.4	1.3	1.3
NEVADA.....	16,142,523	0.2	0.5	7.2	0.1	1.9
REGION X.....	282,101,438	2.3	0.4	6.2	0.9	1.3
ALASKA.....	8,730,485	0.2	0.1	---	0.8	0.8
IDAHO.....	24,460,126	0.3	0.2	6.1	0.5	0.3
OREGON.....	76,761,915	1.4	0.2	5.4	0.7	2.1
WASHINGTON.....	172,148,912	3.1	0.6	6.5	1.0	1.1

^{1/} Totals include \$201,930 not distributed by type of service: New Hampshire, \$165,319; and Montana, \$36,611.

^{2/} In some States, two or more types of services may be grouped under one class, such as Connecticut where other care includes other practitioners', clinic, laboratory and radiological, home health and family planning services, and such as South Carolina, where skilled nursing facility services include payments to State mental institutions.

Source: U.S. Department of Health, Education, and Welfare
 Social and Rehabilitation Service
 Office of Information Sciences
 National Center for Social Statistics
 March 1976

MEDICAID SERVICES STATE BY STATE,

JUNE 1, 1976 ✓

*BASIC REQUIRED MEDICAID SERVICES: Every Medicaid program must cover at least these services for at least everyone receiving federally supported financial assistance: inpatient hospital care; outpatient hospital services; other laboratory and X-ray services; skilled nursing facility services and home health services for individuals 21 and older; early and periodic screening, diagnosis, and treatment for individuals under 21; family planning; and physician services. Federal financial participation is also available to States electing to expand their Medicaid programs by covering additional services and/or by including people eligible for medical but not for financial assistance. For the latter group States may offer the services required for financial assistance recipients or may substitute a combination of seven services.

Services provided only under the Medicare buy-in or the screening and treatment program for individuals under 21 are not shown on this chart.

Definitions and limitations on eligibility and services vary from State to State. Details are available from local welfare offices and State Medicaid agencies.

FMAP ^{4/}	SEE ABOVE	BASIC* REQUIRED MEDICAID SERVICES	Additional services for which Federal financial participation is available to States under Medicaid.																	State	
			Clinic services	Prescription drugs	Dental services	Podiatric services	Eyeglasses	Private duty nursing	Physical therapy and related services ^{1/}	Other diagnostic, screening, therapeutic, and rehabilitative services ^{2/}	Emergency hospital services	Skilled nursing facility services for patients under 21	Optomatists' services	Podiatrists' services	Chiropractors' services	Care for patients 65 or older in institutions for the mentally retarded	Care for patients 65 or older in institutions for tuberculous or psychiatric hospitals	Institutional services in intermediate care facilities			
74	●	Alabama	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	AL	
50	●	Alaska	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	AK
60	●	Arizona	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	AZ
75	+	Arkansas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	AR
50	+	California	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	CA
55	●	Colorado	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	CO
50	+	Connecticut	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	CT
50	●	Delaware	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	DE
50	+	D.C.	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	DC
57	●	Florida	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	FL
66	●	Georgia	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	GA
50	+	Guam	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	GU
50	+	Hawaii	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	HI
68	●	Idaho	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	ID
50	+	Illinois	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	IL
57	●	Indiana	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	IN
57	●	Iowa	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	IA
54	+	Kansas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	KS
71	+	Kentucky	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	KY
72	●	Louisiana	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	LA
71	+	Maine	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	ME
50	+	Maryland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	MD
50	+	Massachusetts	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	MA
50	+	Michigan	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	MI
57	+	Minnesota	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	MN
78	●	Mississippi	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	MS
59	●	Missouri	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	MO
63	+	Montana	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	MT
56	+	Nebraska	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	NB
50	●	Nevada	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	NV
80	+	New Hampshire	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	NH
50	●	New Jersey	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	NJ
73	●	New Mexico	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	NM
50	+	New York	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	NY
68	+	North Carolina	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	NC
58	+	North Dakota	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	ND
54	●	Ohio	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	OH
67	+	Oklahoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	OK
59	●	Oregon	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	OR
55	+	Pennsylvania	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	PA
50	+	Puerto Rico	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	PR
57	+	Rhode Island	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	RI
74	●	South Carolina	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	SC
67	●	South Dakota	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	SD
70	+	Tennessee	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	TN
64	●	Texas	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	TX
70	+	Utah	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	UT
70	+	Vermont	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	VT
50	+	Virgin Islands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	VI
58	+	Virginia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	VA
64	+	Washington	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	WA
72	+	West Virginia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	WV
60	+	Wisconsin	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	3/	WI
61	●	Wyoming	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	3/	WY
●	21	●	13	21	12	14	12	5	10	5	18	18	15	10	11	5	25				
+	32	+	29	30	22	27	24	14	22	17	25	23	23	18	19	21	25				
●	53	Total	42	51	34	41	36	19	32	22	43	43	38	37	28	41	30	29	50		

Intermediate Care Facilities (ICF): P.L. 92-223 transferred the ICF program to Medicaid (Title XIX) as an optional service, effective 1-1-72. States may at their option include institutions for the mentally retarded, both public and private. See footnote five.

1/ Data from Regional Office reports of characteristics to State programs and State plan amendments.
 2/ People qualifying as members of families with dependent children (usually families with at least one parent absent or incapacitated).
 3/ People qualifying as aged, blind, or disabled under the Supplemental Security Income program.
 4/ FMAP - Federal Medicaid Assistance Percentage: Rate of Federal financial participation in a State's medical vendor payment expenditures on behalf of individuals and families eligible under Title XIX of the Social Security Act. Percentages, effective from July 1, 1975, through June 30, 1977, are rounded.
 5/ Including ICF services in institutions for the mentally retarded.

ALABAMA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)				
					Category Related		Children	Other*	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21 (SFO)
Prescribed Drugs	x	x	x	x					
Inpatient Hospital Care	x	x	x	x					
Outpatient Hospital Care	x	x	x	x					
Laboratory & X-ray Service	x	x	x	x					
Skilled Nursing Home Services	x	x	x	x					
Physician Services	x	x	x	x					
Dental Services				x ^{1/}					

Other Benefits: Optometric services; home health care; screening and diagnosis; family planning; transportation.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending September 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	138,453	\$ 8,594,323	132,735	99,558	\$10,301
MA					
AB	2,574	136,369	2,461	1,759	166
APTD	38,010	1,999,064	52,219	34,977	3,447
AFDC	201,723	1,902,025	218,043	104,171	2,391
Total	380,760	\$12,631,781	405,458	240,465	\$16,305

^{1/} To age 21.

^{2/} Corrected figures by State from those reported in 1975 edition as 302,842 Eligibles; \$12,213 Expenditures.

ALABAMA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Medical Services Administration of the Alabama Department of Public Health.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Vitamins and food supplements.
- B. Formulary: Alabama Drug Code Index, which specifies those drugs that may be dispensed on prescription only.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.
 - 2. Quantity of Medication: Solid dosage of from one to 90; 100; 150; 200. Liquids in fluid ounces. As authorized by the physician. All maintenance drugs for chronic illnesses or repetitive conditions should be prescribed in quantities sufficient to effect optimum economy in dispensing. In acute illnesses, prescribed drugs should be limited to the quantity needed for treatment.
 - 3. Refills: When authorized by prescriber, a maximum of 5 refills within a 6-month period.
 - 4. Dollar Limits: None.
- D. Prescription Charge Formula: Payment for prescriptions dispensed by the Pharmacy will not exceed the Pharmacy's actual cost of drugs plus the professional fee for legend items; and the Pharmacy's actual cost of drugs, plus a dispensing fee not to exceed 50% of such cost or the professional fee, whichever is less (but a minimum charge of \$1 is to be allowed as of October 1, 1974) for non-legend items.

Professional Fee by Type of Drug Provider (as of October 1, 1974):

1. Retail Pharmacies \$1.90

50¢ copayment/R.

Exception: family planning items.

Professional Fee (continued):

- | | |
|---|--------|
| 2. Institutional Pharmacies (hospital pharmacies with outpatient prescription services and skilled nursing facilities pharmacies) | \$1.50 |
| 3. Government Pharmacies (county, state or federal pharmacies) | \$.75 |
| 4. Dispensing Physicians | \$.75 |

V. Miscellaneous Remarks:

Alabama uses a two-part claim form (pharmacy draft) on which the pharmacist enters the drug code information utilizing an imprinting machine and an embossed recipients identification card to reimburse the pharmacies.

ALABAMA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Health Department:

1. Officials:

Ira L. Myers, M.D.
State Health Officer

Alabama Department of
Public Health
State Office Building
Montgomery, Alabama 36104

Robert H. Holzworth, M.D.
Director
Medical Services Administration

2500 Fairlane Drive
Montgomery, Alabama 36111

Sam T. Hardin, R.Ph.
Director, Pharmaceutical Services
Medical Services Administration

" "

2. Title XIX Medical Care Advisory Committee:

Dr. Morgan J. Moore, Chairman
P.O. Drawer 370
Andalusia 36420

Alabama Hospital Assoc.
Frank Perryman, Vice-Chmn.
Sylacauga Hospital
and Nursing Home
Sylacauga 35150

Ala. Nursing Home Assoc.
Emma Swindall, M.D.
P.O. Box 97
Dadeville 36853

Alabama Dental Assoc.
A. James Leo, D.M.D.
315 Sage Avenue South
Mobile 36606

Alabama Pharmaceutical
Association
Lloyd Sellers
Dean's Pharmacy
P.O. Box 189
Opp 36467

Alabama State Nurses Assoc.
Kathryn Crossland, Ed.D.
Dean of School of Nursing
University of Alabama
at Huntsville

State Board of Mental
Health
Everett L. Strandell, M.D.
Brewton 36426

Title XIX Medical Care Advisory Committee (continued):

Ala. Optometric Assoc.
Allen C. Rooks, D.O.D.
Box 1427
Decatur 35602

Consumer
Jackie Bass Messick (Mrs.)
Route 5, Box 230-A
Andalusia 36420

American Association of
Medical Assistants
Brenda Reaves (Mrs.)
c/o D. J. Judge, M.D.
1001 Leighton Avenue
Anniston 36201

Bertha Smith (Mrs.)
1510 Westcott Street
Montgomery 36108

Mrs. Zecozy Williams
2012 Hill Street
Montgomery 36108

Consumer Representatives
John E. Baites
Employment and Labor
Relations Supervisor
Wolverine Tube Division of
Universal Oil Products
Box 2202
Decatur 35602

Medical Association of
the State of Alabama
Eugene H. Bradley, M.D.
901 Cedar Bluff Road
Centre 35960

Rev. Joseph Toomey
4421 Narrow Lane Road
Montgomery 36111

Gerald G. Woodruff, Jr., M.D.
721 East 10 Street
Anniston 36201

B. Welfare Department:

Julia Oliver (Mrs.)
Commissioner

State Department of
Pensions and Security
64 North Union Street
Montgomery, Alabama 36104

C. Executive Officers of State Medical and Pharmaceutical Societies:

1. Medical Association:

L. P. Patterson
Executive Director
Medical Association of the
State of Alabama
19 South Jackson Street
Montgomery 36104
Phone: 205/263-6441

2. Pharmaceutical Association:

Launia L. Thagard (Mrs.)
Executive Director
Alabama Pharmaceutical
Association
2217 - 19th Place, S.
Birmingham 35209
Phone: 205/879-4697

ALASKA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began September 1, 1972

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	Other* (SFO)
Prescribed Drugs	<u>1/</u> <u>2/</u>									x
Inpatient Hospital Care	x	x	x	x						x
Outpatient Hospital Care	x	x	x	x						x
Laboratory & X-ray Service	x	x	x	x						x
Skilled Nursing Home Services	x	x	x	x						x
Physician Services	x	x	x	x						x
Dental Services										<u>x^{3/}</u>

Other Benefits: Intermediate care facilities; transportation; home health care; diagnostic screening and dental services for persons under 21 (EPSDT); family planning; intermediate care facilities for mentally retarded; inpatient psychiatric care.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	2,260	\$	2,153	1,244	\$ 56
MA					
AB	100		85	22	1
APTD	1,910		1,906	1,600	72
AFDC	17,790		16,785	4,577	206
Others ^{5/}	1,090		1,313	68	3
Total	23,150	\$306	22,242	7,511	\$338

^{1/} See under IV.

^{2/} Family planning drugs available to all; all other drugs only to those with no prior resource.

^{3/} Early and periodic screening.

^{4/} Emergency only.

^{5/} Mandated eligibles not included in other categories.

ALASKA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

There is no state Title XIX vendor drug program. The Alaska Medical Assistance programs including Medicaid and General Relief-Medical are administered by the Division of Public Assistance (formerly the Division of Medical Assistance) of the Alaska Department of Health and Social Services. This Division also includes the categorical assistance programs (OAA, AB, APTD, and AFDC) and makes eligibility determinations.

IV. Provisions Relating to Prescribed Drugs:

Drugs are a covered service only under the General Relief-Medical Assistance program.

V. Miscellaneous Remarks:

The Division's part-time Pharmacy Consultant reviews pharmacy invoices for appropriateness of drugs, drugs not permitted, patterns of drug use and pricing levels. He pinpoints problem areas for examination. Although drugs are not covered under Medicaid in Alaska, prescriptions are paid from the General Relief-Medical budget for Medicaid recipients who have no other resource for obtaining prescribed medications.

ALASKA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Dr. Francis S.L. Williamson Commissioner	Department of Health and Social Services Pouch H Juneau, Alaska 99811
---	--

Catherine M. Lloyd Deputy Commissioner for Administrative Management	(as above) Pouch H01
--	-------------------------

Lawrence J. Sullivan Director Division of Public Assistance	(as above) Pouch H07
---	-------------------------

V. L. Iverson, Director Division of Administrative Services	(as above) Pouch H02
---	-------------------------

Ronald Sedgwick, R.Ph. (Part-time) Pharmacist Consultant Division of Public Assistance	(as above) Pouch H07
--	-------------------------

2. Alaska Medical Care Advisory Committee:

<u>Alvin Finneseth</u> <u>Chairman</u>	c/o Fairbanks Memorial Hospital 1650 Cowles Street Fairbanks, Alaska 99701
---	---

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Mrs. M. L. MacDermaid
Administrative Assistant
Alaska State Medical
Association
1185 West 8 Avenue
Anchorage 99501

B. Pharmaceutical Assoc.

George Grimm
Secretary
Alaska Pharmaceutical
Association
Box 1185
Anchorage 99501

ARIZONA
WELFARE DRUG PROGRAM

I. Types of medical care programs in effect and services available.

TYPE OF SERVICE (Vendor)	TYPE OF PROGRAM					
	OAA	MAA	AB	APTD	AFDC	GA
Prescribed Drugs						
Inpatient Hospital Care						
Nursing Home Care	x					
Physicians' Services						
Other Practitioners' Services						
Dental Care						

II. Expenditures for Drugs. Payments to pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1973	1974	1975
		Persons Eligible	Persons Eligible
OAA			
MAA			
AB		No Vendor Drug Program ^{1/}	
APTD			
AFDC			
Total			

^{1/} See Miscellaneous Remarks.

ARIZONA
WELFARE DRUG PROGRAM

III. How Administered:

There is no state vendor drug program. The Medical Assistance Program is administered by the Department of Health Services. The Department of Economic Security certifies applicants as eligible for medical assistance.

IV. Provisions Relating to Prescribed Drugs:

No provisions for a vendor drug program.

Public assistance recipients are generally eligible as medical indigents for medical care, including drugs, through the county hospital where available and by physicians, local hospitals and retail pharmacies in counties where county hospital services are not available. The Board of Supervisors in each county is responsible for the medically indigent.

V. Miscellaneous Remarks:

Special Note

Medicaid law enacted.

Implementation date: August 15, 1977 by action of 1976
State Legislature.

Prescribed drugs will be covered.

ARIZONA
WELFARE DRUG PROGRAM

Officials, Consultants and Committees

1. Health Services Department Officials:

Susan Dandoy, M.D., M.P.H.
Director

Department of Health
Services
411 North 24 Street
Phoenix, Arizona 85008

Gary D. Hulshoff, Ph.D.
Assistant Director
for Medical Assistance
Program

" "

George W. Roberts, R.Ph.
Pharmacist Consultant

" "

2. Committee for Liaison between the Medical Profession and
the State on Title XIX planning:

No Committee active now. Can be activated if needed.

3. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Association:

Bruce E. Robinson
Executive Director
Arizona Medical Association, Inc.
810 West Bethany Home Road
Phoenix 85013
Phone: 602/263-8900

B. Pharmaceutical Association:

James A. Toomey
Executive Secretary
Arizona Pharmaceutical Association
2202 North 7 Street
Phoenix 85006
Phone: 602/258-8121

ARKANSAS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment .				Medically Needy (M N)					
	Recipients				Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services	x	x	x	x	x	x	x	x	x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts ^{1/2}
OAA	69,595	\$5,173	76,232	66,479	\$ 7,913
MA					
AB	1,916	108	1,905	1,334	157
APTD	18,923	1,384	27,502	18,952	2,563
AFDC ^{3/}	104,064	1,193	117,758	63,348	1,950
MN Aged			473	255	38
MN Blind			6	2	5/
MN Disabled			480	155	31
MN AFDC ^{4/}			675	86	8
Total	194,498	\$7,858	225,031	150,611 ^{6/}	\$12,660

1/ Does not include 50¢ copayment/R.

2/ U-21 and Medically Needy programs not started until January 1, 1975.

3/ Includes Foster Care and U-21.

4/ Includes U-21.

5/ Miniscule amount.

6/ DHEW - SRS/NCSS 2082 A(2), FY-1975.

ARKANSAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Division of Social Services, of the Department of Social and Rehabilitative Services. The prescription drug program was implemented September 1, 1973 with PAID Prescriptions serving as program administrator.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

All legend drugs are covered with the following exceptions: investigational drugs, I.V. solutions, irrigating solutions, vaccines, and routine immunizing agents.

Pursuant to a prescription the following OTC items are covered: insulin, insulin needles and syringes, acetaminophen, antacids, calcium lactate, contraceptive foams and jellies, dicalcium phosphate, ferrous fumarate, ferrous sulfate, pediatric vitamin drops for children up to three years of age, and sodium salicylate. All other non-legend items are excluded.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.
2. Quantity of Medication: Pharmacies may receive only one professional fee per month per drug on prescriptions for nursing home patients. This restriction does not apply to antibiotics, anti-infectives, and Schedule II and III analgesics.
3. Refills: Effective August 1, 1974, 5 refills within 6 months are allowed, if authorized by prescriber.
4. Dollar Limits: None.

D. Prescription Charge Formula:

Legend drugs - cost according to Red Book (AWP if listed) plus \$2 professional fee, less 50¢ copayment. Total charge may not exceed provider's posted or advertised price. Non-legend items - actual cost plus 50% of cost (not to exceed a maximum of \$2) less 50¢ copayment.

V. Miscellaneous Remarks:

New Regulations for 1976:

- A. MAC program: A MAC program was implemented 1/1/76. MAC prices were set on 8 multi-source drugs. A Medicaid Drug Advisory Committee meets regularly to review and revise this list. The MAC price replaces AWP for these drugs as the maximum cost allowed for reimbursement purposes.
- B. Three-Prescription Limit: Effective 1/1/76, each recipient is limited to Medicaid coverage for 3 prescriptions per month.
- C. Quantity of Medication Limit: Effective 1/1/76, each prescription can be filled for a maximum of a one month's supply. The only exceptions are Schedule II drugs and nitroglycerin.
- D. Drug Category Exclusion: On 1/1/76 all amphetamines and anti-obesity agents were excluded from the drug program.

ARKANSAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services Officials:

J. B. Cartwright Commissioner	Arkansas Social Services Blue Cross/Blue Shield Building 7th and Gaines Streets (P.O. Box 1437) Little Rock, Arkansas 72203
Jack Provine Comptroller	" "
Ed McMillian, Director Field Operations	" "
Adalene Patterson (Mrs.) Director, Program Development	" "
Allan B. Cooper, Director Medical Services	" "
Ivan H. Smith, Director Legal Services	" "
Debbie Dodson, R.Ph. Pharmacist Consultant	" "

2. Social Services Consultants:

Physicians (Part-time):

W. H. O'Neal, M.D.	Baptist Medical Center Campus 9600 West 12th Kanis Road Little Rock 72205
Roy A. Brinkley, M.D.	" "
Robert E. Richardson, M.D.	500 South University Little Rock 72205
Bert L. Phillips, M.D.	1403 Main North Little Rock 72114

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Paul C. Schaefer
Executive Vice-President
Arkansas Medical Society
P.O. Box 1208
Fort Smith 72901
Phone: 501/782-8218

B. Pharmaceutical Association

Charles West
Secretary-Manager
Arkansas Pharmaceutical Association
318 Wallace Building
Little Rock 72201
Phone: 501/374-4787

CALIFORNIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began March 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
	Prescribed Drugs	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	1/2/ Amounts	Persons Eligible	1/2/ Drug Recipients	1/ Amounts
OAA	291,096	\$23,413	306,344	139,394	\$ 27,096
MA					
AB	13,903	1,173	12,618	5,496	1,177
APTD	216,572	22,067	252,858	113,305	27,489
AFDC	1,212,792	23,870	1,215,502	225,784	28,812
MN Aged	60,944	10,518	56,918	40,148	10,785
MN Blind	1,157	212	941	703	190
MN Disabled	14,854	2,147	14,630	7,491	2,457
MN Children	85,240	1,621	113,144	19,921	2,207
MI	163,760	5,900	203,996	51,898	7,689
Total	2,060,318 ^{3/}	\$90,921 ^{3/}	2,176,952	604,142	\$102,903

1/ Monthly average.

2/ Excludes PHP, Refugees and Renal Dialysis

3/ 1974 figures adjusted by State from 2,257,825 and \$103,772.

Note: Figures are rounded independently and may not add to total.

CALIFORNIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Health and Welfare Agency with direct supervision by the Department of Health. Payment of bills is through a fiscal intermediary consisting of a consortium of California Blue Shield, Hospital Service of California (Blue Cross, North) and Hospital Service of Southern California (Blue Cross, South).

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Multivitamins, most OTC items, non-narcotic analgesics except sodium salicylate. Amphetamines and dextro-amphetamines can be used only for specific diagnoses (epilepsy, or hyperkinetic behavior syndrome). Contact laxative suppositories can be used only for specific diagnoses (paraplegia or quadriplegia, multiple sclerosis, poliomyelitis, ganglionic blockade processes occurring in the spinal nerve pathways or affecting the lumbo-sacral autonomic nervous system pathways related to bowel motility). Diazepam restricted to use in cerebral palsy, athetoid states, and spinal cord degeneration.
- B. Formulary: Over 600 drugs (2525 separate codes for differing strengths and dosage form) listed generically in closed-end formulary. Most brand names listed alphabetically as cross-index references. Except on a prior authorization basis, drugs which are not included in the formulary are ineligible for payment. The patient's physician or pharmacist may request authorization from the local Medi-Cal Consultant for approval. Formulary lists price ceilings for 109 drug codes. Pharmacist must enter drug code number on prescription billing form (MC-175).
- C. Prescribing or Dispensing Limitations:
 1. Terminology: Formulary basically set up on generic name basis.

Prescribing or Dispensing Limitations (continued):

2. Quantity of Medication: This is flexible, but quantities should be consistent with the medical needs of the patient and may not exceed a 100-day supply except under certain circumstances. Most oral solid dosage forms of drugs are subject to minimum quantity limitations/or maximum frequency of billing controls.
 3. Refills: A prescription refill can be prepared after authorization by physician.
 4. Number of prescriptions: Number of formulary drugs not limited but overutilization limited by prepayment or postpayment controls. These controls include those mentioned in item 2 supported by on-site audit of provider files and peer review.
 5. Dollar Limits: None.
- D. Prescription Charge Formula: Blue Book or Red Book cost plus \$2.70 professional fee for prescriptions. Maximum allowable ingredient cost for certain drugs is set forth by the Department. Pharmacist required to dispense lowest cost item he has in stock meeting requirements of practitioner and needs of the patient as shown on prescription form. Prescription price must not exceed regular retail price for non-indigent patients' prescriptions.

V. Miscellaneous Remarks:

Revisions to formulary are made periodically in order to update the formulary and also to effect adjustments promulgated by the Department of Health.

Medical Therapeutics and Drug Advisory Committee

The Medical Therapeutics and Drug Advisory Committee has the responsibility to compare the therapeutic effect of drugs and make recommendations as to additions to and/or deletions from the formulary.

Hospital Discharge Medications

1. The quantities furnished as discharge medications shall not exceed a 10-day supply.
2. The charges shall be incorporated in the hospital's claims for inpatient services.

Recent Proposed Drug Program Changes (March 1976)Volume Plan for Prescription Drugs

The State of California is developing a plan whereby the Medi-Cal program will purchase prescription drugs directly from manufacturers or wholesalers on a competitive bid basis. Although Medi-Cal now controls prices at the retail level, the State Department of Health has been aware for some time that other government agencies buy drugs in volume at prices substantially lower than Medi-Cal does.

In fiscal 1974-75 the Medi-Cal program paid \$64.5 million for prescription drugs used by its outpatient beneficiaries, exclusive of pharmacists' service fees. In 1975-76 increased utilization of the program is expected to raise that amount to \$86 million.

The State plans to buy commercially-available prescription drug items which meet established quality specifications. The State will distribute these drugs to participating retail pharmacies in California, so that beneficiaries' access to them will be unimpaired. In order to simplify physical distribution the State plans to contract with existing wholesale drug outlets in California who will warehouse and ship Volume Purchase drugs to the retailer. The retail pharmacist's participation will be enlisted by offering him a financial incentive sufficient to offset added handling and other associated costs.

It is the State's intention to make use of volume purchasing practices and terms already in use by other government agencies, and to make maximum use of existing channels of distribution.

Of the 2,800 drug items in the Medi-Cal Formulary 150 constitute approximately 70% of the total dollar volume. About half of the 150 drugs are single-source and half multi-source. The proposed volume purchase plan will be limited at the outset to a pilot project using only the 75 multi-source drugs and a limited number of volunteer pharmacies for the duration of one year. This will enable the State to verify projected cost savings and test the operation of the distribution system.

The proposed Volume Purchase pilot project is awaiting final approval by the Secretary of California's Health and Welfare Agency. Initial implementation date was targeted for July 1, 1976, but recent developments make January 1, 1977 a more realistic estimate.

CALIFORNIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Health and Welfare Agency:

1. Health and Welfare Agency Officials:

Mario G. Obledo
Secretary

CALIFORNIA HEALTH AND
WELFARE AGENCY
State Office Building #1
Room 427
Sacramento, Calif. 95814

2. Health Department Officials:

Jerome A. Lackner, M.D.
Director

CALIFORNIA DEPARTMENT OF
HEALTH
714 P Street
Sacramento, Calif. 95814

Medi-Cal Division:

Lee Helsel
Deputy Director

" "

Jay A. Gould
Chief

Medi-Cal Benefits Section

Carlo Michelotti, R.Ph.
Assistant Chief

" "

Milton Kuschnereit, R.Ph.
Pharmaceutical Program
Coordinator

" "

3. Advisory Committee to California Department of Health:

a. Health Care Commission:

James Gentry
Executive Secretary

CALIFORNIA DEPARTMENT OF
HEALTH
714 P Street
Sacramento, Calif. 95814

Advisory Committee (continued):

b. Medical Therapeutics and Drug Advisory Committee:

Jorge Delgado, R.Ph. Executive Secretary	CALIFORNIA DEPARTMENT OF HEALTH 714 P Street Sacramento, Calif. 95814
---	--

Paul Hoagland, M.D. <u>Chairman</u>	- Pasadena
James L. Boynton, R.Ph.	- Stockton
David Fung, R.Ph.	- Fresno
James M. Guernsey, M.D.	- Palo Alto
Jerome Kleiman, M.D.	- La Palma
Todd T. Tomihiro, R.Ph.	- San Jose
Richard E. Turk, M.D.	- Berkeley
Wallace D. Winters, M.D., Ph.D.	- Davis
Bruce H. Woolley, Pharm.D.	- Los Angeles

B. Benefit Payments Officials:

Marion Woods Director	DEPARTMENT OF BENEFIT PAYMENTS 744 P Street Sacramento, Calif. 95814
--------------------------	---

C. Health Protection Officials:

(Vacant) Deputy Director	HEALTH PROTECTION DIVISION 744 P Street Sacramento, Calif. 95814
-----------------------------	--

D. Health Treatment Officials:

Don Z. Miller Deputy Director	TREATMENT SERVICES DIVISION 744 P Street Sacramento, Calif. 95814
----------------------------------	---

E. Rehabilitation Officials:

Edward V. Roberts Director	STATE DEPARTMENT OF REHABILITATION 722 Capitol Mall Sacramento, Calif. 95814
-------------------------------	---

F. Officers of California Physicians' Service
(the Fiscal Intermediary):

Charles W. Stewart
Vice President

MEDI-CAL INTERMEDIARY OPERATIONS
Blue Shield of California
2 North Point
San Francisco, Calif. 94133

William Thompson, R.Ph.
Pharmacist Consultant

" "

G. Executive Officers of State Medical and Pharmaceutical
Societies:

1. Medical Association:

Will W. Babb
Executive Director
California Medical Association
731 Market Street
San Francisco 94103
Phone: 415/777-2000

2. Pharmaceutical Association:

Robert C. Johnson
Executive Vice President
California Pharmaceutical Association
555 Capitol Mall
Sacramento 95814
Phone: 916/444-7811

COLORADO

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1969

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)				
					Category Related		Children	Other*	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21 (SFO)
Prescribed Drugs	x	x	x	x					x
Inpatient Hospital Care	x	x	x	x					x
Outpatient Hospital Care	x	x	x	x					x
Laboratory & X-ray Service	x	x	x	x					x
Skilled Nursing Home Services	x	x	x	x					x
Physician Services	x	x	x	x					x
Dental Services									x

Other Benefits: Home health care; transportation; glasses following surgery; family planning; prostheses; whole blood; durable medical equipment.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	34,818	\$3,379	32,903	31,655	\$3,720
MA					
AB	413	20	367	307	23
APTD	17,163	2,192	15,395	16,724	2,140
AFDC	101,550	1,264	104,228	71,477	1,557
Other		33		1,647	19
Total	153,944	\$6,888	152,893	121,810	7,459

1/ Monthly average.

COLORADO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Eligibility is determined by 63 County Departments of Social Services, and the drug program is administered by the Colorado Department of Social Services.

IV. Provisions Relating to Prescribed Drugs:

Effective September 1, 1973:

A. General Exclusions (diseases, drug categories, etc.):

Restricted Drug Categories:

1. Dextro-Amphetamine
2. All prescription-legend vitamins, including vitamin B-12 or liver extract injectables
3. Methadone (Dolophine)
4. Prescription-legend drugs not listed in the "Colo^Rx Drug Formulary".

Payment for restricted drugs authorized only in accordance with non-emergency or emergency procedures as set forth in the Department's Manual Regulations, Volume IV, Supplement "A", Section A-4336.53.

5. OTC items are not included; exceptions are: insulin, contraceptive products, aspirin, and stool softeners in minimum quantities, and with refill limitations as stated in Manual Regulations, Volume IV, Supplement "A", Section A-4336.52.

Payment for these OTC items shall be according to the Maximum Allowable Price.

B. Formulary: Colo^Rx Drug Formulary

Only those drugs presently assigned drug numbers in the Formulary are a benefit. (Refer to Manual Regulation Section A-4336.53 for provisions whereby drugs not listed in the Colo^Rx Drug Formulary may be allowed as a benefit.)

Controlled Drug Formulary

Section I - Alphabetical drug index in brand name order; if no brand name assigned, the generic name is listed.

Section II - Generic drugs are identified as having a Maximum Allowable Price, listed with price information which is updated periodically.

C. Prescribing or Dispensing Limitations:

1. Terminology: None. The Department encourages appropriate consideration of cost in prescribing and dispensing by the selection of the less expensive trade name or generic product when, in the practitioner's professional judgment, the use of such a product is compatible with the best interests of the patient.

The Colo^Rx Drug Formulary will not be used by clinic and hospital pharmacies for drug pricing - only for drug code number information. Acquisition cost must be used for unit pricing.

2. Quantity of Medication: New prescriptions for chronic or acute conditions, at the discretion of the physician. However, reasonable amounts for more than a 30-day supply for chronic conditions are recommended. Insulin and contraceptive devices for more than 90 days require new prescriptions.

New PrescriptionsMinimum

Aspirin	1,000 tablets
Dioctyl Sulfosuccinate 100 mg. (Calcium or Sodium)	100 caps.

RefillsMinimum

Chronic conditions	30 days
Insulin, contraceptive devices	90 "
Aspirin, stool softener	90 "

Quantity of Medication (continued):

Exceptions to the above are:

- a. Antibiotic medications and drugs for short-term illnesses.
- b. Narcotic prescriptions.
- c. Intravenous and subcutaneous solutions.
- d. Prescribed injectable medications.
- e. Shelf package size oral liquid medications, in pint size only, or smaller package size when not packaged in pint size.
- f. Shelf package size oral tablet and capsule medications in quantities of 100 only or smaller when not available in package size of 100.
- g. Analgesics (prescription-legend)
- h. Cough syrups (prescription-legend)
- i. All cold preparations to include:
Antihistamines and decongestants and/or cold preparation combinations (prescription-legend).
- j. Anti-neoplastics (prescription-legend)
- k. Anthelmintics (prescription-legend)

Prescriptions for less than minimum amounts will be denied reimbursement of the professional fee unless the physician notifies the State Department in writing of the medical need for amounts less than a 30- or 90-day supply. Medical consultation will determine the decision.

3. Dollar Limits: None.

D. Prescription Charge Formula:

1. Community Pharmacist (based on whichever is lower):
 - a. Red Book price of the drug plus \$2 professional fee.
 - b. Maximum Allowable Price plus \$2 professional fee (See A-4336.4 for information regarding MAP).
 - c. The price charged in the ordinary course of business to the general public.

Community Pharmacist (continued):

Colo^R_x price is determined from the most current issue of the Red Book, its Supplements to the Red Book, and current editions of the Drug Topics.

Since the Red Book is not consistent in providing information for all drugs, the order of priority in determining the cost of the drug allowable is as follows:

- (1) Wholesale price.
- (2) AWP.
- (3) Direct price plus 17.6% markup (the price allowed in the Colo^R_x is determined by dividing the manufacturer's direct price by .85).

For drugs not listed in Red Book or its Supplements, but which are contained in the Colo^R_x, the cost of the drug allowed will be determined by using the manufacturer's direct cost to the pharmacy and adding a 17.6% markup.

Current MAP is based on package size of 100 or pint size, or the next smaller size if not marketed in 100's or pints. If packaged in:

<u>Size of Package</u>	<u>Base Price</u>
100's	100's
50's and 500's	50's
5 oz. and 16 oz.	16 oz.
Only in 2 oz.	2 oz.

Special Note:

The Maximum Allowable Price shall be determined by the Division of Medical Assistance, based upon a professional determination of a quality product available at the least expense possible. Recommendations from the Colo^R_x Drug Formulary Advisory Committee and the Pharmacy Advisory Committee of the Medical Advisory Council are considered in determining the MAP.

2. Medical Institution Pharmacists or Clinic Pharmacists:

Actual cost of the drug plus a professional fee of 95¢. (No payment will be made in excess of the MAP set forth in the Colo^R_x.)

Prescription Charge Formula (continued):3. Government-Owned or -Operated Clinics:

Actual cost of the drug only (no professional fee is allowed.) No payment will be made in excess of the MAP set forth in the Colo^Rx. Includes OEO funded Health Centers.

4. Physicians:

Physicians must bill the cost of drugs non-self-administered on "injectables" dispensed by them in their office to the Fiscal Agent (Blue Cross/Blue Shield). Form MED-2 will not be used by physicians for this purpose.

Dispensing physicians will receive the actual cost of the drug, or the lowest price prescribed in A-4336.7. If the physician is 25 miles or beyond from a participating pharmacy, the physician may request consideration to receive cost plus 95¢ per prescription. Physician-owned pharmacies that have a registered pharmacist on duty will receive \$2 professional fee.

V. Miscellaneous Remarks:

From July 1974 through June 1975, total medical expenditures were \$114,801,725, of which the Federal share was \$60,869,513.

Drug Utilization Data - July 1974 through June 1975:

Units of service	1,356,860
Recipients (unduplicated count - actual)	118,639
Units per recipient	11.4
Total dollars (prescriptions only)	\$7,459,692
Average per unit	\$ 5.49
Average per recipient	\$ 62.87

Drug Utilization Review Procedures:

The State Department receives computer processed print-outs designed to discover over-utilization of drugs prescribed by physicians, dispensed by vendors, and received by eligible recipients.

Drug Utilization Review Procedures (continued):

A Drug Utilization Review Committee composed of two physicians and 13 pharmacists meets monthly to review the printouts and make recommendations to the State regarding corrective action. In most cases, the attending physician is notified of the Drug Utilization Review Committee's recommendations. Caseworkers are also contacted and informed of the over-utilization review on abuse with a request to contact the recipient and take corrective action.

COLORADO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants, and Committees

1. Social Services Department Officials:

Henry A. Foley, Ph.D. Executive Director	Colorado Department of Social Services 1575 Sherman Street Denver, Colorado 80203
---	--

Fred Langille Executive Administrator	" "
--	-----

Lemm Allen Associate Director for Programs	" "
---	-----

Division of Medical Assistance

Garry A. Toerber, Ph.D. Acting Director	" "
--	-----

Hershell L. Abbott, Chief Special Services	" "
---	-----

Douglas T. Margreiter, R.Ph., M.P.H. Chief, Pharmacy Section	" "
---	-----

James C. Syner, M.D. Medical Consultant Professional Services Section	" "
---	-----

Gerald A. Fournier, Chief Nursing Home Section	" "
---	-----

2. Social Services Department Consultants:

Marvin J. Lubeck, M.D. Ophthalmology	3865 Cherry Creek North Drive Denver 80210
---	--

3. Medical Advisory Committees:

A. State Medical Assistance and Services Advisory Council:

(Mrs.) Anne M. Gough, R.N. <u>Chairman</u>	Katherine E. Corbin, DPM Vice-Chairman
---	---

State Medical Assistance and Services Advisory Council
(continued):

Harry Asmus	Ada Kruger
Ray H. Black	Marvin E. Johnson, M.D.
Roy M. Hedlund, O.D.	Jack D. Nassimbene, D.D.S.
Mildred De Heus	Walter C. Mill, D.O.
Angeline D. Heaton, M.D.	
Roger C. Johnson	

Ex Officio

Henry A. Foley, Ph.D.	Executive Director Dept. of Social Services
Dr. Anthony Robbins	Acting Director Dept. of Public Health

Note: The Medical Assistance and Services Advisory Council under the Title XIX Medical Assistance Program shall be composed of 15 members. Ex officio members are the administrative heads of the Colorado Department of Social Services, and the Colorado Department of Public Health. The remaining members of the Advisory Council shall be appointed by the governor, to represent the various areas of medical services and the public. Specifically included shall be two members who are doctors of medicine, a doctor of osteopathy, a dentist, an optometrist, an owner or operator of a licensed nursing home in the State, a member representing licensed hospitals in the State, a pharmacist, a registered nurse, and three members to represent the public. The remaining member may represent any other area of medical services not specifically enumerated, but shall not be limited thereto.

