

PHARMACEUTICAL BENEFITS  
UNDER  
STATE MEDICAL ASSISTANCE PROGRAMS

Compiled

by the

NATIONAL PHARMACEUTICAL COUNCIL  
1030 Fifteenth Street, N.W.  
Washington, D.C. 20005  
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1977



# MEDICAID STATISTICAL DATA <sup>1/</sup> FY-1976

TOTAL PAYMENTS — \$14.7 Billion      INCREASE OVER FY-1975 — 15.5%  
 RECIPIENTS (Unduplicated) 24.4 Million      INCREASE OVER FY-1975 8.1%  
 (Received one or more services)

BASIS OF ELIGIBILITY	AVERAGE MONTHLY RECIPIENT DATA (in 000)					AVERAGE MONTHLY PAYMENTS TO VENDORS (in 000)	
	FY-1975	FY-1976	PERCENTAGE DISTRIBUTION	PERCENTAGE CHANGE	DIRECT OR THROUGH FISCAL AGENTS	PERCENTAGE DISTRIBUTION	
Aged 65 and over	1,987	2,080	22.8	+ 4.7	\$432,573	36.5	
Blindness	48	45	0.5	- 6.3	7,253	0.6	
Disabled	1,130	1,296	14.2	+ 14.7	298,954	25.2	
Members of Families with Dependent Children	4,686 <sup>2/</sup>	5,075 <sup>3/</sup>	55.6 <sup>4/</sup>	+ 8.3	370,200 <sup>5/</sup>	31.3 <sup>6/</sup>	
Other Title XIX <sup>7/</sup>	595	637	7.0	+ 7.1	75,042	6.3	
Total	8,446	9,133	100.0	+ 8.1	\$1,184,022	100.0	

NOTE: Totals may not add due to rounding.

- <sup>1/</sup> Data partly estimated; Totals rounded.
- <sup>2/</sup> Children 2,885; Adults 1,801.
- <sup>3/</sup> Children 3,126; Adults 1,949.
- <sup>4/</sup> Children 34.2; Adults 21.3.
- <sup>5/</sup> Children \$185,387; Adults \$184,813.
- <sup>6/</sup> Children 15.7; Adults 15.6.
- <sup>7/</sup> Includes Children and Adults up to 64 years of age.

Source: Department of Health, Education, and Welfare  
 Social and Rehabilitation Service  
 National Center for Social Statistics  
 NCSS Report B-5 (FY-76) (Preliminary)

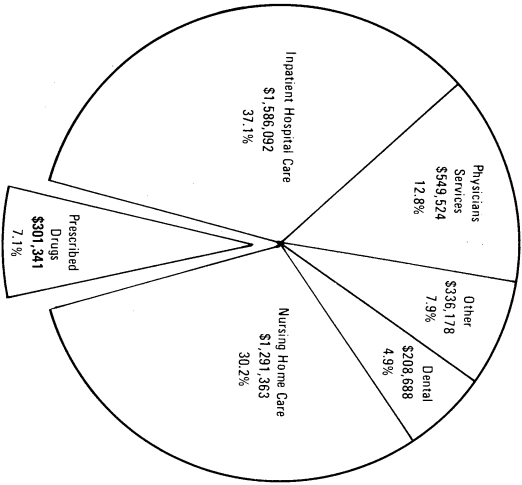
# MEDICAL CARE EXPENDITURES UNDER PUBLIC ASSISTANCE PROGRAMS

## BY TYPE OF SERVICE

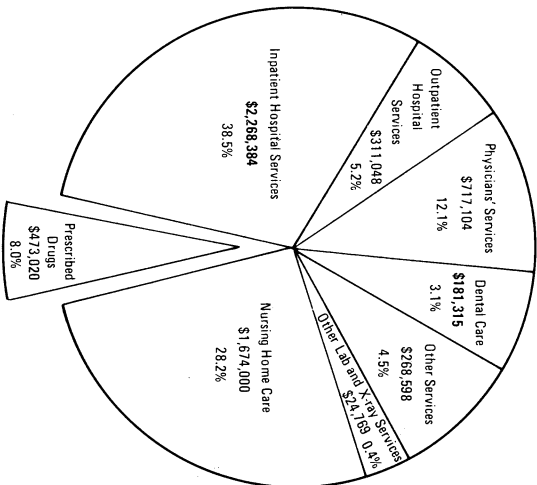
(1969-76)

### VENDOR PAYMENTS

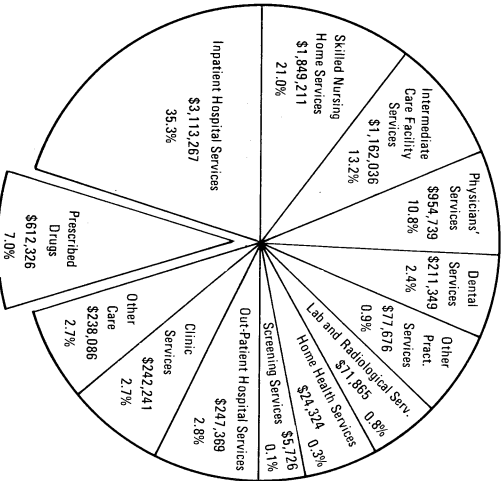
1969  
\$4,273,439



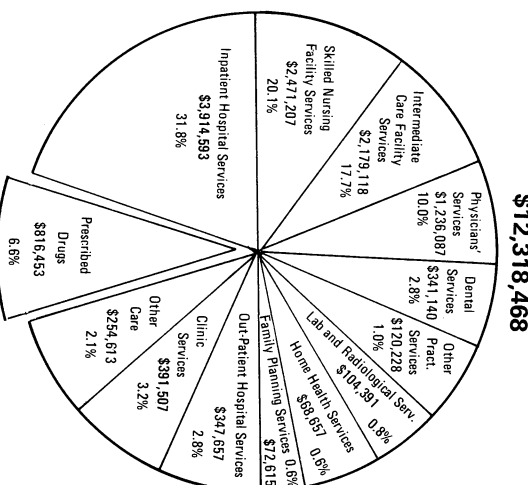
1971  
\$5,939,236



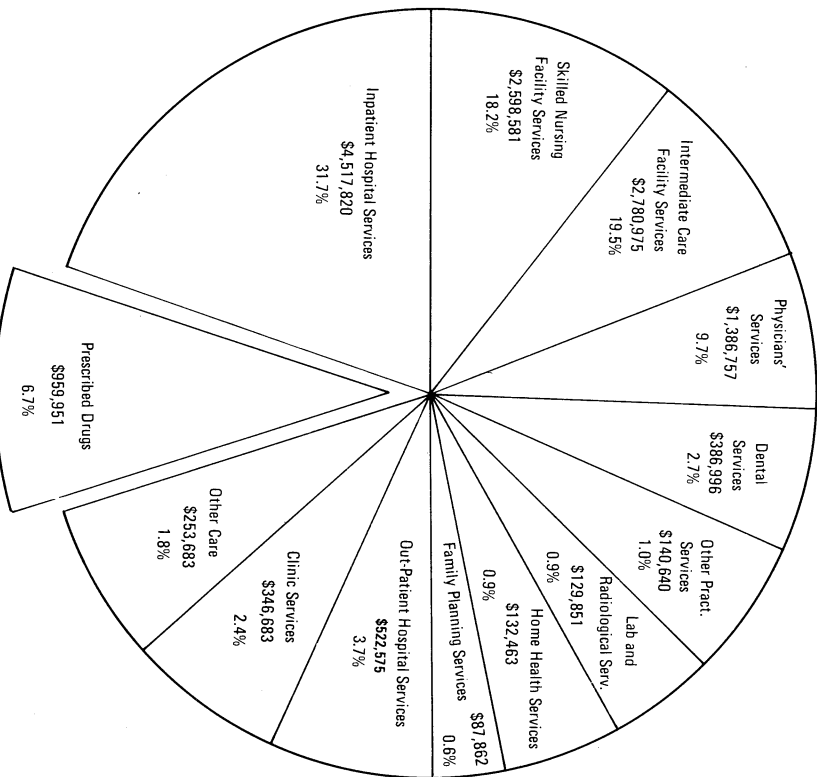
1973  
\$8,810,215<sup>1</sup>



1975  
\$12,318,468



1976  
\$14,244,837



(Dollar figures in thousands — 000)

(Pie-charts reflect trends by type of service)

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### Medical Assistance Programs

(Alphabetically by state and/or territory)

Data submitted directly to NPC unless otherwise noted:

1. Benefits Provided and Groups Eligible
2. Drug Program Recipients
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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 Medicaid in the nation's health care and the significance of the levels of care made available to patients receiving benefits under such a program. 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 the Medicaid programs which are reflected in the current compilation.

The revisions of "Pharmaceutical Benefits Under State Medical Assistance Programs" include many changes made since the implemen-

tation 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 by an individual state program. 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. Scope 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 recipients of 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.

Fifty-three (53) of the fifty-four (54) jurisdictions have 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
16. Inpatient psychiatric hospital services for individuals under 21
17. Other Medical or Remedial Care recognized under State law and specified by Secretary, Department of Health, Education, and Welfare

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 Control and Review and Medical Review

Social Security Act, As Amended, Section 1902 (a) (30) states under: (Safeguards Against Unnecessary Care and Services)

State Medicaid plans must provide such methods and procedures relating to the utilization of, and the payment for, care and services available under the plan as may be necessary to safeguard against unnecessary utilization and to assure that payments (including payment for drugs) are not in excess of reasonable charges consistent with efficiency, economy, and quality of care.

The law also further requires under: Section 1902 (a) (19):

State Medicaid plans to provide such safeguards as may be necessary to assure care and services will be provided in a manner consistent with simplicity of administration and in the best interest of the recipients.

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.

Alternate PSROs

Federal Register, Vol. 42, No. 63, April 1, 1977  
Advance Notice of Proposed Rule Making

As a result of legislative amendments passed on December 31, 1975 (Section 108, of Public Law 94-182), the Secretary may designate alternate PSROs in those areas where, as of January 1, 1976, a poll under section 1152(f) of the Act had been lost or the largest membership association of doctors of medicine or osteopathy in the area or State opposed PSROs prior to December 31, 1975. Regulations

establishing the criteria and other requirements are prerequisite to the designation of alternate PSROs under Section 1152 (b)(1)(B).

### Background

It is possible that physician organizations will not be established in all 203 designated PSRO areas by Jan. 1, 1978 as required by law. The Senate Finance Committee Report (No. 92-1230, 92nd Congress, 2nd Session, 1972, p. 259) on the PSRO statute declared that:

...only a full implementation effort will provide the impetus needed to establish effective and equitable comprehensive professional review throughout the Nation.

Congress made it clear that other applicant organizations would be considered for PSRO status if the local preferred physician group failed to express interest in performing review activities.

Given the possibility that there may not be qualified physician organizations as specified under section 1152 (b)(1)(A) of the Act in every designated PSRO area by January 1, 1978, the Department must determine eligibility criteria which will be used in designating alternate PSROs.

### 3. Family Planning Services

Social Security Amendments of 1972 require that family planning services and supplies must be furnished (including drug products) to individuals of child bearing age, including minors who can be considered to be sexually active, who are eligible under the State plan.

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, in accordance with the provision of Section 402 (a)15 of the Act.

### 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

AFDC Recipients (continued):

- c. All families that were receiving assistance under the State's AFDC plan in at least 3 of the 6 months immediately preceding the month which the family became ineligible for AFDC.

Vendor Drug Program

1. Freedom of Choice

Section 1902 (a)(23) Social Security Act:

Any individual eligible for Medicaid may obtain the services available under the State Medicaid plan from any institution, agency, pharmacy or practitioner, including an organization which provides such services or arranges for their availability on a prepayment basis, which is qualified to perform such services.

It is not required an institution has 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

Title 45 - Subtitle A - Part 19 - Limitations on Payment or Reimbursement for Drugs

Policy

The Maximum Allowable Cost (MAC) regulation establishes a mechanism to limit reimbursement or payment for prescribed drugs furnished under Federally subsidized health care programs.

Sec. 250.3 (b)(2)(H) - Reasonable Charges

"For each multiple source drug designated by the Pharmaceutical Reimbursement Board and published in the Federal Register cost will be limited to the lower of:

- (a) the maximum allowable cost (MAC) established by the Board for such drug and published in the Federal Register, or
- (b) the estimated acquisition cost (EAC - as defined in regulations).

Limitation to the maximum allowable cost established by the Board shall not apply in any case where a physician certifies in his own handwriting that in his medical judgement a specific brand is medically necessary.

The form and procedure for the certification shall be prescribed by the State. An example of an acceptable certification would be a notation "brand necessary." A procedure for checking a box on a form will not constitute an acceptable certification."

For all prescribed drugs the upper limits for which payment is made shall be based on the lower of the cost of the drug plus a dispensing fee or the provider's usual and customary charge to the general public.

3. Drugs with Final Maximum Allowable Cost Determinations\*  
Published Federal Register - May 27, 1977  
Effective - June 27, 1977

AMPICILLIN -

250 mg. capsules .... \$0.0725 per capsule  
500 mg. capsules .... \$0.1390 per capsule

*Suspension -  
125mg/5ml = # 0.0145 / ml  
250mg/5ml = # 0.0290 / ml*

4. Pharmaceutical Reimbursement Board (PRB)

The PRB is established in the Office of the Assistant Secretary of Health, HEW.<sup>1/</sup> It consists of five (5) full time employees of the Department representing the principal program areas involved in developing and implementing the cost determination. The Assistant Secretary for Health shall be a member and shall serve as Chairman of the Board.

5. Pharmaceutical Reimbursement Advisory Committee

The advisory committee consists of fifteen (15) members not in the full time employment of the United States. Eight (8) appointments are for two years, seven (7) are for one year. Appointments are made at the discretion of the Secretary, DHEW.

Functions of the Committee:

- (a) Advise the Board on the appropriateness of proposed MAC determinations submitted by the Board.

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\*Determination by Pharmaceutical Reimbursement Board, in accordance with Department of Health, Education and Welfare regulations concerning Limitations on Payment or Reimbursement for Drugs (45 CFR Part 19).

<sup>1/</sup> Subject to change as a result of HEW reorganization. It is anticipated a consolidated "MAC Program Office" will be established under the new HEW-Health Care Financing Administration.

- (b) Upon request, advise the Secretary and the Board concerning general policies and procedures of the Department in reimbursing or paying the cost of drugs used in Departmentally funded programs.

6. Procedures for Determination of Maximum Allowable Cost

- (a). Identification of drugs to which MAC may be applied.  
The drugs are identified by the Board. They are multiple source drugs for which significant amounts of Federal funds are or may be expended under programs and for which there are or may be significantly different prices.
- (b). Review by the Food and Drug Administration  
The Board notifies the FDA in writing of each drug identified for proposed MAC. The FDA in response to the Board advises in writing:
- (1) Whether there is any regulatory action, pending or under consideration, bearing on the marketability of, or to establish a bioequivalence requirement for the drug.
  - (2) Whether in the judgement of FDA, any such action is a reason for delaying or withholding the establishment of a MAC for the drug.
- (c). Determination of lowest unit price  
The Board shall determine the lowest unit price at which the drug is widely and consistently available from any formulator or labeler.
- (d). Review by Pharmaceutical Reimbursement Advisory Committee  
The Advisory Committee reviews each determination of lowest unit price submitted by the Board. All information utilized by the Board in determining the lowest unit price is also submitted to the Advisory Committee. The committee reviews each determination and provides the Board in writing its advice concerning the Board's determinations of lowest price and the appropriateness of proposing a maximum allowable cost pursuant to paragraph (e), following. The Advisory Committee meetings are open to the public.
- (e). Proposed MAC  
The Board, after considering the advice and recommendations of the Advisory Committee, determine whether the lowest unit price should be proposed as the MAC for the drug.

(f). Notice and Comment

Each proposed MAC is published in the Federal Register with the Advisory Committee's report of its advice and summary of the Board's reasons for proposal. Public comments within 30 days are invited.

(g). Public Hearing

Any person or organization may request in writing an informal hearing before the Board. If granted, notice of hearing will be published in Federal Register. Any denial of a hearing and for what reason(s) will be forwarded to the party requesting it.

(h). Conduct of Hearing

The hearing is informal. It may be before an administrative law judge, the full Board or a panel of three or more members of the Board. The hearing is open to the public.

(i). Final Determination

After consideration of all the forementioned actions, the Board decides whether a MAC should be established for each drug for which a notice of a proposed MAC was published and, if so, shall determine the MAC for each drug. Notice of such determination is then published in the Federal Register with an implementation date.

Review and Revision

There is a procedure established for regular review and revision of established MAC determinations.

7. Estimated Acquisition Cost (EAC)

Estimated Acquisition Cost (EAC) applies to all drug products not reimbursed for as a maximum allowable cost (MAC) drug product established by the HEW-Pharmaceutical Reimbursement Board.

The development of EAC price levels is the responsibility of each state.

However, HEW will periodically provide each state with product cost data as a guideline to assist in establishing the estimated acquisition costs for that particular state.



## 8. 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" (when one is used) 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.

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.

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

REGIONAL ADMINISTRATORS AND DIRECTORS  
Health, Education and Welfare  
Medical Services Administration  
Health Care Financing Administration

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REGION	ACTING REGIONAL MEDICAID DIRECTORS	ACTING REGIONAL ADMINISTRATORS - HCFA	HEW REGIONAL DIRECTORS
I - BOSTON Conn., Me., Mass., N.H., R.I., Vt. John F. Kennedy Federal Bldg. Government Center Boston, Massachusetts 02203	Alfred G. Fuoroli 223-6881 or 5347  (617)	John D. Kennedy 223-6871	Acting Warren McFague 223-6831
II - NEW YORK N.Y., N.J., P.I., V.I. Federal Building 26 Federal Plaza New York, N.Y. 10007	William Toby, Jr. 264-2590 or 2584  (212)	William Toby, Jr. 264-2580	Bernice L. Bernstein 264-4600
III - PHILADELPHIA Del., D.C., Md., Pa., Va., W.Va. Mailing - P.O. Box 7760 Physical - 36th & Market Sts. Philadelphia, Pa. 19101	Alwyn Carty, Jr. 596-1325  (215)	Alwyn Carty, Jr. 596-1351	Acting Benjamin Guy 596-6492
IV - ATLANTA Ala., Fla., Ga., Ky., Miss., N.C. S.C., Tenn. Rm. 721 - 50 Seventh St., N.E. Atlanta, Georgia 30323	Edward Davis 257-3953 or 4624  (404)	Virginia M. Smyth 257-4038	Acting Charles Cain 257-4817
V - CHICAGO Ill., Ind., Minn., Mich., Ohio, Wisc. 300 S. Wacker Drive Chicago, Illinois 60606	Ralph Detloff 8-886-5353 or 353-4238  (312)	George R. Holland 353-4235	Acting George R. Holland 353-5160
VI - DALLAS Ark., La., N.M., Okla., Texas 1200 Main Tower Building Dallas, Texas 75202	James A. Adams 729-4105  (214)	Jerry D. Sconce 729-4071	Stuart Clarke 729-3301
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July 6, 1977

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Drug Program Administrators

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-21  
1977

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Vendor Payments for Prescribed Drugs  
Under Title XIX of the Social Security Act, Medical Assistance Programs  
for Fiscal Years Ended June 30, 1971-1976<sup>1/</sup>  
(Amounts in Thousands)

<u>State</u>	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>	<u>1976</u>
<u>Total</u>	<u>\$473,020</u>	<u>\$548,764</u>	<u>\$612,326</u>	<u>\$706,746</u>	<u>\$816,453</u>	<u>\$959,951</u>
Alabama	15,213	9,214	10,451	12,123	15,643	15,730
Arkansas	-	-	-	6,321	11,960	14,221
California	82,808	76,548	77,308	87,957	96,156	119,881
Colorado	7,045	7,577	7,253	6,856	7,458	8,343
Connecticut	5,410	5,880	6,007	7,124	9,079	10,864
Delaware	767	1,006	1,209	1,248	1,342	1,614
Dist. of Col.	2,423	3,187	3,904	4,843	5,779	6,524
Florida	11,682	11,143	11,696	11,764	18,878	19,604
Georgia	15,087	14,112	17,795	16,753	25,929	26,771
Guam	- 9	- 21	- 45	- 2/	- 2/	- 2/
Hawaii	373	1,560	1,875	2,372	2,747	3,999
Idaho	-	724	1,280	1,331	1,503	1,762
Illinois	25,890	34,639	43,656	56,945	64,907	66,629
Indiana	7,858	10,812	12,672	11,416	12,505	16,512
Iowa	5,357	5,225	5,309	5,260	6,607	8,547
Kansas	5,194	8,161	7,183	7,415	8,364	10,072
Kentucky	12,486	11,687	12,129	10,698	12,009	12,896
Louisiana	8,706	9,456	10,199	10,931	25,755	34,316
Maine	1,656	2,098	2,626	3,745	3,825	5,762
Maryland	10,119	12,581	14,838	15,869	17,282	17,634
Massachusetts	26,160	27,073	23,989	24,157	28,776	29,750
Michigan	17,611	21,868	30,976	36,933	43,713	50,566
Minnesota	11,503	12,643	13,196	13,160	12,831	16,423
Mississippi	8,393	10,790	12,603	16,256	19,677	23,949
Missouri	9,363	9,792	10,572	11,685	12,923	15,991
Montana	952	964	1,027	1,135	1,706	1,723
Nebraska	3,582	3,870	4,134	4,528	4,709	5,496
Nevada	652	751	876	916	1,165	1,502
New Hampshire	1,316	1,582	1,856	2,071	2,738	2,489
New Jersey	10,998	13,925	16,924	19,725	24,509	24,865
New Mexico	2,832	2,544	2,381	2,828	3,130	3,805
New York	56,615	66,330	62,364	86,851	86,183	100,242
North Carolina	14,545	18,093	20,253	16,599	18,281	22,604
North Dakota	1,469	1,712	1,743	1,766	2,146	1,955
Ohio	17,455	20,929	24,396	38,351	34,339	38,597

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, 1971-1976<sup>1/</sup>  
(Amounts in Thousands)

<u>State</u>	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>	<u>1976</u>
Oklahoma	124 <sup>3/</sup>	172 <sup>3/</sup>	168 <sup>3/</sup>	90 <sup>3/</sup>	14	3,601
Oregon	2,239	2,462	2,797	3,180	4,174	5,282
Pennsylvania	20,923	24,874	26,358	29,664	24,853	44,716
Puerto Rico	- <sup>2/</sup>	7,036	15,378	16,884	21,862	21,270
Rhode Island	4,320	4,548	4,586	4,876	5,304	5,878
South Carolina	3,319	3,804	4,740	4,569	7,371	10,419
South Dakota	-	-	-	-	1,560	1,247
Tennessee	9,583	10,557	10,823	12,439	17,853	23,789
Texas	- <sup>2/</sup>	21,518	30,855	32,224	37,468	44,383
Utah	1,374	1,677	1,997	2,286	2,424	2,826
Vermont	1,441	1,713	2,088	2,103	2,414	2,794
Virgin Islands	- <sup>2/</sup>	239	325	326	301	466
Virginia	7,215	11,451	13,293	14,224	13,911	12,709
Washington	7,671	7,124	8,907	10,448	11,891	13,021
West Virginia	2,939 <sup>4/</sup>	3,262	3,786	3,256	3,710	6,482
Wisconsin	10,345	9,827	11,501	12,245	16,788	19,430

<sup>1/</sup> Source: National Center for Social Statistics, Health Care Financing Administration, (formerly Social and Rehabilitation Service), Department of Health, Education and Welfare (NCSS/HCF/A/DHEW).