B. Pharmacy Advisory Committee of the Medical Assistance and Services Advisory Council:

(Vacant)
Chairman
10859 West 70 Avenue
Arvada 80004

Myrle A. Myers, R.Ph., M.S.
Executive Director
Colorado Pharmacal
Association
5711 East Evans Avenue
Denver 80222

Pharmacy Advisory Committee (continued):

Lillian Bird, R.Ph.
2420 - 71 Avenue
Greeley 80631

Jack Thebus, R.Ph.
2142 East 17 Avenue
Denver 80206

Elton Ferguson, R.Ph.
5991 South Pearl Street
Littleton 80120

James H. Vincent, R.Ph.
320 South Ash Street
Yuma 80659

Stanley Stein, R.Ph.
3535 Cherry Creek Drive North
Denver 80209

Daniel L. Young, R.Ph.
4090 West Dartmouth Avenue
Denver 80236

Tom Stock, R.Ph.
Swedish Hospital Pharmacy
501 East Hampden Avenue
Englewood 80110

C. Colorado^R_X Drug Formulary Advisory Committee:

Tom Stock, R.Ph., Chairman
Swedish Hospital Pharmacy
501 East Hampden Avenue
Englewood 80110

James Kobach, R.Ph.
Director of Pharmacy
King Soopers, Inc.
P.O. Box 5567
Denver 80221

Mark F. Blum, M.D.
305 East Espanola
Colorado Springs 80907

Duane H. Lambert, R.Ph.
2857 West Hampden Avenue
Englewood 80110

Franklin L. Connell, R.Ph.
P.O. Box 189
Del Norte 81132

Robert E. Doyle, R.Ph.
8 Viking Drive
Englewood 80110

Ernest Gonzales, R.Ph.
4720 Tejon
Denver 80221

Howard E. Netz, M.D.
6900 West Alameda Avenue
Denver 80226

Richard A. Haynes, R.Ph.
1107 - 30 Street Road (38A)
Greeley 80631

Donald Vecchio, R.Ph.
4485 Wadsworth Boulevard
Wheat Ridge 80033

4. Drug Utilization Review Committee:

This Committee operates independently of the Medical Assistance and Services Advisory Council, and meets monthly to review and recommend to State officials corrective procedures regarding individual drug over-utilization recipient cases. The Committee has its own letterhead stationery and sends correspondence directly to physicians and pharmacists.

Drug Utilization Review Committee (continued):

Thomas G. Starr, R.Ph.
Chairman
810 - 8th Street
Greeley 80637

William L. Lowes, R.Ph.
Vice-Chairman
2209 Robin Drive
Colorado Springs 80909

Herbert Beck, R.Ph.
635 South Clinton Street
Denver 80231

Calvin F. Johnson, R.Ph.
5395 West 38th Avenue
Denver 80212

A. Lyle Campbell, R.Ph.
1055 East LaSalle
Colorado Springs 80907

James Frazier, R.Ph.
1801 - 17 Street
Greeley 80637

Stanley E. Hren, R.Ph.
332 South Victor Way
Aurora 80012

John M. James, R.Ph.
601 West 29 Street
Pueblo 80101

Marie Copher, R.Ph.
2837 South Grant Street
Englewood 80110

P. A. Di Lorenzo, M.D.
4045 Wadsworth Boulevard
Wheat Ridge 80033

Lloyd R. Lundsten, M.D.
209 South Nevada Street
Colorado Springs 80902

Douglas T. Margreiter, R.Ph.
M.P.H.
Chief, Pharmacy Section
Div. of Medical Assistance
1575 Sherman Street
Denver 80203

John T. Morrison, M.D.
2750 Broadway
Boulder 80302

Harry Picht, R.Ph.
6240 East Colfax Avenue
Denver 80220

Gerald E. Stutz, R.Ph.
11580 East Second Avenue
Aurora 80010

Buell P. Bogan, R.Ph.
P.O. Box 386
FRISCO 80443
(not San Francisco)

5. Executive Officers of the State Medical and Pharmaceutical Societies:

A. Medical Society:

Donald G. Derry
Executive Director
Colorado Medical Society
1601 East 19 Avenue
Denver 80218
Phone: 303/534-8580

B. Pharmacal Association:

Myrle A. Myers, R.Ph., M.S.
Executive Director
Colorado Pharmacal
Association
5711 East Evans Avenue
Denver 80222
Phone: 303/759-0567

CONNECTICUT

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment				Medically Needy (M N)					
	Recipients				Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons ^{1/} Eligible	Amounts	Persons ^{1/} Eligible	Drug Recipients Amounts
OAA	5,347	\$ 738	3,700	\$ 676
MA				
AB	187	20	119	18
APTD	8,472	1,153	6,115	1,058
AFDC	116,328	2,236	123,529	2,981
MN Aged	13,621	2,084	16,278	2,902
MN Blind	106	11	170	18
MN Disabled	5,279	559	9,573	1,198
MN Children	3,316	152	3,378	189
Total	152,656	\$6,953	162,862	\$9,040

^{1/} Average monthly caseload.

CONNECTICUT

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Directly by the State Welfare Department through 7 district offices and one town delegated this special authority.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Will not pay for: experimental drugs, maintenance vitamins except during pregnancy and for children up to seventh birthday, anti-obesity drugs, food substitutes or dietary foods, cathartics and laxatives. Therapeutic vitamins require prior authorization.

Special Note: Exception to above is made for fecal-softener and/or combination of fecal softener with a laxative.

- B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: Physicians are encouraged to prescribe 7 specified drugs generically, when possible.
2. Quantity of Medication: 30-day supply with exceptions in nursing facilities which may be prescribed for a period not to exceed 90 days.
3. Refills: No refills except in cases of chronic diseases or deficiency states requiring continuous therapy with the same medications. Refills in chronic conditions may cover period not to exceed 90 days.
4. Dollar Limits: Prescriptions costing more than \$16 require prior authorization from District Office.

Provisions Relating to Prescribed Drugs (continued):

D. Prescription Charge Formula: AWP as listed in Red or Blue Book plus fee:

Convalescent and nursing homes - cost plus \$1.80
"Walk-In" patients - cost plus \$2.00

CONNECTICUT

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Edward Maher Commissioner	State Welfare Department 110 Bartholomew Avenue Hartford, Connecticut 06105
Carolyn Perry Deputy Commissioner	" "
James F. Morrison, Director Health Services	" "
Harold McIntosh Assistant Director Health Services	" "
David Galinsky, M.D., Chief, Medical Services	" "
Meyer Rosenkrantz, R.Ph. Pharmacist Consultant	" "

2. Welfare Department Consultants
(Part-time):

Jack Rosenberg, M.D.	" "
Joseph Rich, M.D.	" "
Milton R. Arons, M.D.	" "
M. D. Lischner, M.D.	" "
Manuel Hirshberg, M.D.	" "
Mark Silk, M.D.	" "
Waldo Martin, M.D.	" "
Bernard Svedlow, M.D.	" "

3. Title XIX Advisory Committees:

A. Pharmacy Advisory Committee:

State Pharmacy Commission
Dr. James O'Brien
Dan Leone

Connecticut State Medical Society
Dr. Elliot R. Mayo

Connecticut Pharmaceutical Association
Francis B. Cole
William Summa
Edward C. Liska

State Welfare Department
James F. Morrison
Raymond Charland
(Pharmacist)
Meyer Rosenkrantz
(Pharmacist)

B. Medical Advisory Committee:

A Medical Advisory Council, as provided under Federal Law, has been appointed by the Commissioner. This consists of 28 members including 10 physicians, the Deans of both Medical Schools, the Commissioner of Health, the Commissioner of Mental Health and the Commissioner of Human Rights. In addition, there are representatives of the Allied Health Professions, AFL-CIO, Ambulance Association, Pharmaceutical Association, State Dental Association, State Medical Society, Podiatry, the National Council of Senior Citizens and representatives of the poor. The function of this Committee, in which the State Health Department is an active participant, is not only to make recommendations on standards, quality and costs of medical services, personnel and facilities, but to help identify unmet needs and to assist in long-range planning, evaluation and utilization. It advises on administrative and financial matters and interprets the program and its goals to professional and consumer groups.

John W. Patterson, M.D., Dean - Univ. of Connecticut
Health Center School of Medicine
Hartford Plaza
Hartford 06105
Chairman

Francis P. Dellafera, President
Connecticut Association of
Extended Care Facilities
565 Vernon Street
Manchester 06040
Vice-Chairman

Medical Advisory Committee (continued):

Dr. Ira V. Hiscock 215 Highland Street New Haven 06511	- Dean-Emeritus Yale School of Public Health
Charles B. Womer, Director Yale New Haven Hospital 789 Howard Avenue New Haven 06504	- Connecticut Hospital Association
Leon Tec, M.D., Director Mid-Fairfield Child Guidance Center 74 Newtown Avenue Norwalk 06851	- Association of Child Guidance Clinics
Raymond T. McMullen Johnsonville Road Moodus 06423	- Connecticut Pharmaceutical Association
Sidney L. Cramer, M.D. 21 Woodland Street Hartford 06105	- Connecticut State Medical Society - Radiology
Leonard Spear, O.D. 195 Montowese Street Branford 06405	- President Connecticut Optometric Society
Charles T. Schechtman, M.D. Cedar Lake Medical Center 73 Cedar Street New Britain 06052	- Section of Ophthalmology Connecticut State Medical Society
William Mitchard 160 Main Street Meriden 06450	- Connecticut Podiatry Association
Charles Polivy, M.D. 60 Gillett Street Hartford 06105	- Connecticut State Medical Society - General Surgeon
Dr. Joseph B. Scully 233 Main Street New Britain	- President Connecticut State Dental Society

Medical Advisory Committee (continued):

David D. Komisar, Ph.D., Dean School of Arts and Sciences University of Hartford 200 Bloomfield Avenue Hartford 06117	- Connecticut Psychological Association - Past President
Eugene H. Corley, M.D. 1026 Park Avenue Bridgeport 06604	- Practicing Physician
Annette Carter (Mrs.) 39 East Dutch Point Hartford 06114	- President Sheldon Charter Oak Neighborhood Council
Louise Nelson (Mrs.) Emergency Psychiatric Services Merrit Hall Connecticut Valley Hospital Middletown	- Nurse Clinical Instructor
Richard Lewis, Exec. Director Connecticut Council - Agency Executives Planning Group Woodfield 1899 Stratfield Road Bridgeport 06604	Gertrude L. Norcross Executive Director Connecticut Society for Crippled Children & Adults 682 Prospect Avenue Hartford 06105
Harold S. Barrett, M.D., M.P.H. Deputy Commissioner State Health Department 79 Elm Street Hartford 06103	Myron J. Rockmore, Director Psychiatric Social Service State Department of Mental Health 90 Washington Street Hartford 06103
Florence C. Austin Executive Director Visiting Nurse Association of Hartford 40 Woodland Street Hartford 06105	Betty Lang Harris (Mrs.) Commission on Human Rights and Opportunities 92 Farmington Avenue Hartford 06105
Frank Santaguida Field Representative National Council of Senior Citizens UAW Office 30 West Main Street Waterbury 06702	Enroci F. Reale President Connecticut Opticians' Association 18 Asylum Street Hartford 06103

Medical Advisory Committee (continued):

Charles H. Audet, Jr., M.D.
Secretary
Connecticut Academy of
General Practice
3 Second Avenue
Waterbury 06720

Joseph J. Talariski
Conn. Ambulance Associates
P.O. Box 14020
Barry Square Station
Hartford 06114

Dr. George J. Paul, Vice-Pres.
Connecticut Chiropractic Assoc.
914 Main Street
East Hartford 06103

Donald C. McMeans
230 Sylvan Knoll Road
Stamford 06902

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

William R. Richards, M.D.
Executive Director
Connecticut State Medical Society
160 Saint Ronan Street
New Haven 06511
Phone: 203/865-0587

B. Pharmaceutical Association:

Daniel C. Leone, Jr.
Executive Director
Connecticut Pharmaceutical Association
936 Silas Deane Highway
Wethersfield 06109
Phone: 203/563-4619

DELAWARE

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x							
Physician Services	x	x	x	x						
Dental Services				x						

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{2/}	Amounts	Persons Eligible	Drug Recipients Amounts ^{3/}
OAA	3,042	\$ 282	3,192	\$ 359
MA				
AB	472	29	276	32
APTD	2,351	262	2,607	315
AFDC ^{1/}	39,614	569	27,253	636
MN Aged	1,310	69		
MN Blind	2			
MN Disabled	383	25		
MN Children	691	11		
Total	47,933	\$1,247	33,328 ^{4/}	\$1,342 ^{4/}

^{1/} Includes All Others: 2,038 - \$13 (FY-1974).^{2/} Recipients.^{3/} \$163 was paid for legend drugs (plus Insulin and Pediatric Vitamins when prescribed) in November 1975.^{4/} DHEW - SRS/NCSS 2082 A(2) B(3), FY-1975.

DELAWARE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By Division of Social Services, Department of Health and Social Services, through 3 county offices of the State agency.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

Only legend item drugs (except for insulin) can be prescribed. Vitamins (except pediatric vitamins), antacids, etc. can not be prescribed unless they are legend items. OTC items can not be prescribed.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity: None. Department requests physician to prescribe reasonable amounts.

3. Refills: Prescription blank has space for physician to authorize renewals.

Pharmacist may refill the prescription for 6 months if the physician authorizes renewals without stating the number of renewals.

4. Dollar Limits: None.

D. Prescription Charge Formula:

Wholesale cost plus \$2 professional fee except when the usual charge is less, in which case the smaller amount is paid. Pharmacists asked to pass on savings due to quantity purchases.

V. Miscellaneous Remarks:

Payment to pharmacists - bank draft system.

Miscellaneous Remarks (continued):

Payment is made to the pharmacists by depositing a "bank draft" claim form in the banking system. This system is similar to that utilized by the Alabama Medicaid drug program, often referred to as an "instant pay" system.

DELAWARE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Earl F. McGinness Secretary	Department of Health and Social Services P.O.- Box 309 Wilmington, Delaware 19899
Miklos T. Lazar, Ph.D. Director	Division of Social Services (same address as above)
A. Roke Lieberman Assistant Director Assistance Payments	" "
Mary Lee Berry Chief Consultant Medical Social Work	" "
Roger Waters, Assistant Program Development Assistance Payments	" "
Anne Gray Social Services Administrator Medical Unit	" "
Patricia Phillips Social Services Administrator Medical Unit	" "
Edmund G. Laird, M.D. Medical Consultant	13 Red Oak Road Wilmington, Delaware 19806
David Krigstein, R.Ph. (Part-time) Pharmacist Consultant	3404 Broom Place Wilmington, Delaware 19802

2. Health and Social Services Medical Advisory Committee:

<u>Osteopathic Society</u> A. A. Golden, D.O. 502 Rockwood Road Wilmington 19802	<u>Optometric Society</u> H. Martin Moss, O.D. 702 North Union Street Wilmington 19805
---	---

Medical Advisory Committee (continued):

Medical Society of Delaware
(Mrs. Anne Shane, Ex. Sec'y)
1925 Lovering Avenue
Wilmington 19806

Bishoff, Rhoslyn J., M.D.
Park Drive and Division Street
Dover 19901

Esterly, Katherine L., M.D.
1410 Delaware Avenue
Wilmington 19806

Morgan, Richard, M.D.
Suite 203
Lombardy Foulk Road
Wilmington 19803

Wilmington Public Schools
Waddell, Helen (Mrs.)
1400 Washington Street
Wilmington 19899

Visiting Nurses Association
Schwartz, Dorris C., R.N.
104 Greenhill Avenue
Wilmington 19805

Blue Cross/Blue Shield, Inc.
Long, Leo, Manager
Provider Relations Department
Blue Cross/Blue Shield
of Delaware, Inc.
201 West 14 Street
Wilmington 19801

Pharmaceutical Representative
Campbell, Thomas
321 Willey Street
Seaford 19973

Division of Social Services
Laird, Edmund G., M.D.
13 Red Oak Road
Wilmington 19806

Consumer Representative
Majka, Adele (Mrs.)
336 Fiddlers Green
Dover 19901

Lieberman, A. R.
207 West 35 Street
Wilmington 19802

Twilley, Rosemary (Mrs.)
201 Orchard Avenue
Morris Estate I
Dover 19901

Division of Public Health
Cowan, Donald R., D.D.S.
Chief, Bureau of Special
Health Services
Director of Public Health
Jesse Cooper Building
Dover 19901

Haritos, Nicholas P., M.D.
Deputy Director
Div. of Public Health
Jesse Cooper Building
Dover 19901

Division of Mental Health
Schweidel, Sheldon, Director
Community Programs and Plnng.
Division of Mental Health
Delaware State Hospital
New Castle 19720

Department of Health and
Social Services
Krigstein, David
Pharmaceutical Consultant
1806 North Van Buren Street
Wilmington 19802

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Anne Shane Bader (Mrs.)
Executive Director
Medical Society of Delaware
1925 Lovering Avenue
Wilmington 19806
Phone: 302/658-7596

B. Pharmaceutical Society:

Joseph L. Fink III, B.S. Pharm., J.D.
Executive Director
Delaware Pharmaceutical Society
716 Philadelphia Pike
Wilmington 19809
Phone: 302/762-6019

DISTRICT OF COLUMBIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1968

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
Prescribed Drugs	x	x	x	x	x	x	x	x		x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x		x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x		x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		x	
Physician Services	x	x	x	x	x	x	x	x		x	
Dental Services	x	x	x	x	x	x	x	x		x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	2,814	\$ 275	2,750	\$ 315
MA				
AB	141	13	148	16
APTD	7,829	765	7,641	914
AFDC	65,280	2,178	71,220	2,888
MN Aged	6,515	611	6,263	684
MN Blind	52	7	49	7
MN Disabled	1,668	200	1,988	257
MN Children	20,543	675	17,043	670
	246	26	226	29
Total	105,088 ^{2/}	\$4,750 ^{2/}	107,328	\$5,780

^{1/} Recipients.^{2/} Data not reported categorically by D.C. in 1975 edition.

DISTRICT OF COLUMBIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

The D. C. Department of Human Resources (DHR) has been designated as the single State Agency and delegated with the responsibility for developing and administering its Medicaid program. Acting as agent for the Director of DHR, the Assistance Payments Administration administers the State plan and has the responsibility of determining patient eligibility and payment of all bills.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): All legend drugs are covered except those drugs that are listed by FDA as ineffective. Pursuant to a prescription the following non-legend items are covered: oral analgesics, oral antacids, insulin, insulin needles and syringes, contraceptive foams and jellies, ferrous sulfate, prenatal vitamin formulations, geriatric vitamin formulations for recipients 65 years of age and over, and multivitamin formulations for children 7 years of age and under. All other non-legend items are excluded.
- B. Formulary: A fairly broad-scoped formulary is used which lists approximately 2,000 drug items by brand names. The drug dispensing unit - i.e., tablet, capsule, ml., ounce, etc. is specified with its wholesale cost. Each drug is coded for computerization purposes in the billing procedure for prescriptions. Periodic formulary changes are made and distributed with a complete revision planned for each year.
- C. Prescribing or Dispensing Limitations:
1. Terminology: None.
 2. Refills: In general, amounts dispensed are to be limited to quantities sufficient to treat an episode of illness. Maintenance drugs such as thyroid, digitalis, etc. may be dispensed in amounts up to a 30-day supply with 3 refills which must be dispensed within 4 months.

Prescribing or Dispensing Limitations:
Refills (continued):

Birth control tablets may be dispensed in 3-cycle units with a maximum of 3 refills within one year.

3. Dollar Limits: There is no present dollar limitation. Physicians are requested to prescribe reasonable amounts.

When a prescription charge is \$20 or more, specific telephone authorization to fill it will be required from the Consulting Pharmacist, Medical Assistance Unit.

D. Prescription Charge Formula:

Wholesale cost plus professional fee of \$1.80 for legend drugs and cost plus 50% for non-legend drugs.

V. Miscellaneous Remarks:

Drug Utilization Data

Prescribed Drugs

Total \$5,779,154

Age in Years

Under 6	\$ 380,846
6 - 21	807,348
21 - 64	3,354,221
65 and over	1,236,739

Total Number of Prescriptions 1,245,676

OA	201,411
AB	4,459
APTD	233,827
AFDC	485,244
Children Under 21	315,136
Other	5,599

Average Prescription Price \$4.64

DISTRICT OF COLUMBIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Human Resources Department:

1. Officials:

Joseph P. Yeldell Director	Dept. of Human Resources 1350 E Street, N.W. Washington, D.C. 20004
-------------------------------	---

William H. Whitehurst, Jr. Assistant Director for Planning	" "
--	-----

Z. Ozella Webb, M.D. Chief, Medical Assistance Unit	614 H Street, N.W. Washington, D.C. 20001
---	--

James Harris, R.Ph. Pharmacist Consultant Medical Assistance Unit	500 First Street, N.W. Washington, D.C. 20001
---	--

2. Consultants:

William J. Washington, M.D. Deputy Director for Health Services	1350 E Street, N.W. Washington, D.C. 20004
---	---

Jacqueline Johnson, Admr. Payment Assistance Administration	500 First Street, N.W. Washington, D.C. 20001
---	--

William J. Washington, M.D. Acting Administrator Community Health and Hospitals Administration	1875 Connecticut Ave., N.W. Washington, D.C. 20009
--	---

Melvin W. Crotty Chief, Bureau of Pharmacies	1875 Connecticut Ave., N.W. Washington, D.C. 20009
---	---

3. D. C. Health Planning Advisory Committee:

Revised membership list not available at time of publication. There are approximately 47 members.

NPC

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B. Social Services Administration Officials:

Norman Pierson
Administrator

Social Services
Administration
122 C Street, N.W., Rm. 800
Washington, D.C. 20001

C. Executive Officers of District Medical and Pharmaceutical Societies:

1. Medical Society:

Francisco P. Ferraraccio
Executive Secretary
Medical Society of the District of Columbia
2007 Eye Street, N.W.
Washington, D.C. 20006
Phone: 202/223-2230

2. Pharmaceutical Association:

Chauncey I. Cooper
Executive Secretary
Washington, D.C. Pharmaceutical Association
5506 Connecticut Avenue, N.W.
Suite 26
Washington, D.C. 20015
Phone: 202/363-0305

1. Introduction

2. Methodology

3. Results

4. Discussion

5. Conclusion

6. References

7. Appendix

8. Acknowledgements

9. Author Biographies

10. Correspondence

11. Contact Information

12. Declaration of Interest

13. Funding Sources

14. Data Availability

15. Ethics Approval

16. Supplementary Materials

17. Additional Resources

18. Further Reading

19. Related Works

20. Future Research

21. Final Remarks

22. Closing Statement

23. Final Acknowledgements

24. End of Document

FLORIDA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
	OAA	AB	APTD	AFDC	Category Related OAA	Related AB	APTD	AFDC	Children Under 21	Other* (SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	<u>1</u> /x	x	x	x						
Physician Services	x	x	x	x						
Dental Services		x	x	x ^{2/}						

Other Benefits: Home health services; State TB and mental hospitals; family planning; intermediate care nursing home service; transportation.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	60,341	\$ 5,927	107,076	98,989	\$12,736
MA					
AB	2,308	153	2,551	1,989	203
APTD	28,981	2,428	56,224	48,833	5,703
AFDC	293,740	3,254	286,842	170,181	4,338
Total	385,370	\$11,762	452,693	319,992	\$22,980

1/ Patients on whose behalf vendor payments only are made for skilled nursing home care or intermediate care are also eligible for the other medical services.

2/ Covered under the EPSDT Program.

FLORIDA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Department of Health and Rehabilitative Services. Payment and utilization review by contract with fiscal agent.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Drugs provided under Division of Health programs, food supplements, vitamin preparations for tonic or dietary use, and appliances.
- B. Formulary: Legend drugs plus non-legend multiple vitamins, ferrous sulphate and liquid antacids (combinations of aluminum, magnesium hydroxides and trisilicates) when prescribed for treatment of a specific disease entity.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.
 - 2. Quantity of Medication: Prior authorization required for: quantity in excess of 34-day supply per prescription or a maximum of \$20 per patient per month.
 - 3. Refills: Up to 5 times, subject to the laws on refills and provided that the refills are indicated on the original prescription or authorized since the original prescription.
 - 4. Eligibility: Each month eligible clients are furnished an identification card, a portion of which is detachable and is used by pharmacies in conjunction with the billing form mailed to PAID Prescriptions, Inc.
- D. Prescription Charge Formula:

(See Form M-3, April 1966, attached.)

Prescription Schedule for Public Assistance Recipients
of the State Department of Public Welfare

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Average Price Includes Costs, Profit, Container (5), Charge and Professional Fee

Volume or Weight	Internal Liquids (Dram or more per dose)	Eye, Ear Nose Drops (Internal Liquids in Drop Doses)	External Liquids (Lotions, Gargles, Injections, etc.)	Handmade Ointments	Handmade Powders Bulk (Calculate on Volume)	Number	Handmade Capsules, papers, etc.	Handmade Suppositories
	Avg.	Avg.	Avg.	Avg.	Avg.		Avg.	Avg.
1 dr.	1.00	1.00	1.00	1.00	1.00	1-2	1.00	1.00
2 dr.	1.00	1.00	1.00	1.00	1.00	3	1.00	1.00
4 dr.	1.00	1.00	1.00	1.00	1.00	6	1.00	1.00
1 oz.	1.00	1.25	1.00	1.00	1.00	12	1.25	2.75
2 oz.	1.25	1.50	1.00	1.50	1.25	18	1.50	3.00
3 oz.	1.50	2.00	1.25	2.00	1.50	20	1.75	3.25
4 oz.	1.75	2.50	1.50	2.50	1.75	24	2.00	3.75
6 oz.	2.00		1.75	3.00	2.00	36	2.75	4.25
8 oz.	2.50		2.00	3.75	2.25	40	3.00	4.75
12 oz.	2.75		2.25	4.50	2.50	50	3.50	5.00
16 oz.	3.50		2.50	5.00	3.00	100	6.00	8.50

(If exact quantity called for is not listed, charge at rate of the average of the two nearest quantities given.)

I N S T R U C T I O N S

1. Above prices are Average and subject to modification where dose varies or where one or more ingredients are very expensive. In general, when the cost (1) of the amount used of any ingredient (2) equals or exceeds 1/5 of the Schedule price add the cost of the amount used of such ingredient, to the Schedule price.

2. In every case where calculated price is an odd number, adjust price to the nearest number divisible by 5. If more than one calculation is required, adjust number after each calculation.

3. For all proprietaries or other manufactured product in original manufacturer's size or quantity cost (1) plus 66%, or prevailing over counter price, if any, whichever is lower.

4. For less than manufacturer's size (3) of any liquid, solid or powder Proprietary (4) with wholesale cost of \$4.00 or less for the quantity dispensed charge Schedule price, or cost (1) of quantity dispensed plus 75%, whichever is higher. If in combination, follow Schedule (or cost of quantity dispensed plus 75%, whichever is higher) and instruction 1. For less than manufacturer's size (3) of any liquid, solid or powder Proprietary with wholesale cost of more than \$4.00 for the quantity dispensed charge cost of quantity dispensed plus 66%.

5. For less than manufacturer's size (3) of any Tablet, Pill, Capsule, etc. with wholesale cost of \$4.00 or less for the quantity dispensed, charge cost (1) of quantity dispensed plus 150% for all quantities up to and including 1/4 of manufacturer's size; charge cost of quantity dispensed plus 100% for all quantities up to and including 1/2 of manufacturer's size; charge cost of quantity dispensed plus 75% for all quantities greater than 1/2 of manufacturer's size. For less than manufacturer's size (3) of any Tablet, Pill, Capsule, etc. with wholesale cost for the

quantity dispensed of more than \$4.00 charge wholesale cost of quantity dispensed plus 75%.

6. Minimum price for any prescription \$1.00.

7. Prescription prices will not exceed those charged non-recipients for identical prescriptions. If schedule prices exceed those on record in the pharmacy's prescription file for identical prescriptions for persons who are not public assistance recipients, adjust price to lower figure.

- (1) "Cost" means Wholesaler's price.
- (2) "Ingredient" does not include vehicle. No increase in price should be made for cost of vehicle unless such cost equals or exceeds 1/2 of Schedule price. In such cases add 1/2 the cost of the amount (of vehicle) used to the Schedule price.
- (3) "Size". Where more than one size is listed base price on cost of size nearest to quantity dispensed.
- (4) "Proprietary" includes all "Specialties", Trade Marked items, specific manufacturer's product, etc.
- (5) Best Quality and adapted to intended use of medicament, (e. g. dropper bottle, ophthalmic tube, etc.)

FLORIDA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Rehabilitative Services Department Officials:

William J. Page, Jr. Secretary	Department of Health and Rehabilitative Services 1323 Winewood Boulevard Tallahassee, Florida 32301
-----------------------------------	--

Charles Hall Staff Director	Social and Economic Services Program Office 1323 Windwood Boulevard Tallahassee, Florida 32301
--------------------------------	---

Walter B. Conwell Assistant Staff Director	Social and Economic Services Program Office Post Office Box 2050 Jacksonville, Florida 32203
---	---

C. Wright Hollingsworth Chief Bureau of Medical Services	" "
--	-----

2. Consultants to Social and Economic Services:
(Part-time)

Sam Atkinson, M.D.	"	"
M. E. Morrow, M.D.	"	"
Dudley Reep, D.D.S.	"	"

3. Medicaid Advisory Committee:

Below is the list of the newly appointed members of the Medicaid Advisory Committee. No formal meeting has been conducted since assignment for the purpose of establishing the various subcommittees.

<u>County Welfare Executives</u> Harold J. Angermeier, Pres. Fla. Association of County Welfare Executives 601 Court Street Clearwater 33516	<u>Nursing</u> (Mrs.) Billye Boselli, R.N. Executive Director Visiting Nurse Association 2105 Jefferson Street Jacksonville 32206
---	--

* Jacksonville offices will be moved to Tallahassee on July 1, 1976.

Medical Advisory Committee (continued):

Orthotics

Ross Bremer, President
Bremer Brace Co.
1107 Margaret Street
Jacksonville

Pharmacy

George Browning, R.Ph.
Medical Arts Bldg. Pharmacy
1281 South Hickory Street
Melbourne 32901

School Health Programs

Benton Clifton, Admr.
Health, Safety, Fiscal
Education and Summer Programs
Department of Education
413 Winchester Building
Tallahassee 32304

Mental Health

Robert Furlough, Ph.D.
Admr., Special Programs and
Interstate Services
Division of Mental Health
1323 Winewood Boulevard
Tallahassee 32301

Consumer

Mary Glover (Mrs.)
709 Court J, Blodgett Homes
Jacksonville 32209

Optometry

Robert Greenberg, O.D., FAAO
Drawer 4009
906 Thomasville Road
Tallahassee 32303

Nursing Home Administrators

Arthur Harris, Admr.
Florida Manor
830 West Michigan Avenue
P.O. Box 5577
Orlando 32805

Dentistry

H. Raymond Klein, D.D.S.
St. Johns Building
1824 King Street
Jacksonville 32204

Board Certified Physicians

Donald G. Nikolaus, M.D.
Mease Hospital and Clinic
Dunedin 33528

Childrens Medical Services

Julia St. Petery, M.D.
Program Director
Office of Childrens
Medical Services
1323 Winewood Boulevard
Tallahassee 32301

Office of Health

E. Charlton Prather, M.D.
Program Staff Director of
Health Program Office
P.O. Box 210
Jacksonville 32201

Hospital Administrators

James W. Quinn, Director
Orange Memorial Hospital
1416 South Orange Avenue
Orlando 32806

Community Medicine

Richard C. Reynolds, M.D.
Assistant Dean
Dept. of Community Health
College of Medicine
Box 712
J. Hillis Miller Health Ctr.
University of Florida
Gainesville 32601

Osteopathy

Melvyn Sarnow, D.O.
Kendall Medical Center
8831 S.W. 107 Avenue
Miami 33156

Medical Advisory Committee (continued):

Hearing Aid Dealers

Thomas E. Smith
Orlando Hearing Aid Center
35 West Pine Street
Orlando

Consumer

Will Thornton
Post Office Box 152
Sparr 32690

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

W. Harold Parham
Executive Vice-President
Florida Medical Association, Inc.
P.O. Box 2411
*Jacksonville 32203

B. Pharmaceutical Association:

James B. Powers
Executive Secretary
Florida Pharmaceutical Association
P.O. Box 960
Tallahassee 32302
Phone: 904/222-2400

* Jacksonville offices will be moved to Tallahassee on July 1, 1976.

GEORGIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
									Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services				x						

*SFO - State Funds ~~x~~ Only - ~~x~~ Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 8,786	80,778	\$ 8,799
MA				
AB		192	2,006	201
APTD		3,958	44,690	5,504
AFDC		4,572	228,502	6,143
MN Aged			15,130	3,319
MN Blind			150	20
MN Disabled			3,433	825
MN Children			6,228	205
Total		\$17,508	380,917 ^{1/}	\$25,016 ^{1/}

^{1/} DHEW - SRS/NCSS 2082 B(2) B(3), FY-1975.

GEORGIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Department of Human Resources through its Medicaid program.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Drugs not on the drug list, OTC items.
- B. Formulary: The Medical Assistance Drug List contains approximately 9000 drug items listed in package sizes available by brand name. Exceptions to the drug list can be made.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: Physicians are encouraged to prescribe a 34-day supply.
 - 2. Quantity of Medication: A 34-day supply or a 100-dose unit, whichever is larger.
 - 3. Refills: According to state and federal law.
 - 4. Dollar Limits: None.
- D. Prescription Charge Formula: Local wholesale cost, plus professional fee of \$2, less 50¢ copayment and 5% factor.

V. Miscellaneous Remarks:

Physicians use their regular prescription blanks. Physicians wishing to dispense drugs under the program must apply to the Director, Medicaid Program, and submit evidence that pharmacy facilities are not available within 20 miles of his office.

Average prescription cost in FY 1975 was \$4.76.

GEORGIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Department of Human Resources Officials:

T. M. (Jim) Parham Commissioner	Dept. of Human Resources State Office Building 47 Trinity Avenue, S.W. Atlanta, Georgia 30334
Sam T. Thurmond Director Medicaid Program	Medicaid Office Dept. of Human Resources P.O. Box 55006 Atlanta, Georgia 30308
C. Thomas Smith, Director Program Management Medicaid Program	" "
Gilbert H. Buice, R.Ph. Program Management Officer	Pharmaceutical Service - Medicaid Dept. of Human Resources P.O. Box 55002 Atlanta, Georgia 30308
(Mrs.) Frances Lipscomb, R.Ph. Chief, Pharmaceutical Service Medicaid Program	" "

2. Title XIX (Medicaid) Medical Advisory Committee:

Represented by each of the following groups:

Medical Association of Georgia
Atlanta Medical Association
Georgia Chapter American Academy of Pediatrics
Georgia Hospital Association
Georgia Pharmaceutical Association
Georgia State Nursing Association
Georgia Nursing Home Association
County Department of Family and Children Services
Casework Agency
Economic Opportunity Atlanta
Medicaid Recipient
Georgia Osteopathic Medical Association

Title XIX (Medicaid) Medical Advisory Committee (continued):

Georgia Dental Association
Georgia Legal Services Programs
Medicaid Staff
Association of County Commissioners' of Georgia

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

James M. Moffett
Executive Director
Medical Association of Georgia
938 Peachtree Street, N.E.
Atlanta 30309
Phone: 404/876-7535

B. Pharmaceutical Association:

Roger T. Lane
Executive Director
Georgia Pharmaceutical Association
1 LaVista-Perimeter Office Park
Suite 108
Tucker 30084
Phone: 404/934-5340

GUAM

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began November 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x		
Outpatient Hospital Care	x	x	x	x	x	x	x	x		
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		
Physician Services	x	x	x	x	x	x	x	x		
Dental Services	x	x	x	x	x	x	x	x		
Other Benefits:	Transportation; prostheses.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA				
MA				
AB				
APTD				
AFDC				
Total				

No report to NPC or available data published by HEW.

GUAM

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Department of Public Health and Social Services.

IV. Provisions Relating to Prescribed Drugs:

Prescribed drugs are provided to needy persons eligible for services under Title XIX. Providers include the Guam Memorial Hospital pharmacy as well as other privately operated pharmacies.

GUAM

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Franklin S. Cruz Director	Department of Public Health and Social Services Government of Guam P.O. Box 2816 Agana, Guam 96910
Pedro L.G. Santos, ACSW Social Services Administrator Division of Social Services	" "
Don Miller, Director Medical Care Service	P.O. Box 2719 Agana, Guam 96910
Eugene G. Hammond Acting Medicaid Program Supervisor Division of Social Services	P.O. Box 2816 Agana, Guam 96910

HAWAII

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
	Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x	x
Other Benefits:											

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 408	3,303 ⁸ 6,000	233 \$ 427
MA		12	2,476	194 9
AB		427	110 4,000	9 404
APTD		1,152	3,772 47,000	464 1,309
AFDC		1,199	46,867 56,000	1,309 2,149
		All other	6,843	597
Total		\$3,198	113,000	73,108 ^{1/} \$4,298

1/ DHEW SRS/NCS 2082-A(2) FY-'75.

Corrections - by letter 4/9/78
D Mel Turk

HAWAII

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Department of Social Services and Housing through its Public Welfare Division and four county branch offices.

HAWAII

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services and Housing Department Officials:

Andrew I. T. Chang Director	Department of Social Services and Housing P.O. Box 339 Honolulu, Hawaii 96809
Masaru Oshiro Deputy Director	" "
Raymond Sato Administrative Services Officer	" "
Edwin Tam Public Welfare Administrator	Public Welfare Division (same address as above)
Robert W. Millar Medical Care Administrator	" "
Edward Yoshimura Medical Welfare Specialist	" "
Wayne S. Hansen, M.D. Medical Consultant	" "
John Sheedy, M.D. Medical Consultant	" "
Benjamin Sherman, D.D.S. Dental Consultant	" "
Omel L. Turk, R.Ph. Pharmacist Consultant (Part-time)	" "

2. Social Services and Housing Department Advisory Committee:

Patrick Walsh, M.D.	550 South Beretania Street Honolulu 96813
---------------------	--

Social Services and Housing Department Advisory Committee
(continued):

Grover H. Batten, M.D. 264 Alexander Young Building
Honolulu 96813

Jacob Kim, R.Ph. 314 Lewers Street
Honolulu 96815

3. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Association:

H. Tom Thorson
Executive Director
Hawaii Medical Association
510 South Beretania Street
Honolulu 96813
Phone: 808/536-7702

B. Pharmaceutical Association:

David A. Cook
President
Hawaii Pharmaceutical Association
P.O. Box 1198
Honolulu 96807

IDAHO

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
									Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services				x						
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug 2/ Recipients Amounts ^{2/}
OAA		\$ 248		5,268 \$ 577
MA		304		
AB		5		80 6
APTD		304		4,164 447
AFDC		450		17,923 473
Total		\$1,311		27,435 \$1,503

Source: DHEW, SRS-NCSS-2082 A(2), B(3) FY-1975.

IDAHO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By State Department of Health and Welfare through seven regional offices, each serving five or more of the state's 44 counties.

IV. Provisions Relating to Drugs:

Vendor drug program; limit \$20 per person per month, with no exceptions.

IDAHO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Welfare Department:

Milt Kline Director	Department of Health and Welfare, LBJ Bldg. State House Boise, Idaho 83720
Karl Banschbach, Director Medical Assistance	Department of Health and Welfare State House Boise, Idaho 83720
O. E. Merrell, M.D. Medical Consultant	" " " " " " " "
James Collier, R.Ph. Pharmacist Consultant (Part-time)	Lemps Apothecary 201 East Bannock Boise 83702

2. Medical Care Advisory Committee:

Clarence Thompson, M.D. 920 Ironwood Drive Coeur d'Alene 83814	- Region I
Mrs. Mac Schultz Box 208 Orofino 83544	- Region II
Ruth Carroll (Mrs.) 313 Sunset Drive Payette 83661	- Region III
Barbara Wescott (Mrs.) 3937 West Clement Road Boise 83704	- Region IV
Mrs. Donald Rehwalt Route 2 Paul 83347	- Region V
Alice Wilson (Mrs.) 60 West Second South Soda Springs 83276	- Region VI

Medical Care Advisory Committee (continued):

William Jones Box 956 Twin Falls	- Member-at-Large
Ruby Crosby (Mrs.) Route 2 Wendell 83355	- Idaho Nurses Association
Roy Watson 1200 Maple Grove, #2 Boise 83706	- A.A.R.P.
Marcelino Gonzales 103 - 16 Avenue South Nampa 83651	- Member-at-Large
Samuel R. Winn, D.M.D. 1410 North 28th Boise 83703	- Idaho Dental Association

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

D. Sower
Executive Director
Idaho Medical Association
407 West Bannock Street
Boise 83702
Phone: 208/344-7888

B. Pharmaceutical Association:

Clifford E. Barnett
Executive Director
Idaho State Pharmaceutical Association
~~#3 Imperial Plaza~~ **2416 BANK DRIVE**
~~200 North Third Street~~
Boise ~~83702~~ **83705**
Phone: 208/343-1156

ILLINOIS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	30,568	\$ 3,953		\$
MA				
AB	1,634	170		
APTD	82,929	12,408		
AFDC	778,576	26,358		
MN Aged	44,332	8,466		
MN Blind	338	50		
MN Disabled	23,950	4,447		
MN Children				
MN GA ^{2/}	39,785	1,024		
	54,698	4,518		
Total	1,056,810	\$61,394		\$64,907 ^{3/}

^{1/} Average per month.^{2/} Includes only those GA units receiving supplemental State funds.^{3/} DHEW - NCSS Report B-5 (FY-1975) (Preliminary)

ILLINOIS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the state through 102 county departments of public aid offices of the Illinois Department of Public Aid.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Biologicals and drugs available from State Department of Health or other agencies. Do not provide for preventive medicine.
- B. Formulary: Drug manual prepared by a committee of the Illinois State Medical Society issued July 1971 lists approximately 1200 items and maximum amount of each that may be prescribed. Has sections listing allowable "prescription items", "over-the-counter items", and a "Therapeutic and Pharmacologic Index". Payment authorized for listed items only. Item number must be entered on prescription by pharmacist.

In "very unusual circumstances" the physician may request prior authorization to prescribe a drug not in the Manual.

Manual provides also for drugs listed in USP and NF.

C. Prescribing or Dispensing Limitations:

1. Terminology: "When a drug is manufactured by several companies, the non-proprietary name is listed along with some of the trade names most commonly used in the State of Illinois, in parenthesis, for purposes of cross-index reference and identification only. Such items are to be prescribed or ordered by the non-proprietary name.

"The pharmacy shall dispense non-proprietary products of quality. Maximum reimbursement to the pharmacy will be based on the price of a non-proprietary item of recognized quality."

Terminology (continued):

If the pharmacist dispenses a trade name product, the charge to the Department of Public Aid can not exceed that charge based on the maximum allowable charge or cost indicated in the Drug Manual.

2. Quantity of Medication: Payment shall not be made for quantities in excess of the maximum amounts designated in the Drug Manual. If no maximum is designated, the quantity must not exceed one month's supply.
 3. Refills: Prescriber must specify refills, not to exceed two refills.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Prices shall be either those charged to the general public or those based on the Department's published Fee Schedule, whichever is lower. Name of the manufacturer of a non-proprietary drug supplied must be shown on the prescription form. OTC items at prevailing OTC price. Prescription charge formula is cost (AWP) plus \$2.05.

V. Miscellaneous Remarks:

Payments are made only to participating pharmacies which must meet Department requirements.

The Department requires that prescriptions written in clinics or emergency rooms of participating hospitals be filled by the hospital pharmacy.

ILLINOIS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Public Aid Department Officials:

James L. Trainor Director	Department of Public Aid 316 South 2nd Street Springfield, Illinois 62706
Jeffrey Miller Deputy Director	" "
Robert G. Wessel Chief Assistant to the Director	" "
Pat Kain, Chief Bureau of Medical Administration	931 East Washington Street Springfield, Illinois 62763
Norman Ryan Deputy Director Finance	222 South College Springfield, Illinois
Jesse Harris Deputy Director Programs and Operations	" "
Wayne Epperson, Chief Bureau of Research and Statistics	301 East Monroe Springfield, Illinois
Garry E. Paddick, Chief Bureau of Information Systems	State Office Building 400 South Spring Street Springfield, Illinois 62706
Douglas H. Clough, R.Ph. Pharmacist Consultant	931 East Washington Street Springfield, Illinois 62708

2. Public Aid Department Advisory Committees:

A. Medical Advisory Committee:

The Department has a State Medical Advisory Committee, composed only of physicians appointed yearly by the Illinois State Medical Society. The members of this

Medical Advisory Committee (continued):

Committee are from different areas of the State and are representative of the different specialty fields. There are Subcommittees of the State Medical Advisory Committee on Ophthalmology, Radiology, Anesthesiology, Cardiovascular and Renal Diseases.

Fred A. Tworoger, M.D. 4753 North Broadway
Chairman Chicago 60640

B. Committee on Drugs and Therapeutics:

A Committee on Drugs and Therapeutics, a standing committee appointed by the Illinois State Medical Society, serves in an advisory capacity to the Department of Public Aid on drug policy and the Drug Manual.

It is composed of physicians and consultants from the field of pharmacy.

Arthur R. Marks, M.D. 101 East Center Street
Chairman Fairfield 62837

Richard L. Landau, M.D., 950 East 59 Street
Chicago 60637

Andrew Krajec, M.D. 108 West South Street
West Salem 62476

Richard H. Suhs, M.D. 1409 Stevenson Drive
Springfield 62703

William T. Gogan, M.D. 7623 West 63 Street
Summit 60501

Charles Salesman, M.D. Box 426
Paris 61944

Vincent A. Costanzo, Jr., 7531 South Stony Island
M.D. Chicago 60649

Thomas William Lester, M.D. 2017 West 107 Street
Chicago 60643

Consultant:

Louis Gdalman, R.Ph. 1753 West Congress Parkway
Chicago 60612

C. Drug Advisory Committee:

A State Drug Advisory Committee, appointed by the Director of the Department of Public Aid to advise on general policies necessary to the operation of a state-wide drug program for public assistance recipients.

Harold J. Shinnick, R.Ph. H. J. Shinnick Drugs <u>Chairman</u>	934 West Armitage Avenue Chicago 60614
W. Edwin Brown Brown Drug Company	720 State Street Quincy
Carl V. Daschka, R.Ph. Victor Drugs	611 State Street Chester
H. M. F. Doden, Sr., R.Ph. Doden Drug Stores, Inc. #1	1625 - 11 Street Rock Island
Justin Eisele, R.Ph. Eisele Pharmacy	3520 Caseyville East St. Louis
Louis Gdalman, R.Ph. Director of Pharmacy Services	Presbyterian - St. Luke's Hospital 1753 West Congress Street Chicago 60612
John T. Gulick, R.Ph. Woodbury Drug Company, Inc.	403 West North Avenue Danville
John F. Koller, R.Ph. Koller Pharmacy	1547 Oak Park Avenue Berwyn
Harold W. Pratt, R.Ph.	3480 Brittany Road Northbrook 60062
Theodore R. Sherrod, Ph.D., M.D. Professor of Pharmacology	University of Illinois College of Medicine 1853 West Polk Street Chicago 60612
Charles P. Skaggs Skaggs Pharmacy	9 East Poplar Street Harrisburg
Roy B. Maher, R.Ph.	12 Sunnyside Springfield 62702

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Roger N. White
Executive Administrator
Illinois State Medical Society
65 East Monroe, Suite 3510
Chicago 60603
Phone: 312/782-1654

B. Pharmaceutical Association:

Fred E. Schwartz
Executive Director
Illinois Pharmaceutical Association
222 West Adams Street, Suite 546
Chicago 60606
Phone: 312/236-1135

INDIANA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	Other* (SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug <u>1/</u> Recipients	Amounts
OAA	34,384	\$ 4,711	32,390	27,759	\$ 6,624
MA					
AB	1,629	168	1,315	1,095	164
APTD	18,942	2,580	22,017	16,939	4,769
AFDC	222,846	3,576	208,531	118,323	4,769
MN Aged					
MN Blind					
MN Disabled					
MN Children					
Total	288,901	\$11,035	264,253	164,116	\$16,326

1/ DHEW - SRS/NCSS 2082 A(2)

INDIANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Indiana State Department of Public Welfare with the 92 county departments of public welfare acting as agents of the State Department. The State Plan for carrying out the program was developed under the guidance of the Medical Advisory Committee of the State Department of Public Welfare as mandated by law.

Under the provisions of the law which authorizes the Indiana Department of Public Welfare to contract with the fiscal agent to assist in the administration of the medical assistance program, the State Department contracted with Blue Cross of Indiana and Blue Shield of Indiana. The Fiscal Agent receives, audits, and pays claims submitted by the providers of health care for benefits rendered to eligible patients.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
None. All prescriptions filled as written, by pharmacists who have signed provider agreements with the Fiscal Agent.
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: No statewide requirements for generic prescribing.
 - 2. Quantity of Medication: None. However, for purchases of non-legend drugs of over \$20, a prior approval form must be obtained from the County Department of Public Welfare and it must be signed by the Director of that Department.
 - 3. Refills: Allowed as authorized by physician.
 - 4. Dollar Limits: None.

D. Prescription Charge Formula:

Payment to the pharmacist will be based on acquisition cost of the legend drug, plus a flat professional fee of \$1.85 which has been established by the State Department of Public Welfare. Non-legend drugs and medical supplies payment is made to the pharmacist based on the amount of the usual and customary charge.

V. Miscellaneous Remarks:

Expenditures for medical care furnished under Indiana's Medicaid program for the period July 1, 1974 to June 30, 1975 amounted to \$172,433,950. About 264,253 persons were eligible for Medicaid as of June 30, 1975. A total of approximately 242,184 recipients received Medicaid services at least once during FY 1975.

Source: DHEW SRS/NCSS 2082-A(1)
2082-A(2)

INDIANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Wayne A. Stanton Administrator	Department of Public Welfare 100 N. Senate Avenue, Rm. 701 Indianapolis, Indiana 46204
James O. Price, M.D. Chief Medical Director	" "
Evelyn G. Bell Assistant Administrator - Programs	" "
James L. John Assistant Administrator - Administration	" "
George N. Nichols Assistant Administrator - Medicaid	" "
John B. Douglas, Director Div. of Administrative Services	" "
(Mrs.) Marian Steffy, Director Division of Public Assistance	" "
William Harding Chief Accountant	" "
Loren Schmidt Supervisor Medical Review Team	" "
E. W. Dyar, M.D. Supervising Ophthalmologist (Part-time)	" "
Kenneth Browning, R.Ph. Pharmacist Consultant (Part-time)	" "

2. Welfare Department Advisory Committee:

- | | |
|--|--|
| David A. Clark, R.Ph.
<u>Chairman</u>
54 Monument Circle
Indianapolis 46204 | - Indiana Pharmaceutical
Association, Inc. |
| Glen Sagraves, D.D.S.
Vice-Chairman
1121 West Michigan Street
Indianapolis 46202 | - Indiana Dental Association |
| Elton TeKolste
Executive Director
Indiana Hospital Assoc.
38 East 39 Street
Indianapolis 46205 | - Indiana Hospital Association |
| Charlotte Akins (Mrs.)
Visiting Nurses Assoc.
615 North Alabama Street
Indianapolis 46204 | - Indiana State Nurses
Association |
| Ronald Anjard
906 Bellevue Place
Kokomo 46901 | - Citizenry of Indiana |
| John Cervenka
R.R. 1, Box 121
North Judson 46366 | - State-wide Taxpayer
Association |
| Louis Congdon
3353 Woodland Parkway
Columbia 47201 | - Business and Industrial
Interests |
| John H. Huber, Admr.
Sycamore Village Health
Care Center
2905 West Sycamore Road
Kokomo 46901 | - Indiana Association of
Licensed Nursing Homes |
| Hon. James L. Drews
R.R. 1, Box 285-B
Knox 46534 | - Indiana House of
Representatives |
| Demetrius Ewing
513 South 15 Street
Terre Haute 47801 | - Citizenry of Indiana |
| Keith G. Felix
P.O. Box 396
Plymouth 46563 | - Insurance Interests |

Welfare Department Advisory Committee (continued):

- | | |
|--|--|
| Jack B. Glick, D.P.M.
3119 West 30 Street
Indianapolis 46222 | - Indiana State Podiatry
Association |
| Maurice E. Glock, M.D.
229 Medical Center Building
Fort Wayne 46802 | - Indiana State Medical
Association |
| Carl D. Hicks
R.R.
Perrysville 47974 | - Agricultural Interests |
| Albert F. Kull, D.O.
2515 East Jefferson Blvd.
South Bend 46615 | - Indiana Association of
Osteopathic Physicians
and Surgeons |
| Lowell G. Foster, M.D.
3500 Lafayette Road
Indianapolis 46222 | - Indiana Psychiatric
Association |
| Pearl Myers (Mrs.)
R.R. 3, Box 159
Bremen 46506 | - Indiana State Licensed
Practical Nurses
Association, Inc. |
| George F. Parker, M.D.
Community Hospital
1500 North Ritter Avenue
Indianapolis 46219 | - Indiana Chapter, American
Academy of Pediatrics |
| (Mrs.) Marie Peacock, R.N.
612 North Webster
Kokomo 46901 | - Citizenry of Indiana |
| Albert B. Stroud, O.D.
7 North Meridian Street
Indianapolis 46204 | - Indiana Optometric
Association |
| Hon. Leo Sullivan
Indiana State Senator
529 West Fifth Street
Peru 46970 | - Indiana State Senate |
| Charles Watkins, D.C.
5117 East Washington Street
Indianapolis 46219 | - Indiana State Chiropractic
Association |

Welfare Department Advisory Committee (continued):

Ex Officio:

James B. Richman - Representing the Mental
Patient Accounts Officer Health Commissioner
1315 West 10th
Indianapolis

Louis W. Spolyar, M.D. - Representing the State
Asst. State Health Health Commissioner
Commissioner for
Medical Operations
Indiana State Board of Health
1330 West Michigan Street
Indianapolis 46202

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

James A. Waggener
Executive Secretary
Indiana State Medical Association
3935 North Meridian
Indianapolis 46208
Phone: 317/925-7545

B. Pharmaceutical Association:

David A. Clark
Executive Director
Indiana Pharmaceutical Association
54 Monument Circle
Indianapolis 46204
Phone: 317/634-4968

IOWA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						
Other Benefits:	Prostheses; ambulance; visiting nurse; optometrist, optician, podiatrist and chiropractor.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible ^{2/}	Drug Recipients ^{3/}	Amounts
OAA	230,366	\$2,715	31,855	12,321	\$3,418
MA				531	79
AB	14,064	126	1,348	479	125
APTD	48,234	662	12,606	3,502	1,085
AFDC	960,185	1,795	127,445	16,395	2,066
Total	1,252,849	55,298	173,254	33,228	\$6,773

1/ Duplicated.

2/ Unduplicated.

3/ Monthly average.

IOWA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Central administration by the State Department of Social Services.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Non-legend drugs, amphetamine products, and legend multiple vitamins.
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
1. Terminology: None.
 2. Quantity of Medication: Prescriptions should be limited to a 30-day supply, except for prescriptions calling for unit packaging (e.g., quantities of 50 or 100 that could run up to a 100-day supply). Maintenance drugs may be supplied in 90-day quantities.
 3. Refills: Not permitted.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Payment will be based on the pharmacist's usual, customary and reasonable charge, but payment may not exceed the current wholesale cost of the drug as defined by the Department of Social Services, plus a professional fee of \$2.15.

V. Miscellaneous Remarks:

A written prescription is required for all drugs and supplies.

Drug Utilization Data - Recipients (FY 1975)

	<u>OAA</u>	<u>AFDC</u>	<u>AB</u>	<u>APTD</u>
Total	147,854	196,311	5,748	42,475
Avg./Month	12,321	16,359	479	3,540

Miscellaneous Remarks (continued):

FY 1975:

Total number B	1,248,114
Average cost/B for all categories	\$5.27

Source: Division of Statistics, Office of Administrative Services, August 1975.

IOWA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services Department Officials:

Kevin Burns Commissioner	Department of Social Services Lucas State Office Building Des Moines, Iowa 50319
-----------------------------	--

Elmer M. Smith, M.D. Chief Bureau of Medical Services	" "
---	-----

Ronald J. Mahrenholz, R.Ph. Utilization Review Section	" "
---	-----

Pharmacist Consultant*

2. Social Services Department Advisory Committees:

A. Title XIX Medical Assistance Council:

<u>College of Medicine</u> Associate Dean College of Medicine University Hospitals Iowa City 52240	<u>Iowa Hospital Association Inc.</u> Donald Cordes, Administrator Iowa Methodist Hospital 1200 Pleasant Street Des Moines 50309
--	--

<u>House of Representatives</u> Rep. James Jordan R.R. #3 Marion 52302	<u>Iowa Medical Society</u> A. J. Havlik, M.D. 207 West 3 Street Tama 52339
---	--

Rep. Reid Crawford 1117 Arizona Avenue Ames 50010	<u>Iowa Nurses Association</u> Marilyn Russell (Mrs.) Public Health Nursing Assoc. Armory Building East 1st and Des Moines Street Des Moines 50309
<u>Iowa Dental Association</u> Richard T. Evans, D.D.S. 225 South Main Street Britt 50423	

* Two pharmacists serve as pharmacist consultants for Iowa Blue Cross/Blue Shield, which is the carrier.

Title XIX Medical Assistance Council (continued):

Health Facilities
Association of Iowa

R. Buckman Brock
P.O. Box 236
4010 Woodland Plaza, #5
West Des Moines 50265

Iowa Optometric Association

Thomas E. Ward, O.D.
801 Grand Avenue
Des Moines 50309

Iowa Osteopathic Hospital
Association

Dwight G. Reigert
1111 West Kimberly Road
Davenport 52806

Iowa Pharmaceutical
Association

Robert G. Gibbs
302 Shops Building
Des Moines 50309

Iowa Podiatry Society

Howard Inbody, D.P.M., Pres.
404 Carver Building
Fort Dodge 50501

Iowa Senate

Senator Joseph Coleman
Clare 50524

Senator Dale L. Tieden
Elkader 52043

Iowa Society Osteopathic
Physicians and Surgeons

Gerald Leuty, D.O.
1001 Chestnut Street
Earlham 50072

Iowa State Department of
Health

Norman Pawlewski, Commissioner
Lucas State Office Building
Des Moines 50319

Iowa State Board of
Chiropractic Examiners

Anthony P. Untz, D.C.
212 - 2nd Avenue
Dyersville 52040

Iowa Ophthalmic Dispensers, Inc.

R. Wayne Ellis
849 Marion
Des Moines 50315

Public Representatives

Mary Ellen Evans (Mrs.)
2503 Fulton Avenue
Davenport 52803

Ruth Hannagan (Mrs.)

214 C. C. Acres
Newton 50208

Don L. McGrath

600 South Caldwell
Eagle Grove 50533

Virginia R. Peterson (Mrs.)

4303 N.W. 46 Place
Des Moines 50323

B. Pharmaceutical Advisory Committee:

John Wagoner

Fred Janssen

Ron Dorris

Richard L. Watkins

John Havnen

Jack Bertch

Gus Erickson

G. Joseph Norwood

- Merville

- Clinton

- Jewell

- Independence

- Des Moines

- Waterloo

- Garner

- Iowa City

2. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Eldon Huston
Executive Vice-President
Iowa Medical Society
1001 Grand Avenue
West Des Moines 50265
Phone: 515/255-2105

B. Pharmaceutical Association:

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Executive Director
Iowa Pharmaceutical Association
900 Grand Avenue, #217
Des Moines 50319
Phone: 515/283-0169

KANSAS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began June 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x
Other Benefits:	Home health care; clinic; physical therapy; prostheses; preventive services; family planning supplies; chiropractor and optometrist.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible ^{1/}	Drug Recipients ^{2/}	Amounts
OAA	6,108	\$1,127	8,408	8,582	\$1,520
MA	14,244	2,866	24,817	30,001	3,834
AB	248	46	371	350	50
APTD	5,149	1,165	7,371	7,978	1,324
AFDC	67,716	1,763	69,390	57,664	1,810
GA	7,262	475	9,086	11,873	599
Total	100,727	\$7,442	119,443	116,448	\$9,137

1/ Average per month.
2/ Unduplicated count.

KANSAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

State administered effective January 1, 1974. (Formerly by county boards of social welfare, units of county government, under the supervision of State Department of Social and Rehabilitation Services.)

IV. Provisions Relating to Prescribed Drugs:

- A. All legend drugs are covered with the exception of specifically listed categories and products. Many OTC products are also covered when prescribed for treatment of certain disease conditions. Common medicine chest items are excluded from coverage.
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
 1. Terminology: Maintenance drugs are considered to include the following drug categories:
 - a. Anti-diabetic preparations (oral hypoglycemics)
 - b. Anti-convulsants
 - c. Cardiovascular preps, namely -
 - (1) Anti-anginal drugs
 - (2) Digitalis and cardiac glycosides
 - (3) Anti-hypertensives
 - d. Diuretics
 - e. Thyroid preparations (pure and synthetic)
 - f. Vitamins covered by the program
 - g. Antacids
 2. Quantity of Medication: Maximum of a 100-day supply. Minimum quantities of a 100-dose or 30-day supply should be prescribed and dispensed for maintenance drugs.
 3. Refills: As authorized by the prescriber up to a one-year period from the date of issuance of the prescription.
 4. Dollar Limits: A prescription claim in excess of \$25 is reviewed prior to payment.

- D. Prescription Charge Formula: Variable-fee schedule effective August 1970. Fee per prescription established for each individual participating pharmacy within the range of \$1.24 to \$2.25 for FY 1976, based on analysis of operating data submitted by each pharmacy.

The dispensing fee assigned to a pharmacy is the total of the allocated operating cost plus a 30¢ profit factor. Reimbursement to a pharmacy provider is the total of the dispensing fee plus the allowable drug cost. Copay 50¢/R effective July 1, 1976.

V. Miscellaneous Remarks:

"Claims for pharmaceuticals will be paid only to licensed pharmacies, except in instances where a physician is issued a dispensing permit. Such permits will be issued wherever there is no licensed pharmacy in the town or community, upon request by a physician. Applications for such permits will be passed on by a medical review committee."

*1973 Revisions of Reimbursement Policies (August 13, 1973)

1. Actual acquisition cost no longer in effect.
2. Establishment of allowable cost prices listed in Kansas Title XIX Drug Listing (at request of and in conjunction with Kansas Pharmaceutical Association).
3. Generally, allowable cost of most drugs is AWP of 100-unit or pint size of product.
4. Seven manufacturers' products generally have as their average allowable price the direct price of smallest package size of drug product.
5. Exception to 3 and 4 is that group of products enjoying a high volume of usage in the Title XIX program. The allowable cost price of such products is that of the most commonly purchased size of the product, whether purchased direct from manufacturer or from the wholesaler.

* Source: State Department of Social Welfare Memorandum dated August 10, 1973.

KANSAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social and Rehabilitation Services Department Officials:

Dr. Robert C. Harder Secretary	Department of Social and Rehabilitation Services State Office Building Topeka, Kansas 66612
William E. Richards, Director Division of Social Services	" "
Sally Anderson, Chief Income Maintenance	" "
Ruth Elsenraat, Director Public Assistance Section	" "
William A. Newman, Director Medical Services Section	" "
James W. Bibb, Budget Director Department of Administration	" "
P. L. Beiderwell, M.D. Coordinator of Medical Services	" "
Nancy J. Wing, M.D. Medical Director	" "
Gene Hotchkiss, R.Ph. Pharmacist Consultant	" "

2. Governor's Advisory Committee:

(The membership of this committee is currently under revision.)

Kent Atkins
201 East 7 Street
Hays 67601

Frank Donovan, D.S.C.
111 North 5 Street
Atchison 66002

Dr. Merle Bolton
415 West 8 Street
Topeka 66603

Robert E. Eisler
3221 Troost
Kansas City 64109

Governor's Advisory Committee (continued):

J. H. French, O.D.
613 Market Street
Osage City 66523

Russell Miller
Univ. of Kansas Medical
Center
Kansas City 66103

Evalyn Gendel, M.D.
Division of Maternal
and Child Health
535 Kansas Avenue
Topeka 66603

Burton W. Osborn, D.D.S.
643 South Ohio
Salina 67401

Dr. Robert Harder
Secretary, Dept. of
Social and Rehabilitation
Services
State Office Building
Topeka 66612

Ona Mae Price (Mrs.)
705 North Brady
Abilene 67410

Mrs. Henry Schwaller
2200 Pershing Drive
Hays 67601

Hilda LeCuer (Mrs.)
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Health Department
El Dorado 67042

Loren Shaw
3236 East Douglas
Wichita 67208

Dwight Metzler
Ex. Sec. and Director
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State Department of Health
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Topeka 66612

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2307 East First
Wichita 67214

Betty Talliaferro (Mrs.)
2600 North 52 Street
Kansas City 66104

Rowe Meats
1518 North Hershey
Beloit 67420

Ron Wiebe, ACSW
501 $\frac{1}{2}$ Commercial Street
Emporia 66801

F. P. Wolff, M.D.
106 East 2 Street
Pratt 67124

Calvert J. Winter, M.D.
155 South 18 Street
Kansas City 66102

3. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Society:

Jerry Slaughter
Executive Director
Kansas Medical Society
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Topeka 66612
Phone: 913/235-2383

B. Pharmaceutical Association:

Douglas Johnson, R.Ph.
Executive Director
Kansas Pharmaceutical
Association
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Topeka 66604
Phone: 913/232-0439



KENTUCKY

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
	Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x		
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x		
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x		
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x		
Physician Services	x	x	x	x	x	x	x	x	x		
Dental Services	x	x	x	x	x	x	x	x	x		

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/2/}	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	56,058	\$ 4,058	67,011	30,674	\$ 4,984
MA					
AB	2,120	110	2,328	827	129
APTD	21,224	1,776	33,850	15,340	2,693
AFDC	151,907	2,502	158,545	27,264	2,561
MN Aged	13,432	865	5,082	2,253	373
MN Blind	174	11	78	31	5
MN Disabled	3,499	335	2,209	1,095	211
MN Children	55,038	1,070	55,055	10,532	1,053
Total	303,452	\$10,727	324,158	88,016	\$12,009

^{1/} Monthly average.

^{2/} Monthly average of recipients was 83,519.

KENTUCKY

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Division for Medical Assistance within the Bureau for Social Insurance, within the Department of Human Resources.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
The following are items which are not covered under the pharmacy benefit area of the program:
1. Medical supply items such as syringes, bedpans, urinals, ice bags, etc.
 2. Medicine cabinet supplies and drug staples.
 3. Drugs available through other programs or agencies.
 4. Drugs not included on the Kentucky Medical Assistance Program Drug List.
 5. Medications and supplies used or dispensed by physicians or dentists during home or office calls.
- B. Formulary: Yes. In the form of a drug list containing items listed by generic name. This list may be revised in accordance with requests by participating physicians and dentists, in accordance with funds available, and beneficiaries. Included on the drug list are 7 broad therapeutic entities which cover multiple drug products. Therefore, program payment actually covers a wide range of drugs although approximately 200 entities appear on the drug list.
- C. Prescribing or Dispensing Limitations:
1. Terminology: None.
 2. Quantity of Medication: Maximum quantities/R approximate a 30-day supply on maintenance medications and a shorter course of therapy for drugs used in acute conditions.

Prescribing or Dispensing Limitations (continued):

3. Refills: No prescriptions may be refilled more than 5 times or more than 6 months after the prescription is written.
4. Dollar Limits: None.

D. Prescription Charge Formula:

Ingredient cost plus professional fee (\$1.80/R).

1. All covered outpatient pharmacy benefits provided to Kentucky Medical Assistance Program recipients are to be billed to the program at the lower of the established program price, consisting of drug cost plus professional fee, or the usual charge to the general public for the same product and service(s).
2. The ingredient cost for covered drugs is adjusted monthly for those drugs for which significant price fluctuations have occurred.
3. The basic formula used in determining program payment for covered drugs involves the use of the median cost for drug products available from multiple suppliers (15 or more) as listed in standard reference books such as the Red Book and Blue Book and PharmIndex. If, in the opinion of the Formulary Subcommittee, the median cost reference standard does not meet the criteria of: availability in interstate commerce, no documented questions regarding equivalency, ready availability throughout the State, and acceptable drug recall record of the supplier/manufacturer, the actual median cost product will not be recommended in establishing the MAC. Instead, the lowest priced product which does meet these criteria, in the opinion of the Formulary Subcommittee, will be recommended by the Committee for use as the program pricing standard.

V. Miscellaneous Remarks:

Payment for drugs is limited to those pharmacies which affiliate themselves with the Medical Assistance Program by completing the "Agreement of Participating Pharmacies".

Miscellaneous Remarks (continued):

Drug Utilization Data

<u>Average Monthly Amount of Payment</u>	<u>Utilization Rate</u> (per 100 Eligible Persons)
--	--

Average Monthly Vendor Payment -----	\$11.37 -----	27
--------------------------------------	---------------	----

Categorically Needy

Aged -----	13.54 -----	46
Blind -----	12.99 -----	36
Disabled -----	14.63 -----	45
Dependent Children -----	7.83 -----	17

Medically Needy

Aged -----	13.79 -----	44
Blind -----	12.65 -----	40
Disabled -----	16.08 -----	50
Dependent Children -----	8.33 -----	19

Source: State Summary of Recipients and Medical Utilization
Rate, PA-264, Public Assistance in Kentucky, FY 1975.

KENTUCKY

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

BUREAU FOR SOCIAL INSURANCE - DEPARTMENT FOR HUMAN RESOURCES

Officials, Consultants and Committees

1. Officials:

C. Leslie Dawson Secretary	Dept. for Human Resources Capitol Annex Frankfort, Kentucky 40601
Gail S. Huecker (Mrs.) Commissioner	Bureau for Social Insurance Capitol Annex Frankfort, Kentucky 40601
James C. Rogers, Director Division for Medical Assistance	Bureau for Social Insurance U.S. Highway 127, South Frankfort, Kentucky 40601
(Miss) Gene A. Thomas, R.Ph. Division for Medical Assistance	Bureau for Social Insurance U.S. Highway 127, South Frankfort, Kentucky 40601

2. State Advisory Committees for Medical Assistance:

Advisory Council on Medical Assistance appointed by the Governor, is composed of members representing pharmacy, hospitals, registered nurses, medical doctors, dentists, nursing homes, optometrists, podiatrists; meet quarterly or more often.

A. Advisory Council for Medical Assistance:

Howard L. Bost, Ph.D. Assistant Vice President for Program and Policy Planning University of Kentucky Medical Center Lexington 40506 <u>Chairman</u>	W. H. Weddington, D.M.D. 5031 Preston Highway Louisville 40213 Roger Proffitt North Dixie Highway Cave City 42127
Robert N. McLeod, M.D. 500 Bourne Avenue Somerset 42501	Frank Brisley, O.D. 109 East Third Street Maysville 41056

Advisory Council for Medical Assistance (continued):

Mrs. Archie Craft
1645 Linstead Drive
Lexington 40504

John B. Anneken
Anneken's Pharmacy
918 Madison Street
Covington 41011

William T. Williamson
138 Seneca Trail
Louisville 40214

Sandra Higgins (Mrs.)
Administratrix
Senior Citizens Nursing Home

Earl Linqvist, Administrator
Hayswood Hospital
Maysville 41056

C. A. Nava, D.P.M.
Secretary
Kentucky State Board of
Podiatry
110 North Hubbard Lane
Louisville 40207

(Mrs.) Ellen Buchart, R.N.
Jefferson County Health Dept.
Louisville 40202

Formulary Subcommittee

Robert N. McLeod, M.D.
500 Bourne Avenue
Somerset 42501
Chairman

R. N. Smith
Smith Drug
Brukesville 42717

Carl Cooper, M.D.
Bedford 40006

Samuel R. Scott, M.D.
460 West Second Street
Lexington 40508

Earl Linqvist, Administrator
Hayswood Hospital
Maysville 41056

Joe D. Taylor
Box 627
Glasgow 42141

Lewis W. Dittert, Ph.D.
University of Kentucky
College of Pharmacy
Lexington 40506

There are also 8 Technical Advisory Committees consisting of members appointed by a professional association, that advise the Advisory Council in their respective fields: Medicine, Pharmacy, Hospital Administration, Nursing, Nursing Home Administration, Dentistry, Optometry, and Podiatry:

B. Technical Advisory Committees:

(1) Physician Technical Advisory Committee:

H. Burl Mack, M.D.
304 Mt. Mercy Drive
Pewee Valley 40056
Chairman

Robert T. Longshore, M.D.
910 Scott Street
Covington 41011

Physician Technical Advisory Committee (continued):

Wallas Bell, M.D.
Sturgis 42459

Robert M. Blake, M.D.
611 Forrest Drive
Maysville 41056

Fred C. Rainey, M.D.
912 Woodland Drive
Elizabethtown 42701

(2) Hospital Technical Advisory Committee:

H. Earl Feezor
Executive Vice Pres.
Western Baptist Hospital
2501 Kentucky Avenue
Paducah 42001
Chairman

George Hancock, Vice Pres.
Children's Division
Norton Children's Hospital
226 East Chestnut Street
Louisville 40203

James P. Franklin, Admr.
Caldwell County War
Memorial Hospital
Princeton 42445

Eugene Watson, Admr.
John Graves Ford Memorial
Hospital
427 West Main Street
Georgetown 40324

James K. Wilson, Admr.
Pineville Community
Hospital
Pineville 40977

(3) Pharmacy Technical Advisory Committee:

Dean L. Henderson, R.Ph.
521 Greenwood Drive
Franklin 42134
Chairman

R. N. Smith, R.Ph.
Smith's Pharmacy
Burkesville 42717

David C. Hancock, R.Ph.
401 Park Row
Bowling Green 42101

William Farrell, Jr., R.Ph.
300 Highway Avenue, #4
Ludlow 41016

Ron Silberg, R.Ph.
4100 Acomack Drive, #8
Louisville 40222

(4) Nursing Home Technical Advisory Committee:

David K. Rice
Sunrise Manor
Box 9
Hodgenville 42748
Chairman

Lois Miller, Administratrix
Haws Memorial Nursing Home
1011 Holiday Lane
Fulton 42041

Nursing Home Technical Advisory Committee (continued):

Aaron Davis
Summit Manor
400 Bomar Heights
Columbia 42728

Sandra Bulgrin
Administratrix
Anne Lynne Manor
1101 Lyndon Lane
Louisville 40222

Bernic Logsdon
Box 118
Morganfield 42437

(5) Dental Technical Advisory Committee:

J. G. Green, D.M.D.
Owens Medical Center
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Louisville 40207
Chairman

L. Robey Crowe, D.M.D.
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H. T. Daniel, D.M.D.
2533 Larkin Road
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M. J. Gross, D.M.D.
Hazard 41701

(6) Nursing Services Technical Advisory Committee:

Ellen Buchart, R.N.
Jefferson County Health
Department
400 East Gray Street
Louisville 40202
Chairman

Sister Dorothy Peterson
Box 43
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Louise Pickerill (Mrs.)
R.F.D. #4
Hodgenville 42748

Bess Witt, Director
Public Health Nursing
275 East Main Street
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Jean Keating, R.N.
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Ruth Spurrier
174 Rolling Acres Drive
Frankfort 40601

(7) Optometric Technical Advisory Committee:

James M. Bryn, O.D.
106 North 6 Street
Murray 42071
Chairman

Richard B. Rolfes, O.D.
123 East 7 Street
Newport 41071

Optometric Technical Advisory Committee:

Leonard Klein, O.D.
3932 Dixie Highway
Louisville 40216

Rolland H. Myers, O.D.
103½ Caroline Avenue
Pikesville 41501

Ramona P. Clifton, O.D.
311 North 3 Street
Bardstown 40004

(8) Technical Advisory Committee on Podiatry Services:

Jess D. Songer, D.P.M.
95 Main Street
Paintsville 41240
Chairman

R. Patrick Stivers, D.P.M.
565 Professional Towers
Louisville 40207

Shelby P. Powell, D.P.M.
1301 South Virginia Street
Hopkinsville 42240

Robert A. Burnett, D.P.M.
402 Medical Arts Building
Paducah 42001

Donald L. Holtzclaw, D.P.M.
Hinkle Building
Richmond 40475

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Robert G. Cox
Executive Director
Kentucky Medical Association
3532 Ephraim McDowell Drive
Louisville 40205
Phone: 502/452-6324

B. Pharmaceutical Association:

Robert J. Lichtefeld
Executive Director
Kentucky Pharmaceutical Association
P.O. Box 715, Highway 127
Frankfort 40601
Phone: 502/227-2303

LOUISIANA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
	Prescribed Drugs	x	x	x	x					
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						x
Laboratory & X-ray Service	x	x	x	x						x
Skilled Nursing Home Services	x	x	x	x						x
Physician Services	x	x	x	x						x
Dental Services										
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug 1/ Recipients Amounts
OAA	72,865	\$ 8,102	65,056	\$16,506
MA				
AB	977	106	947	222
APTD	16,593	1,857	18,384	4,808
AFDC	13,251	462	35,247	4,282
CRA	28	8	79	10
GA	4,935	219	4,351	883
Total	108,649	\$10,754	124,064	\$26,711

1/ Average per month.

LOUISIANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Public assistance programs are administered by the State Division of Family Services directly through its 62 parish (county) family services divisions.

Vendor drug program for all categories.

IV. Provisions Relating to Prescribed Drugs:

A. All legend drugs and specified non-legend drugs (OTC) are reimbursed.

B. Prescribing or Dispensing Limitations:

1. Quantity of Medication: New prescription must be issued for drugs given on a continuing basis, after 5 refills or after 6 months.

Maximum payment quantity for prescriptions shall be either one month's treatment or 100 unit doses.

2. Refills: Permitted as indicated by physician within 6 months and not to exceed 5 refills.
3. Dollar Limits: None.

C. Prescription Charge Formula:

1. The maximum payment for a prescription is wholesale cost plus \$2.10 dispensing fee, effective September 1, 1974.
2. The average price of prescriptions, insulin, and diabetic testing agents for welfare recipients is not to exceed price paid by others.
3. The maximum for a 5cc and 30cc indwelling catheter, and catheterization tray will continue to be \$5, \$5.55 and \$1.88 respectively, effective September 1, 1974.

Note: Maximum payment formula will be evaluated at the end of a 6-month period and at least annually thereafter.

LOUISIANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Human Resources Administration Officials:

Dr. William H. Stewart Commissioner	Health and Human Resources Administration -P.O. Box 44065 Baton Rouge, Louisiana 70804
H. K. Sweeney Deputy Commissioner	" "
Garland L. Bonin Assistant Commissioner for Federal Programs	" "
Roy Westerfield Director	Division of Family Services (same address as above)
Alvis D. Roberts Deputy Director	" "
Max Murphy Assistant Director for Field Operations	" "
William Hightower Special Assistant to Director	" "
Olive H. Randall (Mrs.) Assistant Director Special Services	" "
John N. Gum, J. Administrator of Medical Services	" "
Neal D. Blanchard, M.D. Medical Director	" "
Pharmacist Consultants:	
Walter S. McLean, Jr.	" "
Carolyn Maggio	" "

Pharmacist Consultants (continued):

Charles Favaro	Division of Management
Mamie Losavio	" "

2. Income Maintenance Division Advisory Committees:

A. Medical Advisory Committee:

(To be appointed.)

B. Pharmacy Policy and Advisory Committee:

Fenwick J. Laborde <u>Chairman</u>	- Marksville
Howard Bolton	- Alexandria
Walter Pierron	- Monroe
Larry Hohnson	- Buras
Sal D'Angelo	- New Orleans
Walter S. McLean, Jr. (Staff)	- Baton Rouge

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

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Secretary-Treasurer
Louisiana State Medical Society
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New Orleans 70113
Phone: 504/522-9513

B. Pharmaceutical Association:

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Executive Officer
Louisiana State Pharmaceutical Association
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New Orleans 70117
Phone: 504/949-7545

MAINE

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)				Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related				
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21
Prescribed Drugs	x	x	x	x					x
Inpatient Hospital Care	x	x	x	x					x
Outpatient Hospital Care	x	x	x	x					x
Laboratory & X-ray Service	x	x	x	x					x
Skilled Nursing Home Services	x	x	x	x					x
Physician Services	x	x	x	x					x
Dental Services									
Other Benefits:	Scope commensurate with Title XVIII, includes rental of durable equipment; prostheses; ambulance; mental health clinics; podiatrist.								

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	17,113	\$1,037	18,663	16,651	\$1,996
MA					
AB	312	12	331	200	19
APTD	9,466	626	11,671	9,326	1,157
AFDC	98,090	934	111,761	55,181	1,806
GA		106			
Total	124,981	2,715	142,426	81,358	\$4,978

MAINE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By State Department of Human Services through its 11 district offices.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

1. OTC drugs, except insulin and artificial tears.
2. Combination antibiotics.
3. Symptomatic remedies for common colds and coughs resulting from common colds.
4. All vitamins and vitamin preparations.
5. All amphetamines, straight or in combination, and all obesity control drugs. (Authorization for amphetamines or methylphenidate in documented cases of narcolepsy or hyperkinesia may be obtained upon request.)
6. Injectables when oral medication is available for equally effective treatment.

Prior authorization may be obtained in case of necessary exceptions to the exclusions.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: Every prescription written by the physician must carry specific directions for the patient. None are to be indicated "as directed" only.
2. Quantity of Medication: Not to exceed 90 days' supply - but prescriptions for unusually large quantities of drugs which are not consistent with the dosage directions required for the period covered by the prescription are not acceptable for payment.

Prescribing or Dispensing Limitations (continued):

3. Refills: Up to 2 refills allowed if so ordered by the prescriber, but total supply of the prescription is not to exceed 90 days' supply and refills should be for not less than 30 days' supply, unless prescriber specifically directs otherwise or if the quantity to be dispensed will create difficulty in package size or handling.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Red Book AWP, plus a professional fee of \$2.00, but in no case should the average charge to the State be higher than the average charge made to the general public.

V. Miscellaneous:

No medication is to be dispensed by a physician to a welfare patient with expectation of payment from the State. The privilege to dispense in remote areas may be applied for.

All licensed pharmacies are eligible to participate in this program.

Prescriptions must be billed to the State on a G-46 form provided by the State and submitted no later than 30 days following the end of the month in which the prescription is dispensed. Daily or weekly billing is recommended.

The G-46 form must be signed by the patient or an authorized agent indicating receipt of the prescription and will present proper State authorization to identify their eligibility for coverage under the Drug Program. When signed by an agent it must indicate the name of the patient and the word "by" preceding the agent's name. Initials are not acceptable.

Preferably, prescriptions shall be in writing from the prescribing physician. However, telephone prescriptions from the prescriber may be accepted where not contrary to State and Federal laws and regulations; the pharmacist shall promptly reduce the prescription to writing.

In the interest of economy, the Department of Health and Welfare strongly urges participating practitioners to prescribe drugs in generic terms whenever possible. The

Miscellaneous (continued):

pharmacist is expected to supply such generic preparations at a reasonable cost which does not sacrifice quality. A drug dispensed by a pharmacist on prescription and billed to the Department of Health and Welfare by its non-proprietary name must be equal in pharmacologic and therapeutic qualities to its trade name counterpart.

It is permissible to dispense up to a 6-months' supply of medication. The prescription should be for at least a 30-day supply for chronic illnesses when medically feasible - refillable 5 times.

The State has a contract with PAID Prescriptions to administer the drug program.

MAINE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Welfare Department Officials:

David E. Smith Commissioner	Department of Human Services State House Augusta, Maine 04330
Robert O. Wyllie, Director Director	Bureau of Social Welfare (same address as above)
John Fickett, Manager Medical Assistance Unit	" "
Michael O'Donnell, R.Ph. Drug Program Coordinator Medical Assistance Unit	" "
Medical Consultants:	
George Sullivan, M.D. General Medical	" "
Allen Elkins, M.D. Psychiatric	" "
D. K. McFadden, D.O. Osteopathic	" "
Donald Ellis, O.D. Optometric	" "
Kevin Hill, M.D. Ophthalmologist	" "
J. D. Reeder, D.C. Chiropractic	" "

2. Medical Assistance Advisory Committee:

A. Dewey Richards, M.D.

Chairman

11 Gage Street
Bridgton 04009

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Daniel F. Hanley, M.D.
Executive Director
Maine Medical Association
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Phone: 207/725-6414

B. Pharmaceutical Association:

John Burrill, R.Ph.
Executive Secretary
Maine Pharmaceutical Association
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Portland 04102
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MARYLAND

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
	Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	x	
Dental Services	x	x	x	x	x	x	x	x	x	x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible ^{1/}	Drug Recipients ^{2/}	Amounts
OAA	10,575	\$ 922	11,768	9,231	\$ 944
MA					
AB	442	31	418	316	31
APTD	24,714	2,259	25,397	21,343	2,307
AFDC	233,361	4,348	235,746	160,821	4,602
MN Aged	29,424	3,736	30,641	27,434	3,910
MN Blind	91	10	93	77	11
MN Disabled	7,335	868	8,830	7,506	1,105
MN Children	34,353	417	32,226	20,599	415
GA & Others	62,511	3,031	71,032	42,984	3,106
Total	402,806	\$15,622	416,151	290,311	\$16,431

^{1/} Average per month.

^{2/} DHEW - SRS/NCSS 2082 A(2)

MARYLAND

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Department of Health and Mental Hygiene. The local Department of Social Services determines eligibility of applicants for assistance. Participating vendor pharmacies send claims direct to the State Health Department.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
OTC drugs other than insulin, needles and syringes, family planning products other than condoms.
- B. Formulary: Maryland State Formulary and Maryland Medical Assistance Formulary, 3rd Edition, March 15, 1974 (see under Miscellaneous Remarks).
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: The licensed practitioner is urged to prescribe one of the lower cost brand name products or prescribe the listed drugs by generic name.
 - 2. Quantity of Medication: The prescriber may order up to a 90-day supply of medication on a single prescription.
 - 3. Refills:
 - a. Maximum number of refills authorized on a prescription is two.
 - b. Refills may not be dispensed after 90 days of date of original prescription.
 - c. No refills allowed on antibiotics.
 - 4. Dollar Limits: Prior authorization required from local Health Departments when ingredient cost exceeds \$20.

D. Prescription Charge Formula:

Effective July 1, 1975 the pharmacy is reimbursed whole-sale cost plus \$2 professional fee per prescription for legend drugs. Payment for payable non-legend medication ordered by the physician or dentist on the proper form remains cost plus 50% markup or the pharmacy's usual price, whichever is lower. No allowance for labeling or broken packages.

V. Miscellaneous Remarks:

Maryland State Formulary
and
Maryland Medical Assistance Formulary

Third Edition
Published March 15, 1974

* Anti-Infective Drugs:

6 drugs - 22 dosage forms

Note: Replacement of products allowable for identical salts only.

The products of all suppliers of the antibiotics listed are suitable for use.

* Fecal Softeners (Dioctyl Sodium Sulfosuccinate):

1 drug - 2 dosage forms

Note: There are 5 distributors listed. The dosage forms listed are manufactured by one manufacturer.

Only those drug products listed can be interchanged under the "Drug Product Selection Law".

* Sedatives and Hypnotics

A. Chloral Hydrate

1 dosage form

Note: 5 distributors - 1 manufacturer

*Names of manufacturers and distributors have been omitted.

Sedatives and Hypnotics (continued):

B. Meproamate

2 dosage forms

Note: 8 distributors - 7 manufacturersRemarks:

Following are the conditions under which a pharmacist may dispense a different drug product under the Drug Product Selection Law (quoted from the Formulary):

"Only those products of the firms whose names appear in the Maryland State Formulary are acceptable for use in accordance with the conditions of the Drug Product Selection Law.:

Note, however, in the case of Anti-Infectives, products of all suppliers of the antibiotics listed are suitable for use.

Conditions:

1. Such action is not authorized when the prescriber explicitly states otherwise when transmitting an oral prescription or in the instance of a written prescription, indicates in his own writing or by initialing an appropriate imprinted statement.
2. Such action taken by the pharmacist is authorized only if in each case the pharmacist immediately transmits notice in writing to the prescriber specifying the drug product actually dispensed and includes the name of the manufacturer or distributor.
3. Such action is authorized only for those drug products included in the Maryland State Formulary.
4. In any instance in which the pharmacist dispenses a different drug product from that prescribed, the pharmacist shall pass on the full savings in cost, being the difference between the wholesale price of the two drug products, to the consumer.

For information purposes:

The Formulary (3rd Edition - March 15, 1974) consists of:

9 Drugs

27 Dosage forms

9 Drug manufacturers (excluding Anti-Infectives:
"all suppliers are suitable for use")

18 Drug product distributors (excluding Anti-Infectives)

MARYLAND

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Mental Hygiene Department Officials:

Neil Solomon, M.D., Ph.D. Secretary	Department of Health and Mental Hygiene 301 West Preston Street Baltimore, Maryland 21201
John J. Kent, Jr. Assistant Secretary for Medical Care Programs	" "
James C. Eshelman, Director Medical Assistance Policy Administration	" "
Harry Bass, R.Ph., M.P.H. Chief Division of Professional Care Programs	" "
Sue B. Fine, R.Ph. Staff Specialist Pharmacy Services	" "

2. Medical Assistance Advisory Committee:

Jean Galkin, Dr. P.H. Director, Instructive Visiting Nurses Association 5 East Read Street Baltimore 21202	Robert Fisher, M.D. Eastpoint Medical Center 1012 Old North Point Road Baltimore 21224
(Mrs.) Joan Gershberg, MSW Coordinator Home Health Services The Jewish Family and Childrens' Service 5750 Park Heights Avenue Baltimore 21215	Martin H. Diamond Special Assistant to Executive Vice-Pres. and Director Johns Hopkins Hospital 601 North Broadway Street Baltimore 21205

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3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Faculty:

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Executive Director
Medical & Chirurgical Faculty of Maryland
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B. Pharmaceutical Association:

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MASSACHUSETTS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began September 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
	OAA	AB	APTD	AFDC	Category Related				Other* (SFO)	
					OAA	AB	APTD	AFDC		Children Under 21
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services ^{1/}										x

Other Benefits: Blood; special duty nursing in home; ambulance and other medically necessary transportation.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{2/}	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	58,081	\$		\$
MA ^{3/}	113,152			
AB				
APTD	29,654			
AFDC ^{3/}	310,855			
GA ^{3/}	31,860			
Total	543,602	\$25,804		\$28,776 ^{4/}

^{1/} Under 21 only.

^{2/} Average monthly caseload.

^{3/} Estimated.

^{4/} DHEW SRS/NCSS Report B-5, FY-1975 (Preliminary)

MASSACHUSETTS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Administered by the State Department of Public Welfare through 5 State regional offices. Welfare services are rendered locally through Welfare Service Offices and Community Service Centers with the exception of services to the blind, which are administered by the Commission for the Blind without local offices.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Amphetamines, immunizing biologicals available from DPH, legend vitamins not on Drug List, non-legend drugs not on Drug List. Restrictions on certain therapeutic classes, such as laxatives and antacids. Legend cough and cold medications excluded.
- B. Formulary: No. Drug List and legend drugs not on list with above exceptions.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.
 - 2. Quantity of Medication: Not more than a 6-months' supply may be prescribed.
 - 3. Refills: Prescription may be refilled, as long as total authorization does not exceed a 6-months' or 5-refills supply from time of original prescription.
 - 4. Dollar Limits: None, for drugs.
\$30 for direct billing of medical supplies and durable goods.
- D. Prescription Charge Formula:
 - 1. Legend Drugs: at cost* plus \$2.10 dispensing fee.

* Average Red or Blue Book wholesale price.

Prescription Charge Formula (continued):

2. Compounded prescriptions (extemporaneous)
 - a. Legend and non-legend compounded prescriptions - \$3 fee.
 - b. Suppositories, tablet triturates, capsules - \$4 fee.
 - c. Cough preparations excluded
3. Payment shall be for the lower of the usual and customary charge or AWP cost plus dispensing fee.
4. After 5 authorized refills within a 6-month period the pharmacist must receive authorization, if continued therapy is indicated by physician, to provide long-term (maintenance) medication in a minimum of a 30-day supply or a "reasonable size" stock package. (100's for tab and caps; 16 oz. for liquids; 2 oz., 4 oz., 1 lb. for creams and ointments, etc.) The pharmacist may supply whichever is the lesser quantity (30-day supply or 100's).
5. Non-Legend Drugs: Customary shelf price not to exceed usual and customary charge to the general public, or 50% markup.

V. Miscellaneous Remarks:

For AB drugs, supplier bills State Commission for the Blind directly, which pays vendor pharmacy through intermediary.

Nursing home prescriptions are handled in the same way as other prescriptions - through local pharmacies.

MASSACHUSETTS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Welfare Department:

1. Officials:

Alexander Sharp Commissioner	Department of Public Welfare 600 Washington Street Boston, Massachusetts 02111
(Vacant) Deputy Commissioner	" "
(Interim appointee) Assistant Commissioner Medical Assistance	" "
Jack Guveyan, Director Medical Assistance Program	" "
(Vacant) Assistant Director Medical Assistance Program	" "
(Vacant) Chief, Medical Assistance Program Coordinator	" "
Beth Warren Assistant Commissioner Social Services	" "
Sumner Hoisington Assistant Commissioner Assistance Payments	" "
Loran Bittman Assistant Commissioner Research and Planning	" "
Janice Levy Assistant Commissioner Administration	" "

Officials (continued):

Herbert B. Hechtman, M.D. Medical Director	Department of Public Welfare 600 Washington Street Boston, Massachusetts 02111
Nat Carpenter Director Medicaid Pharmacy Program	" "
David Rosenberg, R.Ph. Staff Pharmacist	" "

2. Advisory Committees:

a. Medical Assistance Advisory Council:

Consists of Commissioner of Public Health, Mental Health, of the Blind, Chairman of Consumers' Council, Commissioner of Rehabilitation Commission, and 14 persons appointed by the Governor. Appointees shall include one representative of each of the following professions and groups: nursing homes, hospitals, social work, industry and organized labor.

b. State Advisory Board:

Consists of 15 members, 5 of whom shall be members of college or university faculties and shall include a public administration specialist, a regional planning specialist, a community organization specialist, a social worker, and an economist.

B. Commission for the Blind Officials:

John F. Mungovan Commissioner	Commission for the Blind 39 Boylston Street Boston, Massachusetts 02116
George T. Curtin, Director Medical Assistance Unit	" "
John A. McGowan, M.D. Medical Consultant	" "
Christine McLaughlin Medical Social Worker	" "

C. Executive Officers of State Medical and Pharmaceutical Societies:

1. Medical Society:

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Phone: 617/536-8812

2. Pharmaceutical Association:

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Executive Secretary
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MICHIGAN

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x	x	x	x	x	x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services										x

Other Benefits: Vision and hearing services for recipients under 21. Drug addiction, alcoholism, psychiatric care; ambulance; family planning and medical supplies.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible ^{2/}	Drug Recipients ^{3/}	Amounts
OAA	49,664	\$ 5,257	44,685	50,196	\$ 6,434
MA	85,663	8,508	125,345	78,489	11,092
AB	1,713	135	1,650	1,339	148
APTD	64,637	6,810	54,911	60,520	8,729
AFDC	702,251	14,240	633,993	505,550	15,868
Total	903,928	\$34,950	860,584	696,094	\$42,271

^{1/} Total recipients who became eligible during 1974.

Average number of eligible recipients during 1974 was 820,000.

^{2/} Average monthly eligibles.

^{3/} Unduplicated count.

MICHIGAN

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Department of Social Services.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

Simple analgesics	Oral antiseptics
Simple laxatives	Dentrifices
Common cold remedies	All Anorectics
Simple first-aid supplies	

B. Formulary: None. There are no restrictions on the physician's or other licensed practitioner's prerogative to prescribe. (Medical necessity must be evident.)

C. Prescription Charge Formula:

Acquisition cost plus professional fee not to exceed \$2.19 or charges in the private sector.

V. Miscellaneous Remarks:

Medicaid drug program emphasis will include utilization review (under the "surveillance" operations).

MICHIGAN

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX -

Officials, Consultants and Committees

1. Social Services Department Officials:

John T. Dempsey, Ph.D. Director	Dept. of Social Services Commerce Center Building Lansing, Michigan 48926
Paul Allen Chief Deputy Director	" "
B. Higgins, Director Bureau of Medical Assistance	" "
Keith Cole, Director Invoice Processing Division Bureau of Medical Assistance	" "
James L. Hall, R.Ph., Chief Technical Services and Support and Deputy Director of Invoice Processing Division Bureau of Medical Assistance	" "
R. Bonhag, D.D.S. Division of Health Services Review Bureau of Health Care Administration	Dept. of Public Health (same address as above)

2. Social Services Department Advisory Committees:

A. State Medical Care Advisory Committee:

Alice Sonnenburg 10600 Puritan Avenue Detroit 48238 <u>Chair person</u>	- Citizens for Better Care
Kevin Seitz 200 Mill Street Lansing 48933	- Michigan Welfare Reform Coalition

State Medical Care Advisory Committee (continued):

Millie Loveless Lansing Model Cities Program 206½ East Michigan Avenue Lansing 48926	- Lansing Model Cities
Evelyn Simms Michigan Welfare Rights Organization 460 Overbrook Drive Muskegon Heights 49444	- Michigan Welfare Rights Organization - AFDC Recipients
Mary Love Clavon Wayne County DSS Client Advisory Council 16515 Delton Detroit 48228	- Wayne County DSS Client Advisory Council - AFDC Recipient
Winifred Fisher, R.N. Washtenaw County Health Department County Building Ann Arbor 48106	- Michigan Nurses Association
Marion C. McCall, Jr., M.D. 8401 Woodward Detroit 48202	- Wolverine State Medical Society
Kirk H. Herrick, D.O. 611 West Belle Avenue St. Charles 48655	- Michigan State Osteopathic Association
Maurice S. Reizen, M.D. Department of Public Health 3500 North Logan Lansing 48906	- State Health Department Director

B. State Pharmaceutical Advisory Committee:

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State Pharmaceutical Advisory Committee (continued):

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MINNESOTA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	Other* (SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA ^{2/}	16,431	\$ 1,551	13,292	11,131	\$ 1,770
MA	34,989	5,288			
AB	728	116	688	471	117
APTD	14,904	1,840	14,387	9,398	1,380
AFDC	182,529	2,850	187,683	100,816	3,038
MN Aged			34,816	29,478	5,414
MN Blind			154	81	10
MN Disabled			11,520	6,417	841
MN Children			41,680	15,601	300
MN	45,978	1,132			
Total	295,559	\$12,777	304,220	173,393	\$12,870

^{1/} There were 161,857 recipients in FY 1974.

^{2/} Includes persons over 65 who were eligible through the AB and AD programs.

MINNESOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Minnesota Department of Public Welfare, Income Maintenance Division, Medical Assistance Program.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Nutritional supplements, salt and sugar substitutes, oral antiseptics, dry skin and chapping aids, non-medicated soaps, medicated rubs, throat lozenges.
- B. Formulary: Legend drug - none.
OTC - in development stage.
- C. Prescribing or Dispensing Limitations:
 - 1. Prescribers are requested to limit quantities to a 30-day supply for acute conditions, and 100-day supply for maintenance medications.
 - 2. Refills are limited to 5 times or 6 months, whichever comes first. Contraceptives may be filled to provide a 12-month supply.
- D. Prescription Charge Formula: Reimbursement is based on the pharmacist's submitted charge or the State Department of Public Welfare's maximum price, whichever is lower.

MINNESOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Vera J. Likins Commissioner	Department of Public Welfare Centennial Office Building St. Paul, Minnesota 55101
James J. Hiniker, Jr. Deputy Commissioner	" "
Merle V. Stone Assistant Commissioner Bureau of Support Services	" "
Robert C. Baird Assistant Commissioner Bureau of Income Maintenance	" "
Dr. Roger Johnston, Director Medical Assistance Division	690 North Robert Street St. Paul, Minnesota 55117
John T. Bush, R.Ph. Pharmacist Consultant	" "

2. Welfare Department Advisory Committees:

A. Title XIX Advisory Committee:

Sherman Child, M.D. 2645 - 1st Avenue South Minneapolis 55408	Thomas Olson, Commissioner Hennepin Co. Welfare Board 400 South 5 Street Minneapolis 55409
Ellen Z. Fifer Assistant Commissioner Department of Health 717 Delaware Street S.E. Minneapolis 55440	John M. Barker 6409 Willow Woods Road Minneapolis 55436
	Gary Appel, Ph.D. 24 East Rustic Lodge Minneapolis 55409

Title XIX Advisory Committee (continued):

James Glaser
Minnesota Recipients Alliance
116 East 32 Street
Minneapolis 55408

Kenneth Wenzel
St. Paul Jaycees
2727 Marion
St. Paul 55113

Ralph Bearman
Senior Citizens Center, Inc.
3819 Abbott Avenue South
Minneapolis 55410

Mrs. Thomas Piggott
Crow Wing County
Welfare Board
721 S.W. 4 Street
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David Rowe
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175 Aurora Avenue
St. Paul 55103

Steve Rogness
Minnesota Hospital
Association
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Quentin Dexter
5411 Circle Downs
Minneapolis 55416

B. Minnesota State Pharmaceutical Association Welfare
Task Force

Roger Vadheim, R.Ph.
Chairman

- Tyler

William F. Appel, R.Ph.
Norman M. Carlson, R.Ph.

- Minneapolis

- White Bear Lake

Hugh F. Kabat, R.Ph., Ph.D.

- St. Paul

Barry M. Krslitz, R.Ph.

- Minneapolis

3. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Association:

Harold W. Brunn
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Minnesota State Medical Association
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Phone: 612/222-6366

B. Pharmaceutical Association:

Donald A. Dee, R.Ph.
Executive Director
Minnesota State Pharmaceutical Association
2469 University Avenue
St. Paul 55114
Phone: 612/646-4088

MISSISSIPPI

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children	Other*
									Under 21	(SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients ^{1/}	Amounts
OAA	85,164	\$ 9,304	85,145	85,448 ^{2/}	\$11,222
MA					
AB	2,084	155	1,994	1,764	180
APTD	29,265	3,606	28,961	30,066 ^{2/}	4,258
AFDC	195,069	3,320	197,711	169,918	4,017
MN Aged MN Blind MN Disabled MN Children					
Total	311,564	\$16,385	313,811	287,196	\$19,677

^{1/} Average numbers (monthly).

^{2/} Unduplicated count of total annual recipients.

MISSISSIPPI

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Mississippi Medicaid Commission.

IV. Provisions Related to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

1. Reimbursement is limited to drugs listed in the formulary.
2. Exclusions are directed particularly at amphetamines, obesity control drugs, vitamins, and those drugs classified as mild-tranquilizers.

B. Formulary: Restricted formulary using National Drug Code, effective September 1, 1971.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.
2. Quantity of Medication: Prescription or refill quantities should not exceed the amount shown in the "maximum units" column of formulary.
3. Refills: 5 refill prescriptions are allowed when authorized by the prescriber. There are no refill restrictions on insulin.
4. Dollar Limits: None.

D. Prescription Charge Formula:

1. Legend drugs - average wholesale price (Red Book and supplements and Drug Topics) plus \$1.75 fee. Price based on 100 (or size nearest), 16-ounce, 12's (suppositories and single tubes (ointments)). Drugs listed by generic name are limited to a maximum wholesale price as shown in the drug list.

Note:

Effective July 1, 1976: 50¢ copay/prescription.
Exceptions: Family Planning Services Drugs,
Prescribed Drugs, Early and Periodic
Screening, Diagnosis and Treatment.

Prescription Charge Formula (continued):

2. Non-legend drugs, insulin, birth control pills, and injections - average wholesale price plus 50% or the usual and customary retail price, whichever is lower. No professional fee is allowed.
3. Compounded prescriptions for topical use are covered if at least one legend drug (in therapeutic amounts) is included in the ingredients.
4. Compounded oral medications when all ingredients are covered separately under their own drug codes in the formulary.

V. Miscellaneous Remarks:

FY 1975, 241,330 recipients (approximately 76.9% of those eligible) received one or more prescriptions. This was an increase of 8,941 recipients over FY 1974. (Physicians' Services had a 77.1% utilization rate.)

Drug Utilization Data (FY 1975)

<u>Program Category</u>	<u>Number of R</u>	<u>Number of Eligibles</u>	<u>Avg. R per Eligible</u>	<u>Number of Recipients</u>	<u>Avg. R per Recipient</u>
Total	4,050,999	313,811	12.9	241,330	16.8
OAA	2,206,067	85,145	25.9	78,725	28.0
AB	37,413	1,994	18.8	1,567	23.9
APTD	834,304	28,961	28.8	27,674	30.1
AFDC Children	505,196	154,080	3.3	96,717	5.2
AFDC Adults	466,041	42,957	10.8	36,269	12.8
Other	1,978	674	2.9	378	5.2

Expenditure Data for Drugs

<u>Total Amount</u>	<u>% Total Expenditures</u>	<u>Avg. per Eligible</u>	<u>Avg. per Recipient</u>
\$19,676,763	19.0%	\$62.70	\$81.53
Average Prescription Price \$ 4.85			

Source: Sixth Annual Report, Mississippi Medicaid Commission, 1975.

V. Miscellaneous Remarks (continued):

Effective July 1, 1976:

Drugs no longer eligible for reimbursement -

1. Peripheral Vasodilators

Exception: Nicotinic Acid

2. Anti-arthritis

Exceptions: Aspirin, acetaminophen

MISSISSIPPI

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Mississippi Medicaid Commission Officials:

A. Medicaid - Administration:

W. B. Holliday Director	Mississippi Medicaid Commission (P.O. Box 5160) 2906 North State Street Jackson, Miss. 39216
Will Lowery Associate Director	" "
W. Jack Estes Assistant Director Administration	" "
William R. Allen, R.Ph. Deputy Director	" "
Emmett A. Berry, Jr., R.Ph. Pharmacist	" "
James T. Steele, R.Ph. Pharmacist	" "

B. Commission Members (7):

S. E. Kossman, <u>Chairman</u>	- Cleveland
D. W. Williamson	- Meridian
Jesse O. Adcock	- Biloxi
Sen. Wm. G. Burgin, Jr.	- Columbus
Sen. Nap L. Cassibry	- Gulfport
Rep. Milton Case	- Canton
Rep. Charles M. Deaton	- Greenwood

2. Title XIX Technical Advisory Committee:

A. Technical Advisory Committee on Physicians' Services:

Joe S. Covington, M.D. Meridian <u>Chairman</u>	Louis C. Lehmann, M.D. Natchez
---	-----------------------------------

Technical Advisory Committee on Physicians' Services
(continued):

Thomas W. Wesson, M.D.
Tupelo

James C. Bass, M.D.
Laurel

Ralph L. Brock
McComb

B. Technical Advisory Committee on Drugs:

Cecil Allred, R.Ph.
Hazlehurst
Chairman

Josephine Suber (Mrs.)
(Secretary of Assoc.)
University

George Abdo, Jr., R.Ph.
Greenville

Dr. Dewey Garner
University

William E. Farlow, R.Ph.
Jackson

C. Technical Advisory Committee on Hospital Services:

James Townsend, Admr.
East Bolivar Co. Hospital
Cleveland
Chairman

Robert L. Lingle, Admr.
Singing River Hospital
Pascagoula

Thomas O. Logue, Jr., Admr.
Southwest Mississippi
Regional Medical Center
McComb

Robert M. Castle
Administrator
Methodist Hospital
Hattiesburg

Clifford L. Johnson, Admr.
Grenada County Hospital
Grenada

D. Technical Advisory Committee on Nursing Home Services:

Hal G. Fiser
Greenbough Nursing Center
Clarksdale
Chairman

Charles T. Smith
Ellisville

Edgar H. Overstreet
Gracelands Convalescent
Center
Oxford

Edgar W. Santa Cruz, Jr.
Gulf View Haven, Inc.
Bay St. Louis

Michael W. Howard
Queen City Nursing Center

J. C. Smith
Monell Rest Home
Brookhaven

E. Technical Advisory Committee on Dental Services:

Russell Burns, D.D.S.
Brookhaven
Chairman

James Goldman
Marks

James Russell Dumas, D.D.S.
Prentiss

Phillips Weaver, D.D.S.
Laurel

Sam Hall
Granada

F. Technical Advisory Committee on Optometric Services:

William A. Williamson, O.D.
Greenville
Chairman

R. R. Lacey, O.D.
Aberdeen

Carl Von Seutter, O.D.
Magee

James C. Hamilton, O.D.
Jackson

Nell Edgar Niles, O.D.
Kosciusko

James Grace, Sr., O.D.
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3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association

Charles L. Mathews
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Mississippi State Medical Association
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B. Pharmaceutical Association:

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University 38677
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MISSOURI

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 13, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related		Children	Other*		
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x						x
Inpatient Hospital Care	x	x	x	x						x
Outpatient Hospital Care	x	x	x	x						x
Laboratory & X-ray Service	x	x	x	x						x
Skilled Nursing Home Services	x	x	x	x						x
Physician Services	x	x	x	x						x
Dental Services	x	x	x	x						x
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 6,496		\$ 6,850
MA				
AB		273		281
APTD		1,832		2,301
AFDC & AFDC-FC		2,409		2,983
GR & CWS-FC		921		829
Total	486,146	\$11,931	515,464	250,032 \$13,244

MISSOURI

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Public assistance programs administered by the Division of Family Services of the State Department of Social Services through 115 county family services offices.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.): Exclusions governed by Formulary.

B. Formulary: Formulary lists 214 drugs in 653 dosage forms by generic names and trade names (for identification purposes only) and specified maximum prices allowable. The formulary also has a 53-page cross-reference section listing generic and trade names (for identification purposes only).

State allows payment for only the drugs in the formulary.

C. Prescribing or Dispensing Limitations:

1. Terminology: The Formulary allows for payment for brand name drugs or generic, whichever is prescribed or dispensed on specified drugs.

2. Quantity of Medication: Physician encouraged to prescribe 30-day supply but may, at his own discretion, prescribe up to a maximum 90-day supply.

3. Refills: Federal regulations must be observed for all drugs on the formulary which are listed in BNDD Schedules 2, 3, 4, and 5. All other prescriptions refilled should be in accordance with the directions given by the prescribing physician.

D. Prescription Charge Formula:

Formulary base price plus \$1.50 professional fee.
Fee \$1.75 effective July 1, 1976.

V. Miscellaneous Remarks:

All prescriptions must be filled with drugs that meet USP standards. Participating pharmacies sign a participation agreement with the State Department. All dispensing physicians participating in the program are required to keep prescription files the same as pharmacists.

MISSOURI

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services Department Officials:

Lawrence L. Graham Director	Department of Social Services Broadway State Office Bldg. Jefferson City, Mo. 65101
Ewing B. Gourley Director	Division of Family Services
Thomas E. Singleton Deputy Director Medical Services	Medical Services Section
Gerald L. Washburn, R.Ph.	" "
George E. Mallams, R.Ph.	" "
Earl A. Watkins, R.Ph. Pharmaceutical Consultants II	" "
Richard L. Eidson Assistant Drug Claims Payment Supervisor	" "
Everett Harris, D.O.	" "
Michael Wilson, D.O.	" "

2. Medical Advisory Committee to the State Division of Family Services:

Leslie F. Bond, M.D. 5583 Lindell Boulevard St. Louis 63112	Rep. Russell Goward 4015 Fair Avenue St. Louis 63115
Robert E. Eisler Service Employees International Local No. 96 4526 Paseo Kansas City 64110	Herbert R. Domke, M.D. Director Missouri Division of Health Broadway State Office Bldg. Jefferson City 65101
Senator William J. Cason 215 East Franklin Clinton 64735	

Medical Advisory Committee (continued):

Harlan Ferguson
Missouri Pharmaceutical
Association
1105 Vegas Drive
Columbia 65201

Richard Haffner, D.D.S.
Missouri Dental Association
6979 Chippewa
St. Louis 63109

Max A. Heeb, M.D.
Missouri State Medical Assoc.
Sikeston 63801

John Lally
Missouri Association of
Home Health Agencies
4532 Lindell Boulevard
St. Louis 63108

Norman McCann
Missouri Hospital Association
3015 North Ballas Road
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Osage Beach 65065

Claus A. Rohweder, D.O.
Missouri Association of
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and Surgeons
800 West Jefferson
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Rep. John T. Russell
P.O. Box 93
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Jerome T. Y. Shen, M.D.
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Homer Spiers
Missouri Nursing Home
Association
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Independence 64050

Rev. Seanes Boyce
7118 Blue Spruce Drive
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Wm. D. Dellande, O.D.,
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3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Raymond McIntyre
Executive Secretary
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B. Pharmaceutical Association:

Cora D. Cox (Mrs.)
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Executive Officers of State Medical and Pharmaceutical
Societies (continued):

C. Osteopathic Association:

Edward Borman
Executive Director
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Physicians and Surgeons
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MONTANA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services	x	x	x	x	x	x	x	x	x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients ^{2/} Amounts ^{2/}
OAA	4,771	\$ 481		5,660 \$ 752
MA				
AB	155	15		129 16
APTD	3,692	317		4,375 505
AFDC	14,980	309		17,499 462
MN Aged				
MN Blind				
MN Disabled				
MN Children				
GA		256		512 11
Total	23,598	\$1,378 ^{3/}		28,175 \$1,746

^{1/} Recipients.^{2/} DHEW - SRS/NCSS 2082 A(2), B(3) - FY-1975.^{3/} Medically Needy are included in Money Payment recipient categories.

MONTANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Administered by the County Department of Social and Rehabilitation Services in 56 counties under the supervision of the State Department of Social and Rehabilitation Services.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Provided are legend drugs and non-legend drugs in the following classes: insulin, laxatives, antacids. They must be prescribed by a licensed practitioner (physician, osteopath, dentist, or podiatrist).
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
 - 1. Quantity of Medication: None.
 - 2. Refills: As directed by licensed practitioner.
 - 3. Dollar Limits: No limit, effective May 1, 1976. Copayment of 50¢/R by recipient on any prescription over 2/month.
- D. Prescription Charge Formula: Drugs will be paid at the usual retail rate or estimated acquisition cost or maximum allowable cost, plus a dispensing fee - whichever is lower (effective date of Federal Regulations).

V. Miscellaneous Remarks:

Pharmacists are asked to enter NDC numeric code to identify drug.

MONTANA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social and Rehabilitation Services Department Officials:

Theodore Carkulis Director	Department of Social and Rehabilitation Services P.O. Box 1723 Helena, Montana 59601
Jack R. Carlson, Administrator Division of Economic Assistance	" "
William F. Ikard, Chief Bureau of Medical Assistance	" "
Neal Ostby, R.Ph. Pharmacist Consultant	" "
Ron Brown, Chief Fiscal Bureau	" "
E. C. Maronick, M.D. Medical Consultant	" "
R. C. Whitesitt, M.D. Medical Consultant	" "
R. O. Betzner, D.D.S. Dental Consultant	" "

2. Medical Assistance Advisory Council:

Jack R. Carlson, Chairman

Montana Dental Association
Henry B. Lorentz, D.D.S.
501 First Avenue North
Great Falls 59401

Consumer Interests
Margaret Raihl
120 South G Street
Livingston 59047

Montana Nurses Association
(Mrs.) Henrietta Brandon, R.N.
Box 321C
Hamilton 59840

Montana Medical Association
Norman J. Nickman, M.D.
Professional Village
Missoula 59801

Medical Assistance Advisory Council (continued):

Montana Commissioners
Association

Ed Shubat, Commissioner
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Montana Optometric
Association

A. S. Kautz, O.D.
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Montana Pharmaceutical
Association

Ed Doig, R.Ph.
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Montana Hospital Association

Sister Mary Clarice Lousberg
St. James Community Hospital
400 South Clark Street
Butte 59701

Glendive Community Hospital
Nursing Home

Philip M. Auble, Administrator
Glendive 59330

Department of Health and
Environmental Sciences

A. C. Knight, M.D.
Acting Director
Helene 59601

3. Social and Rehabilitation Services Economic Assistance
Division:

Theodore Carkulis
Director

W. F. Ikard, Chief
Medical Assistance Bureau

Jack R. Carlson
Administrator

R. O. Betzner, D.D.S.
Dental Consultant

E. C. Maronick, M.D.
Medical Consultant

Neal Ostby
Pharmacy Consultant

A. T. Rasmussen, O.D.
Optometric Consultant

Jim McCabe
Medical Care Specialist

Jack Dorner
Medical Care Specialist

John Brown
Medical Care Specialist

4. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Association:

G. Brian Zins
Executive Director
Montana Medical
Association
2021 - 11 Avenue
Helene 59601

B. Pharmaceutical Association

Roderic R. Gudgel
Executive Secretary
Montana State
Pharmaceutical Assoc.
P.O. Box 908
Helene 59601
Phone: 406/442-1432

NEBRASKA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
Prescribed Drugs	x	x	x	x	x	x	x	x		x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x		x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x		x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		x	x
Physician Services	x	x	x	x	x	x	x	x		x	x
Dental Services	x	x	x	x	x	x	x	x		x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug <u>1/</u> Recipients	Amounts
OAA	4,566	\$ 564	7,177	6,249	\$ 988
MA					
AB	204	20	241	183	27
APTD	5,640	696	6,783	5,398	925
AFDC	38,591	792	42,744	28,712	853
MN Aged	10,666	1,830	8,344	7,387	1,541
MN Blind	140	21	63	49	10
MN Disabled	3,793	555	2,140	1,472	320
MN AFDC	5,676	50	2,700	1,625	52
Total	69,276	\$4,528	70,192	51,075	\$4,716

1/ Unduplicated annual total.

NEBRASKA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Department of Public Welfare.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.): Experimental drugs; liquors; weight control and appetite depressant drugs, except for use in Narcolepsy or Hyperkineses in children, unless granted prior approval; OTC drugs that have not been prescribed by a licensed practitioner; OTC drugs determined by Medical and Pharmacy Review Team to be not "a real medical need" or considered not effective; medicine chest supplies.

B. Formulary: The "Drug Prescription Policy" implemented August 1, 1968 initiated the use of an "Official Drug Guide" which lends itself to computer controls over drug charges and serves as a reference for identification numbers.