<sup>2/</sup> No data reported.

<sup>3/</sup> 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.)

<sup>4/</sup> Includes State Pharmacy Program payments made without Federal participation.

Note: No Title XIX vendor drug program in FY-1976:  
Alaska, Arizona, Wyoming

Totals may not add due to rounding.

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, 1976  
(Dollars in Thousands)

State	Type of Program						
	OAA	AFDC	AB	APTD	MAA	GA	MN
Total	\$254,316	\$228,918	\$7,753	\$173,763	\$28,825	\$22,332	\$105,719
Alabama	9,370	2,034	154	3,853	-	-	-
Arkansas	7,920	2,171	1,480	3,254	-	-	156
California	31,917	29,378	1,312	37,937	-	-	27,343 <sup>1/</sup>
Colorado	3,911	1,750	22	2,252	-	-	408 <sup>2/</sup>
Connecticut	894	3,495	16	1,242	-	-	5,223
Delaware	412	755	32	415	-	-	-
D. C.	381	3,367	17	1,039	-	-	1,720
Florida	12,259	4,101	196	6,630	-	-	-
Idaho	144	551	2	204	861	-	-
Illinois	3,505	32,573	156	11,901	-	6,848	18,611
Iowa	3,509	2,485	130	1,518	1,137	-	-
Kansas	1,615	2,320	56	1,662	4,574	799	-
Kentucky	5,083	3,030	135	3,362	-	-	1,285
Louisiana	14,024	3,888	188	6,054	-	431	10 <sup>3/</sup>
Maine	2,323	1,808	23	1,608	-	-	-
Maryland	7,733	5,239	36	2,957	-	2,385	5,488
Massachusetts	7,419	7,771	-	4,956	8,847	916	-
Michigan	7,019	20,203	161	10,281	12,902	-	-
Minnesota	2,383	3,503	45	1,791	-	-	8,701
Mississippi	13,602	4,900	216	5,221	-	10 <sup>4/</sup>	-
Missouri	7,880	4,189	322	3,199	-	813 <sup>5/</sup>	-
Montana	290	347	10	385	-	-	707
Nebraska	1,165	966 <sup>6/</sup>	30	1,045	-	-	2,289 <sup>7/</sup>
Nevada	617	483	19	383	-	-	-
New Hampshire	781	762	31	334	-	-	581
New Jersey	6,657	12,760	102	5,007	-	-	270 <sup>8/</sup>
New Mexico <sup>9/</sup>	1,041	1,326	27	1,411	-	-	-
North Carolina	6,916	3,568	450	6,702	-	-	6,653
North Dakota	491	328	3	365	-	-	792 <sup>10/</sup>
Ohio	18,753	15,863	190	4,783	-	-	-

Chart II  
(continued)

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, 1976  
(Dollars in Thousands)

State	Type of Program						
	OAA	AFDC	AB	APTD	MAA	GA	MN
Oregon	1,989	1,510	81	1,511	-	-	-
Pennsylvania	8,087	18,253	1,076	8,035	-	9,179	-
Puerto Rico	-	1,591	-	58	-	-	13,406
Rhode Island	1,338	1,442	24	1,255	-	470	1,880
South Carolina	4,900	2,005	210	3,262	-	-	42 <sup>11/</sup>
South Dakota	839	156	9	254	-	-	7 <sup>12/</sup>
Tennessee	11,844	4,098	150	7,695	2	-	-
Texas	29,443	8,250	353	8,079	-	-	-
Utah	971	1,008	19	852	-	-	16
Vermont	647	829	-	804	502	-	13 <sup>13/</sup>
Virginia	5,580	3,721	148	3,155	-	-	-
Washington	5,188	3,239	54	4,094	-	481	303 <sup>14/</sup>
West Virginia <sup>15/</sup>	2,231	3,802	-	-	-	-	1,761
Wisconsin	3,327	3,100	68	2,958	-	-	8,054

- <sup>1/</sup> Includes \$9,418 - Medically Indigent.  
<sup>2/</sup> Other.  
<sup>3/</sup> Others.  
<sup>4/</sup> CWS Foster Care.  
<sup>5/</sup> GR and CWS - FC.  
<sup>6/</sup> AFDC - \$612. Children - \$354.  
<sup>7/</sup> MN-AFDC - \$69, MN Children - \$40.  
<sup>8/</sup> DYFS.  
<sup>9/</sup> DHEW-SRS 2082A(2) FY-1976.  
<sup>10/</sup> Includes \$8 - Foster Care.  
<sup>11/</sup> All other.  
<sup>12/</sup> Foster Care.  
<sup>13/</sup> All other.  
<sup>14/</sup> Other.  
<sup>15/</sup> OAA, AB, APTD = \$2,231, AFDC = \$3,802, Others \$1,761.

Note: Jurisdictions not reporting have been omitted: Alaska, Arizona,  
Georgia, Guam, Hawaii, Indiana, New York, Oklahoma, Wyoming.  
(Underlined states do not have vendor drug programs)



Amounts of Medical Vendor Payments by Type of Service  
and by HEW Region and State  
Fiscal Year 1976

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..	\$14,244,837,399	\$4,517,819,976	\$4,010,220,835	\$507,599,141	\$2,598,580,723	\$2,780,975,290	\$609,546,319	
REGION I.....	1,044,482,097	376,090,691	349,930,236	26,160,455	181,795,350	211,423,365	37,988,678	
CONNECTICUT 1/.....	192,737,098	55,414,548	55,414,548	---	79,756,687	6,814,006	---	
MAINE.....	84,196,544	29,833,669	29,833,669	---	2,349,134	27,297,681	---	
MASSACHUSETTS.....	605,354,222	237,122,360	217,130,099	19,992,261	86,304,049	122,248,934	24,820,081	
NEW HAMPSHIRE.....	34,627,084	5,591,256	5,588,940	4,316	1,665,583	18,624,659	---	
RHODE ISLAND.....	90,122,555	36,916,388	33,038,441	3,877,947	10,060,500	24,111,111	11,736,869	
VERMONT.....	37,444,594	11,212,470	8,926,539	2,285,931	1,659,397	12,326,974	1,431,728	
REGION II.....	3,845,761,576	1,390,208,575	1,119,286,524	270,922,051	825,255,864	548,016,857	146,327,931	
NEW JERSEY.....	403,312,196	149,321,005	100,902,501	48,418,504	7,487,207	114,969,498	---	
NEW YORK.....	3,346,145,064	1,208,128,535	985,624,988	222,503,547	817,768,657	433,047,359	146,327,931	
PUERTO RICO.....	93,944,697	31,616,517	31,616,517	---	---	---	---	
VIRGIN ISLANDS.....	2,359,619	1,142,518	1,142,518	---	---	---	---	
REGION III.....	1,386,300,985	489,105,495	481,387,517	7,717,978	286,613,183	244,724,132	80,936,910	
DELAWARE.....	17,927,454	6,454,338	5,887,944	566,394	298,308	4,295,362	---	
DIST. OF COLUMBIA.....	104,878,209	46,202,435	46,202,435	---	3,057,055	15,413,058	1,525,796	
MARYLAND.....	227,364,345	92,916,450	92,916,450	---	28,316,393	29,346,637	---	
PENNSYLVANIA.....	788,480,052	258,965,211	258,965,211	---	249,249,186	114,720,333	61,786,507	
VIRGINIA.....	188,356,720	55,580,746	48,429,162	7,151,584	5,240,846	71,014,375	17,624,607	
WEST VIRGINIA.....	59,294,205	28,986,315	28,986,315	---	451,395	9,934,367	---	
REGION IV.....	1,336,831,254	351,970,814	331,638,107	20,332,707	278,827,608	260,726,926	61,685,219	
ALABAMA.....	160,513,041	35,923,224	35,918,111	5,113	51,218,950	25,281,976	---	
FLORIDA.....	176,309,174	52,785,437	48,206,416	4,579,021	59,700,431	8,913,628	---	
GEORGIA.....	256,335,685	59,157,079	59,157,079	---	59,653,324	56,225,177	11,136,696	
KENTUCKY.....	150,177,997	45,737,681	42,650,124	3,087,557	22,440,452	33,216,335	11,778,201	
MISSISSIPPI.....	111,268,777	27,270,011	27,270,011	---	31,756,916	4,988,966	7,013	
NORTH CAROLINA.....	202,177,955	65,785,757	57,084,757	8,701,000	26,439,725	42,892,399	19,347,253	
SOUTH CAROLINA 1/.....	103,892,610	29,831,713	25,915,339	3,916,374	26,789,626	11,185,615	1,846,253	
TENNESSEE.....	176,156,015	35,479,912	35,436,270	43,642	828,184	78,022,830	17,569,801	
REGION V.....	2,880,566,907	847,543,098	773,784,075	73,759,023	474,115,087	635,889,663	116,406,351	
ILLINOIS.....	796,605,459	288,965,323	273,997,635	14,967,688	71,338,714	147,996,845	4,635,049	
INDIANA.....	205,429,960	45,173,195	45,173,195	---	26,999,014	76,746,920	---	
MICHIGAN.....	704,820,586	233,865,359	200,891,154	32,974,205	133,451,851	91,600,287	3,667,534	
MINNESOTA.....	319,587,926	62,565,605	57,090,780	5,474,825	65,851,401	118,499,175	56,230,235	
OHIO.....	444,114,217	146,431,548	133,550,795	12,880,753	90,707,910	63,005,766	6,976,152	
WISCONSIN.....	410,008,759	70,542,068	63,080,516	7,461,552	85,766,197	138,040,670	44,897,381	
REGION VI.....	1,091,879,695	213,923,975	213,171,632	752,343	46,547,083	542,916,017	106,841,098	
ARKANSAS.....	117,293,524	19,713,167	19,703,599	9,568	17,839,964	44,594,301	8,392,422	
LOUISIANA.....	205,821,426	53,020,077	52,424,102	595,975	2,741,109	85,085,839	24,759,947	
NEW MEXICO.....	36,079,997	11,208,561	11,208,561	---	116,097	9,886,300	1,985,522	
OKLAHOMA.....	161,809,471	44,760,917	44,760,917	---	375,191	84,337,758	9,850,915	
TEXAS.....	570,875,277	85,221,253	85,074,453	146,800	25,474,722	319,011,819	61,852,292	
REGION VII.....	432,216,433	116,333,423	110,397,548	5,935,875	14,156,329	167,114,553	24,515,108	
IOWA.....	121,115,079	21,611,882	21,611,882	---	584,557	66,733,872	7,509,691	
KANSAS.....	125,706,783	35,762,869	32,099,288	3,663,581	3,387,282	46,377,393	11,059,291	
MISSOURI.....	124,902,027	46,049,088	44,190,330	1,858,758	8,219,487	24,454,720	444,821	
NEBRASKA.....	60,492,544	12,909,584	12,496,048	413,536	1,965,003	29,548,568	5,501,305	
REGION VIII.....	234,217,158	52,333,528	46,059,115	6,274,413	48,705,074	69,756,045	10,239,214	
COLORADO.....	107,022,015	25,737,215	21,970,442	3,766,773	17,560,720	33,862,193	4,787,314	
MONTANA.....	31,048,588	6,350,198	6,113,326	236,872	7,582,467	7,784,316	322,983	
NORTH DAKOTA.....	24,241,183	5,400,295	4,121,681	1,278,614	8,791,315	4,690,643	---	
SOUTH DAKOTA.....	25,049,903	4,496,895	4,496,895	---	5,841,763	9,332,643	1,362,364	
UTAH.....	40,172,102	8,884,112	7,891,958	992,154	6,813,842	12,105,661	3,364,775	
WYOMING.....	6,683,367	1,464,813	1,464,813	---	2,114,967	1,980,589	401,778	
REGION IX.....	1,675,918,990	608,540,072	519,239,244	89,300,828	365,889,223	26,821,565	---	
CALIFORNIA.....	1,600,545,680	588,419,907	499,353,990	89,065,917	348,549,538	20,934,274	---	
HAWAII.....	52,991,561	12,115,902	12,115,902	---	12,995,098	3,922,239	---	
NEVADA.....	22,381,749	8,004,263	7,769,352	234,911	4,344,587	1,665,052	---	
REGION X.....	316,662,304	71,770,305	65,326,837	6,443,468	76,675,922	73,586,167	24,605,810	
ALASKA.....	12,080,038	2,080,342	1,813,925	266,417	2,084,175	5,905,682	2,009,811	
IDAHO.....	30,616,088	4,792,886	4,792,886	---	5,063,550	12,511,101	4,494,186	
OREGON.....	95,737,216	20,239,802	17,700,315	2,539,487	2,016,573	48,391,589	18,101,813	
WASHINGTON.....	178,228,962	44,657,275	41,019,711	3,637,564	67,511,624	6,777,795	---	

SEE FOOTNOTE AT END OF TABLE.

Source: U. S. Department of Health, Education, and Welfare  
\*Health Care Financing Administration

\*Formerly Social and Rehabilitation Service  
National Center for Social Statistics

Amounts of Medical Vendor Payments by Type of Service  
and by HEW Region and State  
Fiscal Year 1976

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..	\$14,244,837,399	\$2,171,428,971	\$1,386,756,563	\$386,995,697	\$140,640,458	\$522,575,391	\$346,683,295
REGION I.....	1,044,482,097	173,434,687	82,942,059	32,277,819	6,904,448	57,542,859	6,520,532
CONNECTICUT 1/.....	192,737,098	6,814,006	15,768,058	3,529,914	---	11,906,791	---
MAINE.....	84,196,544	27,297,681	11,479,462	1,895,181	---	3,524,459	---
MASSACHUSETTS.....	605,354,222	97,428,853	41,966,261	22,407,265	6,130,139	36,430,892	6,512,277
NEW HAMPSHIRE.....	34,627,084	18,624,659	3,360,568	850,740	373,730	931,285	6,919
RHODE ISLAND.....	90,122,555	12,374,242	4,889,291	2,466,617	277,589	3,538,956	---
VERMONT.....	37,444,594	10,895,246	5,478,419	1,128,102	122,990	1,210,476	1,336
REGION II.....	3,845,761,576	401,688,926	230,625,077	72,689,188	28,204,254	111,443,666	245,111,699
NEW JERSEY.....	403,312,196	114,969,498	45,674,400	17,562,349	2,148,280	28,826,111	2,366,414
NEW YORK.....	3,346,145,064	286,719,428	162,592,880	54,064,236	26,055,974	82,042,575	242,745,285
PUERTO RICO.....	93,944,697	---	22,308,645	1,047,573	---	---	---
VIRGIN ISLANDS.....	2,359,619	---	49,152	15,030	---	574,980	---
REGION III.....	1,386,300,985	163,787,222	116,644,109	33,089,056	9,172,877	43,850,793	37,792,047
DELAWARE.....	17,927,454	4,295,362	3,166,269	---	92,211	1,494,390	91,273
DIST. OF COLUMBIA.....	104,878,209	13,887,262	14,155,371	1,014,212	1,437,009	8,457,906	3,510,768
MARYLAND.....	227,364,345	29,346,637	18,371,984	10,010,421	---	23,510,083	---
PENNSYLVANIA.....	788,480,052	52,933,826	50,793,673	16,563,325	4,114,486	307,708	33,029,662
VIRGINIA.....	188,356,720	53,389,768	22,390,562	4,074,136	1,531,032	10,080,706	1,160,344
WEST VIRGINIA.....	59,294,205	9,934,367	7,766,250	1,426,962	1,998,139	---	---
REGION IV.....	1,336,831,254	199,041,707	158,411,386	38,629,086	5,691,122	53,031,299	6,270,082
ALABAMA.....	160,513,041	25,281,976	18,037,878	2,879,183	1,404,774	4,846,292	---
FLORIDA.....	176,309,174	8,913,628	21,474,546	3,424,295	175,286	7,859,679	6,092
GEORGIA.....	256,335,685	45,088,481	27,409,498	10,468,367	494,143	11,580,685	---
KENTUCKY.....	150,177,997	21,438,134	17,829,130	4,729,274	863,590	6,031,170	2,980,263
MISSISSIPPI.....	111,268,777	4,981,953	15,743,646	2,536,589	385,990	3,433,163	25
NORTH CAROLINA.....	202,177,955	23,545,144	27,405,479	7,971,643	2,057,513	7,489,616	2,569,275
SOUTH CAROLINA 1/.....	103,892,610	9,339,362	12,687,729	3,316,874	309,826	3,497,354	---
TENNESSEE.....	176,156,015	60,453,029	23,014,219	3,302,861	---	8,293,340	714,427
REGION V.....	2,880,566,907	519,483,312	336,935,349	94,501,679	48,663,921	116,527,897	33,709,335
ILLINOIS.....	796,605,459	143,361,796	92,779,762	27,009,808	15,484,952	31,335,032	28,229,364
INDIANA.....	205,429,960	76,746,920	18,063,557	3,881,884	1,394,345	7,538,211	1,433,908
MICHIGAN.....	704,820,586	87,932,753	106,511,913	25,943,227	9,523,981	33,060,422	888,469
MINNESOTA.....	319,587,926	62,268,940	65,405,479	8,498,545	2,591,663	8,079,534	359,126
OHIO.....	444,114,217	56,029,614	46,794,772	15,209,486	7,747,827	25,307,977	2,798,468
WISCONSIN.....	410,008,759	93,143,289	45,379,866	13,958,729	11,921,153	11,206,721	---
REGION VI.....	1,091,879,695	436,074,919	113,548,947	10,122,868	3,918,927	21,289,085	3,510,797
ARKANSAS.....	117,293,524	36,201,879	12,332,105	4,565,298	314,082	1,744,582	---
LOUISIANA.....	205,821,426	60,325,892	17,336,204	2,935	---	5,438,196	2,792,906
NEW MEXICO.....	36,079,997	7,900,778	5,061,464	1,351,634	526,488	1,489,544	717,891
OKLAHOMA.....	161,809,471	74,486,843	17,724,287	1,980,696	194,867	421,169	---
TEXAS.....	570,875,277	257,159,527	61,094,887	2,222,305	2,883,490	12,195,594	---
REGION VII.....	432,216,433	142,599,445	48,003,996	15,439,249	4,521,789	13,682,407	1,999,321
IOWA.....	121,115,079	59,224,181	11,350,983	4,800,566	1,814,700	3,288,850	95,868
KANSAS.....	125,706,783	35,318,102	13,294,071	4,633,589	1,728,519	4,027,847	1,429,630
MISSOURI.....	124,902,027	24,009,899	18,546,295	4,407,124	523,984	4,665,891	---
NEBRASKA.....	60,492,544	24,047,263	4,812,647	1,597,970	454,586	1,699,819	473,823
REGION VIII.....	234,217,158	59,516,831	22,956,460	5,033,183	1,937,279	9,504,373	1,084,867
COLORADO.....	107,022,015	29,074,879	11,000,823	876,742	---	6,476,804	---
MONTANA.....	31,048,588	7,461,333	4,190,668	1,150,484	783,060	659,185	---
NORTH DAKOTA.....	24,241,183	4,690,643	1,304,499	581,117	421,051	251,953	---
SOUTH DAKOTA.....	25,049,903	7,970,279	2,627,976	304,638	511,211	443,400	---
UTAH.....	40,172,102	8,740,886	2,992,858	2,084,720	170,068	1,526,754	1,076,596
WYOMING.....	6,683,367	1,578,811	839,636	35,482	51,889	146,277	8,271
REGION IX.....	1,675,918,990	26,821,565	246,559,822	70,156,743	29,520,448	85,578,945	8,193,260
CALIFORNIA.....	1,600,545,680	20,934,274	234,378,933	63,587,936	28,832,598	82,117,485	8,183,155
HAWAII.....	52,991,561	3,922,239	8,773,809	5,416,557	406,654	2,258,364	---
NEVADA.....	22,381,749	1,965,052	3,407,080	1,152,250	281,196	1,203,096	10,105
REGION X.....	316,662,304	48,980,357	30,129,358	15,056,826	2,105,393	10,124,067	2,491,355
ALASKA.....	12,080,038	3,895,871	1,083,593	256,961	---	444,929	---
IDAHO.....	30,616,088	8,016,915	3,567,755	722,711	151,674	986,402	---
OREGON.....	95,737,216	30,289,776	7,507,234	3,349,127	426,744	3,326,616	---
WASHINGTON.....	178,228,962	6,777,795	17,970,776	10,728,027	1,526,975	5,366,120	2,491,355