The Official Drug Guide includes both legend drugs and OTC drugs most frequently prescribed.

The identification code number for each drug consists of 6 numeric digits. The identification code number is based on the pharmacology of the drug.

C. Prescribing or Dispensing Limitations:*

1. Terminology: None.

2. Quantity of Medication: Maintenance-type drugs limited to purchases of at least a 30-day supply, unless an exception is specifically allowed. Cardiac glycosides, thyroid, vitamins and Dilantin will be limited to purchases of not less than 100's.

* Medical Services, Department of Public Welfare, State of Nebraska. Guidelines to the policies and procedures issued November 1, 1973.

Quantity of Medication (continued):

The Department of Public Welfare further requires that any other maintenance drug or any drug used in a chronic manner be PRESCRIBED and DISPENSED in a minimum of a one-month supply.

(Note: Prescriptions which are written for quantities larger than a month's supply are not to be reduced to a month's supply. The Nebraska Department of Public Welfare will consider any form of prescription splitting as fraudulent.)

Exceptions to the Quantity Limitations:

- a. When the prescribing physician first introduces a maintenance drug to a patient's course of therapy, the physician is allowed to prescribe as his judgment dictates. Physicians and Pharmacists MUST indicate on the claim form that this is the initial filling of the medication.

Any subsequent dispensing of this maintenance drug must be prescribed and dispensed in at least a month's supply or the required 100 doses.

- b. When the prescribing physician's professional judgment indicates that these quantities of medication would not be in the patient's best medical interest, the physician may prescribe as his judgment directs; but the claim form MUST clearly indicate that an exception to the requirement is being made.
- c. If, in the Pharmacist's professional judgment, an exception to the requirements must be made, the Pharmacist also MUST clearly indicate this on the claim form.
- d. Schedules II, III, and IV drugs are exceptions.
- e. Original shelf packages: The Department of Public Welfare will accept CERTAIN original shelf package sizes of medication.
 - (1) An original shelf package of 16 fluid ounces, or less when not packaged in the pint size will be sufficient for the month's requirement for liquids.

Original shelf packages (continued):

- (2) Original shelf packages of 100 tablets or capsules of ROUTINELY prescribed drugs such as Darvon, Librium, Valium, Mellaril, etc., will NOT be acceptable as sufficient for fulfillment of the one-month supply requirement. The full month's supply must be prescribed and dispensed.
- (3) An original shelf package of 100 tablets or capsules, or less when not available in the 100 size will be sufficient for the month's supply requirement for SELDOM prescribed solid dosage drugs.
- (4) Ready-made ointments, creams, etc., when used in a chronic or maintenance manner, may be dispensed in an original shelf package size provided it is the original size closest to the needed amount of medication.
- (5) The determination of whether a claim violates the regulations or not, would, by necessity, have to be made by the Department of Public Welfare's professional staff. Any claim judged to be in violation or not an exception to the rulings, will not be compensated with the dispensing fee.

Any disagreement with the Department's decision may be arbitrated through the Nebraska Pharmaceutical Association's Welfare Advisory Committee.

3. Refills: As authorized by the prescribing physician.

4. Dollar Limits: None.

D. Prescription Charge Formula:

1. Legend drugs, except birth control tablets, and compounded prescriptions may be priced on a cost plus a dispensing fee basis:

a. Cost:

Cost for all vendors may be based on the smallest quantity price as charged by a Nebraska Drug Wholesaler. The Department of Public Welfare uses the Average Wholesale Price as indicated in the RED or BLUE BOOKS.

Prescription Charge Formula (continued):

b. Retail Pharmacy Dispensing Fee:

The dispensing fee for RETAIL PHARMACIES is a "sliding fee". The "sliding fee" will vary according to the cost of the amount of drug dispensed.

If the amount of drug dispensed costs between:	The dispensing fee would be:
\$0.01 and \$3.49 -----	\$1.75
\$3.50 and \$7.99 -----	\$2.10
\$8.00 and above -----	\$2.45

c. Hospital Pharmacy Dispensing Fee:

The dispensing fee for Hospital Pharmacies is a "fixed" fee of \$0.80 per prescription.

2. Over-The-Counter Drugs (All Vendors):

OTC drugs are to be priced on the basis of the wholesale cost plus a 50% markup. No dispensing fee is allowed for OTC drugs.

Example: The wholesale cost of an item is \$2. The maximum allowable total charge, therefore, is \$3.

3. Birth Control Tablets (All Vendors):

Birth control tablets are to be priced on the basis of the wholesale cost plus a 50% markup. No dispensing fee is allowed for birth control tablets regardless of intended use.

(Note: The Department of Public Welfare will NOT approve payment for more than 3 cycles of birth control tablets.)

4. Payments for Medical Supplies are not to exceed the usual and customary charges in the community.

5. The State of Nebraska is tax exempt. Therefore, no sales tax is to be charged.

V. Miscellaneous Remarks:

The Advisory Committee, Nebraska Pharmaceutical Association, to the State Department of Public Assistance has been re-titled Peer Review Group for Pharmacy.

The committee consists of 10 pharmacists selected by the NPA from the Association's state districts.

Source of information: Mortar and Pestle, official publication of NPA - July 1974.

NEBRASKA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Alan H. Ihms Director	Department of Public Welfare 1526 K Street, 4th Floor Lincoln, Nebraska 68508
Donald F. Hogg, Chief Medical Services Division	" "
Samuel F. Moessner, M.D. Medical Consultant	" "
E. J. Smith, M.D., Director Utilization Review	" "
Tom R. Dolan, R.Ph. Pharmacist Consultant	" "
Gary J. Cheloha, R.Ph. Assistant Pharmacist Consultant	" "

2. Welfare Department Medical Care Advisory Committee:

Major Vendor Groups:

H. C. Stewart, M.D. Pawnee City 68420	Leo P. Bolin, Director Executive Vice-President Nebraska Blue Cross-Blue Shield P.O. Box 3248, Main Post Office Omaha 68103
Helen Becker Health Education Specialist University of Nebraska Extension Service 201 Home Economics Building East Campus Lincoln 68503	Calista Cooper Hughes (Mrs.) Director of Comprehensive Health Planning 231 South 14 Street Lincoln 68509
Emil Beyer Lutheran Old Peoples' Home 520 South 26 Street Omaha 68105	Louis J. Piccolo, R.Ph. 7318 Grover Omaha 68043

Major Vendor Groups (continued):

Terry Kuenning (Mr.) Mid-Nebraska Community Mental Health Center P.O. Box 61 Grand Island 68801	Henry Smith, M.D., M.P.H. Director of Dept. of Health Lincoln Building 10th and O Streets Lincoln 68508
B. T. Christensen, Admr. Franklin Senior Citizens Home Franklin 68939	Henry T. Reimer, Jr., Admr. Mennonite Deaconess Home and Hospital 1110 North 10 Street Beatrice 68310
Bruce Ackerman, O.D. Fairbury 68352	Riley Green Associate Executive Director Immanuel Hospital 36th and Meredith Omaha 68111
Harold M. Nordlund, M.D. York 68467	Paul Klawitter, D.P.M. 4418 Farnam Street Omaha 68131
Ben Patterson, Vice-President Health Insurance Benefits Mutual of Omaha Box 456, Downtown Station Omaha 68101	Gordon G. Pejsar, D.D.S. 5440 South Street Lincoln
John Thomas, M.D. 8601 West Dodge Road Omaha 68114	<u>Consumers:</u> Cherita Richardson (Mrs.) 4602 North 37 Street Omaha 68111
Delanne Simmons, R.N., M.P.H. Chief in Charge of Nursing Service Omaha-Douglas Co. Dept. of Health 1201 South 42nd Omaha 68105	Mary Lou Taylor (Mrs.) 4626 Gladstone Street Lincoln 68504
Gene Lewallen, M.D. Box 2636, Station B Lincoln 68502	Ralph Marshall Tabitha Home 4720 Randolph Street Lincoln 68510
(Mrs.) Patricia Bott, P.T. Bryan Memorial Hospital 4848 Sumner Lincoln 68506	
Don Weber Director of Social Services Boys' Town 68010	

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Kenneth Neff
Executive Secretary
Nebraska Medical Association
1902 First National Bank Building
Lincoln 68508
Phone: 402/432-7585

B. Pharmaceutical Association:

Cora Mae Briggs
Executive Secretary
Nebraska Pharmaceutical Association
1001 Anderson Building
Lincoln 68508
Phone: 402/475-4274



NEVADA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	Other* (SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						

Other Benefits:

Prostheses; home health care; family planning supplies; physical therapy.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{2/}	Amounts	Persons Eligible ^{2/}	Drug Recipients	Amounts
OAA	3,521	\$395	3,962	3,318	\$ 488
MA					
AB	138	15	168	121	15
APTD	1,105	174	1,772	1,335	245
AFDC ^{1/}	14,518	332	15,519	11,901	425
Total	19,282	\$916	21,421	16,675	\$1,173

^{1/} Includes Indian Foster Care, CWS, FC.

^{2/} Monthly average.

NEVADA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Division of Welfare of the Department of Human Resources through its district offices. Provider payments are made through contract with the State Medical Association and individual contracts with pharmacies. Nevada Blue Shield is the fiscal intermediary.

IV. Provisions Relating to Prescription Drugs:

A. General Exclusions (diseases, drug categories, etc.):

1. Specific Exclusions:

- a. All vitamins and minerals; in single or multiple form or any combination thereof with any other drug, including Central Nervous System stimulants and hormones.
- b. All anorexiants, CNS stimulants and combinations thereof classified as anorexiants.
- c. Libido stimulants.
- d. All OTC drugs, or pharmaceutical supplies, not bearing the legend "Federal law prohibits dispensing without a prescription".
- e. "Non-effective" drugs listed by FDA.
- f. All sundries, appliances, and supplies.

2. Exclusion Exceptions:

- a. Insulin shall be reimbursed at usual retail price when on written prescription of physician.
- b. Test tablets (Clinitest) and tapes (Testape) shall be reimbursed at usual retail price when on written prescription of a physician.

Exclusion Exceptions (continued):

- c. Insulin syringes, disposable or permanent, and needles shall be reimbursed at usual retail price when on written prescription of physician.
- d. Prenatal vitamins used only during pregnancy when prescribed by a physician, shall be reimbursed at AWP plus a professional fee for legend items, and at usual retail price for non-legend items.
- e. Vitamin injections for acute vitamin deficiencies given in a physician's office or for recipients in inpatient care facilities shall be reimbursed at AWP plus a professional fee.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

- 1. Terminology: None.
- 2. Quantity of Medication: 30-days' supply.
- 3. Refills: As determined by the prescribing physician, but not to exceed one year.
- 4. Dollar Limit: None.

D. Prescription Charge Formula:

- 1. Reimbursement for prescriptions will be at cost (defined as AWP) plus \$2.75 professional fee for all prescriptions. (See V. Miscellaneous Remarks.)

V. Miscellaneous Remarks:

Direct payment shall be made to all Nevada providers who have signed participating agreements. Out-of-state providers, if any, shall be paid on the same fee schedule as participating physicians and other Nevada providers.

Miscellaneous Remarks (continued):

Prescription Charge Formula for Estimated Acquisition Cost (EAC) concept: (Implemented May 10, 1976)

<u>AWP</u> (latest microphase list)	Cost	\$000.00
<u>LESS</u> 5%	(Minus)	<u>0.00</u>
	Balance	000.00
<u>PLUS</u> Professional Fee		<u>2.75</u>
	Balance	000.00*
<u>LESS</u> Co-pay	(Minus)	<u>0.00</u>
	Amount paid by State	\$000.00**

* The lesser of this amount or usual and customary amount billed to the state.

** Amount reimbursed by state after the state deducts the applicable copay.

- - - - -

Co-pay Schedule (effective May 10, 1976):

\$.50	for prescriptions costing \$10 or less.	
\$1.00	" " " "	\$10.01 through \$25
\$2.00	" " " "	\$25.01 " \$50
\$3.00	" " " "	\$50.01 or more

(Outpatients and vendor drug recipients)

NEVADA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Human Resources Department Officials:

Roger Trounday Director	Department of Human Resources State Capital Complex Carson City, Nevada 89701
George Miller, Administrator State Welfare Division	" "
Minor L. Kelso, Chief Medical Services	" "
Earl Yamashita State Plan Coordinator	" "
Ira E. Gunn, Chief Research and Statistics	" "
James I. Laird, M.D. Medical Consultant Medical Care Section	" "
Steven P. Bradford, Pharm.D. Pharmacist Consultant Medical Care Section	" "

2. Advisory Committees of the Welfare Division:

A. Medical Care Advisory Group:

Robert W. Clark, M.D.	- Chairman, Executive Committee
A. J. Sthultz	- Chairman, Hospital Committee
Robert Alves	- Chairman, Long Term Care Comm.
Richard C. Inskip, M.D.	- Chairman, Physicians Comm.
Harry P. Massoth, D.D.S.	- Chairman, Dental Committee
John Aberastur	- Chairman, Consumer Recipient Committee
George R. Tucker, R.Ph. Fallon	- Chairman, Pharmacy Committee

B. Drug Review Committee:

Ben Timberlake, R.Ph., Chairman
Phil Crowder, R.Ph.
Milo Banovich, R.Ph.
Joe Williams, R.Ph.
Wayne Kilpatrick, R.Ph.

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Richard C. Pugh
Executive Director
Nevada State Medical Association
3660 Baker Lane
Reno 89502
Phone: 702/825-6788

B. Pharmaceutical Association:

Stewart E. Paquette, R.Ph.
Executive Secretary
Nevada State Pharmaceutical Association
1113 South 15 Street
Las Vegas 89104
Phone: 702/384-7943

NEW HAMPSHIRE

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{1/}	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$		6,260 \$ 996
MA				
AB				293 38
APTD				2,340 398
AFDC				21,629 788
MN Aged				289
MN Blind				9
MN Disabled				145
MN Children				72
MN				4,571
Total	49,883	\$2,072		35,093 \$2,735 ^{2/}

^{1/} Approximate number of drug recipients was 28,205 (AFDC - 23,145; Adults - 11,950).

^{2/} Non-money payments of \$383 are included in total.

NEW HAMPSHIRE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Directly by the Division of Welfare, Department of Health and Welfare, through its 11 District Offices. Billing and payment procedures centralized in accounting unit or Office of Commissioner.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):
None.

B. Formulary: None. Most common medications listed in computer drug file. All other drugs are for individual consideration.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity of Medication: As prescribed by physician.

3. Refills: No more than 5 refills during a 6-month period.

4. Dollar Limit: Legend - average wholesale (Red Book) plus \$2.20 professional fee. OTC - usual charge to general public.

V. Miscellaneous Remarks:

The Department of Health and Welfare now administers the processing of drug claims.

There were 572,000 R drug claims in FY 1975. Drug expenditures were 9.6% of total program costs..

Adult recipients of drugs numbered 11,950, totaling \$1,575,000 or \$4.81 per R.

The federal concept of the Medicaid Management Information System has been implemented for pharmaceutical services since November 1, 1973.

NEW HAMPSHIRE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Welfare Department Officials:

Robert Whelan Commissioner	Dept. of Health and Welfare 8 Loudon Road - Concord, New Hampshire 03301
Thomas E. Thompson Acting Director Division of Welfare	" "
Dr. Robert W. Kaschub, M.D. Deputy Director Office of Family Assistance Medical Services Division of Welfare	" "
Maurice E. Goulet, M.S., R.Ph. Chief, Bureau of Pharmacy Services	" "
Clifford A. Zilch, R.Ph. Pharmaceutical Services Specialist	" "

2. Medical Care Advisory Committee:

This committee consists of 22 members representing providers and consumers of health care, as well as the various agencies interested in health care in the state. The Chairman is Dr. Jesse Gault, Dover, New Hampshire, Past President of the New Hampshire Medical Society. The Committee meets monthly and has various subcommittees which will be active in advice and consultation with respect to specific aspects of the program.

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Hamilton S. Putnam
Executive Director
New Hampshire Medical
Society
4 Park Street
Concord 03301
Phone: 603/224-1909

B. Pharmaceutical Association:

Grace E. Hannan (Mrs.)
Executive Secretary
New Hampshire
Pharmaceutical Association
36 Warren Street
Concord 03301
Phone: 603/225-2231

NEW JERSEY

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x						
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by calendar year:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	42,326	\$ 4,617	59,118	47,718	\$ 6,182
MA	1,494	233	186		15
AB	1,142	101	1,250	896	108
APTD	35,573	3,227	47,232	34,632	4,402
AFDC	425,587	11,242	438,253	387,295	13,387
AFWP ^{1/}	37,577	895	39,140		1,041
DYFS	19,442	201	20,380		291
CR ^{2/}	4,978	422	3,577		406
Total	568,119	\$20,938	609,136	470,541	\$25,832

^{1/} Assistance to Families of Working Poor.^{2/} Cuban Refugees.^{3/} DHEW SRS/NCSS 2082 A(2)

NEW JERSEY

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By Division of Medical Assistance and Health Services,
supervising 17 local Medical Assistance Units.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (disease, drug category, etc.): None.
- B. Formulary: Limited generic.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None. No insistence on generic prescribing but preference is asked for the following:
 - a. Drugs listed in the latest edition of the U.S. Pharmacopoeia (U.S.P.), National Formulary (N.F.), New Drugs, and Accepted Dental Therapeutics.
 - b. Oral medication when as effective as injectable preparations.
 - c. Non-proprietary or generic drugs of equal therapeutic effectiveness if available at a lower cost than proprietary or brand name drugs. If a generic drug is prescribed the basis of payment to the pharmacists will be the average price for the generic drug prescribed.
 - 2. Quantity of Medication: The quantity of medication prescribed should provide a sufficient amount of medication necessary for the duration of the illness or an amount sufficient to cover the interval between visits, but may not exceed a 60-day supply.

Exceptions:

- a. Oral contraceptives may be prescribed for up to a 3-month supply.
- b. Vitamins and vitamin-mineral combinations may be dispensed for up to a 100-day supply.

3. Refills: Prescription refills will be limited to 2 times within a 6-month period if so indicated by the prescriber on the original prescription.

Exceptions:

- a. Oral contraceptives originally prescribed for a 3-month supply may be refilled 2 times within a 9-month period.
- b. Vitamins and vitamin-mineral combinations may be refilled 2 times within one year.

4. Dollar Limitations: None.

- D. Prescription Charge Formula: Payment for legend drugs is based on maximum cost plus a dispensing fee.

Maximum cost is defined as:

1. Pharmacies whose Medicaid legend drug volume for the previous calendar year was less than \$25,000 - Average Wholesale Price (AWP).
2. Pharmacies whose volume was between \$25,000 and \$50,000 - AWP minus 3%.
3. Pharmacies whose volume was over \$50,000 - AWP minus 6%.

The dispensing fee for pharmacies with retail permits is \$1.80. In addition, if the pharmacy maintains a 24-hour prescription service, an additional 10¢ may be added, making the dispensing fee \$1.90.

For pharmacies with institutional permits, the dispensing fee is \$1.50 (July 1, 1975).

The Pharmacy Manual further states the following: The maximum charge to the New Jersey Health Services Program for a legend drug may not exceed the lowest of the following:

- a. Cost plus dispensing fee as outlined herein.
- b. Usual and customary charges and/or posted or advertised charges.

Prescription Charge Formula (continued):

- c. Charges made to medical facilities or agencies through contracts or other agreements.

Note: Where such contracts or other agreements with a medical facility or agency exist, this rule shall apply to claims submitted on behalf of Medicaid recipients in said facility or receiving services by said agency.

- d. Other third party prescription plan charges, when contracts or agreements to participate have been entered into subsequent to the adoption of this regulation.

Non-Legend Drugs: The maximum payment for all prescribed non-legend drugs listed in Appendix B of the National Drug Code listings will be the usual retail price charged for the same item to other persons in the community.

When the quantity of medication prescribed exceeds a manufacturer's largest retail package size, the maximum allowable payment will be the usual retail price charged for the manufacturer's largest retail package size.

V. Miscellaneous Remarks:

Hospital Service Plan of New Jersey (Blue Cross) serves as the fiscal intermediary for payment of drug claims and the Prudential Insurance Company is fiscal intermediary for payment of medical supplies under Title XIX.

Recipients are supplied with plastic (Credit Card type) identification cards which are used in an imprinter machine for processing prescription claim forms.

Hypodermic syringes and needles are reimbursed as drug products (1/1/76). Usual and customary price prevails.

NEW JERSEY

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Institutions and Agencies Department Officials:

Ann Klein Commissioner	State Department of Institutions and Agencies P.O. Box 1237 Trenton, New Jersey 08625
---------------------------	--

Gerald J. Reilly Director	Division of Medical Assistance and Health Services 324 East State Street Trenton, New Jersey 08625
------------------------------	---

William H. Metcalf Deputy Director	" "
---------------------------------------	-----

J. Charles Breme, M.D. Medical Director	" "
--	-----

Sanford Luger, R.Ph., Acting Chief Pharmaceutical Services	" "
---	-----

2. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Vincent A. Maressa
Executive Director
Medical Society of New Jersey
P.O. Box 904
315 West State Street
Trenton 08605
Phone: 609/394-3154

B. Pharmaceutical Association:

Alvin N. Geser
Executive Officer
New Jersey Pharmaceutical Association
118 West State Street
Trenton 08608
Phone: 609/394-5596



NEW MEXICO

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began December 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)			
	OAA	AB	APTD	AFDC	Category Related	Children Under 21	Other* (SFO)	
Prescribed Drugs	x	x	x	x				
Inpatient Hospital Care	x	x	x	x				
Outpatient Hospital Care	x	x	x	x				
Laboratory & X-ray Service	x	x	x	x				
Skilled Nursing Home Services	x	x	x	x				
Physician Services	x	x	x	x				
Dental Services	x	x	x	x				

Other Benefits: Private duty nursing; rehabilitation medical services; home health services; orthotic appliances and prostheses; family planning services; transportation; psychiatric and psychological services; optometry; podiatry.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	10,641	\$ 654	8,288	\$ 803
MA				
AB	426	22	257	22
APTD	12,272	972	9,287	1,081
AFDC	86,257	1,118	38,813	1,223
Total	109,596 ^{1/}	\$2,766	56,645 ^{1/}	\$3,129

^{1/} Estimated.

NEW MEXICO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Health and Social Services Department through its 29 welfare offices, each of which serves one or more counties.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

1. Drugs for treatment of tuberculosis are not included.
2. Medications supplied by the New Mexico State Hospital to clients on convalescent leave from hospital are not included.
3. Drugs and immunizations available from any other source are not included.
4. Legend multiple vitamins, tonic preparations and combinations thereof with minerals, hormones, stimulants or other compounds which are available as separate entities for treatment of specific conditions.
5. Hematinics except Ferrous Sulfate, Ferrous Gluconate, Ferrous Fumarate.
6. Amphetamines and combinations of amphetamines with other therapeutic agents; amphetamine-like sympathomimetic compounds used for obesity control including any combination of such compounds with other therapeutic agents.
7. Drugs classified by FDA as "Ineffective" or "Possibly Effective".
8. OTC items are provided only with prior approval, with the following exceptions:

General Exclusions (8) (continued):

- a. Insulin.
 - b. Antacids for active gastric and duodenal ulcers.
 - c. Infant vitamin drops for children up to one year of age.
 - d. Salicylates for treatment of arthritis and mild to moderate pain.
 - e. Ferrous Sulfate, Ferrous Gluconate, Ferrous Fumarate.
- B. Formulary: Open formulary with use of National Drug Code Directory, subject to above-stated limitations.
- C. Prescribing or Dispensing Limitations:
1. Terminology: No restriction.
 2. Quantity of Medication: No restriction.
 3. Refills:
 - a. Payment will be made to a particular pharmacy only three times for the same drug for the same client in any 90-day period.
 - b. Refills must be consistent with dosage schedule prescribed and all existing Federal and State laws.
- D. Prescription Charge Formula:
1. Prescriptions reimbursed at the lesser of the following:
 - a. Cost (as indicated in Coded Drug Manual) x units dispensed plus variable fee, (range \$2 to \$2.43) or
 - b. The usual and customary charge by the pharmacy to the general public.
 2. Medical supplies priced at cost plus 1/2 cost or manufacturer's suggested list - whichever is less.

V. Miscellaneous Remarks:

In FY 1975 - 56,645 (or 5.1% of a population of 1,122,500 (estimated for June 1974) received drug program services.

Utilization rate for pharmaceutical services - 46.83%.

Average R cost - \$5.68.

Cost/eligible person/year - \$25.87.

Cost/recipient/year - \$55.25

Utilization Review is done by the State's Drug Utilization Review Committee which consists of 4 pharmacists and one physician who are providers in the drug program. The committee meets once a month to review selected cases.

NEW MEXICO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Alex Armijo Acting Executive Director	Health and Social Services Department P.O. Box 2348 Santa Fe, New Mexico 87501
Charles Lopez, Director State Welfare Agency	" "
M. Glenn Lockhart, Controller Controller Division	" "
B. B. Patten, Ph.D., Director Medical Assistance Division	" "
Mark Lane, M.D. Medical Consultant	1009 Bradbury Drive, S.E. Albuquerque, New Mexico 87106
F. Richard Atkinson, R.Ph. Medical Assistance Division	P.O. Box 2348 Santa Fe, New Mexico 87501
Dwight Bartlett, R.Ph. Drug Program Administrator Medical Assistance Division	" "

2. Drug Utilization Review Committee:

(Six members - 2 permanent, 4 rotating biannually)

Drug Program Administrator	Medical Assistance Division
Raphael J. DeHoratius, M.D. Physician Consultant	8910 Princess Jeanne, N.E. Albuquerque 87112
Ron Paynter, R.Ph. Committee <u>Chairman</u>	905 West Alameda Santa Fe 87501
Lowell M. Irby, R.Ph.	1807 Ray Artesia 88210

Drug Utilization Review Committee (continued):

Joseph George, R.Ph. 12513 Sierra Grande Ave. N.E.
Albuquerque 87112

Diana Calvert, R.Ph. 9116 Orlando Place N.E.
Albuquerque 87111

3. Medical Care Advisory Committee:

Lynda Vaskov, R.N. (Mrs.) Lula Kirk, R.N., P.N.A.
Director of Nursing Maternal and Child Health
Las Cruces Manor Nurse
2905 East Missouri Department of HEW
Las Cruces 88001 Public Health Service
Federal Office Building

Judith Walden, R.N. and U.S. Courthouse
Hospital-Home Health Care 500 Gold Avenue
Medical Towers Albuquerque 87101
500 Walter, N.E.

Albuquerque 87102

Ronald J. Wilner, D.P.M. Lila A. Embury (Mrs.)
Northern N.M. Podiatry Assoc. PA Executive Director
565 St. Michael's Drive Associated Home Health
Santa Fe 87501 Services, Inc.
960 North Main

Ruth Shurter Sarah Rochester, Director
375 Armenta Los Alamos Visiting Nurse
Santa Fe 87501 Service, Inc.
P.O. Box 692
Los Alamos 87544

J. Lester Rigby, Director (Mrs.) Vesta L. Starkey, AGSW
SRG/COG Area Agency on Aging Chief, Area Social Service
P.O. Box 216 Branch
Socorro 87801

Milton O. Johnson, Chief Albuquerque Area Indian
Area Health Education Branch Health Service
Department of HEW Federal Office Building
Public Health Service and U.S. Courthouse
Federal Office Building 500 Gold Avenue, S.W.
and U.S. Courthouse Room 4005
500 Gold Avenue Albuquerque 87101
Albuquerque 87101

Muriel R. James Henry Hatcher
Executive Director General Manager
Visiting Nursing Service, Inc. Medical Personnel Pool
Suite B
of the Bernalillo County Area 1415 University Boulevard, N.E.
Suite C Albuquerque 87102
1200 University Blvd., N.E.
Albuquerque 87102

Medical Care Advisory Committee (continued):

Roy Soto
New Mexico Family Planning
3207 Matthew, N.E., Suite A
Albuquerque 87101

Ronald L. Paynter, R.Ph.
905 West Alameda
Santa Fe 87501

Diana F. Calvert, R.Ph.
9116 Orlando Place N.E.
Albuquerque 87111

Charles A. Day, R.Ph.
1320 South Solano
Las Cruces 88001

Gerald J. Boyle, Ph.D.
7800 Hendrix Avenue, N.E.
Albuquerque 87110

Dr. W. K. Graham
7810 Menaul Boulevard, N.E.
Albuquerque 87110

Sister Marie Patrice
Nazareth Psychiatric Hospital
501 Richfield Avenue N.E.
Albuquerque 87113

George Johnson, Chairman
Assistant Administrator
St. Joseph Hospital
400 Walter Avenue S.E.
Albuquerque 87102

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Ralph R. Marshall
Executive Director
New Mexico Medical Society
2650 Yale Boulevard, S.E.
Albuquerque 87106
Phone: 505/265-8494

B. Pharmaceutical Association

Jack E. Hilligoss
Executive Director
New Mexico Pharmaceutical Association
4800 Zuni, S.E.
Albuquerque 87108
Phone: 505/265-8729

NEW YORK

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began May 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x
Other Benefits:	Prostheses; home care; transportation; optometrist and podiatrist.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30: 1/
(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$		\$
MA				
AB				
APTD				
AFDC				
Total		\$90,312 ^{2/}		\$91,118

1/ See Miscellaneous Remarks.

2/ Includes \$434 in drugs and supplies for Family Planning - in rest of State only (excludes New York City).

NEW YORK

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

The program has gone through two phases. From May 1 to October 31, 1966 it was operated (as it still is) at the local level by 65 county or city public welfare districts and administered and supervised by the State Department of Social Services.

On October 31, 1966 the Health Department assumed responsibility for the administration and professional supervision (by a local medical director) of the medical care aspects of the Medical Assistance Program. This involves establishing medical care standards in both the institutional and non-institutional parts of the program, development of fee schedules and auditing of quality and availability of care. Social Services remains the single State agency and retains responsibility for establishment of financial eligibility standards, for supervision of the implementation of such standards and for payment of bills for medical service.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

No restrictions except:

1. Household and medicine chest items not related to a specific diagnosis
2. Prescribed vitamins and minerals not prescribed for medical necessity
3. Sickroom supplies costing in excess of \$40 unless given prior approval
4. Amphetamines and other drugs whose sole clinical use is for reduction of weight

B. Formulary: New York State - None.

New York City - Non-restrictive formulary intended for use as an aid to computer pricing of drugs (state approved).

C. Prescribing or Dispensing Limitations:

1. Terminology: None.
2. Quantity of Medication: Drugs and sickroom supplies shall be prescribed in sufficient quantity to cover the intervals between physicians' visits.

New York City REQUIRES PRIOR APPROVAL ON (1) prescriptions of any single item for more than \$30; (2) narcotics (except codeine) in excess of 30 doses; (3) Doriden; amphetamines and amphetamine-like drugs; (4) disposable syringes for those under 65; (5) certain vitamin B's; (6) special foods.

Note: In general, New York City allows medication for an acute illness not to exceed a 10-day supply and for a chronic illness not to exceed a 30-day supply. Certain chronic drugs, however, may be dispensed in 100-unit dose quantities, even if dosage is one a day.

3. Refills: Regulations now provide that refills can not exceed 5 and the life of a prescription can not exceed 6 months.

New York City allows original prescription and up to 2 refills if doctor so designates on original prescription. No refill allowed after 90 days from date of original prescription.

4. Dollar Limits: None.

D. Prescription Charge Formula:

Effective October 1, 1974, except on non-legend (OTC) drugs, where pricing schedule is effective December 1, 1974.

1. Legend drugs: \$2 dispensing fee plus actual acquisition cost in those districts utilizing a state-approved local formulary. (New York City is the only such district at this time.) \$1.80 dispensing fee plus actual acquisition cost for other local districts.
2. Compounded prescriptions: An additional charge of 75¢ is authorized.

Prescription Charge Formula (continued):

3. Sickroom supplies: 50% markup on actual acquisition cost or the price normally charged the general public, whichever is lower.
4. Non-legend drugs: Reimbursed at local prevailing prices charged the general public. No dispensing fee allowed.

Note: Unless specifically prohibited by the prescribing practitioner, the pharmacist may dispense the package size that most closely corresponds to the quantity on the prescriber's order.

Acquisition cost: Acquisition costs are interpreted to be the invoice cost of the drugs. For billing purposes, the cost of the drug will be reimbursed at actual acquisition cost, to include any documented administrative charges wholesalers have imposed in connection with additional processing for controlled substances. Cash discounts are not to be deducted from the invoice price.

V. Miscellaneous Remarks:

Individual cities and counties which administer programs may initiate certain restrictions for their area so long as they do not conflict with state regulations.

The vendor pharmacists bill and are reimbursed by the 58 local social services districts. The county agencies bill and are reimbursed by the State Social Services Department.

State Medical Assistance Program Data:

Of each \$100 spent for Medicaid in New York State

	<u>CY-1973</u>	<u>CY-1974</u>
Inpatient hospital care	\$41.50	\$37.20
Nursing home services	29.40	31.20
Physicians' services	6.50	7.00
Dental services	2.20	1.90
Prescribed drugs	3.90	4.30
Clinic care	10.40	11.00
Other care	6.10	7.40

NEW YORK

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Social Services Department:

1. Officials:

Philip L. Toia Acting Commissioner	Department of Social Services 1450 Western Avenue Albany, New York 12203
(Vacant) Exec. Deputy Commissioner	" "
(Vacant) Deputy Commissioner Div. of Medical Assistance	" "
J. Raymond Diehl, Jr. Associate Commissioner Div. of Medical Assistance	" "
(Vacant) Bureau of Program Development	" "
(Vacant) Medical Consultant	" "
Gerard F. Nelligan, R.Ph. Senior Consultant Pharmacist	" "

2. Social Services Advisory Committees:

a. Medical Advisory Committee:

Gordon E. Brown <u>Chairman</u>	Executive Director State Communities Aid Assoc. 105 East 22 Street New York 10010
(Vacant)	2971 - 8 Avenue, #15-B New York 10039

Medical Advisory Committee (continued):

(Vacant) President
NAACP - Ossining
30 State Street
Ossining 10562

Richard E. Carnival, D.C. 141 East 55 Street
New York 10022

(Vacant) N.Y. State Nursing Home
Association
25 Fanning Street
Staten Island 10314

Seymour C. Frank, D.P.M. Podiatry Society of the
State of New York
199 North Wellwood Avenue
Lindenhurst, L.I. 11590

Morton I. Gold, D.D.S. Dental Society of the
State of New York
1006 Union Street
Schenectady 12308

E. Wayne Harbinger, D.O. N.Y. State Osteopathic Soc.
87 South Lake Avenue
Albany 12203

Robert P. Whalen, M.D. Commissioner
N.Y. State Dept. of Health
Tower Bldg.-Empire State Plaza
Albany 12237

(Vacant) Research Director
New York State AFL-CIO
30 East 29 Street
New York 10016

Dr. Eleanor C. Lambersten Dean, Cornell University -
New York University
School of Nursing
1320 York Avenue
New York 10021

Michael M. Perhach, R.Ph. Pharmaceutical Society of
the State of New York
187 Robinson Street
Binghamton 13904

Medical Advisory Committee (continued):

S. David Pomrinse, M.D. Director, Mt. Sinai Hospital
5th Avenue and 100th Street
New York 10029

(Vacant) N.Y. State Optometric Assoc.
Medical Arts Building
Oneonta 13820

(Vacant) President, Medical Society
of the State of New York
420 Lakeville Road
Lake Success 11040

Stanley Siegelman Director, Physical Therapy
Program
Methodist Hospital
2350 East 29 Street
Brooklyn 11229

Stewart C. Wagoner, M.D. District Chairman
American Academy of
Pediatrics
124 Rosa Road
Schenectady 12308

Dr. M. Zaphiropoulos American Psychiatric Assoc.
One Lincoln Plaza
New York 10023

- b. The Pharmaceutical Society of the State of New York appoints a committee as needed, in accordance with the particular subject to be discussed, to meet with the State Department of Social Services.

B. Public Health Department:

Robert P. Whalen, M.D., M.P.H. Department of Health
Commissioner Tower Bldg.-Empire State Plaza
Albany, New York 12237

Edward D. Coates, M.D. " "
First Deputy Commissioner

James Wharton, M.D. Department of Health
Assistant Commissioner Tower Bldg.-Empire State Plaza
Medical Services Albany, New York 12237

C. NEW YORK CITY:

1. Health Services Administration:

Lowell E. Bellin, M.D.
Acting Administrator

Health Services Administration
City of New York
125 Worth Street
New York, New York 10013

2. Social Services Department:

J. Henry Smith
Commissioner

New York City Department
of Social Services
250 Church Street
New York, New York 10013

Max Waldgier
First Deputy Commissioner

" "

3. Health Department:

Lowell E. Bellin, M.D.
Commissioner

New York City Department
of Health
125 Worth Street
New York, New York 10013

Pasqual Imperato, M.D.
First Deputy Commissioner
of Health

" "

Morton Fisher, D.D.S.
Deputy Commissioner -
Health

" "

John Gentry, M.D.
Executive Medical Director
(Medicaid)

New York City Department
of Health
330 West 34 Street
New York, New York 10001

Harry Habler, R.Ph.
Director of Pharmacy

" "

D. Executive Officers of State Medical and Pharmaceutical Societies:

1. Medical Society:

Henry I. Fineberg, M.D.
Executive Vice President
Medical Society of
State of New York
420 Lakeville Road
Lake Success 11040
Phone: 516/488-6100

2. Pharmaceutical Association:

Salvatore J. Rubino, R.Ph.
Executive Secretary
Pharmaceutical Society
of the State of New York
117 East 69 Street
New York 10021
Phone: 212/879-5100

NORTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1970

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children	Other*
									Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services	x	x	x	x	x	x	x	x	x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by calendar year:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	41,818	\$ 4,419	60,594	\$ 9,153
MA				
AB	4,808	463	4,414	479
APTD	42,613	5,030	49,995	7,174
AFDC	159,711	2,449	214,657	4,022
MN Aged	17,713	4,372	7,387	1,003
MN Blind	325	79	198	18
MN Disabled	5,358	1,754	3,192	401
MN Children	12,634	598	10,295	158
Total	284,980	\$19,164	350,732	\$22,408

NORTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

The county social services division continues to determine eligibility of applicants for assistance. All eligible recipients receive a Medical Services Authorization card each month from the State Office; counties may issue emergency authorization cards to eligible recipients at any time.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):
No payment made for non-legend drugs, except insulin. Payments made for all legend drugs. Non-legend vitamins are excluded.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity of Medication: None.

3. Refills: A physician authorizes the number of refills.

4. Dollar Limits: None.

D. Prescription Charge Formula (effective July 1, 1975):

Red Book cost plus \$2.50 dispensing fee for each different drug dispensed during a month. The pharmacist filling the original prescription will not be reimbursed for refills for the same drug within a calendar month. 50¢ copayment/R (includes refills).

NORTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Department of Human Resources Officials:

Renee F. Hill Director	Division of Social Services Albemarle Building 325 North Salisbury Street Raleigh, North Carolina 27611
James A. Wight Deputy Director	" "
(Vacant) Chief	Medical Services Section (same address as above)
Robert E. Watkins Deputy Chief	" "
George E. Watson, M.D. Medical Consultant	" "
Charles Llewellyn, M.D. Psychiatric Consultant	" "
Samuel Elliott, D.D.S. Dental Consultant	" "
Benny Ridout, R.Ph. Pharmacist Consultant	" "
Lillian J. Todd Nurse Consultant	" "

2. Social Services Division Advisory Committees:

A. Medical Society Committee on Social Service Programs:

James S. Mitchener, M.D. <u>Chairman</u> <u>Box 1599</u> Laurinburg 28352	Ralph V. Kidd, M.D. 1928 Randolph Road Charlotte 28207
--	--

Medical Society Committee on Social Service Programs
(continued):

E. T. Beddingfield, Jr., M.D. Wilson Clinic Wilson 27893	John R. Kernodle, M.D. Kernodle Clinic Burlington 27215
Bruce B. Blackmon, M.D. P.O. Box 8 Buies Creek 27506	Emery L. Rann, M.D. 1001 Beatties Ford Road Charlotte 28204
Thomas W. Kitchen, Jr., M.D. 510 College Street Jacksonville 28540	Russell L. Smith, M.D. 114 East 3 Street Winston-Salem 27101
William T. MacLauchlin, M.D. Box 774 Conover 28614	Campbell W. McMillan, M.D. N. C. Memorial Hospital Chapel Hill 27514
J. Elliott Dixon, M.D. 215 East 2 Street Ayden 28513	Otis B. Michael, M.D. 208 Doctors Building Asheville 28801
Albin W. Johnson, M.D. 1300 St. Mary's Street Raleigh 27605	Leslie M. Morris, M.D. P.O. Box 1495 Gastonia 28052
John T. Gentry, M.D. Univ. of North Carolina School of Public Health Chapel Hill 27514	George W. Paschal, Jr., M.D. 1110 Wake Forest Road Raleigh 27604
	Donald B. Reibel, M.D. P.O. Box 10707 Raleigh 27605

B. Pharmaceutical Association Committee on Public Health
and Welfare:

Kenneth Edwards <u>Chairman</u> Stantonsburg Drug Company Stantonsburg 27883	B. Paul Woodward Woodard's Pharmacy Princeton 27569
Thomas E. Holding, III P.O. Box 548 Wake Forest 27587	W. Grover Creech 105 Longview Drive Smithfield 27577
Larry Lazarus Route 3, Box 143 Sanford 27330	G. Haywood Jones Zebulon Drug Company P.O. Box 338 Zebulon 27597

Pharmaceutical Association Committee (continued):

W. R. Viall, Jr.
Carolina Pharmacy, Inc.
P.O. Box 25
Pinehurst 28374

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

William N. Hilliard
Executive Director
North Carolina Medical Society
222 North Person Street
Raleigh 27611
Phone: 919/833-3836

B. Pharmaceutical Association

William J. Smith
Executive Secretary
North Carolina Pharmaceutical
Association
Box 151
Chapel Hill 27514
Phone: 919/967-2237



NORTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
	Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x		x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x		x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		x	
Physician Services	x	x	x	x	x	x	x	x		x	
Dental Services	x	x	x	x	x	x	x	x		x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons <u>1/</u> Eligible	Amounts	Persons <u>1/</u> Eligible	Drug <u>1/</u> Recipients Amounts
OAA		\$ 484		\$ 532
MA				
AB	5,671	3	5,670	2,411 3
APTD		327		402
AFDC	14,382	294	14,056	2,114 360
MN Aged		509		689
MN Blind		1		2
MN Disabled	3,537	133	4,151	1,864 148
MN AFDC		21		23
Foster Care	758	11	697	77 10
Total	24,348	\$1,783	24,574	6,466 \$2,169

1/ Monthly average.

NORTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By 53 county departments, units of county government, under the supervision of the Social Service Board of North Dakota.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
None.
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.
 - 2. Quantity of Medication: None.
 - 3. Refills: A prescription drug may be refilled up to 5 times or for 6 months after the date of the original prescription, whichever occurs first, and provided that such refills have been authorized by the physician.
 - 4. Dollar Limits: None.
- D. Prescription Charge Formula: Prescriptions are paid based on charges to the general public documented by on-site audits.

V. Miscellaneous Remarks:

Retail pharmacists send billings to the state office for audit and payment.

NORTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Service Board Officials:

T. N. Tangedahl Executive Director	Social Service Board of North Dakota Capitol Building Bismarck, North Dakota 58505
LeRoy Bollinger, Administrator Research and Statistics	" "
Richard Myatt, Director Medical Services	" "
Chuck Gress, R.Ph. Coordinator Pharmacy Services	" "

2. Social Services Department Advisory Committees:

A. Medical Care Advisory Committee:

(Eleven members - interdisciplinary)

William J. Grosz, R.Ph. Wahpeton Drug Company Wahpeton 58075	Neil D. Cummings, M.D. Foss Building Valley City 58072
Henry Bowker Unit Service Director Indian Health Service Fort Yates 58538	Robert G. Monson Central Dakota Nursing Home 5th Avenue & 18th St., N.E. Jamestown 58401
Ben Gullickson Roseglen 58775	Thomas E. Jacobson, M.D. Hettinger Clinic Hettinger 58639
W. A. Van Vleet Lahr and Lahr Insurance 316 North 5 Street Bismarck 58501	Naomi Modrow (Mrs.) 1209 - 5 Avenue Devils Lake 58301
	Jean Hust 829 - 2 Street West, #12-1 West Fargo 58078

(Two vacancies)

- B. Physicians' Advisory Committee: 22 members - M.D.'s.
(Same as North Dakota Medical Association's Socio-Economic Committee)
- C. Nursing Home Administrators' Advisory Committee: 10 members.
- D. Pharmacy: A committee of eight.
- E. Dentistry: A committee of seven.

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Lyle A. Limond
 Executive Secretary
 North Dakota Medical Association
 420 North 4 Street
 (Box 1198)
 Bismarck 58501
 Phone: 701/223-9475

B. Pharmaceutical Association:

~~Al Doerr~~ **John F. Schuld**
 Secretary ~~Treasurer~~
 North Dakota Pharmaceutical Association
~~P.O. Box 1354~~ **Box 148**
~~Bismarck 58501~~ **Dickinson, N.D. 58601**
 Phone: ~~701/258-1535~~

OHIO

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
	Prescribed Drugs	x	x	x	x					
Inpatient Hospital Care	x	x	x	x						
Outpatient Hospital Care	x	x	x	x						
Laboratory & X-ray Service	x	x	x	x						
Skilled Nursing Home Services	x	x	x	x						
Physician Services	x	x	x	x						
Dental Services	x	x	x	x						
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA	43,230	\$11,195	109,529	\$19,856
MA				
AB	2,365	302	612	63
APTD	50,092	7,866	13,169	1,588
AFDC	492,607	10,892	402,839	12,865
Total	588,294	\$30,255	526,149	\$34,372

OHIO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Effective July 1, 1966 administration of the Drug Program was centralized at the State level under the State Department of Public Welfare.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.): For prescription legend and/or OTC drugs not listed in the formulary, pharmacist should obtain authorization before filing claim for payment.

B. Formulary: Yes. 4500 drug products.

To promote economies in the drug program, practitioners are encouraged to prescribe by generic name those drugs which consistently demonstrate therapeutic effectiveness and are produced by pharmaceutical manufacturers with strict quality controls. In filling such generic prescriptions the pharmacist is expected to dispense the least expensive drug available in his stock. The maximum price allowed for such generics will be an amount closely related to items obtained from generic manufacturers usually associated with wholesale drug houses.

A drug code is listed in the Ohio Welfare Drug Formulary for each form of generic drug. Trade names for these 30 drug items are also contained in the formulary.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity of Medication:

a. 34-day supply or 100-dosage units (whichever is greater).

Quantity of Medication (continued):

b. Oral Antibiotics:

Liquids up to 6 oz. or 200 cc
Capsules - 40
Ointment - 4 oz.

3. Refills: Up to 5 refills. After 5 refills or 6 months (whichever is first) a new prescription is necessary.

D. Prescription Charge Formula:

Generic Drugs: AWP plus \$2.

Legend Drugs: AWP plus \$2. (The average wholesale price is based on Red Book, or a suitable reference source agreed upon by the Advisory Committee.) The total billed cost should not exceed the limits.

Non-Legend (OTC) Drugs: AWP plus \$2
AWP plus 50% markup -
or pharmacist's billed charge, whichever is lesser amount. Discounted non-legend OTC drugs may be billed up to 50¢ in addition to the usual and customary charges. However, total billed charge should not exceed AWP plus \$2.

Compounded Drugs: 2 or more liquids - AWP plus \$2.
Ointments (liquids which incorporate solids) - cost of ingredients plus cost of labor plus cost of professional fee (AWP plus \$10 per hour plus \$2).

Reimbursement to other than community pharmacies (hospitals, private health care centers, etc. - private, public, licensed):

Reasonable and customary fee
Invoice cost plus \$2 (whichever is lesser)
OTC - reasonable and customary fee

Invoice cost plus 50%
Invoice cost plus \$2 (whichever is lesser)

Reimbursement to physicians, private, public health care agencies not a licensed pharmacy:

Reasonable/customary fee but can never exceed AWP. Professional fee or percentage markup is not authorized.

Prescription Charge Formula (continued):

Diet Drugs: Drugs for reducing are controlled. They must be authorized. Authorization is limited to children between the age of 3 to 12. Authorizations are limited to 3 months' supply or less. A new prior authorization must be submitted for renewal. Prior authorized drugs must be billed on the medical supply invoice form 2443.

Dispensing Fee (Unit Dose): There is one dispensing fee per month on unit dose.

V. Miscellaneous Remarks:

The Medicaid Management Information Service (MMIS) developed by HEW has been fully implemented.

OHIO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Kwegyir Aggrey Director	Department of Public Welfare 30 East Broad Street Columbus, Ohio 43215
----------------------------	--

Raymond F. McKenna Assistant Director	" "
--	-----

Division of Medical Assistance

Dr. Joseph Hoffer Director	30 East Broad Street Columbus, Ohio 43215
-------------------------------	--

(Vacant) Deputy Director	" "
-----------------------------	-----

Stanley Sells, Chief Bureau of Medical Program Development	" "
--	-----

David M. Stuart, Ph.D. Pharmacist Consultant Bureau of Medical Operations	" "
---	-----

Richard Glecker, R.Ph. Chief of Provider Assistance Division of Data Services	" "
---	-----

2. Welfare Department Medical Assistance Advisory Committee:

(Not organized.)

3. Executive Officers of State Medical and Pharmaceutical Societies

A. Medical Association:

Hart F. Page
Executive Director
Ohio State Medical
Association
600 South High Street
Columbus 43215
Phone: 614/228-6971

B. Pharmaceutical Association:

Cameron M. Close
Executive Director
Ohio State Pharmaceutical
Association
41 South High Street
Columbus 43215
Phone: 614/221-2391

OKLAHOMA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment				Medically Needy (M N)					
	Recipients				Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services ^{1/}	x	x	x	x	x	x	x	x	x	x

Other Benefits: Medically Needy are eligible if within catastrophic illness determination according to Department definition and if otherwise eligible.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. ^{2/} Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients ^{3/} Amounts
OAA				\$
MA				
AB				
APTD				
AFDC				
Children under 21				1,544
Total				1,544 \$14

^{1/} For emergency care only in adults.

^{2/} Vendor Drug Program instituted July 1, 1975.

^{3/} DHEW SRS/NCSS - 2082 B(3) - Dependent Children under 21.

OKLAHOMA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Drug Program to be instituted July 1, 1975 under the Oklahoma Department of Institutions, Social and Rehabilitative Services (DISRS). The drug program is to be administered under regulations adopted by the Oklahoma Public Welfare Commission.

IV. Provisions Relating to Prescribed Drugs: *

Budgetary Limitations:

The state assistance fund to be used is in an amount to be determined to be needed and available up to, but not more than \$3 million during the fiscal year ending June 30, 1976.

Provider Participation:1. Pharmacy or Pharmacist:

Any pharmacy or pharmacist who has current license with the Oklahoma State Board of Pharmacy and is free from any Pharmacy Board restrictions shall be entitled to be a participating provider under this program.

2. Prescribing Practitioners:

Prescribing practitioners, authorized and licensed to practice the healing art as defined and limited by Federal and state laws who choose to provide their own pharmaceuticals, may not be participating providers at the present time.

3. Reimbursement Fee:

Average Wholesale Price (AWP) plus \$2.50. In no event shall charges to the Welfare Department exceed charges made to the general public for the same prescription or item.

* Source of information: The Oklahoma Pharmacist
(June 1975)

Provider Participation (continued):4. Categories of Drug Coverage (limited initially):

- A. Antiinfectives
- B. Antibiotics
- C. Antibacterials
- D. Bacteriostatic agents
- E. Analgesics

- (1) Narcotic
- (2) Nonnarcotic

F. Cardiovascular (Including antihypertensives)

- (1) Antianginals
- (2) Antiarrhythmics
- (3) Digitalis preps
- (4) Hypotensives
- (5) Hypotensives with diuretic combination
- (6) Diuretics
- (7) Vasodilators and combinations
- (8) Anticoagulants
- (9) Coagulants

- G. Antineoplastics
- H. Insulin
- I. Birth control drugs

5. Prescription Limitations:

Three prescriptions per month/recipient

6. Quantities:

34-day supply or 100 dosage units, whichever is greater.

7. Legend, Non-Legend and Generic Drugs:

That only legend drugs in the designated categories and insulin be covered in the program, and that physicians and other prescribers are encouraged to write prescriptions for generic drugs consistent with quality standards, but may write for trade name if they prefer.

Provider Participation (continued):8. Refills:

Refills shall be provided only if authorized by the prescriber or his authorized agent no more than five times within a 6-month period.

9. Claim Forms:

Utilize the National Pharmacy Insurance Council code (NPIC) for all participating pharmacies.

Computerized claims are continuously validated for eligibility to assure coverage of the patient, the prescriber, the pharmacist, the drug, the proper cost of the drug and the limit of 3 prescriptions per month.

OKLAHOMA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees1. Institutions, Social and Rehabilitative Services Department
Officials:

L. E. Rader Director	Department of Institutions, Social and Rehabilitative Services Sequoyah Memorial Office Bldg. (P.O. Box 25352) Oklahoma City, Okla. 73125
James R. Overfelt Administrative Asst., Supervisor Div. of State Homes and Schools	" "
Vera J. Davis (Mrs.) Medical Social Services and Coordinator of Extra Dept. Training Activities	" "
Roy Keen, Supervisor Special Unit on Aging	" "
N. R. Timmons, Supervisor Division of Finance	" "
Bertha M. Levy, M.D., Director Medical Units Division	" "
Paul A. Reed, M.D., Supervisor Medical Evaluation Unit	" "
George F. McDonnold, M.D. Chief Consultant Medical Services and/or Supervisor Onsite Patient Review Unit	" "
J. C. Cobb, R.Ph. Pharmacist Consultant	" "

2. Institutions, Social and Rehabilitative Services Department
Advisory Committee on Medical Care for Public Assistance
Recipients:

Walter E. Brown, M.D.
Chairman
P.O. Box 3718
2020 South Xanthus
Tulsa 74104

L. C. Baxter
Vice-Chairman
Administrator
Okla. Osteopathic Hospital
744 West 9th
Tulsa 74127

Jesse J. Caldwell
Labor Representative
Southwestern Oklahoma
Building Trade Council
922 N.E. 18th
Oklahoma City 73105

R. LeRoy Carpenter, M.D.
Commissioner
Okla. State Dept. of Health
N.E. 10th and Stonewall
Oklahoma City 73117

Lois Chadrick (Mrs.)
General Delivery
Carnegie 73015

Bruce Perry
Hospital Administrator
University of Oklahoma
Health Sciences Center
P.O. Box 26901
Oklahoma City 73190

Clayton Farmer
205 East Quesenbury
Sallisaw 74955

James Henry
Administrator
Baptist Medical Center
5800 N.W. Grand Boulevard
Oklahoma City 73112

Don Hewett, O.D.
5201 South Western
Oklahoma City 73109

Riley A. Hill, M.D.
P.O. Box 19396
Oklahoma City 73119

Rev. Msgr. A. A. Isenbart
Director
Associated Catholic Charities
425 N.W. 7th
Oklahoma City 73102

Howard B. Keith, M.D.
Newman Clinic
Shattuck 73858

Richard Luttrell
Administrator
Norman Municipal Hospital
P.O. Box 1308
Norman 73069

Clifford McEntire, D.P.M.
2412 Geraldine
Oklahoma City 73107

Honorable George A. Miller
State Senator
1021 East 6th
Ada 74820

Cleveland Rodgers
Executive Director
Oklahoma Hospital Association
1145 South Utica Avenue
Tulsa 74114

Eugene F. Ross, D.O.
17 West Chickasaw
Lindsay 73052

W. A. Taylor
Box 18731
Oklahoma City 73118

Advisory Committee on Medical Care (continued):

G. Rainey Williams, M.D.
Department of Surgery
University of Oklahoma
Health Sciences Center
800 N.E. 13th
Oklahoma City 73190

Jearl Smart
P.O. Box 1413
Wewoka 74884

Honorable Wiley Sparkman
State Representative
P.O. Box 426
Grove 74344

Richard D. Stansberry, M.D.
5700 North Portland
Oklahoma City 73112

Robert Sukman, M.D.
3141 N.W. Expressway
Oklahoma City 73112

Frances Waddle, R.N.
Lincoln Plaza
76 Lincoln Level
Oklahoma City 73105

George R. Russell, M.D.
3143 East 58 Place
Tulsa 74105

Otho R. Whiteneck, D.D.S.
401 Broadway Tower
Enid 73701

James A. Young, D.O.
P.O. Box 278
Vici 73859

Bob Barnard, President
Oklahoma State Nursing
Home Association
1701 East 6 Street
Okmulgee 74447

David Browning, Jr., M.D.
1705 East 19 Street
Tulsa 74104

Charles Mattox
104 West Cherokee
Sallisaw 74955

3. Executive Officers of State Medical, Pharmaceutical and
Osteopathic Societies:

A. Medical Association:

Don Blair
Executive Director
Oklahoma State Medical Association
601 N.W. Expressway
Oklahoma City 73118
Phone: 405/842-3361

Executive Officers of State Medical, Pharmaceutical and
Osteopathic Societies (continued):

B. Pharmaceutical Association:

Wallace A. Taylor
Executive Secretary
Oklahoma Pharmaceutical Association
Box 18731
Oklahoma City 73118
Phone: 405/528-3338

C. Osteopathic Association:

Bob E. Jones
Executive Director
Oklahoma Osteopathic Association
Citizens Bank Tower Building
2200 Classen Boulevard
Oklahoma City 73106
Phone: 405/528-7095

OREGON

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)			
	OAA	AB	APTD	AFDC	Category Related	Children Under 21	Other* (SFO)	
Prescribed Drugs	x	x	x	x				
Inpatient Hospital Care	x	x	x	x				
Outpatient Hospital Care	x	x	x	x				
Laboratory & X-ray Service	x	x	x	x				
Skilled Nursing Home Services	x	x	x	x				
Physician Services	x	x	x	x				
Dental Services	x	x	x	x				
Other Benefits: Visual care; transportation; private duty nurse; physical therapy; chiropractor, podiatrist; home health services; glasses; medical supplies/equipment; intermediate care facility services.								

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{1/2/}	Amounts	Persons Eligible ^{1/}	Drug Recipients ^{3/}	Amounts
OAA	12,958	\$1,474	13,905	14,568	\$1,605
MA					
AB	941	71	962	777	77
APTD	11,927	1,162	12,471	11,921	1,236
AFDC	93,698	1,099	102,929	77,270	1,292
Foster Care	4,948	54	4,862		58
GA	6,249	198	6,877		373
Total	130,721	\$4,058	142,006	104,536	\$4,641

^{1/} Average per month.^{2/} CY-1974^{3/} Unduplicated number. (DHEW SRS/NCSS 2082-A(2) FY-1975.)

OREGON

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By 50 branches managed by 8 regional offices in 36 counties of Public Welfare under the supervision of the State Public Welfare Division. All drug funds are centralized at state levels and pharmacists send bills to state office.

IV. Provisions Relating to Prescribed Drugs:

- A. **Formulary:** A formulary of approximately 612 basic line item drugs established for welfare medical care. A drug with multiple strengths is published in multiple line items. Revisions issued as drugs are added or deleted from basic drug list or prices change. Formulary written in generic terminology.
- B. **Non-Formulary:** Prior approval from state reviewing physician must be obtained for exceptional drugs not included in the formulary.
- C. **Prescribing or Dispensing Limitations:**
 1. **Terminology:** Generic prescribing is specifically encouraged for formulary but is not mandatory.
 2. **Quantity of Medication:** The prescription charge schedule applicable to formulary drugs is geared to 5 refills or 6-month supply of the prescribed item, whichever is the lesser, but physicians prescribe quantities needed. Formulary drugs are not prior authorized. Non-formulary authorization is limited to 6-month supply or 5 refills, whichever is the lesser, and requires prior authorization at the state level. One 5-day supply of a non-formulary drug may be prescribed without prior authorization.
 3. **Refills - Formulary and Exceptional Drugs:** Provision of a drug is billed under a single prescription number with appropriate suffix letters to indicate sequence of dispensings.
 4. **Dollar Limits:** None.

Provisions Relating to Prescribed Drugs (continued):

D. Prescription Charge Formula:

Schedule is based on wholesale cost plus 50%, plus 85¢ professional fee. The pharmacist is instructed to use a medication agent which complies with the formulary ceiling prices. Pharmacist to charge lesser of (1) ceiling price quoted in formulary, or (2) usual charge to the general public.

V. Miscellaneous Remarks:

Public Welfare Division supports policy that welfare drugs, to be paid by welfare, should be dispensed by community pharmacies and not handled by state-owned dispensaries.

OREGON

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Division Officials:

J. Nick Peet Administrator	Public Welfare Division 422 Public Service Building Salem, Oregon 97310
James Landis, M.D. Manager Medical Assistance Unit	" "
Leo T. Hegstrom Assistant Administrator Field Operations	" "
William Todd Assistant Administrator Social and Staff Services	" "
Keith Putman Assistant Administrator Assistance Section	" "
Vern Fisher Assistant Administrator Business Services Section	" "

2. Welfare Division Consultants:

A. Physicians (Part-time):

Consultants to State Review Team -

Charles Gray, M.D.	P.O. Box 82 Salem 97308
Walter Fairfax, M.D. (Ophthalmology)	639 Oak Street, S.E. Salem 97301
James Hogue, M.D.	740 Winter Street, S.E. Salem 97301

Physicians (Part-time) (continued):

Charles W. Norris, M.D. 141 Lancaster Drive, N.E.
Salem 97301

John B. Burr, M.D. 873 Medical Center Dr. N.E.
Salem 97301

Consultants to Medical Assistance Section -

Steve Campbell, D.D.S. 412 Lancaster Drive N.E.
Suite A
Salem 97301

William Dettwyler, M.T. 5555 Sunnyview Road, N.E.
Salem

Raymond W. Hart, D.M.D.
(Dental) 1113 Liberty, S.E.
Salem 97302

Sam K. Hughes, O.D. 1128 Center Street, N.E.
Salem 97301

Reid R. Kimball, M.D.
(Psychiatric) 2222 N.W. Lovejoy, #222
Portland 97210

Robert W. Staley, D.D.S. 1075 Hansen Avenue, S.
Salem 97302

B. Pharmacist (Part-time):

George H. Swartsley, R.Ph. 520 Howard Street, S.E.
Salem 97302

3. Welfare Division Advisory Committees:

A. Governor's Advisory Committee on Medical Assistance for
the Underprivileged:

Rhesa L. Penn, M.D. - Portland
Chairman

Charla Chamberlain - The Dalles

Judge Paul W. Jones - Heppner

Daniel Billmeyer, M.D. - Oregon City

Donald D. Parker, Ph.D. - Lake Oswego

John Kaegi - Eugene

Ernie Savage - Salem

James B. Landis, M.D. - Salem

Governor's Advisory Committee (continued):

*Charles Wold, D.D.S. - Salem
*Carol Batson-Gerious - Portland
*Edsel Goldson - Portland

*Awaiting appointment.

B. Drug and Pharmacy Review Committee:

Physicians:

Robert J. Condon, M.D. 419 N.W. 23rd
Portland

Bernard P. Harpole, M.D. 1920 N.W. Johnson
Portland

George C. Kjaer, M.D. 132 East Broadway
Eugene

Pharmacists:

Dareld Brown, R.Ph. 4425 McKenzie Highway
Springfield

Lynn Wolf, R.Ph. 4800 North Lombard
Portland

Howard D. Steinbach, R.P.M. 12020 S.W. Allen Boulevard
Beaverton

Elton McCawley, Ph.D. University of Oregon
Professor of Pharmacology Medical School
3181 S.W. Sam Jackson
Park Road
Portland

C. County Medical Advisors:

Local medical consultants are available in several
branch offices.

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Robert L. Dervedde
Executive Director
Oregon Medical Association
2164 S.W. Park Place
Portland 97205
Phone: 503/226-1555

B. Pharmaceutical Association:

Henry A. Speckman
Executive Secretary
Oregon State Pharmaceutical
Association
795 Winter Street, N.E.
Five Oaks Building
Salem 97301
Phone: 503/585-4887



PENNSYLVANIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)						
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	Other* (SFO)	
Prescribed Drugs	x	x	x	x							
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x		x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x		x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x		x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x		x
Physician Services	x	x	x	x	x	x	x	x	x		x
Dental Services	x	x	x	x							

Other Benefits: Family planning; home health care; remedial eye care; ambulance; clinics; ICF service; hospital home care; durable medical equipment; prosthetics; inpatient psychiatric care; school medical.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 5,733		62,850 \$ 9,546
MA				
AB		1,074		11,060 1,115
APTD		4,999		68,595 8,317
AFDC		12,995		538,195 15,959
GA		5,253		157,995 9,526
Total		\$30,054		838,695 \$44,463

Source: DHEW - SRS/NCSS 2082 A(2), FY-1975.

PENNSYLVANIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Bureau of Medical Assistance, Office of Medical Programs, and indirectly through Department of Public Welfare County Boards of Assistance in 67 counties. As of February 1, 1975, PAID Prescriptions of Pennsylvania was the Prepaid Drug Insurance Contractor.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Pulmonary tuberculosis: lozenges, troches, personal care items, medicine chest supplies, and drugs available through state and local health departments. Medication used for anti-obesity and appetite control (note): amphetamine and amphetamine-like drugs are compensable only for patients with established diagnoses of hyperkinesis in children as well as primary and secondary narcolepsy, due to structural damage to the brain.

Prior approval required for vitamin preparations, liver extracts, and medications costing over \$15 and exceeding a 45-day supply and specified non-drug items.

- B. Formulary: Noncompulsory drug formulary was introduced July, 1966.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.
2. Quantity of Medication: Maximum allowed is a 45-day supply.
3. Refills: Two refills are permitted.
4. Dollar Limits: Prescriptions costing more than \$15 require prior authorization from the county assistance office.

D. Prescription Charge Formula:

Payment for the cost of compensable prescribed medications and OTC items is based on the current average wholesale price (AWP) appearing in the Drug Topics Red Book (bi-monthly and quarterly supplements). If the AWP for a medication or OTC item does not appear in the Red Book, then the medication cost shall be based on the manufacturer's direct price listed in the Red Book or the price listed in a publication supplied by the manufacturer.

1. A community pharmacy is reimbursed the price of the item dispensed as described above plus a dispensing fee of \$1.85 for legend items.
2. A hospital pharmacy is reimbursed the price of the item dispensed as described above plus a dispensing fee of \$1.25 for legend items.
3. For a compound prescription, an additional fee of \$1 is allowed.
4. For an OTC item, all pharmacies are reimbursed the price of the item dispensed as described above plus a 50% markup, or the price charged the general public, whichever is lower.

PENNSYLVANIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Frank S. Beal Secretary	Dept. of Public Welfare Health and Welfare Bldg. Harrisburg, Pa. 17120
Aldo Colautti Executive Deputy Secretary	" "
Thomas L. Hooker Deputy Secretary for Family Assistance	" "
Jeffrey N. Ball Deputy Secretary for Social Services	" "
Robert M. Daly, M.D. Deputy Secretary and Commissioner for Mental Health	" "
Roger A. Cutt, Ph.D. Commissioner for Medical Programs	" "
Stanley Meyers Deputy Secretary for Mental Retardation	" "
Glenn Johnson Director Bureau of Medical Assistance	" "
William G. Shoemaker, Chief Division of Pharmaceutical Services	* Dept. of Public Welfare P.O. Box 2675 Harrisburg, Pa. 17120
Paul D. Burkholder, R.Ph.	" "
Lloyd A. Kreider, R.Ph.	" "

* Office: 25 North 32 Street
Camp Hill, Pa. 17011

2. Title XIX Advisory Committees:

A. Medical Assistance Advisory Council:

Frank S. Beal #333 Health and Welfare Bldg. Harrisburg 17120	- Secretary of Public Welfare
Roger A. Cutt, Ph.D. #532 Health and Welfare Bldg. Harrisburg 17120	- Commissioner Office of Medical Programs
Mohammad Mazaheri, D.D.S. 24 North Lime Street Lancaster 17602	- Pennsylvania Dental Association
Samuel E. Antrim, Jr., Pres. 614 Smith Street Corry 16407	- Hospital Association of Pennsylvania
G. Winfield Yarnall, M.D. 1192 Lowther Road Camp Hill 17011	- Pennsylvania Medical Society
Brooke Branon, R.N. 815 Union Place Pittsburgh 15212	- Pennsylvania Nurses Association
George D. Weaver, O.D. 36 North Beaver Street York 17401	- Pennsylvania Optometric Association
James C. Miller, D.O. 120 Muench Street Harrisburg 17102	- Pennsylvania Osteopathic Association
(Vacant)	- Pennsylvania Pharmaceutical Assoc.
Daniel L. Carroll, D.P.M. 317 Highland Avenue Hanover 17331	- Pennsylvania Podiatry Association
Hon. Charles F. Dougherty 535 Main Capital Bldg. Harrisburg 17120	- The Senate of Pennsylvania

Medical Assistance Advisory Council (continued):

Hon. Patricia Crawford 341 Oakwood Lane Devon 19333	- The House of Representatives
J. Thomas Millington, M.D. Commissioner, Region III #733 Health and Welfare Bldg. Harrisburg 17120	- Department of Health
Joseph O. Strite, M.D. 118 Cumberland Avenue Shippensburg 17257	- Commission on Mental Health/Mental Retardation Pennsylvania Medical Soc. Psychiatric Discipline
Francis L. Drew, M.D. 3551 Terrace Street Pittsburgh 15213	- School of Medicine University of Pittsburgh
Milton Jacobs American Medical Affiliates Benjamin Fox Pavilion Foxcraft Square Jenkintown 19046	- Health Care Facilities Association
Irene Rochelle 451 Century Building Pittsburgh 15222	- Welfare Rights Organization of Allegheny County
Louise Brookins 1231 North Franklin Street Philadelphia 19122	- Welfare Rights Organization for Philadelphia
The Reverend Harvey Kline Brethren Home New Oxford 17350	- Non-Profit Nursing Homes
<u>Ex Officio</u>	
Robert M. Daly, M.D. #308 Health and Welfare Bldg. Harrisburg 17102	- Deputy Secretary for Mental Health
Glenn Johnson #523 Health and Welfare Bldg. Harrisburg 17120	- Director, Bureau of Medical Assistance Dept. of Public Welfare

Medical Assistance Advisory Council - Ex Officio
(continued):

Leonard Bachman, M.D. #802 Health and Welfare Bldg. Harrisburg 17102	- Secretary of Health and The Governor's Health Service Director
--	--

B. Pharmaceutical Advisory Committee:

Sydney Abrams, R.Ph.
66 Brookline Boulevard
Havertown 19083

Steven Loevner, R.Ph.
100 West State Street
Media 19063

Francis T. Capeloni, R.Ph.
106 Church Street
Moscow 18444

Robert Matesic, R.Ph.
Buttler Street
Pittsburgh 15223

Gayle Cockran, R.Ph.
1400 Locust Street
Pittsburgh 15219

R. Bruce Miller, R.Ph.
813 Conodoguinet
Camp Hill 17011

Daniel Hussar, Ph.D.
Pennsylvania College of
Pharmacy and Science
43 and Kingsessing Streets
Philadelphia 19104

Edward Popielarski, R.Ph.
4000 Gypsy Lane
Philadelphia 19144

John Letizia, R.Ph.
Vinco Pharmacy
Vinco 15909

Joseph Shankel, R.Ph.
West Long Ave. and Brady St.
Dubois 15801

Monroe Lipman, R.Ph.
4511 Union Deposit Road
Harrisburg 17111

Anthony P. Sorrentino,
Pharm.D.
51 North 39 Street
Philadelphia 19104

3. Executive Officers of State Medical and Pharmaceutical
Societies:

A. Medical Society:

John F. Rineman
Executive Vice President
Pennsylvania Medical Society
20 Erford Road
Lemoyne 17043
Phone: 717/238-1635

B. Pharmaceutical Association:

Arnon H. Lear
Executive Director
Pennsylvania
Pharmaceutical Association
508 North Third Street
Harrisburg 17101
Phone: 717/234-6151



PUERTO RICO

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began January 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974 ^{1/}		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA		\$			\$
MA					
AB	51	1	156	97	2
APTD	11,799	230	16,728	12,753	235
AFDC	158,292	2,330	201,957	171,435	2,373
MN Aged					
MN Blind	255	4	325	292	4
MN Disabled	18,447	571	26,532	19,957	581
MN Children	710,032	11,094	1,042,628	768,975	11,302
Total	898,876	\$14,230	1,288,326	973,509	\$14,497 ^{2/}

^{1/} CY-1974.

^{2/} Does not include approximately \$7,000 for Puerto Rico O-category and OAA, both ineligible for Federal monies. OAA expenditures are reported to HEW, reflecting a total of \$21,497.

PUERTO RICO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Department of Health through the existing regionalized health care system operated by the Commonwealth and municipal government.

IV. Provisions Relating to Prescribed Drugs:

Prescribed drugs and biologicals are provided to both inpatients and outpatients in municipal hospitals, health centers, regional hospitals, special hospitals, and rehabilitation centers. All drugs and biologicals provided are approved by the medical staff and included in a regional hospital formulary. In some small municipal hospitals and health centers drugs are prescribed by general practitioners without a formulary.

Designated hospital pharmacies are the primary source of all prescription drugs. Retail pharmacies are used only when necessary.

PUERTO RICO

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health Department Officials:

Dr. José A. Alvarez de Choudens Secretary	Department of Health Stop 19 P.O. Box 9342 Santurce, Puerto Rico 00908
--	---

Medical Assistance Program:

Emilia Hoyos Rucabado, M.S. Pharmacist Consultant	"	"
Randolfo Rivera, M.S. Pharmacist Consultant	"	"
José Brigman Díaz, B.S. Pharmacist Consultant	"	"
Luis A. Cruz Cuevas, M.H.A. Coordinator	P.O. Box 10037 Caparra Heights Station Rio Piedras, P.R. 00922	
Héctor Maysonet, B.B.A. Acting Director	"	"

2. Medical Assistance Advisory Committee:

There is an advisory committee which consists of 11 members, appointed by the Governor. These members represent different sectors in the community, as follows:

Hon. Ramón García Santiago	- Secretary Dept. of Social Services
Arq. Joaquín Benítez	- Consumer
Dr. José A. Lomba	- Dentist
Sra. Angela Díaz de Gutiérrez	- Nurse

Medical Assistance Advisory Committee (continued):

Lcda. Adelaida Vicente de Souffront	- Consumer
Sor Isolina Ferré	- Consumer
Ruben Eli Matos	- Hospital Administration
Lcda. María D. García de Pacheco	- Consumer - Consumer
Rubén Malaret Soto	- Consumer
(Two vacancies)	- Appointments in process

3. Executive Officers of Puerto Rico Medical and Pharmaceutical Societies:

A. Medical Association:

Jorge A. Ramirez
Executive Secretary
Puerto Rico Medical Association
P.O. Box 9387
Santurce 00908
Phone: 809/725-6969

B. Pharmaceutical Association:

Lydia A. Rivera (Mrs.)
Executive Secretary
Colegio de Farmaceuticos de Puerto Rico
Box 206, G.P.O.
San Juan 00936
Phone: 809/765-9177

RHODE ISLAND

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children	
									Under 21	
Prescribed Drugs	x	x	x	x	x	x	x	x	x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	x	
Dental Services	x	x	x	x	x	x	x	x	x	

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{1/}	Amounts	Persons Eligible ^{1/}	Drug Recipients Amounts
OAA	6,826	\$ 814	7,074	\$1,041
MA				
AB	188	20	202	22
APTD	7,741	754	8,694	994
AFDC	50,949	1,140	53,641	1,253
MN Aged	15,670	2,127	14,004	2,049
MN Blind	96			
MN Disabled	3,126			
MN Children	6,704			
GA	13,947	417	15,144	469
Total	105,247	\$5,272	108,728	\$5,828

^{1/} For month of December.

RHODE ISLAND

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Directly by the State Department of Social and Rehabilitative Services.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):
OTC and Medicine Chest Items and Injectables:

Prior authorization is required for all injectables (excluding insulin and adrenalin), appetite depressant drugs, central nervous system stimulants, expensive vitamins, hematinics and lipotropic preparations (selling for over \$5 per 100 or pint), expensive preparations.

Prescribed drugs requiring prior authorization may be refilled if requested by the attending physician and approved by the Office of Medical Standards and Review.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity of Medication: One month's supply of drugs.

3. Maintenance Medication: The attending physician may prescribe certain maintenance drugs up to a maximum of 100 tablets, capsules or equivalent, or a 30-days' supply of these drugs - whichever is greater.

4. Refills:

Refills are allowed for specified drugs: anti-hypertensives, diuretics, anti-convulsants, coronary vasodilators, tranquilizers, antidepressants and hormones (inexpensive).

Refills (continued):

Refills are not allowed for specified drugs, e.g. antibiotics, central nervous system stimulants, narcotics (Schedules I, II, III), expensive corticosteroids and appetite depressants.

5. Dollar Limits: None.

D. Prescription Charge Formula:

1. Prescription Drugs Dispensed to Eligible Recipients
Not Residing in Nursing, Convalescent or Rest Homes:

A professional fee for service of \$2.00 will be allowed for all prescriptions in addition to the cost of the drug.

N.B. For those items which are not usually prescription items (OTC items) for which there is a differential between the usual prevailing charge to the private consumer versus the charge for the same drug on the basis of the established professional fee for Medical Assistance, the lesser charge will be allowed in such cases.

2. Prescription Drugs Dispensed to Recipients Residing
in Nursing, Convalescent or Rest Homes:

A special Professional fee for service of \$1.55 will be allowed for these prescriptions in addition to the cost of the drug to the pharmacist.

N.B. For those items which are not usually prescription items (OTC) for which there is a differential between the usual prevailing charge to the private consumer versus the charge for the same drug on the basis of the established Special Professional Fee for Medical Assistance, the lesser charge will be allowed in such cases.

3. The cost of the drug to the pharmacist in this professional fee-for-service method of payment will be based upon the direct price listings in the Red Book.

Prescription Charge Formula (continued)

4. The quantity of the drug dispensed on the original prescription would be determined on the basis of a 30-day supply to the patient. A maximum of 3 refills in addition to the original prescription will be allowed when so indicated by the physician.
5. The attending physician may prescribe certain maintenance drugs up to a maximum of 100 tablets, capsules or equivalent, or a 30-days' supply of these drugs - whichever is greater.

The following classes of drugs are considered as maintenance drugs:

- a. Anti-diabetic preparations
- b. Anticonvulsants
- c. Cardiovascular preparations, namely:
 - (1) Anti-anginal
 - (2) Digitalis and the cardiac glycosides
- d. Diuretics
- e. Hormones, including thyroid preparations
- f. Vitamins, hematinics and lipotropic preparations for which the total charge to the Medical Assistance Program does not exceed \$5 per pint of liquid or 100 tablets or capsules.