Source: U. S. Department of Health, Education, and Welfare  
\*Health Care Financing Administration

\*Formerly Social and Rehabilitation Service  
National Center for Social Statistics

Amounts of Medical Vendor Payments by Type of Service  
and by HEW Region and State  
Fiscal Year 1976

HEW REGION AND STATE	TOTAL	LABORATORY AND RADIOLOGICAL SERVICES	HOME HEALTH SERVICES	PRESCRIBED DRUGS	FAMILY PLANNING SERVICES	OTHER CARE
TOTAL, REPORTING STATES..	\$14,244,837,399	\$129,851,414	\$132,463,455	\$959,950,735	\$ 87,861,583	\$253,682,734
REGION I.....	1,044,482,097	2,596,828	6,592,486	57,537,325	3,737,342	18,520,990
CONNECTICUT 1/.....	192,737,098	---	---	10,864,242	---	1/ 8,682,852
MAINE.....	84,196,544	---	535,983	5,762,211	743,037	775,722
MASSACHUSETTS.....	605,354,222	2,043,298	5,118,456	29,749,652	1,823,850	7,496,789
NEW HAMPSHIRE.....	34,627,084	76,084	314,049	2,488,714	11,110	332,387
RHODE ISLAND.....	90,122,555	296,159	214,910	5,878,264	517,880	954,891
VERMONT.....	37,444,594	181,287	409,088	2,794,242	641,465	278,349
REGION II.....	3,845,761,576	9,088,986	107,905,420	146,841,709	13,772,805	116,597,470
NEW JERSEY.....	403,312,196	1,618,632	1,060,299	24,864,732	2,256,938	5,156,331
NEW YORK.....	3,346,145,064	3,112,852	106,828,324	100,241,929	11,515,867	98,000,591
PUERTO RICO.....	93,944,697	4,357,327	---	21,269,516	---	13,345,119
VIRGIN ISLANDS.....	2,359,619	175	16,797	468,532	---	95,429
REGION III.....	1,386,300,985	9,331,948	4,542,340	89,678,801	5,923,474	15,832,730
DELAWARE.....	17,927,454	179,645	68,909	1,613,959	165,871	6,919
DIST. OF COLUMBIA.....	104,878,209	546,672	1,322,601	6,523,564	1,366,326	1,871,230
MARYLAND.....	227,364,345	---	422,011	17,634,057	2,895,661	3,940,650
PENNSYLVANIA.....	788,480,052	8,448,146	1,958,804	44,716,067	275,864	5,337,587
VIRGINIA.....	188,356,720	157,485	770,015	12,708,702	1,116,080	2,531,691
WEST VIRGINIA.....	59,294,205	---	---	6,482,452	103,672	2,144,653
REGION IV.....	1,336,831,254	6,284,059	3,924,679	155,761,703	7,905,965	9,396,525
ALABAMA.....	160,513,041	3,413,264	593,419	15,730,259	845,553	338,269
FLORIDA.....	176,309,174	722,876	183,332	19,603,796	819,462	640,314
GEORGIA.....	256,335,685	254,724	261,576	26,771,180	1,035,378	3,024,554
KENTUCKY.....	150,177,997	130,224	1,329,643	12,895,533	795,248	1,199,454
MISSISSIPPI.....	111,268,777	161,838	169,516	23,948,913	655,557	217,647
NORTH CAROLINA.....	202,177,955	8,977	512,974	22,603,670	1,238,458	393,208
SOUTH CAROLINA 1/.....	103,892,610	1,556,323	611,421	10,419,111	1,497,899	2,189,119
TENNESSEE.....	176,156,015	35,833	262,798	23,789,241	1,018,410	1,393,960
REGION V.....	2,880,566,907	18,730,558	5,009,386	208,157,363	13,218,981	47,564,585
ILLINOIS.....	796,605,459	9,290,023	1,561,726	66,629,435	1,477,286	14,507,184
INDIANA.....	205,429,960	1,018,229	724,402	16,512,150	698,649	5,245,496
MICHIGAN.....	704,820,586	7,221,029	810,634	50,566,495	7,412,393	3,964,526
MINNESOTA.....	319,587,926	182,839	1,184,052	16,422,835	821,055	7,126,617
OHIO.....	444,114,217	890,876	712,036	38,596,623	926,696	4,984,232
WISCONSIN.....	410,008,759	127,562	16,536	19,429,825	1,882,902	11,736,530
REGION VI.....	1,091,879,695	17,439,630	653,747	100,325,816	4,089,085	13,593,718
ARKANSAS.....	117,293,524	623,486	53,932	14,221,066	230,408	1,061,133
LOUISIANA.....	205,821,426	3,626,429	271,879	34,316,422	281,716	907,714
NEW MEXICO.....	36,079,997	929,018	77,358	3,804,638	279,142	631,862
OKLAHOMA.....	161,809,471	1,185,289	---	3,600,633	214,297	7,014,367
TEXAS.....	570,875,277	11,075,408	250,578	44,383,057	3,083,522	3,978,642
REGION VII.....	432,216,433	3,460,788	275,828	40,106,770	3,862,672	3,259,307
IOWA.....	121,115,079	64,655	29,059	8,547,082	1,117,713	1,075,292
KANSAS.....	125,706,783	2,565,593	63,657	10,072,412	975,967	1,387,953
MISSOURI.....	124,902,027	84,752	95,242	15,991,498	1,689,105	174,841
NEBRASKA.....	60,492,544	745,788	87,870	5,495,778	79,887	621,221
REGION VIII.....	234,217,158	2,248,570	407,750	16,094,303	772,872	3,382,786
COLORADO.....	107,022,015	1,834,430	206,546	8,343,206	400,320	723,016
MONTANA.....	31,048,588	18,056	114,815	1,723,432	143,404	548,435
NORTH DAKOTA.....	24,241,183	309,800	19,702	1,954,699	47,936	468,173
SOUTH DAKOTA.....	25,049,903	---	9,983	1,246,817	59,283	175,294
UTAH.....	40,172,102	71,037	56,260	2,826,149	96,278	1,467,767
WYOMING.....	6,683,367	15,247	444	---	25,651	101
REGION IX.....	1,675,918,990	54,393,921	1,799,172	125,382,306	32,215,600	20,867,913
CALIFORNIA.....	1,600,545,680	52,823,101	1,535,904	119,881,416	31,379,795	19,921,638
HAWAII.....	52,991,561	1,522,446	157,417	3,998,560	803,555	620,960
NEVADA.....	22,381,749	48,374	105,851	1,502,330	32,250	325,315
REGION X.....	316,662,304	6,276,126	1,352,647	20,064,639	2,362,787	4,666,710
ALASKA.....	12,080,038	24,164	10,228	---	66,306	123,856
IDAHO.....	30,616,088	115,391	80,663	1,761,633	177,859	684,463
OREGON.....	95,737,216	1,927,255	116,455	5,281,618	966,297	2,187,906
WASHINGTON.....	178,228,962	4,209,316	1,145,301	13,021,388	1,152,325	1,670,685

1/ 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.

NOTE: TOTALS AND REGIONAL SUBTOTALS MAY NOT ADD DUE TO ROUNDING.



Distribution of Amounts of Medical Vendor Payments by Type of Service  
and by Region and State  
Fiscal Year 1976

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
<b>TOTAL, REPORTING STATES..</b>							
NUMBER.....	\$14,244,837,399	\$4,517,819,976	\$4,010,220,835	\$507,599,141	\$2,598,580,723	\$2,780,975,290	\$609,546,319
PERCENT.....	100.0	31.7	28.7	3.6	18.2	19.5	4.3
<b>REGION I.....</b>	<b>1,044,482,097</b>	<b>36.0</b>	<b>33.5</b>	<b>2.5</b>	<b>17.4</b>	<b>20.2</b>	<b>3.6</b>
CONNECTICUT <u>1</u> .....	192,737,098	28.8	28.8	---	41.4	3.5	---
MAINE.....	84,196,544	35.4	35.4	---	2.8	32.4	---
MASSACHUSETTS.....	605,354,222	39.2	35.9	3.3	14.3	20.2	4.1
NEW HAMPSHIRE.....	34,627,084	16.1	16.1	(2)	4.8	53.8	---
RHODE ISLAND.....	90,122,555	41.0	36.7	4.3	11.2	26.8	13.0
VERMONT.....	37,444,594	29.9	23.8	6.1	4.4	32.9	3.8
<b>REGION II.....</b>	<b>3,845,761,576</b>	<b>36.1</b>	<b>29.1</b>	<b>7.0</b>	<b>21.5</b>	<b>14.2</b>	<b>3.8</b>
NEW JERSEY.....	403,312,196	37.0	25.0	12.0	1.9	28.5	---
NEW YORK.....	3,346,145,064	36.1	29.5	6.6	24.4	12.9	4.4
PURTO RICO.....	93,944,697	33.7	33.7	---	---	---	---
VIRGIN ISLANDS.....	2,359,619	48.4	48.4	---	---	---	---
<b>REGION III.....</b>	<b>1,386,300,985</b>	<b>35.3</b>	<b>34.7</b>	<b>0.6</b>	<b>20.7</b>	<b>17.7</b>	<b>5.8</b>
DELAWARE.....	17,927,454	36.0	32.8	3.2	1.7	24.0	---
DIST. OF COLUMBIA.....	104,878,209	44.1	44.1	---	2.9	14.7	1.5
MARYLAND.....	227,364,345	40.9	40.9	---	12.5	12.9	---
PENNSYLVANIA.....	788,480,052	32.8	32.8	---	31.6	14.5	7.8
VIRGINIA.....	188,356,720	29.5	25.7	3.8	2.8	37.7	9.4
WEST VIRGINIA.....	59,294,205	48.9	48.9	---	0.8	16.8	---
<b>REGION IV.....</b>	<b>1,336,831,254</b>	<b>26.3</b>	<b>24.8</b>	<b>1.5</b>	<b>20.9</b>	<b>19.5</b>	<b>4.6</b>
ALABAMA.....	160,513,041	22.4	22.4	(2)	31.9	15.8	---
FLORIDA.....	176,309,174	29.9	27.3	2.6	33.9	5.1	---
GEORGIA.....	256,335,685	23.1	23.1	---	23.3	21.9	4.3
KENTUCKY.....	150,177,997	30.5	28.4	2.1	14.9	22.1	7.8
MISSISSIPPI.....	111,268,777	24.5	24.5	---	28.5	4.5	(2)
NORTH CAROLINA.....	202,177,955	32.5	28.2	4.3	13.1	21.2	9.6
SOUTH CAROLINA <u>1</u> .....	103,892,610	28.7	24.9	3.8	<u>1</u> 25.8	10.8	1.8
TENNESSEE.....	176,156,015	20.1	20.1	(2)	0.5	44.3	10.0
<b>REGION V.....</b>	<b>2,880,566,907</b>	<b>29.4</b>	<b>26.9</b>	<b>2.6</b>	<b>16.5</b>	<b>22.1</b>	<b>4.0</b>
ILLINOIS.....	796,605,459	36.3	34.4	1.9	9.0	18.6	0.6
INDIANA.....	205,429,960	22.0	22.0	---	13.1	37.4	---
MICHIGAN.....	704,820,586	33.2	28.5	4.7	18.9	13.0	0.5
MINNESOTA.....	319,587,926	19.6	17.9	1.7	20.6	37.1	17.6
OHIO.....	444,114,217	33.0	30.1	2.9	20.4	14.2	1.6
WISCONSIN.....	410,008,759	17.2	15.4	1.8	20.9	33.7	11.0
<b>REGION VI.....</b>	<b>1,091,879,695</b>	<b>19.6</b>	<b>19.5</b>	<b>0.1</b>	<b>4.3</b>	<b>49.7</b>	<b>9.8</b>
ARKANSAS.....	117,293,524	16.8	16.8	(2)	15.2	38.0	7.2
LOUISIANA.....	205,821,426	25.8	25.5	0.3	1.3	41.3	12.0
NEW MEXICO.....	36,079,997	31.1	31.1	---	0.3	27.4	5.5
OKLAHOMA.....	161,809,471	27.7	27.7	---	0.2	52.1	6.1
TEXAS.....	570,875,277	14.9	14.9	(2)	4.5	55.9	10.8
<b>REGION VII.....</b>	<b>432,216,433</b>	<b>26.9</b>	<b>25.5</b>	<b>1.4</b>	<b>3.3</b>	<b>38.7</b>	<b>5.7</b>
IOWA.....	121,115,079	17.8	17.8	---	0.5	55.1	6.2
KANSAS.....	125,706,783	28.4	25.5	2.9	2.7	36.9	8.8
MISSOURI.....	124,902,027	36.9	35.4	1.5	6.6	19.6	0.4
NEBRASKA.....	60,492,544	21.3	20.7	0.7	3.2	48.8	9.1
<b>REGION VIII.....</b>	<b>234,217,158</b>	<b>22.3</b>	<b>19.7</b>	<b>2.7</b>	<b>20.8</b>	<b>29.8</b>	<b>4.4</b>
COLORADO.....	107,022,015	24.0	20.5	3.5	16.4	31.6	4.5
MONTANA.....	31,048,588	20.5	19.7	0.8	24.4	25.1	1.0
NORTH DAKOTA.....	24,241,183	22.3	17.0	5.3	36.3	19.3	---
SOUTH DAKOTA.....	25,049,903	18.0	18.0	---	23.3	37.3	5.4
UTAH.....	40,172,102	22.1	19.6	2.5	17.0	30.1	8.4
WYOMING.....	6,683,367	21.9	21.9	---	31.6	29.6	6.0
<b>REGION IX.....</b>	<b>1,675,918,990</b>	<b>36.3</b>	<b>31.0</b>	<b>5.3</b>	<b>21.8</b>	<b>1.6</b>	<b>---</b>
CALIFORNIA.....	1,600,545,680	36.8	31.2	5.6	21.8	1.3	---
HAWAII.....	52,991,561	22.9	22.9	---	24.5	7.4	---
NEVADA.....	22,381,749	35.8	34.7	1.0	19.4	8.8	---
<b>REGION X.....</b>	<b>316,662,304</b>	<b>22.7</b>	<b>20.6</b>	<b>2.0</b>	<b>24.2</b>	<b>23.2</b>	<b>7.8</b>
ALASKA.....	12,080,038	17.2	15.0	2.2	17.3	48.9	16.6
IDAHO.....	30,616,088	15.7	15.7	---	16.5	40.9	14.7
OREGON.....	95,737,216	21.1	18.5	2.7	2.1	50.5	18.9
WASHINGTON.....	178,228,962	25.1	23.0	2.0	37.9	3.8	---

SEE FOOTNOTE AT END OF TABLE.

Source: U. S. Department of Health, Education, and Welfare  
\*Health Care Financing Administration

\*Formerly Social and Rehabilitation Service  
National Center for Social Statistics

Chart IV  
(Continued)

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

Fiscal Year 1976

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..							
NUMBER.....	\$14,244,837,399	\$2,171,428,971	\$1,386,756,563	\$386,995,697	\$140,640,458	\$522,575,391	\$346,683,295
PERCENT.....	100.0	15.2	9.7	2.7	1.0	3.7	2.4
REGION I.....	1,044,482,097	16.6	7.9	3.1	0.7	5.5	0.6
CONNECTICUT 1/.....	192,737,098	3.5	8.2	1.8	---	6.2	---
MAINE.....	84,196,544	32.4	13.6	2.3	---	4.2	---
MASSACHUSETTS.....	605,354,222	16.1	6.9	3.7	1.0	6.0	1.1
NEW HAMPSHIRE.....	34,627,084	53.8	9.7	2.5	1.1	2.7	(Z)
RHODE ISLAND.....	90,122,555	13.7	5.4	2.7	0.3	3.9	---
VERMONT.....	37,444,594	29.1	14.6	3.0	0.3	3.2	(Z)
REGION II.....	3,845,761,576	10.4	6.0	1.9	0.7	2.9	6.4
NEW JERSEY.....	403,312,196	928.5	11.3	4.4	0.5	7.1	0.6
NEW YORK.....	3,346,145,064	8.6	4.9	6.6	0.8	2.5	7.3
PUERTO RICO.....	93,944,697	---	23.7	1.1	---	---	---
VIRGIN ISLANDS.....	2,359,619	---	2.1	0.6	---	24.4	---
REGION III.....	1,386,300,985	11.8	8.4	2.4	0.7	3.2	2.7
DELAWARE.....	17,927,454	24.0	17.7	---	0.5	8.3	0.5
DIST. OF COLUMBIA.....	104,878,209	13.2	13.5	1.0	1.4	8.1	3.3
MARYLAND.....	227,364,345	12.9	8.1	4.4	---	10.3	---
PENNSYLVANIA.....	788,480,052	6.7	6.4	2.1	0.5	(Z)	4.2
VIRGINIA.....	188,356,720	28.3	11.9	2.2	0.8	5.4	0.6
WEST VIRGINIA.....	59,294,205	16.8	13.1	2.4	3.4	---	---
REGION IV.....	1,336,831,254	14.9	11.8	2.9	0.4	4.0	0.5
ALABAMA.....	160,513,041	15.6	11.2	1.8	0.9	3.0	---
FLORIDA.....	176,309,174	5.1	12.2	1.9	0.1	4.5	(Z)
GEORGIA.....	256,335,685	17.6	10.7	4.1	0.2	4.5	---
KENTUCKY.....	150,177,997	14.3	11.9	3.1	0.6	4.0	2.0
MISSISSIPPI.....	111,268,777	4.5	14.1	2.3	0.3	3.1	(Z)
NORTH CAROLINA.....	202,177,955	11.6	11.0	3.9	1.0	3.7	1.3
SOUTH CAROLINA 1/.....	103,892,610	9.0	12.2	3.2	0.3	3.4	---
TENNESSEE.....	176,156,015	34.3	13.1	1.9	---	4.7	0.4
REGION V.....	2,880,566,907	18.0	11.7	3.3	1.7	4.0	1.2
ILLINOIS.....	796,605,459	18.0	11.6	3.4	1.9	3.9	3.5
INDIANA.....	209,429,960	37.4	8.8	1.9	0.7	3.7	0.7
MICHIGAN.....	704,820,586	12.5	15.1	3.7	1.4	4.7	0.1
MINNESOTA.....	319,587,926	19.5	8.6	2.7	0.8	2.5	0.1
OHIO.....	444,114,217	12.6	10.5	3.4	1.7	5.7	0.6
WISCONSIN.....	410,008,759	22.7	11.1	3.4	2.9	2.7	---
REGION VI.....	1,091,879,695	39.9	10.4	0.9	0.4	1.9	0.3
ARKANSAS.....	117,293,524	30.9	10.5	3.9	0.3	1.5	---
LOUISIANA.....	205,821,426	29.3	8.4	(Z)	---	2.6	1.4
NEW MEXICO.....	36,079,997	21.9	14.0	1.5	1.5	4.1	2.0
OKLAHOMA.....	161,809,471	46.0	11.0	1.2	0.1	0.3	---
TEXAS.....	570,875,277	45.0	10.7	0.4	0.5	2.1	---
REGION VII.....	432,216,433	33.0	11.1	3.6	1.0	3.2	0.5
IOWA.....	121,115,079	48.9	9.4	4.0	1.5	2.7	0.1
KANSAS.....	125,706,783	28.1	10.6	3.7	1.4	3.2	1.1
MISSOURI.....	124,902,027	19.2	14.8	3.5	0.4	3.7	---
NEBRASKA.....	60,492,544	39.8	8.0	2.6	0.8	2.8	0.8
REGION VIII.....	234,217,158	25.4	9.8	2.1	0.8	4.1	0.5
COLORADO.....	107,022,015	27.2	10.3	0.8	---	6.1	---
MONTANA.....	31,048,588	24.0	13.5	3.7	2.5	2.1	---
NORTH DAKOTA.....	24,241,183	19.3	5.4	2.4	1.7	1.0	---
SOUTH DAKOTA.....	25,049,903	31.8	10.5	1.2	2.0	1.8	---
UTAH.....	40,172,102	21.8	7.5	5.2	0.4	3.8	2.7
WYOMING.....	6,683,367	23.6	12.6	0.5	0.8	2.2	0.1
REGION IX.....	1,675,918,990	1.6	14.7	4.2	1.8	5.1	0.5
CALIFORNIA.....	1,600,545,680	1.3	14.6	4.0	1.8	5.1	0.5
HAWAII.....	52,991,561	7.4	16.6	10.2	0.8	4.3	---
NEVADA.....	22,381,749	8.8	15.2	5.1	1.3	5.4	(Z)
REGION X.....	316,662,304	15.5	9.5	4.8	0.7	3.2	0.8
ALASKA.....	12,080,038	32.3	9.0	2.1	---	3.7	---
IDAH0.....	30,616,088	26.2	11.7	2.4	0.5	3.2	---
OREGON.....	95,737,216	31.5	7.8	3.5	0.4	3.5	---
WASHINGTON.....	178,228,962	3.8	10.1	6.0	0.9	3.0	1.4

Source: U. S. Department of Health, Education, and Welfare  
\*Health Care Financing Administration

Formerly Social and Rehabilitation Service  
National Center for Social Statistics

Chart IV  
(Continued)

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

Fiscal Year 1976

NEW REGION AND STATE	TOTAL	LABORATORY AND RADIOLOGICAL SERVICES	HOME HEALTH SERVICES	PRESCRIBED DRUGS	FAMILY PLANNING SERVICES	OTHER CARE
TOTAL, REPORTING STATES..						
NUMBER.....	\$14,244,837,399	\$129,851,414	\$132,463,455	\$959,950,735	\$ 87,861,583	\$253,682,734
PERCENT.....	100.0	0.9	0.9	6.7	0.6	1.8
REGION I.....	1,044,482,097	0.2	0.6	5.5	0.4	1.8
CONNECTICUT 1/.....	192,737,098	---	---	5.6	---	1/ 4.5
MAINE.....	84,196,544	---	0.6	6.8	0.9	0.9
MASSACHUSETTS.....	605,354,222	0.3	0.8	4.9	0.3	1.2
NEW HAMPSHIRE.....	34,627,084	0.2	0.9	7.2	(2)	1.0
RHODE ISLAND.....	90,122,555	0.3	0.2	6.5	0.6	1.1
VERMONT.....	37,444,594	0.5	1.1	7.5	1.7	0.7
REGION II.....	3,845,761,576	0.2	2.8	3.8	0.4	3.0
NEW JERSEY.....	403,312,196	0.4	0.3	6.2	0.6	1.3
NEW YORK.....	3,346,145,064	0.1	3.2	3.0	0.3	2.9
PUERTO RICO.....	93,944,697	4.6	---	22.6	---	14.2
VIRGIN ISLANDS.....	2,359,619	(2)	0.7	19.7	---	4.0
REGION III.....	1,386,300,985	0.7	0.3	6.5	0.4	1.1
DELAWARE.....	17,927,454	1.0	0.4	9.0	0.9	(2)
DIST. OF COLUMBIA.....	104,878,209	0.5	1.3	6.2	1.3	1.8
MARYLAND.....	227,364,345	---	0.2	7.8	1.3	1.7
PENNSYLVANIA.....	788,480,052	1.1	0.2	5.7	(2)	0.7
VIRGINIA.....	188,356,720	0.1	0.4	6.7	0.6	1.3
WEST VIRGINIA.....	59,294,205	---	---	10.9	0.2	3.6
REGION IV.....	1,336,831,254	0.5	0.3	11.7	0.6	0.7
ALABAMA.....	160,513,041	2.1	0.4	9.8	0.5	0.2
FLORIDA.....	176,309,174	0.4	0.1	11.1	0.5	0.4
GEORGIA.....	256,335,685	0.1	0.1	10.4	0.4	1.2
KENTUCKY.....	150,177,997	0.1	0.9	8.6	0.5	0.8
MISSISSIPPI.....	111,268,777	0.1	0.2	21.5	0.6	0.2
NORTH CAROLINA.....	202,177,955	(2)	0.3	11.2	0.6	0.2
SOUTH CAROLINA 1/.....	103,892,610	1.5	0.6	10.0	1.4	2.1
TENNESSEE.....	176,156,015	(2)	0.1	13.5	0.6	0.8
REGION V.....	2,880,566,907	0.7	0.2	7.2	0.5	1.7
ILLINOIS.....	796,605,459	1.2	0.2	8.4	0.2	1.8
INDIANA.....	205,429,960	0.5	0.4	8.0	0.3	2.6
MICHIGAN.....	704,820,586	1.0	0.1	7.2	1.1	0.6
MINNESOTA.....	319,587,926	0.1	0.4	5.1	0.3	2.2
OHIO.....	444,114,217	0.2	0.2	8.7	0.2	1.1
WISCONSIN.....	410,008,759	(2)	(2)	4.7	0.5	2.9
REGION VI.....	1,091,879,695	1.6	0.1	9.2	0.4	1.2
ARKANSAS.....	117,293,524	0.5	(2)	12.1	0.2	0.9
LOUISIANA.....	205,821,426	1.8	0.1	16.7	0.1	0.4
NEW MEXICO.....	36,079,997	2.6	0.2	10.5	0.8	1.8
OKLAHOMA.....	161,809,471	0.7	---	2.2	0.1	4.3
TEXAS.....	570,875,277	1.9	(2)	7.8	0.5	0.7
REGION VII.....	432,216,433	0.8	0.1	9.3	0.9	0.8
IOWA.....	121,115,079	0.1	(2)	7.1	0.9	0.9
KANSAS.....	125,706,783	2.0	0.1	8.0	0.8	1.1
MISSOURI.....	124,902,027	0.1	0.1	12.8	1.4	0.1
NEBRASKA.....	60,492,544	1.2	0.1	9.1	0.1	1.0
REGION VIII.....	234,217,158	1.0	0.2	6.9	0.3	1.4
COLORADO.....	107,022,015	1.7	0.2	7.8	0.4	0.7
MONTANA.....	31,048,588	0.1	0.4	5.6	0.5	1.8
NORTH DAKOTA.....	24,241,183	1.3	0.1	8.1	0.2	1.9
SOUTH DAKOTA.....	25,049,903	---	(2)	5.0	0.2	0.7
UTAH.....	40,172,102	0.2	0.1	7.0	0.2	3.7
WYOMING.....	6,683,367	0.2	(2)	---	0.4	(2)
REGION IX.....	1,675,918,990	3.2	0.1	7.5	1.9	1.2
CALIFORNIA.....	1,600,545,680	3.3	0.1	7.5	2.0	1.2
HAWAII.....	52,991,561	2.9	0.3	7.5	1.5	1.2
NEVADA.....	22,381,749	0.2	0.5	6.7	0.1	1.5
REGION X.....	316,662,304	2.0	0.4	6.3	0.7	1.5
ALASKA.....	12,080,038	0.2	0.1	---	0.5	1.0
IDAHO.....	30,616,088	0.4	0.3	5.8	0.6	2.2
OREGON.....	95,737,216	2.0	0.1	5.5	1.0	2.3
WASHINGTON.....	178,228,962	2.4	0.6	7.3	0.6	0.9

1/ 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.

NOTE: TOTALS AND SUBTOTALS MAY NOT ADD DUE TO ROUNDING.









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 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 <u>1/</u>						

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:

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	132,735	99,558	\$10,301	125,648	93,955	\$ 9,370
MA						
AB	2,461	1,759	166	2,352	1,549	154
APTD	52,219	34,977	3,447	60,111	40,104	3,853
AFDC	218,043	104,171	2,391	218,386	98,897	2,034
Total	405,458	240,465	\$16,305	406,497	234,505	\$15,411

1/ To age 21.

## ALABAMA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

By the Medical Services Administration of the Alabama Department of Public Health. (See A. Health Department)

## IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):  
Vitamins, food supplements, and anti-obesity.
- 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: 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. (Subject to drug surveillance/utilization review, DS/UR.)
  - 3. Refills: When authorized by prescriber, a maximum of five (5) refills within a six month period. (Subject to DS/UR.)
  - 4. Dollar Limits: Subject to DS/UR.
- D. Prescription Charge Formula: Medicaid pays for prescribed legend and non-legend drugs authorized under the program. Payment is based on the actual acquisition cost plus a dispensing fee, not to exceed upper limits established in conformance with 45 CFR 250.30 (b) (2).

## \* Professional Fee by Type of Drug Provider (as of October 1, 1975):

- 1. Retail pharmacies \$1.90
- 2. Institutional Pharmacies (hospital pharmacies with outpatient prescription services and skilled nursing facilities pharmacies) \$1.50

## Professional Fee (continued):

- |   |        |
|---|--------|
| 3. Government Pharmacies (county, state, or federal pharmacies) | \$ .75 |
| 4. Dispensing Physicians  | \$ .75 |

50¢ co-payment/Rx

Exception: Family planning items and conditions identified and referred from the Early and Periodic Screening, Diagnosis, and Treatment examination.

## 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 recipient identification card to reimburse the pharmacies.

\* In May 1977, the single state agency approved a 10% increase interim adjustment as follows:

- |                             |               |
|-----------------------------|---------------|
| 1. Retail Pharmacies        | \$2.09        |
| 2. Institutional Pharmacies | \$1.65        |
| 3. Government Pharmacies    | \$ .75 (same) |
| 4. Dispensing Physicians    | \$1.10        |

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As of press time: Implementation suspended pending clarification of Governor's June 1977 Executive Order.

## 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 36130

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

2500 Fairlane Drive  
Montgomery 36130

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

" "

## 2. Title XIX Medical Care Advisory Committee:

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

Permanent Ex Officio Members:

Ira L. Myers, M.D.  
State Health Officer  
Alabama Department of  
Public Health  
State Office Building  
Montgomery 36130

Mrs. Julia Oliver  
Commissioner  
State Department of  
Pensions & Security  
64 North Union Street  
Montgomery 36130

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.  
W. R. Harvey, D.D.S.  
Camden 36726

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

\*June 1977 Medicaid Program transferred from Health Department to Governor's Office as Single State Agency by Executive Order (no details at press time).

## Title XIX Medical Care Advisory Committee (continued):

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

Ala. Optometric Assoc.  
Roy D. Adams, O.D.  
P. O. Box 868  
Monroeville 36460

American Association of  
Medical Assistants  
Mrs. June Gordon  
P. O. Box 3  
Bynum 36253

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

Alan R. Dimick, M.D.  
Department of Surgery  
University of Alabama  
in Birmingham  
University Station  
Birmingham 35294

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

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

Rev. Steven D. Rice  
St. Paul Lutheran Church  
4475 Atlanta Highway  
Montgomery 36109

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

Mrs. Bertha Smith  
1510 Westcott Street  
Montgomery 36108

Mrs. Zecozy Williams  
2012 Hill Street  
Montgomery 36108

## B. Welfare Department:

Mrs. Julia Oliver  
Commissioner

State Department of  
Pensions and Security  
64 North Union Street  
Montgomery 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:

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

### Section 1: Introduction and Overview

The first section of the document provides a general overview of the project's objectives and scope. It outlines the primary goals and the key areas of focus that will be addressed throughout the report.

This section also discusses the importance of the project and its potential impact on the organization. It highlights the challenges that need to be overcome and the resources that will be required to successfully complete the project.

The second part of the introduction provides a brief history of the project, detailing its origins and the reasons for its initiation. It also identifies the key stakeholders involved in the project and their respective roles.

Finally, this section outlines the structure of the report, providing a roadmap for the reader. It indicates the order in which the various sections will be presented and the key findings that will be discussed.

The report is organized into several main sections, each of which will provide a detailed analysis of a specific aspect of the project. The findings and conclusions of each section will be summarized in the final chapter of the report.

The first section of the report, titled 'Methodology', describes the research methods used to collect and analyze data. It details the selection of participants, the design of the study, and the procedures used to ensure the reliability and validity of the results.

### Section 2: Methodology

The methodology section is divided into two main parts: data collection and data analysis. Each part provides a detailed description of the procedures used to ensure the integrity of the research process.

In the data collection section, the researcher describes the use of both qualitative and quantitative methods. This approach allows for a comprehensive understanding of the research topic, capturing both the depth and the breadth of the data.

The data analysis section details the statistical techniques used to process the quantitative data. It also describes the methods used to analyze the qualitative data, ensuring that the researcher's interpretations are grounded in the data.

The researcher also discusses the limitations of the study and the steps taken to minimize bias. This transparency is essential for the credibility of the research findings.

Finally, the methodology section concludes with a summary of the overall research design. It emphasizes the rigor and systematic nature of the approach, which is designed to provide a clear and objective assessment of the project's progress.

The second section of the report, titled 'Results', presents the findings of the study. It begins with a summary of the key results, followed by a more detailed discussion of the data.

The results are presented in a clear and concise manner, using tables and graphs to illustrate the data. The researcher also provides a detailed interpretation of the findings, explaining their significance and how they relate to the project's objectives.

The findings of the study indicate that the project has made significant progress towards its goals. However, there are still several areas that need to be addressed, and the researcher provides a detailed analysis of these areas.

### Section 3: Discussion and Conclusions

The discussion section provides a detailed analysis of the findings, exploring their implications and the reasons behind them. It also discusses the limitations of the study and the steps that need to be taken to address these limitations.

The conclusions section summarizes the key findings of the study and provides a clear and concise statement of the project's overall status. It also offers recommendations for future research and provides a final assessment of the project's success.



## 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				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs <u>1/</u>										
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>2/</u>		X	X	X						X

Other Benefits: Intermediate Care Facilities; transportation; home health care; early and periodic screening, diagnosis and treatment for eligibles under 21; family planning; intermediate care for the mentally retarded; inpatient psychiatric care; optometrist services; eyeglasses; speech and hearing services; mental health clinic.

\*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	1975			1976		
	Persons Eligible	Drug Recipients	Drug Amounts	Persons Eligible	Drug Recipients	Drug Amounts
OAA	2,153	1,244	\$ 56	2,182		
MA						No data
AB	85	22	1	86		submitted to
APTD	1,906	1,600	72	2,022		NPC or
AFDC	16,785	4,577	206	17,127		published by
Others <u>5/</u>	1,313	68	3	1,535		HEW
Total	22,242	7,511	\$338	22,952		

1/ Alaska's Medicaid program does not include drugs. Some drugs are covered by Medicaid however. These would be those drugs considered family planning drugs and drugs dispensed to inpatients of hospitals and nursing homes.

2/ Dental services under Medicaid are covered only as required for EPSDT eligible individuals and is not otherwise covered for other Medicaid eligibles.

## 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
Don Kemp Acting 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:

Charles Rush <u>Chairman</u>	P. O. Box 3728 Anchorage 99501
---------------------------------	-----------------------------------

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

Rodman Wilson, M.D.  
Secretary-Treasurer  
Alaska State Medical  
Association  
1185 West 8 Avenue  
Anchorage 99501

## B. Pharmaceutical Assoc.

Charles Rush  
Secretary  
Alaska Pharmaceutical  
Association  
Box 1185  
Anchorage 99501



ARIZONA

MEDICAL ASSISTANCE DRUG PROGRAM (TITLE XIX)

Title XIX Program Began \_\_\_\_\_

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										
Inpatient Hospital Care		X								
Outpatient Hospital Care										
Laboratory & X-ray Service										
Skilled Nursing Home Services		X								
Physician Services										
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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA				
MA				
AB				No Vendor Drug Program <sup>1/</sup>
APTD				
AFDC				
Total				

<sup>1/</sup> 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.

1977 Legislative Action (as of Press time)

Legislature failed to provide necessary funds. House Resolution 2007 specifically prohibited any Medicaid purpose of appropriations to Department of Security, the Department of Health, Department of Administration or the State Treasurer. Resolution also stated, every official taking part in payments for any costs and every person receiving such payment will be personally liable to state for full amount.

## ARIZONA

## WELFARE DRUG PROGRAM

Officials, Consultants and Committees

## 1. Health Services Department Officials:

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

Department of Health  
Services

1740 West Adams Street  
Phoenix, Arizona 85007

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

" "

George W. Roberts, R.Ph.  
Pharmacist Consultant

411 North 24th Street  
Phoenix 85008

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:

(Vacant)  
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 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	
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	

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

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons Eligible	Drug Recipients	Amounts <sup>1/</sup>	Persons Eligible	Drug Recipients	Amounts <sup>1/</sup>
OAA	76,232	66,479	\$7,913	72,729		\$7,920
MA						
AB	1,905	1,334	157	1,872		1,480
APTD	27,502	18,952	2,563	32,805		3,254
AFDC <sup>2/</sup>	117,758	63,348	1,950	125,051		2,171
MN Aged	473	255	38	750		119
MN Blind	6	2	4 <sup>4/</sup>	7		1
MN Disabled	480	155	31	916		11
MN Children <sup>3/</sup>	675	86	8	1,207		10
MN AFDC-Adults				265		15
Total	225,031	150,611	\$12,660	235,602		\$14,981

<sup>1/</sup> Does not include 50¢ copayment/R.<sup>2/</sup> Includes Foster Care and U-21.<sup>3/</sup> Includes U-21.<sup>4/</sup> Miniscule amount.

## 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.

## 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, amphetamines, anti-obesity agents, 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. With the exception of Schedule II drugs and nitroglycerin, each prescription can be filled for a maximum of a one month's supply. Effective 1/1/76, each recipient was limited to Medicaid coverage for 3 prescriptions per month.

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 local wholesale price plus \$2.50 professional fee, less 50¢ copayment. Total charge may not exceed provider's prevailing charge to the self-paying public.

V. Miscellaneous Remarks:

- 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 local wholesale price for these drugs as the maximum cost allowed for reimbursement purposes.

## ARKANSAS

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Social Services Officials:

Raymond L. Scott Commissioner	Arkansas Social Services Blue Cross/Blue Shield Building 7th and Gaines Streets (P.O. Box 1437) Little Rock, Arkansas 72203
Comptroller (vacant)	" "
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.	" "
Tom J. Meek, M.D.	313 Cambridge Place Little Rock 72207
Bert L. Phillips, M.D.	1403 Main North Little Rock 72114

NPC

Arkansas - 101  
1977

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Society:

C. C. Long, M.D.  
Executive Vice-President  
Arkansas Medical Society  
P. O. Box 1208  
Fort Smith 72901  
Phone: 501/782-8218

B. Pharmaceutical Association

Charles West  
Executive Director  
Arkansas Pharmaceutical Association  
Plaza West, Suite 1020  
McKinley & Lee Streets  
Little Rock 72205  
Phone: 501/664-1902



## 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)					Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	
					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.  
Medically Indigent Adults

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

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons $\frac{1}{2}$ Eligible	Drug $\frac{1}{2}$ Recipients	Amounts	Persons $\frac{1}{2}$ Eligible	Drug $\frac{1}{2}$ Recipients	Amounts
OAA	306,344	139,394	\$27,096	324,390	144,755	\$31,917
MA						
AB	12,618	5,496	1,177	12,686	5,363	1,312
APTD	252,858	113,305	27,489	306,501	135,293	37,937
AFDC	1,215,502	225,784	23,812	1,280,800	239,617	29,378
MN Aged	56,918	40,148	10,785	57,232	39,351	11,720
MN Blind	941	703	190	776	608	188
MN Disabled	14,630	7,491	2,457	15,922	7,713	2,922
MN Children	113,144	19,921	2,207	145,965	24,349	3,095
MI	203,996	51,898	7,689	235,202	55,211	9,418
Total	2,176,952	604,142	\$102,902	2,379,474	652,260	\$127,887

1/ Monthly average

2/ Excludes PHP, Refugees and Renal Dialysis

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

Source: Department of Health, Medi-Cal Certified Eligibles Calendar year, 1975, cumulative certified CID Eligibles, through January 1977, and Federal report SRS-NCSS-2082 reports.

## 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 dextroamphetamines 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 blockage 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 91 drug and medical supply codes. Pharmacist must enter 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 high volume and/or chronically used 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 onsite audit of provider files and peer review.
  5. Dollar Limits: None
- D. Prescription Charge Formula: Red Book (Blue Book or Supplier's Catalogue if not listed in Red Book) EAC plus \$3.06 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.

\*Volume Purchase Plan for Prescription Drugs

In fiscal 1975-76 the Medi-Cal program paid \$74 million for prescription drugs used by its outpatient beneficiaries, exclusive of pharmacists' fees. In 1977-78 expenditure is expected to increase to \$86 million.

Although Medi-Cal now controls prices at the retail level, the State Department of Health has been aware for some time that other government and private groups buy drugs in volume at prices substantially lower than Medi-Cal does. The State of California is developing a plan whereby the Medi-Cal program will go out to competitive bid on multi-source drugs. While the initial plan was to purchase these drugs directly from the manufacturer, the program has now modified its approach to one of a rebate from the successful bidder.

The State plans to award contracts for commercially-available prescription drug products which meet established quality specifications. A list of each of the selected drugs and the successful bidder will be sent both to prescribers and to pharmacies. The pharmacist will be paid an additional fee as an incentive to exercise his ability to select a product under the State's drug product selection laws.

It is the State's intention to make use of volume purchasing practices and terms already in use by other government agencies and private groups and to make maximum use of existing channels of distribution. This modification guarantees one of the objectives of the original proposal, not to disturb the existing distribution system.

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 the 18 month project. This will enable the State to verify the projected cost savings and measure the effect of the incentive payment to the pharmacist for product selection. The incentive payment will be 30¢ per prescription of the State-designated products.

Initial implementation date, because of the modifications, has been delayed to no sooner than July 1, 1977 with some possibilities of August 1, 1977 being more realistic.

\*Modified Plan, announced by Secretary, Health and Welfare Agency, March 23, 1977. (See California p-5 for June-July 1977 developments)

Postpayment Controls

Peer Review: In the interest of improving drug utilization review, local pharmacy peer review committees will now have a more significant involvement in drug utilization control. Implementation of a statewide peer review system will be authorized by the Department of Health; MIO will maintain the system. Peer review committees will be responsible for the review of pharmacy services to determine if the services are: appropriate; necessary; in conformance with standards of local community practice; in conformance with Medi-Cal regulations. These committees will have the authority to recommend corrective or punitive action to the Department of Health.

Pharmacy Audit Recoupment Procedures

In December 1975 certain postpayment utilization controls were implemented for prescribed drugs dispensed. Recoupment procedures will be initiated if it is determined during an on-site audit that over payments have been made by the Program.

In the event that any of the seven listed overpayment situations occur, the provider will receive a letter from the Department of Health advising him that further abuse of the Program may result in his removal from participation in the Program.

Modified VPP (continued from page-4)I. June 21, 1977 - California Legislative Action

A. Conference Committee on the Budget adopted amendment to budget bill. Provides:

1. "The Department of Health may not implement a volume purchase plan or other similar pharmaceutical reimbursement program until after 45 days following submission to the Joint Legislative Budget Committee, and after the committee has received reports of the Department's action" in nine (9) specified cost control areas relative to the Medi-Cal drug program.
2. "approval shall be deemed to be given if the committee (Joint Legislative Budget Committee) fails to disapprove the plan with the 45-day period".

II. July 1, 1977 - Governor's Action

The Governor signed the bill with the amendment included, according to a press release.