V. Miscellaneous Remarks:

The State considers the Medical Advisory Committee on Pharmacy one of the most active and important advisory committees to the Rhode Island Medical Assistance Program. It consists of outstanding members of medicine and pharmacy.

RHODE ISLAND

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social and Rehabilitative Services Department Officials:

James H. Reilly Acting Director	Department of Social and Rehabilitative Services 600 New London Avenue Cranston, Rhode Island 02920
P. Joseph Pesare, Dr. P.H., M.D. Medical Care Program Director	" "
Anthony Barile, M.P.A. Assistant Medical Care Program Director	" "
John A. Pagliarini, R.Ph. Senior Medical Care Specialist	" "
Albert LaMarra, R.Ph. Medical Care Program Pharmacist	" "
Cosmo Franchetti, R.Ph. Senior Pharmacist	" "

2. Social and Rehabilitative Services Department Advisory
Committees:A. Committee on Social Welfare (Rhode Island Medical
Society):Peter L. Mathieu, Jr., M.D., Chairman

Orlando Armada, M.D.	Martin Feldman, M.D.
Andrew S. Blazar, M.D.	Donald Fitzpatrick, M.D.
Robert E. DeForest	Russell Hager, M.D.
John A. Dillon, M.D.	Henry F. Izeman, M.D.
Joseph L. Dowling, M.D.	John A. Melchionna, M.D.
	John S. Montgomery, M.D.

B. Medical Assistance Committees:

(1) Medical Advisory Committee on Pharmacy:

Dr. Heber W. Youngken, Jr., Chairman

Vincent Alianiello	Louis Jeffrey
Nicola Bilotti	Peter Mathieu, M.D.
Walter Carnevale	Joseph Navach
John DeFeao, Ph.D.	Anthony Solomon (Rep)
John DePasquale	Ira Wellins
Joseph Galina, Pharm.D.	Richard Yacino
Russell Hager, M.D.	

(2) Rhode Island Pharmaceutical Association:

Norman A. Campbell, Ph.D., President
Joseph L. Casinelli, Chairman
William Garland, Assistant Chairman

Aldo Albanese	Anthony Vitale
John Albanese	Vincent Volpe
Norman Cabral	Richard Yacino
John Goodwin	

3. Executive Officers of State Medical Pharmaceutical Societies:

A. Medical Society:

Timothy B. Norbeck
Executive Director
Rhode Island Medical Society
106 Francis Street
Providence 02903
Phone: 401/331/3207

B. Pharmaceutical Association:

Senator J. S. Gendron (R.Ph.)
Executive Director
Rhode Island
Pharmaceutical Association
301 Main Street
Pawtucket 02860
Phone: 401/725-4141

SOUTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1968

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x		x
Inpatient Hospital Care	x	x	x	x	x	x	x	x		x
Outpatient Hospital Care	x	x	x	x	x	x	x	x		x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		x
Physician Services	x	x	x	x	x	x	x	x		x
Dental Services	x	x	x	x	x	x	x	x		x
Other Benefits:	Prostheses; home health care; whole blood; x-ray and radium treatment; rental of durable medical equipment; transportation; purchase of durable medical equipment.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts ^{1/}	Persons Eligible	Drug Recipients ^{1/}	Amounts
OAA	72,000	\$1,866	50,397	38,897	\$2,991
MA					
AB	2,646	144	2,374	1,756	85
APTD	38,000	1,261	30,526	22,332	1,708
AFDC	122,000	1,268	140,975	73,469	3,416
All Other	646	270	9,721	1,860	342
Total	235,292	\$4,809	233,993	138,314	\$8,542

^{1/} DHEW, SRS/NCSS 2082 A(2), FY-1975.^{2/} Estimated.

SOUTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the South Carolina State Department of Social Services.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Drugs available through local and state health departments for treatment of tuberculosis, venereal disease, prophylactic treatment for rheumatic fever, immunizations, tuberculin tests and oral contraceptives will not be covered at present.
- B. Formulary: A closed-end formulary is used with drug code, strength, quantity and cost per unit. For drugs not on the formulary, special authorization on individual basis when requested by attending physician with medical justification.

Where a drug is listed by generic name it is followed by a parenthetical listing of brand names acceptable for dispensing in the Program. Only those brands listed will be paid for. There is no prejudice intended against brands not listed; experience in prescribing and dispensing by members of the selection committee, and the cost basis of brand names influenced the choice of brands designated as acceptable. The cost basis for each item listed by generic name is the lowest cost of the competitive brands. Research was conducted by the Drug Evaluation and Selection Committee to assure that all listed brands are therapeutically equivalent and are made available for prescribing and dispensing under strict quality controls. PHYSICIANS ARE ADVISED THAT, AS IS TRUE WITH HOSPITAL FORMULARIES, PRESCRIBING DRUGS IN THE MEDICAID PROGRAM CONSTITUTES PRIOR CONSENT FOR THE DISPENSING OF EITHER OF THE BRANDS LISTED, FOR ANY OF THE ITEMS LISTED GENERICALLY.

C. Prescribing or Dispensing Limitations:

1. Terminology: If a drug is prescribed by brand name and is not included in the formulary the prescriber can be called by the pharmacist with a suggested

Terminology (continued):

change. If he refuses to change to a listed product, the patient is responsible for payment. If the drug product is prescribed by generic terminology, the pharmacist is free to select the product and must note the established name of the product and the manufacturer on the prescription.

2. Quantity of Medication: In acute conditions, physician requested to limit supply to a minimum of 10 days. In chronic conditions and for maintenance drugs (designated on formulary by "m"), one prescription per month for a month's supply, or justification given for drug response evaluation.
 3. Refills: Only 3 authorized refills allowed, at which time a newly accomplished prescription is required.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Cost plus \$1.90 dispensing fee per prescription and sales tax. Fees to extended care facilities and nursing homes shall be \$1 per prescription. Exception to the remunerative schedule as established will be the remuneration for OTC, at wholesale cost plus 50%.

Upon advice of the Title XIX (Medicaid) Advisory Committee and in consideration of HEW Guidelines SRS-MSA-196-1971, MSA-PRG-8, entitled "Methods of Reimbursement to Physicians", quote: "It is recommended that payment for drugs dispensed by physicians be limited to not more than the cost of the drug" you are advised that, effective January 1, 1973, you will be paid only for the cost of drugs dispensed to Medicaid patients and without additional fee. Medications which cannot be self-administered and given by the physician as part of the clinic visit are reimbursable on the 1490-W and 1490-SSA form.

V. Miscellaneous Remarks:

It is required that each recipient choose one physician and one pharmacist for a month. If referral to a second physician is required, explanation must be furnished on physician's claim form.

Miscellaneous Remarks (continued):

Revisions in the formulary will occur periodically with no designated time element. The Drug Evaluation and Selection Committee, composed of members appointed by the State Department of Social Services upon recommendation of the President of the South Carolina Medical Association and the South Carolina Pharmaceutical Association, is responsible for any revisions.

SOUTH CAROLINA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services Department Officials:

Dr. R. Archie Ellis Commissioner	Department of Social Services P.O. Box 1520 - Columbia, South Carolina 29202
Robert D. Floyd Deputy Commissioner Support Services	" "
Horace F. Jackson Deputy Commissioner Bureau of Finance & Management	" "
Blanche G. McCullough Deputy Commissioner Bureau of Public and Medical Assistance	" "
Chief (Vacant) Medical Assistance Division	" "
Roy T. Lloyd, Director Public Assistance Division	" "
John F. Riley, R.Ph. Medical Assistance Division	" "
Herbert Martinsen, Chief Data Processing Division	" "

2. Social Services Department Consultants:

A. Physicians (Part-time):

Robert A. Fredericks, M.D.	2719 Middleburg Drive Columbia 29204
F. H. Chamberlin, M.D.	7718 Exeter Lane Columbia 29206

Physicians (Part-time) (continued):

Ian S. Gale, M.D. 1712 St. Julian Place
Columbia 29204

B. Pharmacists (Part-time):

Horace M. Kaiser, R.Ph. 1447 Hampton Street
Columbia 29201

3. Medical Care Advisory Committee to Title XIX:

S.C. Department of Health
and Environmental Control
E. Kenneth Aycock, M.D., M.P.H.
Commissioner
J. Marion Sims Building
2600 Bull Street
Columbia 29201

S.C. Department of Mental
Health
William S. Hall, M.D.
Commissioner
2414 Bull Street
Columbia 29201

S.C. Department of Mental
Retardation
Richard N. Henderson
Asst. Deputy Commissioner
for Residential Services
P.O. Box 4706
Columbia 29240

S.C. Department of Vocational
Rehabilitation
Dr. Dill D. Beckman
Commissioner
P.O. Box 4945
Columbia 29240

S.C. Human Affairs Commission
Virginia Newman
P.O. Drawer 11528
Columbia 29211

S.C. Commission on Aging
Harry R. Bryan, Director
915 Main Street
Columbia 29201

S.C. Department of Health
and Environmental Control
James E. Padgett, Jr., M.D.,
M.P.H.

Deputy Commissioner
Community Health Services
J. Marion Sims Building
2600 Bull Street
Columbia 29201

S.C. State Senate
Senator John Drummond
The State House
Columbia 29202
or
P.O. Box 748
Greenwood 29646

S.C. State House of
Representatives
Rep. Benjamin J. Gordon, Jr.
c/o The Clerk of the House
of Representatives
P.O. Box 11867
Columbia 29211

or
Box 751
Kingstree 29556

Advisory Committee to Title XIX (continued):

Health and Medical

Education
William H. Knisely, Ph.D.
President
Medical University of S.C.
80 Barre Street
Charleston 29401

Practicing Physician

J. Gavin Appleby, M.D.
202 Gavin Street
St. George 29477

John H. Cathcart, Jr., M.D.
North Limestone Street
Gaffney 29340

Practicing Pharmacist

Robert S. Perry
Riley's Drug Store
Lexington 29072

Practicing Dentist

Dr. Eugene C. Proctor
1603 - 10 Avenue
Conway 29526

Dr. Fred N. Simmons
P.O. Box 5752
Spartanburg 29304

Practicing Optometrist

Dr. Wayne M. Cannon
3519 Medical Drive
Columbia 29203

Hospital Administrator

W. H. Hudson, Admr.
Oconee Memorial Hospital
P.O. Box 857
Seneca 29678

Nursing Facility Administrator

(Mrs.) Ethel L. Hughes, Admr.
Abbeville Nursing Home, Inc.
Abbeville 29620

Civil Rights Organization

Alberta Rowe (Mrs.)
1506 Holmes Street
West Columbia 29169

Health Insurance Field

J. B. Johnson, Jr.
Liberty Life Insurance Co.
2000 Wade Hampton Boulevard
Greenville 29602

Home Health Nurse

Mary Suther (Mrs.)
Greenville Health Department
P.O. Box 2507
Greenville 29602

Consumer

Robert Jackson
Route 1, Box 50
Blair 29015

Mrs. Tolar Lee Gibbs
340 Kershaw Street, N.E.
Aiken 29801

Arizona Harrington (Mrs.)
422 Council Street
Sumter 29150

Myrtle Mancil (Mrs.)
242 Syracuse Street
Darlington 29532

Consumer Representative

R. J. Grimshaw
S.C. Labor Council
P.O. Box 1411
Columbia 29202

Roy C. Harms

Deputy Administrator
S.C. Dept. of Consumer Affairs
P.O. Box 11739
Columbia 29211

Advisory Committee to Title XIX (continued):

Ex Officio Members

S.C. Department of
Social Services
Dr. R. Archie Ellis
Commissioner

Philip G. Grose, Jr.
Chief Deputy Commissioner

Blanche G. McCullough (Mrs.)
Deputy Commissioner
Bureau of Public and
Medical Assistance

Vice-Chairman of the State
Board

Robert A. Frederick, M.D.
Medical Consultant

Horace M. Kaiser
Pharmaceutical Consultant

Chief, Medical Assistance
Division

Staff, Medical Assistance
Division, as required

Office of the Governor
State of South Carolina
Director, Division of
Health and Social
Development

S.C. Senate
Director, Research and
Administration to Finance

Director, Research and
Administration to Standing
Committees Generally

S.C. State House of
Representatives

Director, Research and
Administration to Ways
and Means Committee

Director, Research and
Administration to Medical,
Military, Public and Municipal
Affairs Committee

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Charles Johnson
Executive Director
South Carolina Medical
Association
1508 Washington Street
Suite 201
Columbia 29201
Phone: 803/252-6313

B. Pharmaceutical Association:

Coleman Daniel, Jr.
Executive Director
South Carolina
Pharmaceutical Association
2817 Millwood Avenue, Suite 105
Columbia 29205
Phone: 803/254-1065

SOUTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)				
					Category Related		Children	Other*	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21 (SFO)
Prescribed Drugs	x	x	x	x					
Inpatient Hospital Care	x	x	x	x					
Outpatient Hospital Care	x	x	x	x					
Laboratory & X-ray Service	x	x	x	x					
Skilled Nursing Home Services	x	x	x	x					
Physician Services	x	x	x	x					
Dental Services	x	x	x	x					
Other Benefits:	Protheses; home health care; rental of durable medical equipment; ambulance; optometrist; chiropractor.								

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts ^{1/}	Persons Eligible	Drug 2/ Recipients	Amounts
OAA	6,319		8,386	4,138	\$ 973
MA					
AB	119		119	34	8
APTD	2,326		2,995	1,068	297
AFDC	22,383		24,167	2,488	270
Foster Care			975	112	13
Total	31,147		36,642	7,840	1,561

^{1/} Title XIX drug program implemented July 1, 1974.^{2/} Average monthly utilization.

SOUTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the state Department of Social Services, Department of Social Welfare.

IV. Provisions Relating to Prescribed Drugs:

1. Drug program was implemented July 1, 1974.
2. No formulary. Coverage for all prescription drugs and some OTC items.
3. Reimbursement "usual and customary" prevailing charge.

V. Miscellaneous Remarks:

Program changes were made in June 1975 to maintain expenses for FY 1976 at 1.2 million. Savings were effected by restricting payment in 8 categories of drugs, changing basis of payment to cost-plus-fee basis and asking a 50¢ recipient copayment.

The following restrictions apply to the program in FY 1976:

Payment is not allowed for vitamins, hematinics, cough remedies, decongestants, most tranquilizers, trademarked antibiotics unless prescribed for urinary tract infection, legend pain compounds except propoxyphene (generic) and controlled drugs, all items for external use, OTC items, non-legend drugs and medical supplies.

A professional fee of \$2.25/R is allowed and refills of maintenance drugs are limited to not less than a 30-day supply.

Unit dose providers are limited to one fee per month per drug and may include in their billing total the container costs. AWP is used as basis of cost on all claims.

SOUTH DAKOTA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Welfare Division Officials:

Vern Woodward Director	Department of Social Services Division of Social Welfare Pierre, South Dakota 57501
Ervin Schumacher Program Administrator Medical Services	" "
Jack T. Cowan, M.D. Consultant Medical Services	" "
Willis Hodson, R.Ph. Pharmacist Consultant	" "

2. Social Welfare Division Medical Advisory Committee (MAC):

Bert C. Corwin, O.D. <u>Chairman MAC</u> SD Vision Services Corporation Box 3006, 810 Mountain View Rapid City 57701	Herb Cowhick SD County Commissioners Association Foulk County Commissioners Cresbard 57435
Clayton Mullen Vice-Chairman MAC SD Nursing Home Association Good Samaritan Center Centerville 57014	H. Russell Brown, M.D. SD State Medical Association Brown Clinic 506 - 1st Avenue, S.E. Watertown 57201
Ervin Schumacher Secretary MAC Prog. Admin. II, Med. Services Department of Social Services New State Office Building Pierre 57501	Charles Ray, D.D.S. SD Dental Association Box 446 Rapid City 57701
Ralph Arneson, Attorney SD Bar Association Hayti 57241	Wayne Carr, D.C. SD Chiropractor's Association 127 East 3 Street Miller 57326

Medical Advisory Committee (MAC) (continued):

Wiley Vogt, Pharmacist
SD Pharmaceutical Association
1410 Bridle Drive
Mitchell 57301

Arthur Thomas, Administrator
SD Hospital Association
St. Mary's Hospital
803 Dakota, East
Pierre 57501

Phebejean Mills
Recipient Group
844 Wisconsin, S.W.
Huron 57350

Susie Doren (Mrs.)
Recipient Group
2102 East Park
Pierre 57501

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Robert D. Johnson
Executive Secretary
South Dakota State Medical Association
608 West Avenue, N.
Sioux Falls 57104
Phone: 605/336-1965

B. Pharmaceutical Association:

Harold H. Schuler
Secretary
South Dakota Pharmaceutical Association
222 East Capitol
(Box 518)
Pierre 57501
Phone: 605/224-2338

TENNESSEE

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began October 1, 1969

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy ^{1/} (M N)				Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related OAA	AB	APTD	AFDC	
Prescribed Drugs	x	x	x	x	x	x	x	x	
Inpatient Hospital Care	x	x	x	x	x	x	x	x	
Outpatient Hospital Care	x	x	x	x	x	x	x	x	
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	
Physician Services	x	x	x	x	x	x	x	x	
Dental Services ^{2/}				x				x	

Other Benefits:

Home health care; Christian Science sanatoria.

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible ^{3/}	Amounts	Persons Eligible	Drug Recipients ^{4/}	Amounts
OAA	58,893	\$ 6,145	82,725	71,952	\$ 9,043
MA				582	8
AB	1,594	96	1,737	1,146	121
APTD	33,250	3,366	48,165	42,435	5,326
AFDC	191,672	2,831	200,649	118,112	3,353
Total	285,409	\$12,438	333,276	234,227	\$17,851

^{1/} Effective January 1, 1974.^{2/} Age under 21.^{3/} There were 185,290 unduplicated recipients.^{4/} Unduplicated.

TENNESSEE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Tennessee Department of Public Health.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
OTC drugs (except insulin), anorectic drugs (except for amphetamines and derivatives for only specific indications of narcolepsy and the hyperkinetic child), and non-narcotic analgesic compounds.
- B. Formulary: Most legend drugs and insulin (see V - Miscellaneous Remarks, re Pharmacy Manual).
- C. Prescribing or Dispensing Limitations:
 1. Terminology: None. May prescribe and dispense brand name drugs but encourage usage of generic drugs for potential cost savings.
 2. Quantity of Medication:
 - a. Limit psychotropic drugs (tranquilizers, hypnotics, sedatives).
 - b. Original prescription quantities (10-, 20-, or 30-day limitations).
 3. Refills: Covered only if specifically authorized by the prescribing physician on the original prescription. A maximum of 5 refills on maintenance medications over a period of 180 consecutive days.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Acquisition cost plus professional fee of \$2.10, or usual and customary - whichever is lower.

V. Miscellaneous Remarks:

Pharmacy Manual (Revision May 1972):

Payment for covered legend drugs continues to be on the basis of net acquisition cost - the actual cost of a covered drug (considering quantity discount but not reduced by time or cash discounts) to the pharmacy, except in those instances where up to maximum reimbursement rates have been established (listing appears in the Pharmacy Manual). Insulin and contraceptive drugs are covered at OTC price to general public for a 30-day supply without a professional fee.

Drug Utilization Data:

The drug program claims accounted for 90% of the Medicaid claims processed.

	<u>FY-1974</u>	<u>FY-1975</u>
Prescription claims	2,959,708	3,981,171
Claims/recipient	15.97	17.00

Time required to process claim
(receipt to payment)

12.7 days

Total number of claims processed since beginning of Medicaid program

12,377,296 + 3,981,171 = 16,358,467

DRUG PROGRAM ADMINISTRATIVE COSTS

In January 1972 the drug program implemented changes which limited the use of certain drugs; established lower prescription quantities; and instituted maximum allowable prices for certain drugs.

The average payment per prescription drug claim increased 6.67% over 1974, and monthly benefit payments averaged \$450,981 more in 1975 than in 1974. Benefit payments totaled \$17,850,631, an increase of \$3,471,774 over 1974. The average amount paid per prescription during the year was \$4.48 - 28¢ more than in 1974.

Drug Program Administrative Costs (continued):

Prescription drugs, which represent 33.0% of the benefit cost and 90% of the claims processed, account for 51% of the total Blue Cross/Blue Shield of Tennessee administrative costs under the program.

The administrative cost ratio for handling prescription drug claims was 4.8%. This figure does not reflect refunds that will be made to the State after the end of the fiscal year.

TENNESSEE

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Health Department:

1. Officials:

Eugene W. Fowinkle, M.D., M.P.H. Commissioner	State Department of Public Health Nashville, Tenn. 37219
E. Conrad Shackelford, Jr., M.D. Deputy Commissioner Bureau of Medical Care Services	" "
Frank L. Jones, Jr., Director Division of Medical Assistance - Medicaid	" "
S. S. Shannon Chief, Research and Statistics	" "
Ray C. Hall Assistant Director	" "
James N. Calway Administrator Middle Tennessee Region	" "
Dan H. Johnson Administrator East Tennessee Region	" "
Robert R. Bane Administrator West Tennessee Region	" "
Herbert Bates, R.Ph. Pharmacist Consultant	" "
Mary E. Downing Medical-Social Consultant	" "

Officials (continued):

Charles L. Yoakum Supervisor Medical Claims Investigation	State Department of Public Health Nashville, Tenn. 37219
---	--

H. C. Haynie, M.D. Medical Consultant	" " "
--	-------

2. Medical Advisory Committee for Medicaid:

Dr. Eugene W. Fowinkle Commissioner	- Dept. of Public Health
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Dr. Harold W. Jordan	- Dept. of Mental Health
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Horace Bass, Commissioner	- Dept. of Public Welfare
---------------------------	---------------------------

Benjamin E. Carmichael, Com.	- Department of Education
------------------------------	---------------------------

Judge John S. Stanton Court House, Columbia	- Tennessee County Judges Association
--	--

Dr. Roy Elam, Jr. 2102 West End Ave., Nashville	- Tenn. Dental Association
--	----------------------------

Dr. Luther Beazley 2614 Lebanon Road, Donelson	- Tenn. Pediatric Society
---	---------------------------

Dr. Julian C. Lentz Doctor's Building, Maryville	- Tenn. Medical Association Upper East Tennessee
---	---

Dr. M. F. Langston 103 Palisades	- Signal Mountain
-------------------------------------	-------------------

Dr. Oscar M. McCallum Box 128, Henderson	- West Tennessee
---	------------------

Dr. Tom E. Nesbitt 1921 Hayes Street, Nashville	- Middle Tennessee
--	--------------------

Louis Zumstein Imperial Manor Nursing Home Madison	- Tennessee Nursing Home Association
--	---

Dr. Colin H. Threlkeld, Jr. 2400 Poplar Avenue, Memphis	- Tennessee Osteopath Society
--	----------------------------------

Jim Hampton University Hospital, Knoxville	- Tennessee Hospital Association
---	-------------------------------------

Medical Advisory Committee (continued):

Dr. Sarah K. Archer, Dean School of Nursing Vanderbilt Univ., Nashville	- Tennessee Nurses' Association
Horton A. Jones, Jr. 1403 Buchanan St., Nashville	- Tennessee Pharmaceutical Association
Dr. Morse Kochtitzky, Pres. 2104 West End Avenue	- Tennessee Medical Association
George Chrite, Chairman 314 Fifth Avenue, North Nashville	- Model Cities Citizens Coordinating Committee
Rosie Price (Mrs.) 229 Vaal Street, Memphis	- Welfare Recipient

B. Welfare Department

1. Officials:

Horace Bass Commissioner	State Dept. of Public Welfare State Office Building Nashville, Tennessee 37219
Edith Elmore, Director Public Assistance	" "
Louis Harris Fiscal Officer	" "

2. Consultants (Part-time):

Dr. Aubrey B. Harwell Medical Consultant	108 Louise Avenue Nashville
John Lee, R.Ph. Pharmacist Consultant	3203 Belmont Boulevard Nashville

3. Welfare Department Advisory Committee:

a. Physicians:

(Appointed by Tennessee Medical Association)

Dr. K. M. Kressenberg	215 Cedar Lane, Pulaski
Dr. J. N. Thomasson	1916 Hayes Street, Nashville
Dr. Robert P. McBurney	899 Madison Avenue, Memphis
Dr. J. W. Johnson, Jr.	Interstate Bldg., Chattanooga
Dr. Lamb B. Myhr	Jackson Clinic, Jackson
Dr. Aubrey B. Harwell	108 Louise Avenue, Nashville

Welfare Department Advisory Committee (continued):

b. Pharmacists:

(Department has used Tennessee Pharmaceutical Association in developing standards, policies and procedures.)

Horton A. Jones, Jr.	J. B. McCaleb
J. C. Freels, Jr.	Joe M. Luton
R. C. Hoskins	Dean Pettigrew
Tom P. Smith	Sam Coward, Jr.
Ernest Crouch	Jimmy McDonald
Blevins Rittenberry	John Smith
Charles Warren, Jr.	

C. Executive Officers of State Medical and Pharmaceutical Societies:

1. Medical Association:

J. E. Ballentine
Executive Director
Tennessee Medical Association
112 Louise Avenue
Nashville 37203
Phone: 615/327-1451

2. Pharmaceutical Association:

Tom C. Sharp, Jr.
Executive Secretary
Tennessee Pharmaceutical Association
228 Capitol Boulevard
Nashville 37219
Phone: 615/256-3023

TEXAS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began September 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)				
					Category Related		Children	Other*	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21 (SFO)
Prescribed Drugs	x	x	x	x					
Inpatient Hospital Care	x	x	x	x					
Outpatient Hospital Care	x	x	x	x					
Laboratory & X-ray Service	x	x	x	x					
Skilled Nursing Home Services	x	x	x	x					
Physician Services	x	x	x	x					
Dental Services <u>1/</u>	x	x	x	x					
Other Benefits:	Eye refractions, prosthetic lens; home health services; ambulance; chiropractor; podiatrist; eye glasses; hearing aids.								

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending August 31:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons <u>2/</u> Eligible	Amounts	Persons <u>2/</u> Eligible	Drug Recipients <u>3/4/</u>	Amounts
OAA	224,686	\$22,394	232,636	211,598	\$24,563
MA					
AB	3,847	263	4,186	3,213	294
APTD	39,830	3,333	70,550	58,983	5,700
AFDC	431,175	7,434	392,385	293,111	7,812
Total	699,538	\$33,424	699,757	566,905	\$38,369

1/ Limited to oral surgery.

2/ Average number of eligibles per month.

3/ Average number of recipients was 225,799 per month.

4/ DHEW - SRS/NCSS 2082 A(2) FY-1975. Unduplicated count.

TEXAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Vendor drug program was implemented September 1, 1971.

The Title XIX program is administered by the State Department of Public Welfare through 10 regional offices, which include unit supervisory offices covering county offices in each of the 254 counties.

IV. Provisions Relating to Prescribed Drugs:

Pharmacy services under the vendor drug program include the dispensing of most legend drugs and certain non-legend drugs to eligible recipients. Only pharmaceuticals which meet the FDA requirements, are approved for marketing and are approved by the Texas Department of Public Welfare for use in the vendor drug program, may be supplied.

Certain OTC drugs are covered on a prescription basis except as otherwise provided in the reimbursement formula and vendor payment to hospital, nursing homes and institutions.

- A. General Exclusions (diseases, drug categories, etc.):
Adult vitamins and adult vitamin combinations, amphetamines and obesity control drugs, appliances, durable medical equipment (bedpans, etc. - either rental or purchase), elastic stockings, experimental drugs, fertility agents, first aid supplies, foods, food supplements or additives, immunizing agents, medical supplies, oxygen, supports and suspensories, syringes, needles and trusses.
- B. Formulary: None. However, the Texas Drug Code Index is utilized for product identification and claims processing and contains those drugs which are covered under the program.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.

Prescribing or Dispensing Limitations (continued):

2. Quantity of Medication: Usual prescribing practice of the treating physician, not to exceed 3 prescriptions per month, per eligible recipient, including new and refilled prescriptions.
3. Refills: Five refills, but total amount may not exceed 6 months' supply.

D. Prescription Charge Formula: -

1. For prescription legend medication (except insulin), non-legend drugs and birth control tablets:
 - a. Acquisition cost plus a variable dispensing fee up to a maximum of \$2.36 per prescription (range \$1.94 - \$2.36, determined on furnished data based on a point system of services rendered) or usual and customary total price, whichever is lower. (See V - Miscellaneous Remarks.)
 - b. Dispensing physicians and non-tax supported hospitals with outpatient pharmacies: acquisition cost plus a maximum dispensing fee of \$1.17 or usual and customary price, whichever is lower.

Acquisition Cost: Red Book AWP price on the quantity usually purchased by the pharmacy. This must be verified by audit.

2. Insulin, approved non-legend drugs and birth control tablets on prescription: pharmacists and dispensing physicians will be reimbursed on the basis of usual charges to non-welfare citizens or cost plus 50% of cost, whichever is lower. No dispensing fee will be added to these items.

V. Miscellaneous Remarks:

The dispensing fee, which includes all costs of filling a prescription, was established by cost accounting and service evaluation of the expenses involved in dispensing a prescription. Therefore, fees paid to providers who do not experience all cost and service factors considered in arriving at the fee, may be less than the maximum allowable fee.

Miscellaneous Remarks (continued):

The State assisted an average of about 700,000 eligible recipients (or 5.8% of the State population) under the Title XIX program. During that time, the U.S. Government paid approximately \$318 million. The Federal Medical Assistance percentage was 63.53, until July 1, 1975 when the percentage became 63.59.

TEXAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Raymond W. Vowell Commissioner	Department of Public Welfare John H. Reagan Building Austin, Texas 78701
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Jerome D. Chapman Deputy Commissioner	" "
--	-----

Executive Assistant:

Jack Blanton	" "
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Deputy Commissioners:

Philip A. Gates, M.D. Medical Programs	" "
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Merle E. Springer Financial and Social Programs	" "
--	-----

Wesley Hjernevik Management	" "
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Robert Nakamoto Planning and Management Systems	" "
---	-----

Assistant Commissioners:

D. W. Bond Personnel Administration	" "
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C. L. Friou Fiscal Affairs	" "
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John Townsend Coordination	" "
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Assistant Deputy Commissioner:

Burton F. Raiford	" "
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Welfare Department Officials (continued):

Medical Programs:

Marlin W. Johnston Executive Director	Department of Public Welfare John H. Reagan Building Austin, Texas 78701
--	--

Dennis W. Short, M.D. Program Manager Medical Liaison	" "
---	-----

John Boff, Coordinator Medical Care Advisory Committee	" "
---	-----

Medical Services Division:

Andrew J. Magliolo, M.D. Director	" "
--------------------------------------	-----

Medical Specialties Division:

Clyde Benke Program Manager	" "
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Nursing Home Services Division:

Harold Raines Program Manager	" "
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Pharmacy Services Division:

Roy Wiese, Jr., R.Ph. Program Manager	" "
--	-----

Joseph F. Renfro, R.Ph. Assistant Director	" "
---	-----

W. Blount Barner, R.Ph. Consultant Pharmacist	" "
--	-----

Utilization Control
Division

Ervin E. Baden, M.D. Program Manager	" "
---	-----

Welfare Department Officials (concluded):

Regional Medical Assistance Units:

L. G. Johnson, M.D. Program Director	Medical Assistance Unit 664 2404 West 6 Street Amarillo 29101
Thomas L. Williams, R.Ph. Pharmacist Consultant	800 Broadway, Room 302 Lubbock 79401
Edwin S. Chapman, M.D. Program Director	Medical Assistance Unit 665 603 North St. Mary's Street (P.O. Box 2410) San Antonio 78204
James T. Richards, R.Ph. Pharmacist Consultant	" "
E. W. Greif, M.D. Program Director	Medical Assistance Unit 666 510 South Congress Austin 78704
Frank H. Reese, R.Ph. Pharmacist Consultant	" "
John E. Worthen, M.D. Program Director	Medical Assistance Unit 667 4113 Jacksboro Highway Wichita Falls 76302
Louis Allison, R.Ph. Pharmacist Consultant	" "
Richard D. Thompson, R.Ph. Pharmacist Consultant	25455 Danville Abilene 79605
(Vacant) Program Director	Medical Assistance Unit 668 711 West 7 Street (P.O. Box 17129) Fort Worth 76102
Robert H. Sedwick, R.Ph. Pharmacist Consultant	" "
Luther J. Porier, R.Ph. Pharmacist Consultant	" "

Regional Medical Assistance Units (continued):

John Hardy, M.D. Program Director	Medical Assistance Unit 669 3300 West Mockingbird, #100 Dallas 75235
Hal J. Dewlett, M.D. Program Director	" "
Betty Gould, R.Ph. Pharmacist Consultant	" "
Joe Gaulden, R.Ph. Pharmacist Consultant	" "
(Vacant) Program Director	Medical Assistance Unit 670 228 Hinnant Street (P.O. Box 484) Sulphur Springs 75482
Verdon R. Graves, R.Ph. Pharmacist Consultant	" "
Wayne Gentsch, R.Ph. Pharmacist Consultant	309 Pine Tree Road Longview, 75601
Russell K. Horsman, M.D. Program Director	Medical Assistance Unit 671 550 Fannin, Petroleum Bldg. Beaumont 77701
Howard L. Gentry, R.Ph. Pharmacist Consultant	" "
Edward E. Jenkins, M.D. Program Director	Medical Assistance Unit 672 3004 Yale Street, Bldg. N Houston 77018
Lincoln C. Scheh, R.Ph. Pharmacist Consultant	" "
David B. Connery, M.D. Program Director	Medical Assistance Unit 673 2301 North Big Spring (P.O. Box 2880) Midland 79701
Bobby L. Payne, R.Ph. Pharmacist Consultant	" "

Regional Medical Assistance Units (continued):

G. J. Reyna, M.D.
Program Director
Medical Assistance Unit 674
4410 Dillon Lane, #52
Corpus Christi 78404

Jeff I. Coats, R.Ph.
Pharmacist Consultant
" "

Raul Martinez, R.Ph.
Pharmacist Consultant
" "

2. Medical Care Advisory Committee:

The Committee is composed of physicians, dentists, hospital administrators and representatives of the nursing professional and allied fields.

Texas Dental Association
Alton L. Flynn, Jr., D.D.S.
Texas Dental Association
4920 North Interregional
Austin 78751

Texas Chiropractic Association
Bob Glaze, D.C.
Texas Chiropractic Association
P.O. Box 959
Gilmer 75644

Texas Medical Association
Fred Roberson, M.D.
P.O. Box 780
Linden 75563

Texas Hospital Association
Wm. K. Brown, FACHA, Adm.
Texas Hospital Association
P.O. Box 4553
Austin 78765

A. Rex Kirkley, M.D.
P.O. Box 538
Belton 76513

Boone Powell, Jr., FACHA, Adm.
President
Hendrick Memorial Hospital
19th and Hickory
Abilene 79601

Sterling H. Fly, Jr., M.D.
1042 Garner Field
Uvalde 78801

Texas Nurses Association
Alta Forrister, R.N.
2221 West Rosedale
Fort Worth

Milton V. Davis, M.D.
P.O. Box 64569
Dallas 75206

Texas Pharmaceutical Assoc.
Lonnie J. Yarbrough
117 Tiner Street
Denton 76201

Caytano E. Barrera, M.D.
Family Physicians Clinic
606 South Broadway
McAllen 78501

Texas Nursing Home Assoc.
Thomas N. Taylor
6225 U.S. Highway 290 East
Austin 78723

Social Work Profession
Charlotte Clarke, ACSW
3301 Aldwyche Drive
Austin

Medical Care Advisory Committee:

Texas Podiatry Association
Herman G. Miller, D.P.M.
11303 Chimney Rock
Houston 77035

Texas Optometric Association
John L. Hester, O.D.
502 International Life Bldg.
Austin 78701

Texas Association of Homes
for the Aging
Tom Drewett, Administrator
Buckner Siesta Retirement
Homes
P.O. Box 3810
Austin 78764

Texas Osteopathic Medical
Association
Roy C. Mathews, D.O.
2105 North Anlin
Bonham 75418

Jimmy D. Johnson, D.O.
2317 Mountain Lake Road
Dallas 75224

Luz A. Candelaria, D.O.
7722 North Loop Drive
El Paso 79915

Texas Osteopathic Hospital
Association
Charles H. Smith
Southwest Osteopathic Hospital
2828 Southwest 27 Street
Amarillo 79109

Ex Officio Members

Medical Schools
William Knisely, Ph.D.
Asst. to the Chancellor
for Health Affairs
The Univ. of Texas System
P.O. Box 7878
Austin 78712

Truman Blocker, M.D.
President
Medical Branch
University of Texas
Galveston

Charles Max Cole, M.D.
Clinical Professor of
Surgery
Southwestern Medical School
1421 Medical Arts Building
Dallas 75201

Health Services Contractors
Eugene W. Aune
Vice-Pres. of Govt. Relations
Blue Cross/Blue Shield of
Texas
Main at North Central Expressway
Dallas 75222

Fred W. Rodgers
Vice-President of
Medicare Programs
Blue Cross/Blue Shield of
Texas
Main at North Central Expressway
Dallas 75222

Texas State Department of
Health
James E. Peavy, M.D.
Commissioner
1100 West 49 Street
Austin 78756

Medical Care Advisory Committee - Ex Officio Members
(continued):

Texas Dept. of Mental Health
and Mental Retardation
Kenneth D. Gaver, M.D.
Commissioner
Box 12668, Capitol Station
Austin 78711

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

C. Lincoln Williston
Executive Secretary
Texas Medical Association
1801 North Lamar Boulevard
Austin 78701
Phone: 512/477-6704

B. Pharmaceutical Association:

Luther R. Parker
Executive Director
Texas Pharmaceutical Association
916 Southwest Towers
211 East 7 Street
Austin 78701
Phone: 512/836-8350



UTAH

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x	x
Other Benefits: Home health and clinic services; transportation; eye-glasses; services of podiatrist, osteopath, chiropractor, naturopath; audiology; physical and speech therapy; prosthetics; psychological testing; family planning.											

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug ^{1/2/} Recipients Amounts
OAA		\$ 654	2,490	\$ 779
MA				
AB		20	62	20
APTD		720	2,601	748
AFDC		829	7,299	878
MN		1		
Total		\$2,224	12,452	\$2,425

^{1/} Average recipients per month.

^{2/} Unduplicated total: 40,054 - DHEW, SRS/NCSS 2082 A(2) FY-1975.

UTAH

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Office of Medical Services under the supervision of the State Department of Social Services.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Injections (other than insulin), vitamins, appetite depressants, household remedies.
- B. Formulary: Formulary was discontinued July 1966.
- C. Prescribing or Dispensing Limitations:
 - 1. Quantity of Medication: In general, the quantity of medication shall be limited to a supply not to exceed 30 days except for "sustaining" drugs, for which a 100-day supply is authorized.
 - 2. Refills: Should not be authorized without written, oral, or telephone confirmation by the attending physician. Refills for sustaining drugs not in excess of a 100-day supply may be authorized by the attending physician.
 - 3. Dollar Limits: No limit is in effect now. Post audit and utilization review have been established.
- D. Prescription Charge Formula: Payment by the Department for prescriptions for Public Assistance recipients and recipients of Medical Assistance Only (MAO) shall be based upon the following formula:
 - 1. \$2.10 professional fee.
 - 2. Minimum payment by the Department shall be \$1, even though application of the formula may result in an amount less than \$1.