## 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 95814
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Medi-Cal Division:

Lee Helsel Deputy Director	" "
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Wade Williams Chief	Medi-Cal Benefits Section
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Carlo Michelotti, Pharm., M.P.H. Assistant Chief	" "
---	-----

Milton Kuschnerreit, Pharm. Senior Consulting Pharmacist	" "
---	-----

## 3. Advisory Committee to California Department of Health:

## a. Medical Therapeutics and Drug Advisory Committee:

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

Paul Hoagland, M.D. <u>Chairman</u>	- Pasadena
--	------------

James L. Boynton, Pharm.	- Stockton
--------------------------	------------

## Medical Therapeutics and Drug Advisory Committee:

Todd T. Tomihiro, Pharm. - San Jose  
 Richard E. Turk, M.D. - Berkeley  
 Wallace D. Winters, M.D., - Davis  
 Ph.D.  
 Bruce H. Woolley, Pharm.D. - Los Angeles  
 Peter V. Lee, M.D. - Los Angeles  
 David Fung, Pharm. - Fresno

## B. Benefit Payments Officials:

Marion Woods DEPARTMENT OF BENEFIT PAYMENTS  
 Director 744 P Street  
 Sacramento 95814

## C. Health Protection Officials:

Faustina Solis PUBLIC HEALTH DIVISION  
 Deputy Director 744 P Street  
 Sacramento 95814

## D. Health Treatment Officials:

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

## E. Rehabilitation Officials:

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

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

Donald LaNoue MEDI-CAL INTERMEDIARY OPERATIONS  
 Deputy Executive Director Blue Shield of California  
 2 North Point  
 San Francisco 94133

William Thompson, Pharm.  
 Pharmacist Consultant

" "

NPC

California - 102  
1977

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)			Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related			
					OAA	AB	APTD	
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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	32,903	31,655	\$3,720	32,727	28,976	\$3,911
MA						
AB	367	307	23	310	273	22
APTD	15,395	16,724	2,140	14,304	15,549	2,252
AFDC	104,228	71,477	1,557	103,559	71,874	1,750
Other		1,647	19		4,843	408
Total	152,893	121,810	\$7,459	150,900	121,515	\$8,343

## 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 "ColoRx 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: ColoRx 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 ColoRx 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<sup>R</sup>x 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.

<u>New Prescriptions</u>	<u>Minimum</u>
Aspirin	1,000 tablets
Diocetyl Sulfosuccinate 100 mg. (Calcium or Sodium)	100 caps.

<u>Refills</u>	<u>Minimum</u>
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.

Note: Colorado has completed the Fee Survey and will soon implement an increase in the professional fee for community pharmacies and hospital pharmacies.

Community Pharmacist (continued):

Colo<sup>R</sup><sub>x</sub> 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<sup>R</sup><sub>x</sub> 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<sup>R</sup><sub>x</sub>, 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<sup>R</sup><sub>x</sub> 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<sup>R</sup><sub>x</sub>.)

Note: Colorado will implement an increase in the professional fee in 1977.

## 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<sup>R</sup>X. 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 Manual Regulation 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.

Note: Colorado will soon implement an increase in these fees as listed in the above paragraph.

## V. Miscellaneous Remarks:

From July, 1975, through June, 1976, total medical expenditures were \$123,767,370, of which the Federal share was \$62,614,315.

Drug Utilization Data - July, 1975 through June, 1976:

Units of service	1,428,000
Recipients (unduplicated count - actual)	121,515
Units per recipient	11.7
Total dollars (prescriptions only)	\$8,396,640
Average per unit	\$ 5.88
Average per recipient	\$ 69.10

Drug Utilization Review Procedures:

The State Department receives computer processed printouts designed to discover overutilization 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 12 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 overutilization 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
Frederick A. Langille Executive Administrator	" "
Lemm Allen Associate Director for Programs	" "
Charline J. Birkins Assistant Director for Policy and Office of Intergovernment Coordination	" "
Gary A. Smith Assistant Director for Program Planning, Evaluation & Budget	" "
Willis H. LaVance Executive Officer for Administration	" "
Garry A. Toerber, Ph.D., Director Division of Medical Assistance	" "
(Vacant) Chief, Pharmacy Section Division of Medical Assistance	" "
James C. Syner, M.D. Medical Consultant Division of Medical Assistance	" "
Gerald A. Fournier, Program Administrator, Program Services, Division of Medical Assistance	" "
Jay Peck, Administrative Officer Fiscal Services Division of Medical Assistance	" "

## 2. Social Services Department Consultant:

Marvin J. Lubeck, M.D.  
Ophthalmology3865 Cherry Creek North Drive  
Denver, Colorado 80210

## 3. Medical Advisory Committees:

## A. State Medical Assistance and Services Advisory Council:

Wade Blank  
Angeline D. Heaton, M.D.  
Roy M. Hedlund, O.D.  
Francis Lehr  
Walter C. Mill, D.O.  
Phyllis Schultz, R.N.  
Miles Schuman, R.Ph.  
Alvin YordyKatherine E. Corbin, D.P.M.  
(Chairman)  
C. Stephen Gill, D.P.M.  
(Alternate)  
Marvin E. Johnson, M.D.  
Walter Ballard, D.D.S.  
Francis P. Weston  
(one currently vacant member-  
ship)EX OFFICIO MEMBERS:Henry A. Foley, Ph.D.  
Executive Director  
Colorado Department of  
Social ServicesAnthony Robbins, M.D.  
Executive Director  
Colorado Department of  
Health*new  
MEM*

The Medical Assistance and Services Advisory Council under the Title XIX Medical Assistance Program shall be composed of fifteen 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:

John A. Thebus, Jr., R.Ph.,  
Chairman  
Lillian Bird, R.Ph.  
Charles L. Cummings, R.Ph.  
Elton Ferguson, R.Ph.Myrle A. Myers, R.Ph., M.S.  
Duane H. Lambert, R.Ph.  
Stanley Stein, R.Ph.  
James H. Vincent, R.Ph.  
Daniel L. Young, R.Ph.

C. Colo<sup>R</sup>X Drug Formulary Advisory Committee:

Richard A. Haynes, R.Ph.,  
Chairman  
Mark F. Blum, M.D.  
Franklin L. Connell, R.Ph.  
Robert E. Doyle, R.Ph.  
Ernest Gonzales, R.Ph.

James Kobach, R.Ph.  
Duane H. Lambert, R.Ph.  
Howard E. Netz, M.D., R.Ph.  
John A Thebus, Jr., R.Ph.  
Donald A. Vecchio, R.Ph.

## D. Drug Utilization Review Committee:

Thomas C. Starr, R.Ph.,  
Chairman  
William L. Lowes, R.Ph.,  
Vice Chairman  
Helen Angel, R.Ph.  
Herbert Beck, R.Ph.  
James Bradley, R.Ph.  
A. Lyle Campbell, R.Ph.

John M. James, R.Ph.  
Lloyd R. Lundsten, M.D.  
Douglas T. Margreiter,  
R.Ph., M.P.H.  
John T. Morrison, M.D.  
Harry Picht, R.Ph.  
Gerald E. Stutz, R.Ph.  
James Tyler, R.Ph.  
Floyd M. Knaus, R.Ph.

## 4. Executive Officers of the State Medical and Pharmaceutical Societies:

## A. Medical Society:

Donald G. Derry  
Executive Director  
Colorado Medical Society  
1601 East Nineteenth Avenue  
Denver 80218  
(303) 534-8580

## B. Pharmacal Association:

Myrle A. Myers, R.Ph., M.S.  
Executive Director  
Colorado Pharmacal Association  
1711 Pennsylvania Street  
Denver 80203  
(303) 861-0328



## 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 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	
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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	3,700		\$ 676	3,742		\$ 894
MA						
AB	119		18	113		16
APTD	6,115		1,058	5,928		1,242
AFDC	123,529		2,981	131,599		3,495
MN Aged	16,278		2,902	17,007		3,374
MN Blind	170		18	160		21
MN Disabled	9,573		1,198	10,581		1,553
MN Children	3,295*		189	4,898*		275
Total	162,779		\$9,040	174,028		\$10,870

\* Average monthly cases (NC, NF, NG) (Revised).

1 Average monthly.

## 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 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 Central Office.

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

Convalescent and nursing homes - cost plus \$2.00  
"Walk-In" patients - cost plus \$2.20

## 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	"	"
Stephen H. Press, 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):

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

## 3. Title XIX Advisory Committees:

## A. Pharmacy Advisory Committee:

State Pharmacy Commission  
Dr. James O'Brien  
Mike Williams

Connecticut State Medical Society  
Dr. Elliot R. Mayo

Connecticut Pharmaceutical Association  
Dan Leone  
William Summa  
Edward C. Liska

State Welfare Department  
Stephen H. Press  
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
Dennis May Executive Vice President 90 Sargent Drive New Haven 06509	- 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. Talarski  
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				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						

\*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	1975			1976		
	Persons Eligible <sup>1/</sup>	Drug Recipients	Amounts	Persons Eligible <sup>1/</sup>	Drug Recipients	Amounts
OAA	3,645	3,192	\$359	3,450	3,402	\$412
MA						
AB	342	276	32	279	253	32
APTD	2,308	2,607	315	2,956	3,178	415
AFDC	31,083	27,253	636	30,930	29,722	755
MN Aged MN Blind MN Disabled MN Children						
Total	37,378	33,328 <sup>2/</sup>	\$1,342 <sup>2/</sup>	37,615	36,555 <sup>2/</sup>	\$1,614 <sup>2/</sup>

<sup>1/</sup> Monthly average.

<sup>2/</sup> DHEW-SRS/NCSS 2082 A(2), B(3) (Data submitted by Delaware to NPC)

## 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. Anorectics are excluded.

## 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:

Acquisition cost plus \$2 professional fee except when the usual charge is less, in which case the lesser amount is paid.

## V. Miscellaneous Remarks:

Payment to pharmacists - bank draft system

Payment is made to the pharmacists by depositing a "bank draft" claim form in the banking system, 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:

Patricia Schramm Secretary	Department of Health and Social Services Delaware State Hospital New Castle, Delaware 19720
Charles E. Smith Director	Division of Social Services P. O. Box 309 Wilmington 19899
Richard J. Cherrin Administrator Medical Assistance Services	" "
Mary Lee Berry Medical Program Consultant	" "
Anne Gray Social Service Administrator Medical Unit	" "
Patricia Phillips Social Service Administrator Medical Unit	" "
Edmund G. Laird, M.D. (Part-time) Medical Consultant	13 Red Oak Road Wilmington 19806
David Krigstein, R.Ph. (Part-time) Pharmacist Consultant	3404 Broom Place Wilmington 19802

## 2. Health and Social Services Medical Advisory Committee:

<u>Osteopathic Society</u> A. A. Golden, D.O. 4310 Washington Boulevard Wilmington 19802	<u>Optometric Society</u> H. Martin Moss, O.D. 702 N. Union Street Wilmington 19805
---	--

NPC

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Medical Advisory Committee (continued):

Medical Society of Delaware

Robert Abel, M.D.  
1300 N. Harrison Street  
Wilmington 19806

Anne Bader (Mrs.)  
1925 Lovering Avenue  
Wilmington 19806

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

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

Pharmaceutical Society

Mark Abrams  
Hillside House  
8th & Broom Streets  
Wilmington 19806

Thomas Campbell  
321 Willey Street  
Seaford 19973

Division of Public Health

Donald R. Cowan, DDS  
Chief, Bureau of Special Health  
Services

Division of Public Health  
Jesse Cooper Building  
Dover 19901

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

Division of Social Services

David Krigstein, R.Ph.  
Pharmaceutical Consultant  
13404 Broom Place  
Wilmington 19802

Edmund G. Laird, M.D.  
13 Red Oak Road  
Wilmington 19806

Consumer Representative

A. R. Lieberman  
2309 Wynnwood Road  
Wilmington 19810

Adele Majka (Mrs.)  
336 Fiddler Green  
Dover 19901

Harry McGinnis  
1005 Beech Street  
Wilmington 19805

Rosemary Twilley  
201 Orchard Avenue  
Morris Estate I  
Dover 19901

Frances White  
1330 W. 4th Street  
Wilmington 19805

Sylvia Williams  
Reed Street  
Frankford 19945

Visiting Nurse Association

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

Division of Mental Health  
Sheldon Schweidel, Director  
Community Programs and  
Planning

Division of Mental Health  
Delaware State Hospital  
New Castle

Health Planning Council

Robert Tremain  
Assistant Director  
Health Planning Council  
2501 Silverside Road  
Suite 5  
Wilmington 19810

Medical Advisory Committee (continued):

Blue Cross Blue Shield, Inc.  
Norman Tuck  
Provider Relations Department  
Blue Cross Blue Shield of  
Delaware, Inc.  
201 W. 14th Street  
Wilmington 19801

Delaware Hospital Association  
James P. Tyler  
Director of Fiscal Affairs  
Delaware Division  
P. O. Box 1668  
Wilmington Medical Center  
Wilmington

Wilmington Public Schools  
Helen Waddell  
Wilmington Public Schools  
1400 Washington Street  
Wilmington 19801

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					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA		2,750	\$ 315		3,181	\$ 381
MA						
AB		148	16		142	17
APTD		7,641	914		7,777	1,039
AFDC		71,220	2,888		79,120	3,367
MN Aged		6,263	684		6,069	752
MN Blind		49	7		45	8
MN Disabled		1,988	257		2,412	333
MN Children		17,043	670		13,789	596
		226	29		207	31
Total		107,328	\$5,780		112,742	\$6,524

## 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 Office of State Agency Affairs administers the State plan and the Payments Assistance 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 predominantly by brand names but includes some Generic Drugs. The drug dispensing unit - i.e., tablet, capsule, ml., ounce, etc. is specified with its wholesale cost. Each drug is coded for computerization purposes 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 Division.

D. Prescription Charge Formula:

The lesser of:

- Maximum allowable charge (MAC) plus \$1.80 or
- Estimated Acquisition Cost (EAC) plus \$1.80 or
- The providers usual charge to the public.

V. Miscellaneous Remarks:

Drug Utilization Data

Prescribed Drugs

Total ..... \$6,523,564

Age in Years

Under 6 .....	387,500
6-20 .....	889,162
21-64 .....	3,813,676
65 and over.....	1,433,226

Total Number of Prescriptions ..... 1,309,425

OA .....	214,610
AB .....	4,625
APTD .....	251,109
AFDC .....	316,104
Children Under 21 .....	517,499
Other .....	5,478

Average Prescription Price ..... \$4.98

DISTRICT OF COLUMBIA

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

A. Human Resources Department:

1. Officials:

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

Jacqueline E. Johnson Assistant Director for State Agency Affairs	Munsey Building 1329 E Street, N. W. Washington, D. C. 20004
---	--

Peter B. Coppola, Chief Medical Assistance Division	614 H Street, N. W. Washington, D. C. 20001
--	--

James Harris, R.Ph. Pharmacist Consultant Medical Assistance Division	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
---	---

Bertrell Hallum Administrator Payments 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, R.Ph. Chief, Bureau of Pharmacies	" "
--	-----

3. D. C. Health Planning Advisory Committee:

Revised membership list not available at time of publication. There are approximately 42 members.

NPC

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B. Social Services Administration Officials:

William Barr  
Administrator

Social Services Administration  
122 C Street, N. W., Room 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 Director  
Washington, D.C. Pharmaceutical Association  
5506 Connecticut Avenue, N. W.  
Suite 26  
Washington, D. C. 20015  
Phone: 202/363-0305



## 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)			Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related Children			
					OAA	AB	APTD AFDC 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 <sup>1/</sup> Home Services	X	X	X	X				
Physician Services	X	X	X	X				
Dental Services		X	X	<sup>2/</sup> X				

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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	107,076	98,989	\$12,736	107,957	82,342	\$12,259
MA						
AB	2,551	1,989	203	2,564	1,984	196
APTD	56,224	48,833	5,703	67,794	60,311	6,630
AFDC	286,842	170,181	4,338	266,786	172,134	4,101
Total	452,693	319,992	\$22,980	445,101	316,771	\$23,186

<sup>1/</sup> 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.

<sup>2/</sup> 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:

Fee - July 1, 1977

Lower of: (1) MAC plus \$2.40 fee  
(2) EAC plus \$2.40 fee  
(3) Usual and Customary

## 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 1311 Winewood Boulevard Tallahassee 32301
--------------------------------	--

Walter B. Conwell Assistant Staff Director	" "
---	-----

James F. Morrison Program Administrator Medical Services Program Office	" "
---	-----

Robert P. Hurst, R.Ph. Pharmacist Consultant Medical Services Program Office	" "
--	-----

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

Sam Atkinson, M.D. F. V. Berley, M.D. Dudley Reep, D.D.S.	Social and Economic Services Program Office P. O. Box 2050 Jacksonville 32203
---	--

## 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
---	--

## 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

Mr. John T. Keller, Jr.  
Florida Department of  
Education  
106 Center 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

Peter J. Cakmis, D.D.S.  
2135 Blanding Boulevard  
Jacksonville 32210

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 Children 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 Phone: 904/356-1571

## B. Pharmaceutical Association:

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



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 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						

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

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

(Dollar Amounts in Thousands)

CATEGORY	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA		80,778 \$ 8,799		
MA				
AB		2,006 201		
APTD		44,690 5,504		
AFDC		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		380,917 <sup>1/</sup> \$25,016 <sup>1/</sup>		\$26,771 <sup>2/</sup>

<sup>1/</sup> DHEW-SRS/NCSS 2082 B(2) B(3), FY-1975.

<sup>2/</sup> DHEW-SRS/NCSS Report B-5 (FY-76) (Preliminary).

## 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.

## 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 Medical Assistance Officials:

David B. Poythress Commissioner	Department of Medical Assistance 1010 W. Peachtree Street Atlanta, Georgia 30308
Tap Carey Executive Assistant	" "
C. Thomas Smith, Director Program Management	" "
Gilbert H. Buice, R.Ph. Program Management Officer Medicaid Drug Formulary	" "
(Mrs.) Frances Lipscomb, R.Ph. Program Management Officer Pharmacy Service	" "

## 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  
 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

## Georgia

## Governor's Drug Formulary Committee

April 25, 1977

Georgia Pharmaceutical Assoc.

Eugene L. Argo, R.Ph.  
Stacy's Pharmacy, Inc.  
2520 North Decatur Road  
Decatur 30033  
404/636-1424

Jerry L. Walker, R.Ph.  
Gray Drug Store  
Gray 31032  
912/986-3161

University of Georgia School  
of Pharmacy

Joseph P. LaRocca, Ph.D.  
Department of Medicinal  
Chemistry  
115 Fortson Circle  
Athens 30601  
404/542-4410

Mercer University School  
of Pharmacy

A. Leroy Toliver, Pharm.D., R.Ph.  
Assistant Professor of Pharmacy/  
Director of Continuing Education  
345 Boulevard Road, N.E.  
Atlanta 30312  
404/688-6291 x55

Emory University School  
of Medicine

Neil C. Moran, M.D.  
Professor, and Chairman  
Dept. of Pharmacology  
Atlanta 30322  
404/329-5982

Medical Association of Georgia

Linton Bishop, M.D.  
490 Peachtree Street, N.E.  
Atlanta 30309  
404/688-2416

Fleming L. Jolley, M.D.  
President  
c/o Emory University Clinic  
Neurosurgery  
1365 Clifton Road  
Atlanta 30322  
404/377-9111 x395

Georgia State Medical Assoc.

William H. Bland, M.D.  
2600 Martin Luther King, Jr.  
Drive, S.W.  
Atlanta 30311  
404/691-4321

Wesley S. Wilborn, M.D.  
Suite 510

Citizens Trust Bank Building  
75 Piedmont Avenue, N.E.  
Atlanta 30303  
404/659-1795

Medical College of Georgia

Merle W. Riley, Ph.D.  
Associate Professor of  
Pharmacology  
Director of Drug Information  
Center  
1459 Gwinnett Street  
Augusta 30902  
404/828-0211





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 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		
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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA				
MA				
AB				No report to NPC or
APTD				available data published by HEW.
AFDC				
Total				

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					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	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:										

\*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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA	6,000	\$ 427		
MA		9		
AB	4,000	404		
APTD	47,000	1,309		
AFDC	56,000	2,149		
Total	113,000	73,108 <sup>1/</sup>	\$4,298	\$3,999 <sup>2/</sup>

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

2/ DHEW - NCSS Report B-5 (FY-76) - Preliminary.

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:

Jon Won  
Executive Director  
Hawaii Medical Association  
320 Ward Avenue  
Honolulu 96814  
Phone: 808/536-7702

B. Pharmaceutical Association:

James Asato  
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 Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD		
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	1975			1976		
	Persons* Eligible	Drug* Recipients	Amounts	Persons* Eligible	Drug* Recipients	Amounts
OAA	1,346	711	\$127	1,348	743	\$144
MA	6,522	3,734	730	7,092	4,237	861
AB	28	11	2	24	12	2
APTD	1,690	995	193	1,623	984	204
AFDC	18,889	4,156	451	19,143	4,749	551
Total	28,475	9,607	\$1,503	29,230	10,725	\$1,762

\*Average per month.

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. (Legend drugs and insulin only, a maximum of 30 day supply at prescribed dosage - nitroglycerin products excepted).