Prescription Charge Formula (continued):

3. The current AWP is based on package size of 100 or pint size, or the next smaller size whenever the pint or 100 size is not marketed. When a drug comes in a package size of 100 the pharmacist may bill the Division at the cost based on the 100 shelf price. If the product is available only in package size of 50 tabs and 500 tabs, the pharmacist may bill the Division at the 50-tab price.
4. Only one professional fee per prescription is allowed. A prescription written for 200 tablets or 12 ampules, for example, must be billed on one 270-D. Splitting the quantity and filling on more than one 270-D is not allowed. Recovery of the professional fee and necessary corrective action will be taken in such cases.
5. Pharmacists are not required to add the sales tax on claims submitted to the Division.
6. When minor medical requisites are prescribed by a doctor, they shall be paid for at the regular price charged the general public.

V. Miscellaneous Remarks:

A methodology for utilization review of the drug program is also being developed. All pharmacy vendors will be advised of the form this review will take, and the process of pursuing any inadequacies found therein. Some of the areas to be covered in the review will relate to accurate costing of ingredients; 30-day supply of medication, where possible; over-utilization of similar drug entities; and billing the Division at higher prices than advertised for the general public.

Miscellaneous Remarks (continued):

Medical Assistance Program Data (FY 1975):

Total Welfare Expenditures	-----	\$71,814,746
*Administration Costs (6.0%)	-----	4,339,606
<u>Assistance Payments (45.7%)</u>	-----	32,823,131

Average persons/month - 36,119
Average payment/month - \$75.73

Medical Assistance (48.3%) ----- \$34,652,009

Average persons/month - 21,010
Average payment/month -\$137.45/person

Payments by Type of Service (Gross Totals)

<u>Average Persons</u>	<u>Amount</u>	<u>Average/ Month</u>
8,868 Physicians	\$3,230,446	\$ 30.36
885 Inpatient Hospital	7,043,764	665.01
3,384 Outpatient Hospital	1,360,056	33.50
12,453 Drugs	2,424,410	16.23
1,238 Skilled Nursing Homes	7,403,179	498.56
2,396 Intermediate Care Facilities	8,207,047	285.44
2,064 Dental Insurance	1,765,701	71.32
3,751 HMOs	1,094,503	24.32
4,044 Medicare Insurance Premiums	405,329	8.33
5,715 Other	1,717,524	25.05

* Does not include expenditures for the Office of Administrative Services.

Source of Data: Fiscal Year Report 1974-75, Vol. 36, No. 2,
Utah Report of Assistance, Medical and
Food Stamp Payments.

UTAH

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Services Department Officials:

Paul S. Rose Executive Director	Dept. of Social Services 104 State Capitol Bldg. Salt Lake City, Utah 84114
Evan E. Jones, Jr., Director Division of Family Services	333 South 2nd East Salt Lake City 84111
James P. Wheeler, Director Office of Research and Planning	243 East 4th South Salt Lake City 84111
Frank Dix, Director Office of Medical Services	231 East 4th South Salt Lake City 84111
John D. Hunter, R.Ph. Chief Bureau of Medical Review Services Division of Health	44 Medical Drive Salt Lake City 84113
Lloyd Nelson, Deputy Director Social Services Branch	333 South 2nd East Salt Lake City 84111
Roy Cooper, Director Office of Assistance Payments	231 East 4th South Salt Lake City 84111
Melvin Owens, Director Administrative Services	" "

2. Social Services Department Consultants:

A. Physician:

Harold E. Merkeley, M.D.	2020 South 13th, East
--------------------------	-----------------------

B. Pharmacist (Part-time):

(Mrs.) Rae Dell Ashley, R.Ph.	5797 Park View Drive Salt Lake City 84117
-------------------------------	--

3. Social Services Department Medical Care Advisory Committee:

Utah State Health Division
Lyman J. Olsen, M.D.
Director of Public Health
State Division of Health
44 Medical Drive
Salt Lake City 84113

Utah State Hospital Association
Douglas C. Carpenter
Assistant Commissioner
LDS Health Services Corporation
Beneficial Life Tower Building
36 South State Street
Salt Lake City 84111

Utah State Medical Association
Thomas L. Jones, M.D.
166 East 5900 South
Salt Lake City 84107

Utah State Pharmaceutical Assoc.
Lynn H. Sartor
3568 Mardonna Way
Salt Lake City 84109

Utah Women's Legislative Council
Corine Bridgewater
921 South 200 West
Salt Lake City 84101

Welfare Board
Bruce J. Parsons, O.D.
120 East 4800 South
Salt Lake City 84107

Utah Nursing Home Association
Ben G. Midgley, Jr.
P.O. Box 7506
2030 East 4800 South
Salt Lake City 84111

Utah Group Health Plan
Reid Holbrook
Utah Group Health Plan
P.O. Box 15629
Salt Lake City 84115

Comprehensive Health Planning
Stewart Smith
Office of CHP
243 East 400 South
Salt Lake City 84111

Lay
Carol Ashworth (Mrs.)
P.O. Box 822
Provo 84601

Member-at-Large
Bruce A. Walter, M.D., M.P.H.
Deputy Director
State Division of Health
44 Medical Drive
Salt Lake City 84113

Salt Lake County Legal Services

Michael Shepard
Attorney at Law
SL Co. Bar Legal Services
216 East 500 South
Salt Lake City 84111

Utah Chapter NASW
Vernon Nielsen
4789 South 1815 West
Salt Lake City 84118

Utah State Assoc. of Counties
Commissioner Keith G. Jensen
Weber County Commission
Municipal Building
Ogden 84401

Utah State Dental Association
Charles E. Parkin, D.D.S.
President
Delta Dental Plan of Utah
65 West Louise Avenue
Salt Lake City 84115

Medical Care Advisory Committee (continued):

Utah State Department of
Public Instruction
Phillip Clinger
Coordinator of Case Services
Utah State Board of Education
University Club Building
136 East South Temple
Salt Lake City 84111

Utah State Nurses' Association
Carol Malbone
2215 East 2100 South
Salt Lake City 84109
Vice-Chairman

University of Utah College
of Medicine
Ray Bowden, Asst. Admr.
Division of Financial
Services
University of Utah Hospital
50 North Medical Drive
Salt Lake City 84112
Chairman

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Hoyt W. Brewster
Executive Director
Utah State Medical Association
42 South 500 East
Salt Lake City 84102
Phone: 801/355-7477

B. Pharmaceutical Association:

Frank P. McNeil
Executive Secretary
Utah Pharmaceutical Association
1062 East 2100 South
Salt Lake City 84106
Phone: 801/484-9141

VERMONT

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services										
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug 1/ Recipients Amounts 1/
OAA		\$		\$
MA				
AB				
APTD				
AFDC				
Total		\$2,134	20,093	\$2,414

1/ DHEW, SRS/NCSS Report B-5 (FY-1975) - Preliminary.

VERMONT

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the State Department of Social Welfare through its 12 district offices.

IV. Provisions Relating to Prescribed Drugs:

Program allows the welfare recipients to have free choice of physicians and pharmacists.

- A. General Exclusions (diseases, drug categories, etc.):
Supplemental vitamins. Prior authorization is required for therapeutic vitamins, cathartics, analgesics and fecal softeners.
- B. Formulary: None, provided drug is included in the U.S. Pharmacopoeia, National Formulary, U.S. Homeopathic Pharmacopoeia, New Drugs or in Accepted Dental Remedies.

The National Drug Code Directory is now being used as a drug manual for coding purposes.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: Generic prescribing is encouraged.
 - 2. Quantity of Medication: Initial prescription is limited to 30 days' supply.
 - 3. Refills: Up to 5 refills may be authorized by physician.
- D. Prescription Charge Formula: For prescribed legend or non-legend drugs: Average wholesale price, based on Blue Book or Red Book, plus professional fee of \$1.85. Charge must not exceed that for private sector.

VERMONT

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social Welfare Department Officials:

Paul R. Philbrook Commissioner	Dept. of Social Welfare 87 Main Street Montpelier, Vermont 05602
Elmo A. Sassorossi Director Division of Medical Services	" "
Carl E. Wilbur, M.D.	" "
Shelley Weiner, M.D.	" "
Robert Aiken, Asst. Med. Director Division of Medical Services	" "
Robert Webster, R.Ph. (Part-time)	" "

2. Vermont Advisory Council on Medical Programs:

Edward E. Friedman, M.D. <u>Chairman</u> Assistant Commissioner Department of Health 115 Colchester Avenue Burlington 05401	Ralph Sussman, M.D. Department of Pediatrics University of Vermont College of Medicine Burlington 05401
(Mrs.) Ruby Carr, R.N. Vermont State Nurses Assoc. 140 Bellevue Avenue Rutland 05701	Dr. Edward Andrews Dean University of Vermont College of Medicine Burlington 05401
Alvin L. Schein, D.D.S. 256 Pearl Street Burlington 05401	Frederick A. Hale Medical Center Hospital of Vermont Burlington 05401
Paul Eastman, R.Ph. 101 Maple Street Newport 05855	David Gray, M.D., Director Medical Care Facilities Department of Health 115 Colchester Avenue Burlington 05401
Francis S. Irons 70 Clarendon Street Montpelier 05602	

Vermont Advisory Council on Medical Programs (continued):

James J. Lowe
Town Manager
Colchester 05446

Roy V. Buttles, M.D.
1 Clarendon Avenue
Montpelier 05602

Ralph Jardine, M.D.
Lyndonville 05851

Terrance D. O'Brien, O.D.
152 Main Street
Montpelier 05602

Raymond Gobeil
c/o Patenaude Rest Home
Derby 05829

Joyce O. Stickney, R.N.
Department of Health
115 Colchester Avenue
Burlington 05401

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Getty Page (Mr.)
Executive Director
Vermont State Medical Society
128 Merchants Row
Rutland 05701
Phone: 802/773-2933

B. Pharmaceutical Association:

Philip J. O'Neill
Executive Secretary
Vermont Pharmaceutical Association
P.O. Box 926
Bennington 05201
Phone: 802/442-5943

VIRGIN ISLANDS

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related					Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC			
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services											
Physician Services	x	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x	x
Other Benefits:	Home health services; EPSDT; clinic services; prosthetic devices and dentures; eyeglasses; ambulance and other transportation.										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible ^{2/}	Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 14		\$ 14
MA				
AB ^{1/}				
APTD		3		3
AFDC		26		32
MN		283 ^{3/}		252 ^{4/}
Total	21,006	\$326	9,804 ^{5/}	\$301

1/ Miniscule sum only.

2/ Recipients.

3/ Includes \$49 in the non-matching category.

4/ Includes \$68 in the non-matching category.

5/ DHEW - SRS/NCSS Report B-5 (FY-1975) - Preliminary.

VIRGIN ISLANDS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

Department of Health through a network of public medical facilities.

IV. Provisions Relating to Prescribed Drugs:

Broad coverage as provided by public medical facilities.

Private facilities are used when the prescribed drug is not available at the public medical facility or designated hospital pharmacy. However, such private pharmacies used must have signed a provider's agreement with the agency.

VIRGIN ISLANDS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Health Department:

1. Officials:

Alfred O. Heath, M.D., F.A.C.S. Commissioner	Department of Health P.O. Box 1442 Charlotte Amalie St. Thomas Virgin Islands 00801
---	---

Jeannette A. Mahoney (Mrs.) Director Health Insurance and Medical Assistance	" "
---	-----

2. Medical Care Advisory Committee

Alfred O. Heath, M.D., F.A.C.S.	- Commissioner of Health (ex officio)
Jeannette A. Mahoney (Mrs.)	- Director Health Insurance and Medical Assistance (ex officio)
Joanna Lindquist (Mrs.)	- Representative Consumer Services Administration
Dr. Herbert Michelman	- Provider of MAP
Hermaine Capdeville (Mrs.)	- Social Worker St. Croix
Alla Rie Cass (Mrs.)	- Social Worker St. Thomas
Beryl Kean Vice Chairman	- Representative Government Health Insurance

Medical Care Advisory Committee (continued):

✓ Gerald Christian	- Representative Business Community
Edith Galiber (Mrs.)	- Representative Home Care Program
Senator Eric Dawson	- Representative State Legislature
Dr. James Glenn Chairman	- Representative Medical Society
Ana Illarraza (Mrs.)	- Representative State Welfare Department
Jean Larson (Mr.)	- Representative State Labor Dept.
Elaine Heyliger (Mrs.)	- Medicaid Recipient St. Thomas
John Phaire	- Medicaid Recipient St. Croix
Edmund Penn	- Representative State Dept. of Labor
America Thompson (Mrs.)	- Representative Child and Family Services
Gwendolyn Dench (Mrs.)	- Representative Consumer
Frances Armstrong (Mrs.)	- Representative V.I. Nursing Assoc.
Rita M. Watley (Mrs.) Secretary	- Medical Assistance Program

B. Social Welfare Department Official:

Gwendolyn C. Blake (Mrs.) Commissioner	Department of Social Welfare Charlotte Amalie St. Thomas Virgin Islands 00801
---	---

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C. Executive Officer of Virgin Islands Medical Society:

Salvatore Tabacco
Secretary
Virgin Islands Medical Society
P.O. Box 520
Christiansted
St. Croix
Virgin Islands 00820
Phone: 809/773-1311

VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1969

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related Children Other*					
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x		
Outpatient Hospital Care	x	x	x	x	x	x	x	x		
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		
Physician Services	x	x	x	x	x	x	x	x		
Dental Services				x					x	
Other Benefits:	Home health care; clinic; transportation; family planning; limited medical supplies; whole blood; optometrist; podiatrist; screening.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug 1/ Recipients	Amounts
OAA	50,538	\$ 6,516	68,352	49,040	\$ 6,063
MA					
AB	1,970	1,219	2,452	1,554	181
APTD	25,566	2,692	26,488	25,571	3,263
AFDC	194,629	4,332	179,032	141,941	4,227
Total	272,703	\$14,759	276,324	218,106	\$13,734

1/ Unduplicated count.

VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

By the Division of Medical and Hospital Services, State Health Department. Eligibility determination by the Department of Welfare.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Non-legend drugs except family planning drugs and supplies, insulin, and insulin syringes and needles.
Anorectic drugs
Propoxyphene drugs
(All drugs covered for nursing home recipients.)
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
1. Terminology: None.
 2. Quantity of Medication: Physicians requested to prescribe maintenance drugs in quantities reflecting a 30-day supply, or 100 units or doses.
 3. Refills: Physicians may authorize refills according to legal requirements.
 4. Dollar Limits: None.
- D. Prescription Charge Formula:
- Legend drugs: Acquisition cost plus \$1.95.*
Oral contraceptives: Usual and customary charge.*
Non-legend drugs covered: Usual and customary charge.*
Unit-dose: Acquisition cost plus one fee* per drug per month.
Dispensing physicians: Reimbursement same as that for pharmacies.

*50¢ co-pay by recipient; otherwise, no claim is to be submitted for reimbursement. Nursing home facilities reimburse 50¢ to pharmacies. Co-pay and non-legend drug charges submitted in cost report by facilities for reimbursement.

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V. Miscellaneous Remarks:

Drug Utilization Data (FY 1975):

Average monthly number of users	-	80,673
" " " " prescriptions	-	252,579
" number of prescriptions/user	-	3.13

VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Health Department:

1. Officials:

James B. Kenley, M.D.
CommissionerState Department of Health
Richmond, Virginia 23219Edwin M. Brown, M.D.
Director
Division of Medical and
Hospital Services

" "

Freeman C. Hays, M.D.
Medical Director
Medical Assistance Program

" "

Mary Ann Johnson, R.Ph. (Mrs.)
Pharmaceutical Consultant109 Governor Street, Rm. 820
Richmond, Virginia 23219Malcolm O. Perkins
Administrative Assistant
Professional Services
Medical Assistance ProgramState Department of Health
Richmond, Virginia 23219

2. Governor's Advisory Committee on Medicaid:

Medical Society of VirginiaWilliam Grossman, M.D., Chairman
Frank S. Royal, M.D.
Carl E. Stark, M.D.Virginia Medical Service Association

William H. King, Sr.

Virginia State Dental AssociationJason R. Lewis, D.D.S.
Hugh O. Wrenn, D.D.S.Private Insurance CarriersHarley Duane
John L. TuttleMedical School Representative

Kinloch Nelson, M.D.

Governor's Advisory Committee on Medicaid (continued):

Virginia Nursing Home Association

James K. Meharg, Jr.

Virginia Academy of General Practice

A. Epes, Harris, Jr., M.D.

Virginia State Hospital AssociationCharles P. Cardwell, Jr.
Harold PratherVirginia Pharmaceutical Association

J. Curtis Nottingham

Participants Advisory CouncilMamie King
Henry QuickeEx Officio

William L. Lukhard	- Director State Department of Welfare
William S. Allerton, M.D.	- Commissioner State Department of Mental Health & Mental Retardation
James B. Kenley, M.D.	- Commissioner State Department of Health

B. Welfare Department Officials:

William L. Lukhard Director	State Department of Welfare 201 East Cary Street Richmond, Virginia 23219
Herbert A. Krueger, Director Division of General Welfare	" "

C. Executive Officers of State Medical and Pharmaceutical Societies:

1. Medical Society:	2. Pharmaceutical Association:
Robert I. Howard Executive Vice-Pres. Medical Society of Virginia 4205 Dover Road Richmond, Va. 23221 Phone: 804/353-2721	Sam W. Crickenberger Executive Director Virginia Pharmaceutical Association 3119 West Clay Street Richmond, Va. 23230 Phone: 804/355-7942

WASHINGTON

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x
Other Benefits:										

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons <u>1</u> / Eligible	Drug Recipients	Amounts
OAA	32,295	\$ 4,020	35,180	33,280	\$ 4,476
MA					
AB	660	44	711	520	49
APTD	36,902	3,516	37,824	31,480	3,677
AFDC	158,521	2,783	149,148	110,660	2,890
Other (Title XIX)			12,709	11,740	261
Other (SFO)	5,344	228	5,360	8,700	413
Total	233,722	\$10,591	240,932	196,380	\$11,766

1/ Average monthly.

WASHINGTON

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

State Vendor Drug Program administered by the State Department of Social and Health Services through its 49 local offices, some of which serve more than one area.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):
Medicine chest drugs are not provided. Non-formulary drugs are provided in an emergent life-endangering situation and/or medically mandatory.
- B. Formulary: Includes 2,800 listings by drug product name, quantity, dosage form and strength. Formulary is revised annually.
- C. Prescribing or Dispensing Limitations:
 - 1. Terminology: None.
 - 2. Quantity of Medication: All prescriptions in excess of \$15 must be approved by the Medical Consultant before payment can be made.
 - 3. Refills: Allowed on formulary drugs only.
 - 4. Dollar Limits: None.
- D. Prescription Charge Formula: The amount shall not exceed the average customary and reasonable charge to the general public.

The maximum charge to the Department is to be cost price (retailer invoice cost or latest Red Book or Blue Book or listed median cost generic, whichever is lower) plus a dispensing fee for service of \$2.15 for outpatient R's and \$1.85 for nursing home patient R's (SNF and ICF).

The dispensing fee of \$2.15 is also applicable to unit dose systems which meet the Department's billing standards for pharmaceuticals provided by means of unit dose packaging.

V. Miscellaneous Remarks:

Medical care program is a limited program to meet essential, chronic, emergent and acute conditions - not intended to provide all drugs.

Drug Utilization Data (FY 1975):Number of recipients

OAA	35,100
AB	700
APTD	33,840
AFDC	116,820
GA	4,900
Total	191,360

WASHINGTON

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social and Health Services Department Officials:

Charles R. Morris Secretary	Department of Social and Health Services P.O. Box 1788 Olympia, Washington 98504
John A. Beare, M.D. Director Health Services Division	" "
Richard Ned Nelson, Chief Office of Medical Assistance	" "
Robert P. Hall, M.D. Medical Director Office of Medical Assistance	" "
William P. Pace, R.Ph. Pharmacist Consultant Office of Medical Assistance	" "

2. Social and Health Services Department Medical Consultants
(at county level):

A. Full-time:	<u>Local Office</u>
Paul Ferse, M.D.	- King
Harry P. Harper, M.D.	- Spokane
Glenn W. McKinlay, M.D.	- Spokane
Edward P. Palmason, M.D.	- Seattle
Robert A. Reynolds, M.D.	- Port Angeles-Port Townsend
Albert E. Weber, M.D.	- Chehalis
B. Part-time:	
Raymond J. Bunker, M.D.	- Wenatchee
Lyle J. Cowan, M.D.	- Okanogan
Walter P. H. deGroot, M.D.	- King
Mary J. Dexter, M.D.	- Olympia
Lawrence Ettleson, M.D.	- Seattle
Burton A. Foote, M.D.	- Ellensburg

Medical Consultants - Part-time (continued):

Kenneth H. Kinard, M.D.	- Everett
Mark L. Gabrielson, M.D.	- Bellingham
Albert V. Mills, M.D.	- Pasco
Carl C. Walters, M.D.	- Yakima
Harry C. Watkins, Jr., M.D.	- Aberdeen

3. Social and Health Services Department Title XIX Advisory Committee:

Paul R. Lauer, M.D.
Chairman
Colby at 39th
Everett 98201

Hal King, Administrator
Riverwood Care Center
114 - 4th Avenue N.W.
Puyallup 98371

Baird Bardarson, M.D.
4300 Talbot Road South
Renton 98055

Ludwig Lobe
Plaza 600 Building, #1200
Seattle 98101

Robert Day, M.D.
School of Public Health and
Community Medicine
University of Washington
Seattle 98195

Ronald W. Murray, R.Ph.
Wenatchee Clinic Pharmacy
9th at Chelan
Wenatchee 98801

Bob Free
Batell Northwest
Box 999
Richland 99352

Alice W. Sandatrom
Asst. Administrator -
Finance
Children's Orthopedic
Hospital & Medical Ctr.
4800 Sand Point Way N.E.
Seattle 98105

Donald L. Hearon, D.D.S.
1117 Medical Arts Building
Tacoma 98402

Cleo Sandwick
9903 - 10th Place S.W.
Seattle 98106

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

H. R. Knudson
Executive Director
Washington State Medical
Association
444 N.E. Ravenna Boulevard
Seattle 98115
Phone: 206/523-9100

B. Pharmaceutical Association:

Richard W. Fowler
Executive Director
Washington State
Pharmaceutical Assoc.
1305 Third Avenue, #204
Seattle 98101
Phone: 206/624-4818



WEST VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)					
					Category Related				Children	Other*
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21	(SFO)
Prescribed Drugs	x	x	x	x	x	x	x	x		
Inpatient Hospital Care	x	x	x	x	x	x	x	x		
Outpatient Hospital Care	x	x	x	x	x	x	x	x		
Laboratory & X-ray Service	x	x	x	x	x	x	x	x		
Skilled Nursing Home Services	x	x	x	x	x	x	x	x		
Physician Services	x	x	x	x	x	x	x	x		
Dental Services	x	x	x	x	x	x	x	x		
Other Benefits:	Intermediate care facility services for all categories for money payment and medically needy.									

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30: 1/

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	13,290	\$ 970	{	{	{
MA			{	{	{
AB	529	31	{	{	{
APTD	12,937	943	{	{	{
AFDC	52,862	1,173	{	{	{
UF ^{3/}			{	{	{
Others ^{4/}	2,699	39	{	{	{
Total	82,317	\$3,156	122,268	82,957 ^{5/}	\$3,757

^{1/} Excludes State Pharmacy Program (SFO) which is circa \$1.0 million for FY 1975 and includes drugs to approximately 13,000 elderly persons.^{2/} June 1975 eligibles count.^{3/} Unemployed Fathers.^{4/} Includes medically needy (not previously reported), State wards, boarding care children, and youths.^{5/} DHEW - SRS/NCSS 2082 A(2) FY-1975.

WEST VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

The Division of Medical Care, Department of Welfare, is the medical assistance unit responsible for the administration of the Title XIX program. Eligibility for program benefits is determined by the local Welfare offices for AFDC and medically needy individuals. Individuals eligible for SSI benefits are covered for Medicaid as categorically needy, aged and disabled.

IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.): Eligible drug categories are listed for chronic illnesses. Department will not pay for medicine chest items, vitamins (except for prenatal use and pediatric vitamin drops), and appetite depressants. Tranquilizers and barbiturates in combination with program drugs are approved. Psychotherapeutic drugs are covered for emotional illness, with prior approval - limited to addictive types. Special consideration may also be given on an individual basis for any special drug needs by the Medical Director.
- B. Formulary: None.
- C. Prescribing or Dispensing Limitations:
 1. Terminology: None.
 2. Quantity of Medication: 30-day supply can be prescribed for chronic conditions. 10-day supply may be prescribed in acute conditions.
 3. Refills: Physician may authorize 5 refills in chronic conditions. No refills permitted in acute conditions.
 4. Dollar Limits: None.
- D. Prescription Charge Formula: Acquisition cost plus percentage markup. Add 66-2/3% if cost under \$3. Add 50% if cost \$3 to \$7.99. Add 33-1/3% if cost \$8 or more. Red Book or Blue Book basis for acquisition cost. Minimum price \$1.50.

WEST VIRGINIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Welfare Department Officials:

Thomas R. Tinder Commissioner	West Virginia Department of Welfare 1900 Washington Street, East Charleston, W. Va. 25305
H. Ward Nicklin Assistant Commissioner Medical Services	" "
J. L. Mangus, M.D. Medical Director (Half-time) Division of Medical Care	" "
(Mrs.) Helen M. Condry, Director Division of Medical Care	" "
Charles W. Dawkins Assistant Director Division of Medical Care	" "
William B. Rossman, M.D. Psychiatrist Consultant	" "
Bernard Schlact, R.Ph. Pharmaceutical Consultant	" "
Ralph H. Nestmann, M.D. Medical Consultant (Part-time)	" "
Bert Bradford, Jr., M.D. Medical Consultant (Part-time)	" "
Samuel L. Henson, M.D. Medical Consultant (Part-time)	" "
F. A. Sines, D.D.S. Dental Consultant (Part-time)	" "
Robert Cline, Director Division of Research and Project Development	" "

2. Welfare Department Medical Services Advisory Council:

- A. Nine members from fields of medicine, dentistry, hospital administration, pharmacy, nursing and public - appointed by Commissioner, with Director of Health ex officio.

Robert L. Leadbetter, M.D.	- Physician Representative
Robert Frame, D.D.S.	- Dentist Representative
Jack E. Fruth, R.Ph.	- Pharmacist Representative
Fred Blair	- Hospital Administrator Representative
Deloris Wiley (Mrs.)	- Nursing Home Administrator Representative
Lois C. Williams, R.N.	- Nurse Representative
Joseph Powell	- Consumer Representative
Haven T. Rollins, C.P.A.	- Consumer Representative
N. H. Dyer, M.D., M.P.H.	- Ex Officio Representative

- B. Welfare Committee Members of the West Virginia
Pharmaceutical Association:

Robert E. Hickman, Chairman
346 Cherokee Trail
Huntington 25705

Robert Lowe, R.Ph.
West Virginia University
School of Pharmacy
Morgantown 26505

Ed Toompas, Co-Chairman
115 Mandan Road
Clarksburg 26301

William G. Copper
1502 Village Drive
South Charleston 25309

William Plyburns
611 Central Avenue
Barboursville 25504

Arlie Winters
212 Union Street
Berkeley Springs 25411

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Charles R. Lewis
Executive Secretary
West Virginia State
Medical Association
Box 1031
Charleston 25324
Phone: 304/346-0551

B. Pharmaceutical Association:

Samuel W. Channell
Executive Director
West Virginia
Pharmaceutical Assoc.
P.O. Box 1871
Charleston 25327
Phone: 304/344-8348

WISCONSIN

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1966

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	<u>1/</u> Money Payment Recipients				Medically Needy (M N) Category Related					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Children Under 21	
Prescribed Drugs	x	x	x	x	x	x	x	x	x	x
Inpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Outpatient Hospital Care	x	x	x	x	x	x	x	x	x	x
Laboratory & X-ray Service	x	x	x	x	x	x	x	x	x	x
Skilled Nursing Home Services	x	x	x	x	x	x	x	x	x	x
Physician Services	x	x	x	x	x	x	x	x	x	x
Dental Services	x	x	x	x	x	x	x	x	x	x

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975		
	Persons Eligible	Amounts	Persons <u>2/</u> Eligible	Drug Recipients	Amounts
OAA	108,446	\$ 5,268	90,840	57,484	\$ 7,960
MA					
AB	1,509	69	1,886	819	81
APTD	24,896	2,006	45,944	24,129	3,318
AFDC	270,591	3,039	230,882	129,205	3,618
MN Aged <u>1/</u>	13,877	767	8,346	5,428	445
MN Blind <u>1/</u>	181	5	71	37	2
MN Disabled <u>1/</u>	4,562	324	2,965	2,427	274
MN Children <u>1/</u>	46,898	303	46,510	20,089	478
Total	470,960	\$11,781	427,444	239,618	\$16,176

1/ Includes CR cases not receiving money payment.

2/ Eligible only on June 30, 1975; not an unduplicated annual total.

WISCONSIN

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

The Medical Assistance Program is administered by the State Department of Health and Social Services, with certain responsibilities delegated to 72 local agencies.

IV. Provisions Relating to Prescribed Drugs:

A. General Exclusions (diseases, drug categories, etc.):

No exclusions. Drugs for medically needy patients limited to legend items and injectable insulin.

B. Formulary: None.

C. Prescribing or Dispensing Limitations:

1. Terminology: None.

2. Quantity of Medication: None. Physicians encouraged to prescribe in economical manner. Pharmacists can not dispense more than a 34-day supply.

3. Refills: Physicians encouraged to specify number of refills authorized for definite period. If no specification on original prescription, pharmacist must get authorization from physician for each refill.

4. Dollar Limits: None. Physicians encouraged to prescribe in most economical manner.

D. Prescription Charge Formula: Usual prescription charges are authorized subject to guidelines established by the State Department of Health and Social Services, with maximum professional charge of \$2 for General Service Pharmacies; \$2.20 for Special Service Pharmacies.

V. Miscellaneous Remarks:

The recipients have free choice of pharmacy under MAP Title XIX in Wisconsin.

WISCONSIN

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Manuel Carballo Secretary	Department of Health and Social Services State Office Building One West Wilson Street Madison, Wisconsin 53702
Frank Newgent, Administrator Division of Family Services	" "
Robert Lizon Deputy Administrator Operations	" "
Bernard Stumbras Deputy Administrator Planning and Development Division of Family Services	" "
John J. Murphy, Director Medical Services	" "
John Allen, M.D. Physician Consultant (Part-time)	" "

2. Health and Social Services Department Advisory Committees:

A. Medical Assistance Advisory Committee:

Sherman Anderson, Dir. Long Term Care Treatment Dodge Co. Community Mental Health Center Juneau 53039	- County Hospital Assoc.
Arlin Barden, Commandant Grand Army Home King 54946	- Department of Veterans Affairs

Medical Assistance Advisory Committee (continued):

D. J. Bergenske, O.D. 30 West Mifflin Madison 53703	- Optometry
Elaine Ellibee (Mrs.) Division of Nurses 201 East Washington, Room 252 Madison	- Nursing
(Vacant)	- Wisconsin Hospital Association
Roman Galasinski, M.D. 3371 South Princeton Avenue Milwaukee 53215	- State Medical Society
Earl Hall, R.Ph. Hall's Drug Store Sauk City 53583	- Pharmacy
Edward R. Hommel, D.P.M. 127 East Mifflin Madison 53703	- Wisconsin State Podiatry Society
George MacKenzie Lorraine Hotel, Room 139-A Madison 53701	- Wisconsin Nursing Home Assoc.
James F. McDonald Maddison Association for Retarded Children 315 North Sherman Avenue Madison 53704	- Wisconsin Association for Retarded Children
Harry Metten, Administrator Kenosha County Institutions 3506 Washington Road Kenosha 53140	- Wisconsin Association of Municipal Homes
Henry Posyniak, Administrator Villa Clement 9047 West Greenfield West Allis 53214	- Wisconsin Council of Homes for the Aging

Medical Assistance Advisory Committee (continued):

Irwin Probst
Bureau for Handicapped
Children
126 Langdon Street
Madison 53703

- Bureau for Handicapped
Children

Carl B. Shuler, D.D.S.
714 Milwaukee Road
Clinton 53525

- Wisconsin Dental
Association

Julian Modjeski
Communication Workers of
America
9733 West Greenfield Avenue
West Allis 53214

- Wisconsin State
AFL-CIO

B. Health and Social Services Board:

Abolished by law in 1975.

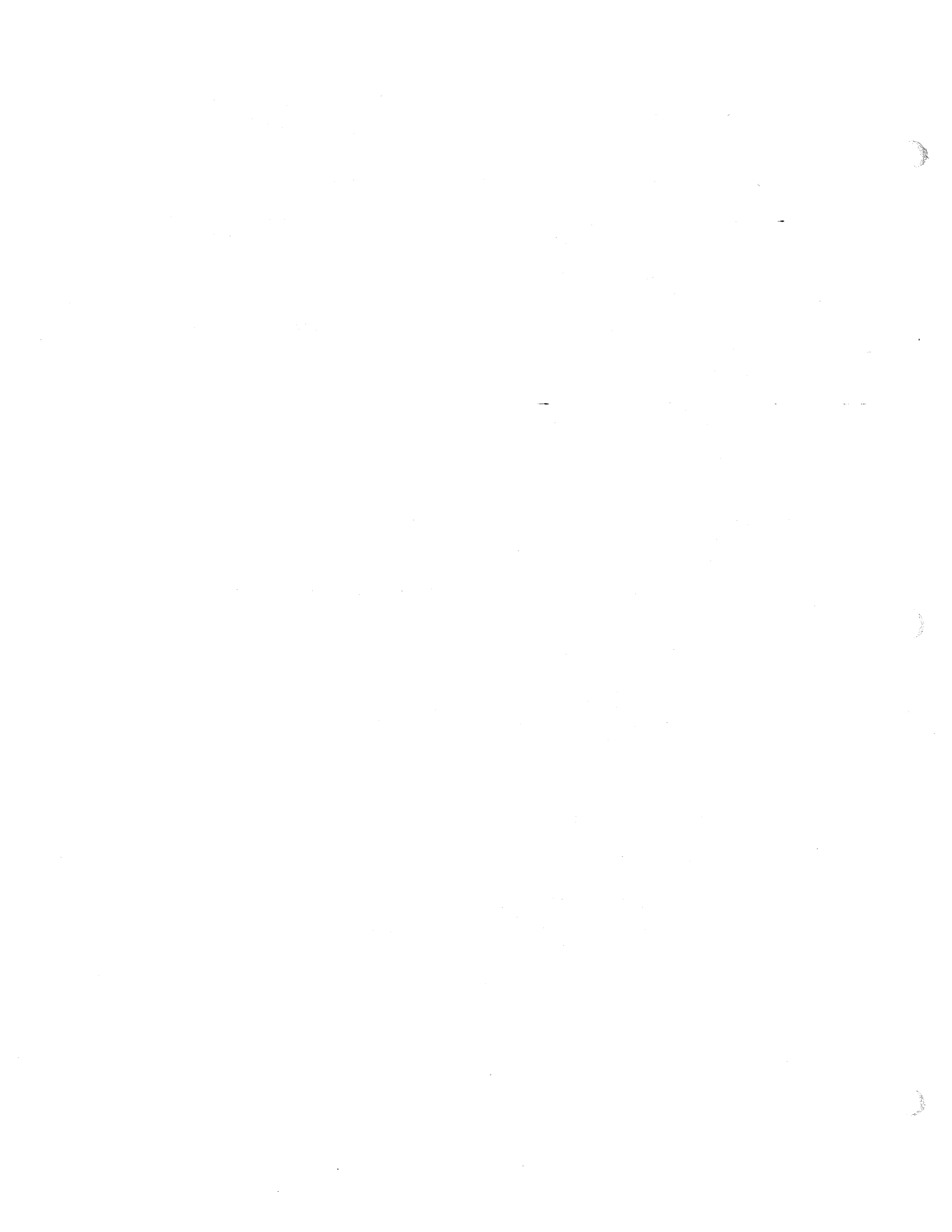
3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Earl Thayer
Secretary-General Manager
State Medical Society
of Wisconsin
330 East Lakeside
Box 1109
Madison 53701
Phone: 608/257-6781

B. Pharmaceutical Association:

W. Allen Daniels, R.Ph.
Executive Director
Wisconsin Pharmaceutical Association
202 Price Place
Madison 53705
Phone: 608/238-5515



WYOMING

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began July 1, 1967

I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)			
	OAA	AB	APTD	AFDC	Category Related	Children Under 21	Other* (SFO)	
Prescribed Drugs								
Inpatient Hospital Care	x	x	x	x				
Outpatient Hospital Care	x	x	x	x				
Laboratory & X-ray Service	x	x	x	x				
Skilled Nursing Home Services	x	x	x	x				
Physician Services	x	x	x	x				
Dental Services								
Other Benefits:	Dental and optometric services, eyeglasses and hearing aids for eligible patients under 21 years of age; home health service.							

*SFO - State Funds Only - Federal matching for administrative costs.

II. EXPENDITURES FOR DRUGS. Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1974		1975	
	Persons Eligible	Amounts	Persons Eligible	Drug Recipients Amounts
OAA				
MA				
AB				
APTD				
AFDC				
Total				

No Vendor Drug Program

WYOMING

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

III. How Administered:

There is no state vendor drug program. The Medical Assistance Program is administered by the Division of Health and Medical Services of the Department of Health and Social Services.

IV. Provisions Relating to Prescribed Drugs:

No state vendor drug program.

The cost of prescription drugs is the responsibility of County Division of Public Assistance and Social Services and payment is made from county funds.

WYOMING

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Health and Social Services Department Officials:

Harvey Peterson Coordinator	Department of Health and Social Services Hathaway Building Cheyenne, Wyoming 82002
Lawrence J. Cohen, M.D., M.P.H. Administrator	Division of Health and Medical Services
Ernest A. Rumpf, Jr., Chief Medical Assistance Branch	" "
George P. Potekhen, M.D. Medical Consultant	" "
Harold Prahl, R.Ph. Assistant Chief of Medical Facilities	" "
Jermy B. Wight Administrator	Division of Public Assistance and Social Services

2. Medical Advisory Committee:

John Yale, <u>Chairman</u>	- Hospital Administrator
Donald Hunton, M.D.	- Physician
Lawrence J. Cohen, M.D.	- Administrator, Div. of Health and Medical Services
John J. Corbett, M.D.	- Physician
Joan Beachler	- County Director of Public Assistance and Social Services
Gerald Palmer	- Pharmacist
Howard Megorden	- Nursing Home Administrator
Tom Searl	- State Senator
Warren J. Hickman, D.D.S.	- Dentist
Jermy B. Wight	- Administrator, Div. of Public Assistance & Social Services
Mrs. J. J. Hickey	- County Commissioner
Steve Cranfill	- State Representative

Medical Advisory Committee (continued):

John Vinich	- State Representative
Joseph Nies	- County Director of Public Assistance and Social Services
Henry Stephenson, M.D.	- Physician
Joyce Fitzhugh (Mrs.)	- Consumer

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

Robert G. Smith
Executive Secretary
Wyoming State Medical Society
2727 O'Neil Avenue
P.O. Drawer 4009
Cheyenne 82001
Phone: 307/635-2424

B. Pharmaceutical Association:

Thomas J. Murphy
Secretary-Treasurer
Wyoming Pharmaceutical Association
Box 480
Gillette 82716
Phone: 307/682-4777