## IDAHO

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Health and Welfare Department:

Milton G. Klein Director	Department of Health and Welfare Statehouse Boise, Idaho 83720
-----------------------------	---

Orvill E. Merrell, M.D. Chief, Bureau of Medical Assistance and Medical Consultant	" "
---	-----

William J. Whiteman, R.Ph. Pharmacy Services Consultant	" "
--	-----

## 2. Medical Care Advisory Committee:

Dr. Ralph Garn P. O. Drawer B Lewiston 83501	Department of Health and Welfare Regional Directors Rep.
--	--

Duane Higer Bannock Nursing Home 527 Memorial Drive Pocatello 83201	Idaho Health Facilities
--	-------------------------

Constance Hatch 303 N. Jefferson Moscow 83843	Idaho Advisory Council on Aging
---	------------------------------------

Howard Barton Statehouse Boise 83720	Idaho Commission for the Blind
--	-----------------------------------

Dr. Wayne Carte 324 2nd Street East Twin Falls 83301	South Central District Health Department
--	---

Robert Berntson, R.Ph. 145 Marjacq Idaho Falls 83401	Idaho State Pharmaceutical Association
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## Medical Care Advisory Committee (continued):

Ed Richardson Minidoka Memorial Hospital Rupert 83350	Idaho Hospital Association
Ruby Crosby, R.N. St. Benedicts Hospital Jerome 83338	Idaho Nurses Association
Dr. Rodney Heater 827 Center Avenue Payette 83664	Idaho Optometric Association
Dr. Gerald Woodworth 301 Scott Avenue Rupert 83350	Idaho State Dental Association
Marilyn Loening 3105 $\frac{1}{2}$ State Street Boise 83703	Idaho Mental Health Association
Irene Kanta, R.N. 618 Main Street, Box 489 Caldwell 83605	South West District Health Department
Dr. Joe E. McCary 222 E. Logan Caldwell 83605	Idaho Medical Association

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

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

## B. Pharmaceutical Association:

Clifford E. Barnett  
Executive Director  
Idaho State Pharmaceutical Association  
2416 Bank Drive  
Boise 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					Other* (SFO)	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	Under 21		
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	1975			1976		
	Persons <u>1/</u> Eligible	Drug <u>1/</u> Recipients	Amounts <u>2/</u>	Persons <u>1/</u> Eligible	Drug <u>3/</u> Recipients	Amounts
OAA			\$ 3,908			64,507 \$ 3,505
MA						
AB			181			1,382 156
APTD			12,609			95,201 11,901
AFDC			31,499			532,145 32,510
Foster Children			63			63
MN Aged			9,605			9,982
MN Blind			55			62
MN Disabled			6,106			7,590
MN Children			697			756
Foster Children			184			207
AMI			14			14
GA			5,449			6,848
Total			\$70,371			693,325 \$73,594

1/ Data not available2/ Revised from FY 1975; reported as \$64,907,000 (Preliminary)3/ DHEW-SRS/NCSS 2082A(2) FY-1976.

## 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 issued April 1977 lists approximately 4,000 items and maximum amount of each that may be prescribed. Has sections listing allowable "prescription items" and "over-the-counter items". Payment authorized for listed items only.

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 UPS and NF if law requires Rx.

## 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."

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. OTC items at prevailing OTC price. Prescription charge formula is actual acquisition cost (AAC) plus \$2.35.

V. Miscellaneous Remarks:

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

## ILLINOIS

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Public Aid Department Officials:

Arthur F. Quern 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 62763
Norman Ryan Deputy Director Finance	222 South College Springfield
Jesse Harris Deputy Director Programs and Operations	" "
Wayne Epperson, Chief Bureau of Research and Statistics	301 East Monroe Springfield
Beverly Knous, Chief Bureau of Information Systems	State Office Building 400 South Spirng Street Springfield 62706
Douglas H. Clough, R.Ph. Pharmacist Consultant	931 East Washington Street Springfield 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.

Vincent A. Costanzo, Jr.,                      7531 S. Stony Island  
R.Ph., M.D., Chairman                      Chicago 60649

Norman J. Ehrlich, M.D.                      111 N. Wabash Avenue  
Chicago 60602

John S. Hyde, M.D.                              603 Forest  
Oak Park 60302

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

## Consultant:

Louis Gdalman, R.Ph.                      Versailles Apts.  
17 West 7 - Apt. 313  
728 Butterfield Road  
Oak Brook Terrace 60181

\*Two additional appointees yet to accept at press time.

## 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.

## Drug Advisory Committee (continued):

Dave W. Watt, R.Ph. Watt Brothers Pharmacy <u>Chairman</u>	1106 East Ash Street Springfield 62703
Louis Gdalman, R.Ph. Professor Emeritus	5418 South Eastview Park Chicago 60615
Martin Alderman, R.Ph. Alderman Drugs	22 West 154th Street Harvey 60426
Herbert E. Braun, R.Ph. Braun Pharmacy, Inc.	2075 North Lincoln Avenue Chicago 60614
M. Duane Dean, R.Ph. Ryan Pharmacy	1245 East River Kankakee 60901
Cecil Dillard, R.Ph. Dillard's Pharmacy	67 East 43rd Street Chicago
Bernard W. Evers, R.Ph., F.A.C.A. Evers Pharmacy	417 West Main Collinsville 62234
John K. H. Griffith, B.P.S., R.Ph. Pill Box Pharmacy	1005 West Lawrence Avenue Springfield 62704
Richard Hase, R.Ph. Hase Pharmacy	313 South Main Street Anna 62906
Russell Imbler, Jr., R.Ph. Denton Drug, Inc.	418 Market Street P. O. Box 9 Mt. Carmel 62863
Myron Newman, R.Ph. Newman Pharmacy	36 West 119th Street Chicago 60628
Harold W. Pratt, R.Ph.	3851 N. Mission Hills Road Apt. #108 Northbrook 60062
Harold J. Shinnick, R.Ph.	934 West Armitage Avenue Chicago 60614
Sherwood Thomas, R.Ph.	7137 North Clark Street Chicago 60626
Eugene Ponder, R.Ph.	3408 Milton Drive Alton 62002
Dale Bergstrom, R.Ph.	1215 N. Alpine Road Rockford 61107

Drug Advisory Committee (continued):

John Swain, R.Ph. Swain Drugs	1204 E. 53rd Street Chicago 60615
----------------------------------	--------------------------------------

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				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	1975			1976		
	Persons Eligible	Drug 1/ Recipients	Amounts	Persons Eligible	Drug 1/ Recipients	Amounts <sup>1/</sup>
OAA	32,390	27,759	\$ 6,624			23,855
MA						
AB	1,315	1,095	164			866
APTD	22,017	16,939	4,769			16,728
AFDC	208,531	118,323	4,769			101,460
Total	264,253	164,116	\$16,326			142,209 \$16,512

<sup>1/</sup> DHEW-SRS/NCSS 2082 A(1)(2) Preliminary.

## 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.

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\*\$2.25 interim 1976-77.

## 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.  
Chairman  
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  
Patient Accounts Officer  
1315 West 10th  
Indianapolis

- Representing the Mental  
Health Commissioner

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

- Representing the State  
Health Commissioner

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		
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: Medical equipment and appliances; ambulance; home health; optometrist; optician; podiatrist; 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	1975			1976		
	Persons <u>1/</u> Eligible	Drug <u>2/</u> Recipients	Amounts	Persons <u>1/</u> Eligible	Drug <u>1/</u> Recipients	Amounts
OAA	31,855	12,321	\$3,418	27,720	22,183	\$3,509
MA		531	79	13,136	8,692	1,137
AB	1,348	479	125	1,205	900	130
APTD	12,606	3,502	1,085	16,201	9,972	1,518
AFDC	127,445	16,395	2,066	143,448	78,158	2,485
Total	173,254	33,228	\$6,773	201,710	119,905	\$8,779

1/ Unduplicated.

2/ 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.

FY 1976:

Total number R	1,597,906
Average cost/R for all categories	\$5.65

Source: Division of Statistics, Office of Administrative Services.

\*July 1, 1977 - \$2.55 Fee.

## 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
-----------------------------	--

Charles S. Ballinger Acting Chief Medical Services Section	" "
--	-----

Ronald J. Mahrenholz, R.Ph. Manager Utilization Review Unit	" "
---	-----

Pharmacist Consultant\*

## 2. Social Services Department Advisory Committees:

## A. Title XIX Medical Assistance Council:

College of Medicine  
Associate Dean  
College of Medicine  
University Hospitals  
Iowa City 52240

Iowa Hospital Association Inc.  
Donald Cordes, Administrator  
Iowa Methodist Hospital  
1200 Pleasant Street  
Des Moines 50309

House of Representatives  
Rep. Reid Crawford  
1117 Arizona Avenue  
Ames 50010

Iowa Medical Society  
A. J. Havlik, M.D.  
207 West 3 Street  
Tama 52339

Iowa Dental Association  
C. E. O'Meara  
530 39th Street  
Des Moines 50309

Iowa Nurses Association  
Marilyn Russell (Mrs.)  
Public Health Nursing Assoc.  
Armory Building  
East 1st and Des Moines Street  
Des Moines 50309

---

\*One pharmacist serves as pharmacist consultant 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 677  
2137 Sunset Road  
Des Moines 50315

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  
J. A. Ritchie, D.P.M.  
1314 2nd Avenue, S.E.  
Cedar Rapids 52403

Iowa Senate  
Senator Joseph Coleman  
Clare 50524

Senator Dale L. Tieden  
Elkader 52043

Iowa Society Osteopathic  
Physicians & Surgeons  
Gerald Leuty, D.O.  
1001 Chestnut Street  
Earlham 50072

Iowa State Department  
of Health  
Norman Pawlewski  
Commissioner  
Lucas State Office Bldg.  
Des Moines 50319

Iowa State Board of  
Chiropractic Examiners  
R. O. Masters  
938 N. Federal  
Mason City 50401

Iowa Ophthalmic Dis-  
pensers, Inc.  
R. Wayne Ellis  
849 Marion  
Des Moines 50315

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

Ruth Hannagan (Mrs.)  
R.R. 1, Box 300  
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:

Daniel Regan  
Ron Dorris  
Richard L. Watkins  
Gus Erickson  
G. Joseph Norwood  
Don Hummel

- Waukon  
- Jewell  
- Independence  
- Garner  
- Iowa City  
- Hawarden



Pharmaceutical Advisory Committee (continued):

Jay Wangerin	- Des Moines
Duane Haberichter	- Oskaloosa
Rolland Johnson	- Council Bluffs

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: 515/223-1401

B. Pharmaceutical Association:

Robert G. Gibbs  
Executive Director  
Iowa Pharmaceutical Association  
302 Shops Building  
Des Moines 50309  
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)					Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	
	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: Home Health Care; Clinic Services; Physical Therapy; Prostheses; Preventive Services; Family Planning Services; Chiropractic Services; and Optometric 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	1975			1976		
	1/ Persons Eligible	2/ Drug Recipients	Amounts	1/ Persons Eligible	2/ Drug Recipients	Amounts
OAA	8,408	8,582	\$1,520	9,635	9,687	\$ 1,615
MA	24,817	30,001	3,834	32,110	38,662	4,574
AB	371	350	50	373	335	56
APTD	7,371	7,978	1,324	9,311	8,963	1,662
AFDC	69,390	57,664	1,810	75,982	64,629	2,320
GA	9,086	11,873	599	10,997	14,232	799
Total	119,443	116,448	\$9,137	138,408	136,508	\$11,026

1/ Average per month.

2/ Unduplicated count of recipients for fiscal year.

## 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 \$2.35 for FY 1977, 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. Effective July 1, 1976, a recipient co-pay charge of 50¢ was applied to each new and refill prescription.

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."

## 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	" "
Duane C. Koll, Acting Director Medical Services Section	" "
James W. Bibb, Budget Director Department of Administration	" "
Position Temporarily Vacant Coordinator of Medical Services	" "
Position Temporarily Vacant Medical Director	" "
Gene Hotchkiss, R.Ph. Pharmacist Consultant	" "

## 2. Governor's Advisory Committee:

This committee is currently under reorganization.

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Society:

Jerry Slaughter  
Executive Director  
Kansas Medical Society  
1300 Topeka Boulevard  
Topeka 66612  
Phone: 913/235-2383

## B. Pharmaceutical Association:

Douglas Johnson, R.Ph.  
Executive Director  
Kansas Pharmaceutical Assoc.  
1308 West 10th Street  
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					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	1975			1976		
	Persons* Eligible	Drug* Recipients	Amounts	Persons* Eligible	Drug* Recipients	Amounts
OAA	67,011	30,674	\$4,984	67,015	31,052	\$5,083
MA						
AB	2,328	827	129	2,293	826	135
APTD	33,850	15,340	2,693	41,546	18,895	3,362
AFDC	158,545	27,264	2,561	195,611	32,923	3,030
MN Aged	5,082	2,253	373	3,239	1,571	273
MN Blind	78	31	5	56	26	4
MN Disabled	2,209	1,095	211	2,243	1,135	223
MN Children	55,055	10,532	1,053	45,899	8,301	785
Total	324,158	88,016	\$12,009	357,902	94,729	\$12,895

\*Monthly average.

## 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 recommendations of the Formulary Subcommittee and in accordance with available funds.
- 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.
  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 -- Reimbursement Formula:

1. All covered outpatient pharmacy benefits provided to Kentucky Medical Assistance Program recipients are to be billed to the Program at the usual charge to the general public for the same product and service(s). Reimbursement to the pharmacy consists of the lowest of: (1) the usual and customary charge; (2) the MAC, if any, plus dispensing fee; or (3) the EAC plus dispensing fee.

(Note: A state-established MAC for drug products available from multiple sources will be used until Federal MAC's for the respective products become effective.)

2. The ingredient cost for covered drugs is adjusted monthly.

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".

Drug Utilization Data:

Average Monthly Amount of Payment

Average Monthly Vendor Payment-----	\$11.34
<u>Categorically Needy-----</u>	11.56
Aged-----	13.64
Blind-----	13.58
Disabled-----	14.83
Dependent Children-----	7.67
<u>Medically Needy-----</u>	9.71
Aged-----	14.48
Blind-----	14.17
Disabled-----	16.39
Dependent Children-----	7.88

Average Monthly Rate of Drug Program Utilization

Utilization Rate-----	26
(per 100 Eligible Persons)	
<u>Categorically Needy-----</u>	27
Aged-----	46
Blind-----	36
Disabled-----	45
Dependent Children-----	17
<u>Medically Needy-----</u>	21
Aged-----	49
Blind-----	47
Disabled-----	51
Dependent Children-----	18

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Source: Public Assistance in Kentucky  
PA-264 Report Series - Fiscal Year 1976

## KENTUCKY

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## BUREAU FOR SOCIAL INSURANCE - DEPARTMENT FOR HUMAN RESOURCES

Officials, Consultants and Committees

## 1. Officials:

Peter Conn 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	" "

## 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
Robert N. McLeod, M.D. 500 Bourne Avenue Somerset 42501	Roger Proffitt North Dixie Highway Cave City 42127
	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  
Madisonville 41431

Earl Linquist, Administrator  
Hayswood Hospital  
Maysville 41056

C. A. Nava, D.P.M.  
Secretary  
Kentucky State Board  
of Podiatry  
100 N. 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  
Burkesville 42717

Carl Cooper, M.D.  
Bedford 40006

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

Earl Linquist  
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

Thomas Scharff, Ph.D.  
Department of Pharma-  
cology  
Health Sciences Center  
University of Louisville  
Post Office Box 1055  
Louisville 40201

## B. Pharmacy Technical Advisory Committee:

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

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

## Pharmacy Technical Advisory Committee (continued):

Clarence Frances, R.Ph.  
P. O. Box 443  
Hindman 41822

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

Arnold Zegart, R.Ph.  
Zegart Drugs  
7th and Oak Streets  
Louisville 40203

## 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: 502/459-9790

## 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						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				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	1975			(Oct. - June F.Y. 1976)		
	Persons Eligible	Drug Recipients	Drug Amounts	Persons Eligible	Drug Recipients	Drug Amounts
OAA		65,056	\$16,506	110,637	117,681	\$14,024
MA						
AB		947	222	2,280	1,858	188
APTD		18,384	4,808	55,599	54,044	6,054
AFDC		35,247	4,282	232,228	131,573	3,888
Others		79	10	670	324	10
GA		4,351	883	4,525	5,718	431
Total		124,064	\$26,711	405,939	311,198	\$24,595

1/ Ave. 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. Certain legend drugs and specified non-legend drugs (OTC) are reimbursed.

Exclusions: (Effective August 1, 1976)

1. Anorexics, such as Amphetamines
2. Multiple ingredient anti-anemia preparations. (Ferrous Sulfate, Ferrous Gluconate, Folic Acid and Injectable Vitamin B<sub>12</sub>, will be payable)
3. Cough and cold preparations
4. Certain gastro-intestinal drugs such as Antacids and Digestants
5. Minor Tranquilizers, such as Valium, Librium and Meprobamate
6. Vitamins or vitamin containing products. (B<sub>12</sub> Injection, Folic Acid, D, K, and Nicotinic Acid are payable)
7. Enzymes and miscellaneous

Specified non-legend drugs on prescription:

Calcium Gluconate, Calcium Lactate, Calcium Phosphate, Contraceptive Supplies, Ferrous Gluconate, Ferrous Sulfate, Nicotinic Acid, Insulin, Benedict's Solution, Clinistix, Clinitest, Tes Tape, Insulin Syringes (not disposable). Indwelling Catheters and Catheterization Trays.



## 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:

William A. Cherry, M.D. Secretary	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	Office 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. Office of Family Services Advisory Committees:

## A. Medical Advisory Committee:

(To be appointed)

## B. Pharmacy Policy and Advisory Committee:

(To be appointed)

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Society:

H. A. Thomas, M.D.  
Secretary-Treasurer  
Louisiana State Medical Society  
1700 Josephine Street  
New Orleans 70113  
Phone: 504/561-1033

## B. Pharmaceutical Association:

James F. Hunnicutt  
Executive Officer  
Louisiana State Pharmaceutical Association  
2337 St. Claude Avenue  
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) Category Related				Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	18,663	16,651	\$1,996	20,771	16,754	\$2,323
MA						
AB	331	200	19	354	160	23
APTD	11,671	9,326	1,157	15,139	11,619	1,608
AFDC	111,761	55,181	1,806	117,276	60,362	1,808
Total	142,426	81,358	\$4,978	153,540	88,895	\$5,762

## 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  
CommissionerDepartment of Human  
Services  
State House  
Augusta, Maine 04333William J. Carney  
Deputy Commissioner

(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  
P.O. Box 250  
Brunswick 04011  
Phone: 207/725-6414

B. Pharmaceutical Association:

John Burrill, R.Ph.  
Executive Secretary  
Maine Pharmaceutical Association  
1098 Brighton Avenue  
Portland 04102  
Phone: 207/892-9334

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)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	11,768	9,231	\$ 944	18,820	13,642	\$ 7,733
MA						
AB	418	316	31	478	342	36
APTD	25,397	21,343	2,307	30,136	24,022	2,957
AFDC	235,746	160,821	4,602	240,346	167,950	5,239
MN Aged	30,641	27,434	3,910	26,048	24,831	3,916
MN Blind	93	77	11	77	71	10
MN Disabled	8,830	7,506	1,105	8,143	7,171	1,147
MN Children	32,226	20,599	415	29,087	20,646	415
GA & Others	71,032	42,984	3,106	71,471	42,451	2,385
Total	416,151	290,311	\$16,431	424,606	301,126	\$17,838

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 to the State for payment.

## 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 low cost brand name products or prescribe drugs by generic name.
  2. Quantity of Medication: The prescriber may order up to a 100-day supply of medication on a single prescription, except for birth control pills which are limited to a 6-cycle supply.
  3. Refills:
    - a. Maximum number of refills authorized on a prescription is two.
    - b. Refills may not be dispensed after 100 days of date of original prescription, except for birth control pills which may be refilled up to 2 times within 180 days.
  4. Dollar Limits: Prior authorization required from local Health Departments when usual and customary charge exceeds \$20.

## D. Prescription Charge Formula:

Legend drugs - An upper price limit has been established, known as the Estimated Acquisition Cost (EAC) for single source drugs or the Maximum Allowable Cost (MAC) for multiple source drugs.

Pharmacists are to bill the Program at their usual and customary charge to the general public.

Reimbursement will be at the lower of:

- Allowable cost plus \$2 (less 50¢ co-pay)
- Usual and customary (less 50¢ co-pay)

O-T-C drugs - reimbursed at the lowest of:

- Usual and customary (less 50¢ co-pay)
- Allowable cost plus 50% (less 50¢ co-pay) or
- Allowable cost plus \$2 (less 50¢ co-pay)

## 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 manufacturer 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

Sedatives and Hypnotics (continued):

## B. Meprobamate

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 is authorized only for those drug products included in the Maryland State Formulary.
3. 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 201 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	" "
---	-----

Madlyn Fass Kruh, 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
---	--

## Medical Assistance Advisory Committee (continued):

Paul V. Joliet, M.D., M.P.H.  
Deputy State Health Officer  
Washington County Health Dept.  
1302 Pennsylvania Avenue  
Hagerstown 21741

James C. Harvey  
Assistant Administrator  
Bon Secours Hospital  
2025 West Fayette Street  
Baltimore 21223

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11613 Toulone Drive  
Potomac 20854

Ethel Pace (Mrs.)  
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Baltimore 21216

Alice Richman (Mrs.)  
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Philip W. Mercer, M.D.  
150 W. Main Street  
Westminster 21157

(Miss) Jean M. Dockhorn, MSW  
Director of Social Work  
Univ. of Maryland Hospital  
22 S. Greene Street  
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James P. Cragg, Jr., R.Ph.  
Irvington Pharmacy  
1126 Harwall Road  
Baltimore 21207

Ivan Tellis, O.D.  
7835 Wise Avenue  
Baltimore 21222

Nicholas F. Desien  
Maryland Hospital Assoc.  
1301 York Road  
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Ann Norman  
708 Richwood Avenue  
Baltimore 21212

Elaine Albrecht (Mrs.)  
1615 Frenchs Avenue  
Baltimore 21221

Margaret Alexander (Mrs.)  
116 Brookbury Drive  
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Reisterstown 21136

Bernard B. Lachman, R.Ph.  
5 Thornbaugh Court  
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3607 Rosedale Road  
Baltimore 21215

J. Emmett Queen, M.D.  
Medical Director  
Blue Cross  
700 E. Joppa Road  
Baltimore 21204

David A. Knapp, Ph.D.  
Professor and Chairman  
Dept. of Pharmacy Admin.  
University of Maryland  
636 W. Lombard Street  
Baltimore 21202

Mary O. Klein, R.N.  
Nursing Director  
Ivy Hall, Inc.  
19 Harrison Avenue  
Baltimore 21220



## Medical Assistance Advisory Committee (continued):

John F. Birkmeyer, Jr., MSW  
Director, Department of  
Medical Social Work  
Baltimore City Hospitals  
4940 Eastern Avenue  
Baltimore 21224

Pat Panaggio, Jr.  
Social Services Administration  
Department of Employment  
and Social Services  
1315 St. Paul Street  
Baltimore 21202

Earl West  
1223 Wellsback Way  
Baltimore 21224

Richard A. Batterton  
Secretary  
Department of Human Resources  
1100 N. Eutaw Street  
Baltimore 21201

Paul D. Cooper  
P. O. Box 55  
Whitehall 21161

Thomas J. S. Walter, Jr., Esq.  
10 Light Street  
Baltimore 21201

Adele Wilzach, R.N.  
Assistant Health Commissioner  
Health Services for the Aging  
and Medical Care  
Baltimore City Health Dept.  
111 N. Calvert Street  
Baltimore 21202

## 3. Pharmacy Liaison Committee:

Marvin A. Friedman, R.Ph.  
3 Burr Oak Court  
Randallstown 21133

Adolph Baer, R.Ph.  
1835 Woodburn Drive  
Hagerstown 21740

Samuel Lichter, R.Ph.  
4001 Carthage Road  
Randallstown 21133

Murray Polonsky, R.Ph.  
415 E. Wayne Avenue  
Silver Spring 20901

Donald A. Schumer, R.Ph.  
3401 Janellen Drive  
Baltimore 21208

Melvin Rubin, R.Ph.  
8512 Green Lane  
Baltimore 21207

Ronald Sanford, R.Ph.  
1336 Denbright Road  
Baltimore 21228

Wesley N. Shelton, R.Ph.  
1916 Cedrick Road  
Baltimore 21216

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Faculty:

John Sargeant  
Executive Director  
Medical & Chirurgical Faculty of Maryland  
1211 Cathedral Street  
Baltimore 21201  
Phone: 301/539-0872

B. Pharmaceutical Association:

David A. Banta  
Executive Director  
Maryland Pharmaceutical Association  
650 W. Lombard Street  
Baltimore 21201  
Phone: 301/727-0746

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) 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	
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 <sup>1/</sup>									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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA			71,138	\$ 7,419
MA			149,562	8,847
AB				
APTD			45,807	4,956
AFDC			385,405	7,771
GA			25,415	916
Total			\$28,776 <sup>2/</sup>	677,327
				\$29,909

1/ Under 21 only.

2/ 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.  
\$35 for direct billing of medical supplies and durable goods.
- D. Prescription Charge Formula:
1. Legend Drugs: at cost\* plus \$2.10 dispensing fee.

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\* Average Red 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 for general public.
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., whichever is the greater)
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
Peter Bloomsburgh Interim Deputy Commissioner	" "
(Interim appointee) Assistant Commissioner Medical Assistance	" "
(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
---	--

George Levey, R.Ph. 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:

Thomas W. Gephart, M.D.  
Secretary  
Massachusetts Medical Society  
22 The Fenway  
Boston 02215  
Phone: 617/536-8812

2. Pharmaceutical Association:

Leonard L. Permut  
Executive Secretary  
Massachusetts State Pharmaceutical Association  
8 Beacon Street  
Boston 02108  
Phone: 617/723-3155



## 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)					Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related 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	

Other Benefits: Transportation; Limited Vision and Hearing; Limited Medical Supplies and Equipment; Family Planning; Drug Withdrawal and Alcoholism Treatment; 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons 1/ Eligible	Drug 2/ Recipients	Amounts
OAA	44,685	50,196	\$ 6,434	49,552	43,299	\$ 7,019
MA	125,345	78,489	11,092	107,591	79,639	12,902
AB	1,650	1,339	148	1,487	1,259	161
APTD	54,911	60,520	8,729	66,171	57,334	10,281
AFDC	633,993	505,550	15,868	754,158	545,243	20,203
Total	860,584	696,094	\$42,271	978,959	726,774	\$50,566

1/ Average Monthly Eligibles.

2/ Unduplicated Count.

\*\*Pharm. Services began 1/1/67

Report Used: Statistical Report on Medical Care - Data Reporting Section DSS

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.):  
Non-Legend (OTC) Drugs; Anorectics

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:

Actual acquisition cost plus professional fee not to exceed \$2.19 or charges in the private sector. 50¢ copay.

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	" "
R. Bonhag, DMD, M.H.A., Director Bureau of Medical Assistance	" "
Keith Cole, Director Division of Medicaid Operations Bureau of Medical Assistance	" "
James L. Hall, R.Ph. Acting Chief, Policy Analysis and Implementation Medicaid Planning Division Bureau of Medical Assistance	" "
(Vacant) 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:

Louis Sesti, R.Ph. Michigan National Tower Lansing	Maurice Bechtel, R.Ph. 1671 West Sherman Blvd. Muskegon
Robert Ludlum, R.Ph. 226 East Grand River Lansing	C. Douglas Acord, R.Ph. 1517 Lochmoor Blvd. Grosse Pointe

## State Pharmaceutical Advisory Committee (continued):

Jack Fountain, R.Ph.  
1956 Birchwood  
Mount Pleasant

B. Terence Reagan, R.Ph.  
301 Michigan North East  
Grand Rapids

Arthur Koorhan, R.Ph.  
21699 Glenmorra  
Southfield

DeWaine Robinson, R.Ph.  
G-1122 West Cook Road  
Grand Blanc

## 3. Executive Officer of State Medical and Pharmaceutical Societies:

## A. Medical Society:

Warren F. Tryloff  
Director  
Michigan State Medical Society  
120 West Saginaw  
East Lansing 48823  
Phone: 517/337-1351

## B. Pharmaceutical Association:

Louis Sesti, R.Ph.  
Executive Director  
Michigan Pharmaceutical Association  
1812 Michigan National Tower  
Lansing 48933  
Phone: 517/484-1466

## C. Osteopathic Association:

J. George Abdilla  
Executive Director  
Michigan Association of Osteopathic Physicians  
and Surgeons, Inc.  
33100 Freedom Road  
Farmington 48024



## 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) 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	13,292	11,131	\$ 1,770	15,548	13,363	\$ 2,383
MA						
AB	688	471	117	831	300	45
APTD	14,387	9,398	1,380	18,808	8,997	1,791
AFDC	187,683	100,816	3,038	203,903	100,496	3,503
MN Aged	34,816	29,478	5,414	36,222	30,642	6,975
MN Blind	154	81	10	151	97	19
MN Disabled	11,520	6,417	841	12,281	6,044	1,253
MN Children	41,680	15,601	300	42,787	15,567	454
Total	304,220	173,393	\$12,870	330,531	175,506	\$16,423

## 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	" "
Robert G. Randle, Director Policy and Planning Division	690 North Robert Street St. Paul 55117
John T. Bush, R.Ph. Pharmacist Consultant	" "

## 2. Welfare Department Advisory Committees:

## A. Professional Medical Advisory Committee

Irving C. Bernstein, M.D. 1011 Medical Arts Bldg. Minneapolis 55402	Larry Greenberg, M.D. 709 South Meadow Lane Minneapolis 55416
Henry Horecki, M.D. 4704 Upper Terrace Minneapolis 55435	Lyle Hay, M.D. Suite 1224 825 S. 8th Street Minneapolis 55404
Alex Barno, M.D. St. Louis Park Medical Center St. Louis Park 55426	Jesse Yap, M.D. 155 W. 96th Street Minneapolis 55420

## Professional Medical Advisory Committee (continued):

Merrill Chesler, M.D.  
Physicians and Surgeons Bldg.  
63 S. Nineth Street  
Minneapolis 55402

John McNeill, M.D.  
1224 Lowry Building  
St. Paul 55102

Henry Blissenbach, Ph.D.  
2119 Aztec  
Mendota Heights 55120

Shirley Mink, Ph.D.  
110 E. 18th Street  
Minneapolis 55403

## B. Minnesota State Pharmaceutical Association Welfare Task Force

Roger Vadheim, R.Ph.

- Tyler

William F. Appel, R.Ph.

- Minneapolis

Chairman

Norman M. Carlson, R.Ph.

- White Bear Lake

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

- St. Paul

Barry M. Krsnitz, R.Ph.

- Minneapolis

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

Harold W. Brunn  
Executive Vice-President  
Minnesota State Medical Association  
American National Bank Building  
101 E. 5th Street, Suite 900  
St. Paul 55101  
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)				Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related	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	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	1975			1976		
	Persons 1/ Eligible	Drug 2/ Recipients	Amounts	Persons 1/ Eligible	Drug 3/ Recipients	Amounts
OAA	85,145	85,448	\$11,222	83,922	81,340	\$13,602
MA						
AB	1,994	1,764	180	1,921	1,576	216
APTD	28,961	30,066	4,258	28,626	29,140	5,221
AFDC	197,037	169,367	4,009	194,443	143,472	4,900
CWS Foster Care	647	551	8	518	498	10
Total	313,811	287,196	\$19,677	309,430	256,026	\$23,949

1/ Average numbers (monthly).

2/ Unduplicated count of total annual recipients.

3/ Unduplicated number of drug recipients in FY '76.

## 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, peripheral vasodilators, certain anti-arthritic products, 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: Up to 5 refills per prescription are allowed when authorized in writing by the prescriber. There are no refill restrictions on insulin, and no refills are allowed on telephoned prescriptions.
4. Dollar Limits: None.

## D. Prescription Charge Formula:

1. Legend drugs - EAC prices adjusted to current data plus \$1.75 fee, or the provider's usual/customary retail charge, whichever is lower. Price based on 100 (or size nearest), 16-ounce, 12's (suppositories and single tubes (ointments)). Drugs listed by generic name are limited to maximum EAC price as shown in the drug list.

Prescription Charge Formula (continued):

Note:

Effective July 1, 1976: 50¢ copay/prescription.

Exceptions: Family Planning Services Drugs,  
Prescribed Drugs, Early and Periodic  
Screening, Diagnosis and Treatment.

2. Non-legend drugs, insulin, birth control pills, and injections - EAC price plus \$1.75 fee or the usual and customary retail price, whichever is lower.
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 1976, 256,026 recipients (approximately 71.2% of those eligible) received one or more prescriptions. This was an increase of 14,696 recipients over FY 1975. (Physicians' Services had a 68.9% utilization rate.)

Drug Utilization Data (FY 1976)

Program Category	Number of Rx	Number of Eligibles	Avg. Rx per Eligible	Number of Recipients	Avg. Rx per Recipient
Total	4,532,049	359,584	12.6	256,026	17.7
OAA	2,450,490	95,178	25.7	81,340	30.1
AB	40,552	2,018	20.1	1,576	25.7
APTD	932,974	33,256	28.1	29,140	32.0
AFDC Children	584,760	177,092	3.3	105,268	5.6
AFDC Adults	520,631	51,119	10.2	38,204	13.6
Other (CWS-FC)	2,642	921	2.9	498	5.3

Expenditure Data for Drugs

Total Amount	% Total Expenditures	Avg. per Eligible	Avg. per Recipient
\$23,947,736	19.6%	\$66.60	\$93.54
Average Prescription Price .....			\$ 5.28

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, phenyl-  
Butazone, OxyphenylButazone.

## 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):

Jesse O. Adcock, <u>Chairman</u>	- Biloxi
D. W. Williamson	- Meridian
Lunsford Casey	- Laurel
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

Matthew J. Page, M.D.  
Greenville

B. Technical Advisory Committee on Drugs:

Cecil Allred, R.Ph.  
Hazlehurst  
Chairman

William J. Mosby, III, R.Ph.  
Canton

George Abdo, Jr., R.Ph.  
Greenville

Mr. Gary Wilkerson  
Jackson (Sec. State  
Pharmaceutical Assoc.)

William E. Farlow, R.Ph.  
Jackson

Dr. Dewey Garner  
University

Eugene B. Polk, R.Ph.  
Magee

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:

Edgar H. Overstreet  
Gracelands Convalescent  
Center  
Oxford

Charles T. Smith  
Ellisville

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, D.D.S.  
Marks

Robert W. Harrison, Jr., D.D.S.  
Yazoo City

James Russell Dumas, D.D.S.  
Prentiss

Phillip Weaver, D.D.S.  
Laurel

Sam Hall, D.D.S.

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

Nell Edgar Niles, O.D.  
Kosciusko

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

Charles L. Mathews  
Executive Secretary  
Mississippi State Medical Association  
P. O. Box 5229  
Jackson 39216  
Phone: 601/354-5433

## B. Pharmaceutical Association:

Gary Wilkerson  
Secretary  
Mississippi State Pharmaceutical Association  
Suite 204 - Barnett Building  
Jackson 39201  
Phone: 601/944-0416



## 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)			Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related	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 <sup>1/</sup>				X
Physician Services	X	X	X	X				X
Dental Services	X	X	X	X				X

Other Benefits: Foster care; general relief; and blind pension.

\*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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA			\$ 6,850	84,000	68,638	\$ 7,880
MA						
AB & BP			281	3,864	2,922	322
APTD			2,301	31,501	25,070	3,199
AFDC & AFDC-FC			2,983	376,286	171,070	4,189
GR & CWS-FC			829	23,212	12,873	813
Total	515,464	250,032	\$13,244	518,863	280,573	\$16,403

<sup>1/</sup> Age 21 or older.

## 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 667 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 index 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 \$1.75 professional fee.

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\*July 1, 1977 - \$2.25 Fee (upon the Governor's signature).

NPC

Missouri - 3  
1977

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:

James F. Walsh Director	Department of Social Services Broadway State Office Bldg. Jefferson City, Mo. 65101
Phyllis J. Reser 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
Sen. Harry Wiggins 7520 Main Kansas City 64114	Sen. Joseph Frappier 625 Glenco St. Charles 63301

## 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  
St. Louis 63131

Rep. G. Phillip Meier  
12440 Glenbush  
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Claus A. Rohweder, D.O.  
Missouri Association of  
Osteopathic Physicians  
and Surgeons  
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Sen. John T. Russell  
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St. Louis 63144

Homer Spiers  
Missouri Nursing Home  
Association  
1500 West Truman Road  
Independence 64050

Rev. Seanes Boyce  
7118 Blue Spruce Drive  
St. Louis 63121

Wm. D. Dellande, O.D.,  
F.A.A.O.  
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601 East Broadway  
Columbia 65201

## 3. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

Royal Cooper  
Executive Secretary  
Missouri State Medical  
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## B. Pharmaceutical Association:

Cora D. Cox (Mrs.)  
Executive Secretary  
Missouri Pharmaceutical  
Association  
410 Madison Street  
Jefferson City 65101  
Phone: 314/636-7522

Executive Officers of State Medical and Pharmaceutical  
Societies (continued):

C. Osteopathic Association:

Edward Borman  
Executive Director  
Missouri Association of Osteopathic  
Physicians and Surgeons  
325 East McCarty  
Jefferson City 65101  
Phone: 314/634-3415



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				Medically Needy (M N)					Other* (SFO)
	Recipients				Category Related				Children Under 21	
	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	1975		1976	
	Persons Eligible	Drug <u>1/</u> Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA		5,660		\$ 290
MA				
AB		129		10
APTD		4,375		385
AFDC		17,499		347
MN Aged				480
MN Blind				4
MN Disabled				156
MN Children				67
GA		512		11
Total		28,175		\$1,739

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

## MONTANA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

Administered in 56 counties by the State Department of Social and Rehabilitation Services.

## IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):  
Provided are all legend drugs and those non-legend drugs in the following classes: insulin, laxatives, antacids. They must be prescribed by a licensed practitioner (physician, 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. Dispensing fees range from \$2.00 to \$3.25. Additional 50¢ per R allowed for unit dose systems.

## 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:

Patrick Melby Director	Department of Social and Rehabilitation Services P.O. Box 4210 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  
E. W. Gibbs, M.D.  
2802 Ninth Avenue North  
Billings 59101

## Medical Assistance Advisory Council (continued):

Montana Commissioners  
Association  
(Vacant) - Commissioner  
Court House  
Great Falls 59401

Montana Optometric  
Association  
A. S. Kautz, O.D.  
1212 Grand Avenue  
Billings 59103

Montana Pharmaceutical  
Association  
Ed Doig, R.Ph.  
Box 663  
Livingston 59047

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:

Patrick Melby  
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

James Wilkens  
Optometric Consultant

John Brown  
Medical Care Specialist

Jack Dorner  
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  
Phone: 406/443-4000

## B. Pharmaceutical Association

Frank Davis  
Executive Secretary  
Montana State  
Pharmaceutical Assoc.  
613 Beth Drive  
Great Falls 59401  
Phone: 406/453-6622

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					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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	7,177	6,249	\$ 988	6,870	6,164	\$1,165
MA						
AB	241	183	27	207	165	30
APTD	6,783	5,398	925	6,333	5,155	1,045
AFDC	13,192	10,925	561	12,297	10,330	612
Children	29,552	17,787	292	29,160	17,757	354
MN Aged	8,344	7,387	1,541	8,306	7,554	1,800
MN Blind	63	49	10	47	42	10
MN Disabled	2,140	1,472	320	2,204	1,546	370
MN AFDC	847	605	31	2,166	1,582	69
MN Children	1,853	1,020	21	3,874	2,253	40
Total	70,192	51,075	\$4,716	71,464	52,548	\$5,496 <sup>2/</sup>

1/ Unduplicated annual total number of recipients of medical services, including drugs.

2/ Difference between total given and adding the figures in this column is due to rounding.

## 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.

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\* 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.

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\*July 1, 1977 - Variable Pharmacy Fee for individual pharmacy determined from survey data submitted to state.

	<u>Range</u>
Normal Prescriptions	\$2.20-\$2.60
30-day supply Prescriptions plus \$1.00 or usual and customary, whichever is lower.	\$3.20-\$3.60

## 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.

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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:

Eldin J. Ehrlich Director	Department of Public Welfare 301 Centennial Mall S., 5th Floor Lincoln, Nebraska 68509
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

John Thomas, M.D.  
8601 West Dodge Road  
Omaha 68114

Gordon G. Pejsar, D.D.S.  
5440 South Street  
Lincoln

Delanne Simmons, R.N., M.P.H.  
Chief in Charge of Nursing  
Service  
Omaha-Douglas Co. Dept. of  
Health  
1201 South 42nd  
Omaha 68105

Consumers:

Cherita Richardson (Mrs.)  
4602 North 37 Street  
Omaha 68111

Gene Lewallen, M.D.  
Box 2636, Station B  
Lincoln 68502

Mary Lou Taylor (Mrs.)  
4626 Gladstone Street  
Lincoln 68504

(Mrs.) Patricia Bott, P.T.  
Bryan Memorial Hospital  
4848 Sumner  
Lincoln 68506

Ralph Marshall  
Tabitha Home  
4720 Randolph Street  
Lincoln 68510

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)				Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related 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	X					
Physician Services	X	X	X	X					
Dental Services	X	X	X	X					

Other Benefits: Prostheses; home health care; family planning services; physical therapy; podiatry; durable and disposable 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	3,962	1,669	\$ 488	3,834	1,853	\$ 617
MA						
AB	168	59	15	195	66	19
APTD	1,772	576	245	1,627	859	383
AFDC	15,519	2,898	425	14,640	3,026	483
Total	21,421	5,202 <sup>1/</sup>	\$1,173	20,296	5,804	\$1,502

<sup>1/</sup> State revised figures from 1976 report.

## 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 individual contracts with pharmacies and physicians. Nevada Blue Shield is the fiscal intermediary.

## IV. Provisions Relating to Prescription Drugs:

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

1. Specific Exclusions. The Title XIX drug program will not pay for the following:

- a. Vitamins and vitamin combinations.
- b. Obesity control pharmaceuticals:
  - (1) Anorectics;
  - (2) Amphetamines;
  - (3) Central nervous system stimulants.
- c. Amphetamine combinations.
- d. Non-legend pharmaceuticals.
- e. Appliances, sundries and supplies; see 1202.5.
- f. Any pharmaceutical, biological, appliance or equipment supplied as an integral part of a program activity of other public agencies or other Title XIX programs, such as immunizations, dressings, oxygen or canes; see 1202.5.
- g. Pharmaceuticals designated "ineffective" by the FDA as to substance or diagnosis for which prescribed.
- h. Pharmaceuticals considered "experimental" as to substance or diagnosis for which prescribed.
- i. Pharmaceuticals not approved for use by the Food and Drug Administration.



## General Exclusions (continued):

2. Exclusion Exceptions. All pharmaceuticals must be prescribed by a licensed physician, podiatrist, osteopath or dentist. They may be dispensed directly by the prescriber or pharmacist, or indirectly by means of an inpatient pharmaceutical chart order, in compliance with federal and state laws and regulations.
  - a. The Nevada Title XIX drug program will pay for the following prescribed pharmaceuticals:
    1. Legend pharmaceuticals.
    2. Insulin.
    3. Diabetic test tablets and test tapes, and diabetic syringes and needles (permanent or disposable).
    4. Prenatal vitamin/mineral supplements, legend or non-legend, WRITTEN for prenatal care.
    5. Nicotinic acid in oral or injectable form.
    6. Methylphenidate (Ritalin).
    7. Birth control items such as diaphragms and fertility-suppressant pills.
    8. Compounded prescriptions, providing that at least one legend pharmaceutical is included in therapeutic quantity.
    9. Tetanus toxoid.
  - b. The Nevada Title XIX drug program will pay for certain other pharmaceuticals which have received prior authorization from the Medical Care Section on form SAMI-3. These would include:
    1. Pharmaceuticals which, because of their peculiar characteristics, become the only pharmaceutical of choice to the prescribing practitioner.
    2. Medications over and above program limitations specified in 1202.4 that can be considered medically essential.

## Exclusion Exceptions (continued):

3. Tedral (plain).
4. Children's multiple vitamins with flouride.
5. Single entity oral or injectable vitamins or iron appropriately prescribed for FDA-approved treatment.

B. Formulary: None.

## C. Prescribing or Dispensing Limitations:

1. Prescriptions. Eligible Title XIX recipients may receive three prescriptions per month plus those designated "emergency" by the prescriber plus those issued for EITHER prenatal OR family planning purposes. Any prescription above and beyond this limitation is reimbursable only if prior-authorized by the Medical Care Section on form SAMI-3.
2. Refills. A refill is a prescription subject to the limitations in paragraph 1 above.
  - a. Authorized refills are valid only to the pharmaceutical provider dispensing the original prescription.
  - b. All prescriptions containing a class II controlled pharmaceutical or pharmaceuticals requiring prior approval, will be considered non-refillable.
3. Quantities and Days Supplied.
  - a. The quantities to be dispensed on original prescription for chronic or acute conditions are at the discretion of the physician and without regard to future eligibility of the recipient. However, reasonable amounts of maintenance pharmaceuticals for chronic conditions are recommended in order to maintain consistency with the Title XIX legislative requirements of efficiency and economy.
  - b. MINIMUM quantities of perpetual and maintenance pharmaceuticals for chronic conditions are normally considered to be a 30-day supply or an original package (if less than a 30-day supply). More may be dispensed on physician's request.

Quantities and Days Supplied (continued):

c. Prescriptions for less than minimum amounts of maintenance pharmaceuticals will be reviewed by the Pharmacy Peer Review Committee; justification of less than minimum amounts may be requested from the prescribing physician and/or pharmacy provider. In those cases where less than a 30-day supply of maintenance drug is dispensed without reasonable medical justification, no reimbursement will be allowed.

D. Prescription Charge Formula:

1. Reimbursement for prescriptions will be at EAC (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.

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.

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Miscellaneous Remarks (continued):

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	" "
Jeffrey L. Monaghan, Pharm.D. Pharmaceutical 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 Moss	- 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.  
John White, 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				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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA		6,260	\$ 996	6,377	5,569	\$ 781
MA						
AB		293	38	271	242	31
APTD		2,340	398	2,902	2,278	334
AFDC <u>1/</u>		21,629	788	38,400	21,571	762
MN Aged		4,571	289	3,097	2,399	325
MN Blind			9	101	74	8
MN Disabled			145	1,336	975	168
MN AFDC <u>2/</u>			72 <u>3/</u>	4,392	1,797	80
Total		35,093	\$2,735 <u>4/</u>	56,876	34,905	\$2,489

1/ Includes AFDC-Foster Care and CFS Children.

2/ Includes small number of CFS Children.

3/ Children.

4/ 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 M.M.I.S. Program through Division of Welfare.

## IV. Provisions Relating to Prescribed Drugs:

- A. General Exclusions (diseases, drug categories, etc.):  
Andrexiant (stimulants); and vitamins for patients over 7 years of age.
- 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 512,500 R drug claims in FY 1976. Drug expenditures were 7.51% of total program costs.

Adult recipients of drugs numbered 11,537, totaling \$1,647,000 or \$5.21 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
Richard G. Lacombe Acting Director Division of Welfare	" "
Roger W. Taillefer Acting Deputy Director Office of Medical Services Division of Welfare	" "
Clifford A. Zilch, R.Ph. Chief, Bureau of Health Care Medical Services, Div. of Welfare	" "

## 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.

## 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 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	59,118	47,718	\$ 6,182	65,087	51,394	\$ 6,657
MA						
AB	1,250	896	109	1,335	927	102
APTD	47,232	34,632	4,402	57,926	42,123	5,007
AFDC	438,253	377,733	13,387	449,164	384,955	12,760
DYFS	20,379	9,562	286	21,326	9,952	270
Total	566,232 <sup>1/</sup>	470,541	\$24,366 <sup>2/</sup>	594,838	489,351	\$24,796

<sup>1/</sup> Reported as 568,119 in 1976 Edition-NPC.

<sup>2/</sup> Reported as \$25,832 in 1976 Edition-NPC.

## 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:

- A. Direct (vendor) payment will be made to participating pharmacies by Blue Cross of New Jersey on behalf of the New Jersey Health Services Program upon receipt of a properly completed Prescription Claim Form (MC-6).
- B. Only one prescription may be submitted on each Prescription Claim Form (MC-6).

208.1 Legend Drugs

1. Payment for "legend" drugs (those drugs bearing the legend "Federal Law Prohibits Dispensing Without a Prescription"), and contraceptive diaphragms will be based upon "Maximum Allowable Cost" as herein defined.
2. "Maximum Allowable Cost" is defined as:
  - A. The "Maximum Allowable Cost" (MAC) price published by the Pharmaceutical Reimbursement Board of the Department of Health, Education and Welfare for listed "multi-source" drugs, or
  - B. The listed Average Wholesale Price (AWP), as so designated for the most frequently purchased package size in the current Drug Topics Red Book (published by Medical Economics Co., Oradell, N.J. 07649), and supplements and price changes listed by the same publisher in Drug Topics Magazine or the designated prices

listed in Section 203. In the case of unlisted or undesignated AWP "costs" or typographical errors, the known correct price will be used as maximum cost.....\*whichever is lower.

- (1) Maximum cost for each eligible prescription claim not covered by Section 208.1 (A), shall be subject to the following fiscal conditions based upon six (6) categories determined from the previous year's total prescription volume as determined by the Division, for each participating pharmacy. The categories shall be adjusted annually.
- (2) In order to determine a provider's total prescription volume, which shall include all prescriptions filled, both new and re-fill, for private, Medicaid and other third party recipients, for the previous calendar year; pharmacies will be required to submit in writing, a report certifying to their prescription volume, annually. Failure to meet this requirement will result in the provider being placed in the maximum discount category (Category VI), for the period of non-compliance.

NOTE: Those pharmacy providers who have participated in the Program for less than one (1) year will have their volume projected over the entire calendar year to determine the appropriate category for next year.

Category I - Pharmacies whose total prescription volume in the previous calendar year was not more than 14,999 prescriptions.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above.

Category II - Pharmacies whose total prescription volume in the previous year was in excess of 15,000 prescriptions but did not exceed 19,999 prescriptions.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above LESS 2% of such cost.

The calculated amount will be automatically deducted from each prescription claim in the reimbursement processing procedure.

Category III - Pharmacies whose total prescription volume in the previous calendar year was 20,000 prescriptions but did not exceed 29,999 prescriptions.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above LESS 3% of such cost.

The calculated amount will be automatically deducted from each prescription claim in the reimbursement processing procedure.

Category IV - Pharmacies whose total prescription volume in the previous calendar year was 30,000 prescriptions but did not exceed 39,999 prescriptions.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above LESS 4% of such cost.

The calculated amount will be automatically deducted from each prescription claim in the reimbursement processing procedure.

Category V - Pharmacies whose total prescription volume for the previous calendar year was 40,000 prescriptions but did not exceed 49,999 prescriptions.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above LESS 5% of such cost.

The calculated amount will automatically be deducted from each prescription claim in the reimbursement processing procedure.

Category VI - Pharmacies whose total prescription volume in the previous calendar year was 50,000 prescriptions or more.

Pharmacies placed in this category will receive maximum cost reimbursement for Legend Prescription Claims at Average Wholesale Price (AWP) as defined above LESS 6% of such cost.

The calculated amount will automatically be deducted from each prescription claim in the reimbursement processing procedure.

\*NOTE: If the published MAC price as defined in Section 208.1 (1) A is higher than the price which would be paid under Section 208.1(2) B, then Section 208.1(2) B will apply.

#### Dispensing Fee

The dispensing fee for pharmacies with retail permits is \$2.05. In addition, if the pharmacy maintains a 24-hour prescription service, an additional 10¢ may be added, making the dispensing fee \$2.15.

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.
- 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.

Utilization Data: (Health Services)

Ave. monthly expenditures Per Eligible and Per Recipient

	<u>Eligibles</u>		<u>Recipients</u>	
	<u>CY-1975</u>	<u>CY-1974</u>	<u>CY-1975</u>	<u>CY-1974</u>
All categories	\$53.42	\$48.67	\$116.81	\$109.89

Drug Program Utilization Data - (Prescribed Drugs)

Ave. monthly utilization

	No. of Providers	Payments (000)	No. of Recipients	No. of Rx	<u>Payment per</u> Recipient Rx <u>Eligible</u>		
CY 1975	1,481	\$2,279	192,980	470,628	\$11.81	\$4.84	\$3.61
1974	1,455	\$1,923	170,411	425,681	\$11.25	\$4.52	\$3.32

Source: 1975 Medicaid Annual Report, State of New Jersey  
Department of Institutions and Agencies  
Division of Medical Assistance and Health Services

## 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 2486 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., 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) 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: Private duty nursing; rehabilitation medical services; home health services; orthetic 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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug 2/ Recipients Amounts
OAA		8,288 \$ 803		9,190 \$1,041
MA				
AB		257 22		270 27
APTD		9,287 1,081		10,590 1,411
AFDC		38,813 1,223		39,908 1,326
Total		56,645 <sup>1/</sup> \$3,129		59,958 \$3,805

<sup>1/</sup> Estimated.

<sup>2/</sup> DHEW-SRS 2082A(2) FY-1976.

## 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 non-sustained release forms of 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 and acetaminophen.
  - e. Non-sustained release forms of 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: 1 year
  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 fee (\$2.50) or
    - b. The usual and customary charge by the pharmacy to the general public.
  2. Medical supplies are reimbursed at the lesser of the following:
    - a. cost plus  $\frac{1}{2}$  cost.
    - b. Usual and customary charge by the pharmacy to the general public.
    - c. Manufacturer's suggested retail price.

## NEW MEXICO

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants, and Committees

## 1. Health and Social Services Department Officials:

Fernando E. C. De Baca Executive Director	Health and Social Services Department P. O. Box 2348 Santa Fe, New Mexico 87503
Charles Lopez, Administrator Social Welfare Programs	" "
Dennis Hazlett, Director State Welfare Agency	" "
Joseph Flynn, Director Medical Assistance Division	" "
Mark Lane, M.D. Medical Consultant	1009 Bradbury Drive, S.E. Albuquerque 87106
F. Richard Atkinson, R.Ph. Medical Assistance Division	P. O. Box 2348 Santa Fe 87503
Robert J. Stevens, R.Ph. Drug Program Administrator Medical Assistance Division	" "

## 2. Drug Utilization Review Committee:

(Consists of 6 members - 2 permanent and 4 rotating biannually)

Drug Program Administrator	Medical Assistance Division
Dennis J. Lucero, R.Ph. Chairman	1708 Columbia SE Albuquerque 87106
Lowell Irby, R.Ph.	1807 Ray Artesia 88210
Joseph George, R.Ph.	12513 Sierra Grande N.E. Albuquerque 87112
Rebecca Strasburg	1307 12th Street Alamogordo 88310
Physician Consultant	

## 3. Medical Care Advisory Committee:

Lynda Vaskov, R.N.  
Director of Nursing  
Las Cruces Manor  
2905 E. Missouri  
Las Cruces 88001

Judith Walden, R.N.  
Hospital-Home Health Care  
Medical Towers  
500 Walter, N.E.  
Albuquerque 87102

Ronald J. Wilner, D.P.M.  
Northern New Mexico  
Podiatry Assoc. P.A.  
565 St. Michael's Drive  
Santa Fe 87501

Ruth Shurter  
375 Armenta  
Santa Fe 87501

J. Lester Rigby, Director  
SRG/COG Area Agency on Aging  
P. O. Box 216  
Socorro 87801

Milton O. Johnson, Chief  
Area Health Education Branch  
Department of HEW  
Public Health Service  
Federal Office Building &  
U. S. Courthouse  
500 Gold Avenue  
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(Mrs.) Lula Kirk, R.N., P.N.A.  
Maternal and Child Health  
Nurse  
Department of HEW  
Public Health Service  
Federal Office Building &  
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500 Gold Avenue  
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Muriel R. James  
Executive Director  
The Visiting Nursing  
Service, Inc. of the  
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Albuquerque 87102

Barba Dunsmore  
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(Mrs.) Lila A. Embury  
Executive Director  
Associated Home Health  
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960 N. Main  
Las Cruces 88001

Sarah Rochester, Director  
Los Alamos Visiting Nurse  
Services, Inc.  
P. O. Box 692  
Los Alamos 87544

(Mrs.) Vesta Starkey, ACSW  
Chief, Area Social Service  
Branch  
Albuquerque Area Indian  
Health Service  
Federal Office Building  
& U. S. Courthouse  
500 Gold Avenue, S.W.  
Room 4005  
Albuquerque 87101

Henry Hatcher  
General Manager  
Medical Personnel Pool  
Suite B  
1415 University Blvd., N.E.  
Albuquerque 87102

George Johnson (CHAIRMAN)  
Assistant Administrator  
St. Joseph Hospital  
400 Walter Avenue, S.E.  
Albuquerque 87102

Medical Care Advisory Committee (continued):

Roy Soto  
Del Pueblo Life Insurance  
200 Lomas Blvd., N.W.  
Albuquerque 87101

W. K. Graham, D.D.S.  
7810 Menaul Blvd. N.E.  
Albuquerque 87110

Gerald J. Boyle, Ph.D.  
7800 Hendrix Avenue, N.E.  
Albuquerque 87110

Sister Marie Patrice  
Nazareth Psychiatric Hospital  
501 Richfield Avenue N.E.  
Albuquerque 87113

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: 505/247-0530

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)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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: Protheses; 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA			\$			\$
MA						
AB						
APTD						
AFDC						
Total			\$91,118			\$100,545

1/ See Miscellaneous Remarks.

## 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.
5. Limited coverage of non-prescription drugs.

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 14-day supply for antibiotics without prior authorization 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:

1. Maximum Reimbursable Pricing Schedule

Maximum reimbursement for each drug claim effective August 26, 1976, shall be based on the lowest of -

- (a) the maximum allowable cost (MAC) established by a federal board for selected multiple source drugs and published in the Federal Register, plus applicable dispensing fee; or

## Prescription Charge Formula (continued):

- (b) for prescribed drugs, the estimated acquisition cost (EAC) established by the State, plus applicable dispensing fee; or
- (c) for infrequently prescribed drugs not covered in (b) above, the average wholesale price (AWP) as recorded in the Red Book, less two percent (2%), plus applicable dispensing fee; or
- (d) any State-approved locally established formulary cost, plus applicable dispensing fee; or
- (e) the usual and customary price charged by the pharmacy provider to the general public, including any sale price which may be in effect on the date of service.

2. Application of Drug Dispensing Fee, effective August 26, 1976

- (a) Add \$1.80 dispensing fee to the federally-established maximum allowable cost (MAC) price or State-established estimated acquisition cost (EAC) price of legend or prescription drug.
- (b) Exception to drug dispensing fee in 2 (a) above. For prescription-required drugs on State approved formularies - Add \$2.00 dispensing fee to the federally-established maximum allowable cost (MAC) price, or State-established estimated acquisition cost (EAC) price of legend or prescription drug, in any area of the State which employs a State-approved formulary system to provide prescription drug services. (New York City is the only such district at this time.)
- (c) For a compounded prescription, add an additional \$.75 compounding fee to the applicable dispensing fee in (a) and (b) above.
- (d) The applicable dispensing fee may be added to the allowable non-prescription drug ingredient cost, to be used for purposes of determining the lowest non-prescription drug price.

3. Medical Equipment and Supplies

Add 50% to the actual acquisition cost (invoice cost to the provider) of the medical equipment and supply on the price normally charged to the general public, whichever is lower.

4. Maximum Reimbursable Price Schedule for Non-Prescription Drugs

- (a) The maximum reimbursable payment for an allowable non-prescription drug shall be the lowest of -
- (1) the usual and customary price charged by the provider to the general public on the date of service, but not to exceed the lower sale price, if any, in effect on that date; or
  - (2) the maximum reimbursable stipulated price established by the Commissioner of Health and approved by the State Director of the Budget; or
  - (3) the estimated acquisition cost (EAC) which shall be either the price shown on the State EAC list, plus applicable dispensing fee or for those drugs not covered on such list, the Red Book price minus 2%, plus applicable dispensing fee; or
  - (4) any State-approved locally established formulary cost plus applicable dispensing fee.
- (b) The maximum reimbursable payment shall be for the available manufacturer's package or unit size of drugs most frequently purchased by providers which most closely corresponds to the quantity requested on the written order.
- (c) Payment for non-prescription drugs as a reimbursable item in the Medical Assistance Program shall be limited to products in those therapeutic categories of Allowable Non-Prescription Drugs established by the Commissioner of Health.

## 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.

## NEW YORK

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## A. Social Services Department:

## 1. Officials:

Carmine Shang Commissioner (Interim)	Department of Social Services 40 North Pearl Street Albany, New York 12243
Hugh O'Neill Exec. Deputy Commissioner	" "
William Steibel, D.D.S. Deputy Commissioner Div. of Medical Assistance	" "
Robert Skerrett Associate Commissioner, Policy and Resources Div. of Medical Assistance	" "
Shirley Harvey Associate Commissioner for Operations Div. of Medical Assistance	" "
Gerard F. Nelligan, R.Ph. Senior Consultant Pharmacist	" "

## 2. Social Services Advisory Committees:

## a. Medical Advisory Committee:

<u>Gordon E. Brown</u> <u>Chairman</u>	Executive Director State Communities Aid Assoc. 105 East 22 Street New York 10010
Richard E. Carnival, D.C.	141 East 55 Street New York 10022
Seymour C. Frank, D.P.M.	Podiatry Society of the State of New York 199 North Wellwood Avenue Lindenhurst, L.I. 11590

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1977

## Medical Advisory Committee (continued):

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 Society 87 South Lake Avenue Albany 12203
Robert P. Whalen, M.D.	Commissioner N.Y. State Department of Health Tower Bldg.-Empire State Plaza Albany 12237
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
S. David Pomrinse, M.D.	Director, Mt. Sinai Hosp. 5th Avenue & 100th Street New York 10029
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. Commissioner	Department of Health Tower Bldg.-Empire State Plaza Albany, New York 12237
Edward D. Coates, M.D. First Deputy Commissioner	" "
William A. Liddle Assistant Commissioner Medical Services	" "

C. NEW YORK CITY:

1. Health Services Administration:

Pasqual Imperato, M.D. Administrator	Health Services Administration City of New York 125 Worth Street New York 10013
---	--

2. Social Services Department:

J. Henry Smith Commissioner	New York City Department of Social Services 250 Church Street New York 10013
Max Waldgier First Deputy Commissioner	" "

3. Health Department:

Pasqual Imperato, M.D. Commissioner	New York City Department of Health 125 Worth Street New York 10013
L. Neugeborn First Deputy Commissioner of Health	" "
Martin Paris, D.D.S. Bureau of Health Care Services (Medicaid)	New York City Department of Health 330 West 34 Street New York 10001

Health Department (continued):

Harry Habler, R.Ph.  
Director of Pharmacy

New York City Department  
of Health  
330 West 34 Street  
New York 10001

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					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	1975 <sup>1/</sup>			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	60,594		\$ 9,153	59,056		\$ 6,916
MA						
AB	4,414		479	3,780		450
APTD	49,995		7,174	50,309		6,702
AFDC	214,657		4,022	204,323		3,568
MN Aged	7,387		1,003	7,708		4,265
MN Blind	198		18	168		76
MN Disabled	3,192		401	3,876		1,651
MN Children	10,295		158	12,913		661
Total	350,732		\$22,408	342,133		\$24,289

<sup>1/</sup> Calendar year.

## 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:

Robert H. Ward Director	Division of Social Services Albemarle Building 325 North Salisbury Street Raleigh, North Carolina 27611
Emmett L. Sellers Deputy Director	" "
James E. Gibson, Jr. Chief	Medical Services Section (same address as above)
Robert E. Watkins Deputy Chief	" "
George E. Watson, M.D. Medical 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> Box 1599 Laurinburg 28352	Ralph V. Kidd, M.D. 1928 Randolph Road Charlotte 28207
Bruce B. Blackmon, M.D. P. O. Box 8 Buies Creek 27506	E. T. Beddingfield, Jr., M.D. Wilson Clinic Wilson 27893

Medical Society Committee on Social Service Programs  
(continued):

Thomas W. Kitchen, Jr., M.D. 510 College Street Jacksonville 28540	Emery L. Rann, M.D. 1001 Beatties Ford Road Charlotte 28204
William T. MacLauchlin, M.D. Box 774 Conover 28614	Russell L. Smith, M.D. 114 East 3 Street Winston-Salem 27101
J. Elliott Dixon, M.D. 215 East 2 Street Ayden 28513	Campbell W. McMillan, M.D. N. C. Memorial Hospital Chapel Hill 27514
Albin W. Johnson, M.D. 1300 St. Mary's Street Raleigh 27605	Otis B. Michael, M.D. 208 Doctors Building Asheville 28801
John T. Gentry, M.D. Univ. of North Carolina School of Public Health Chapel Hill 27514	Leslie M. Morris, M.D. P. O. Box 1495 Gastonia 28052
John R. Kernodle, M.D. Kernodle Clinic Burlington 27215	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	Jess T. Moore 2705 Highland Avenue Durham 27704
Jean P. Gagnon School of Pharmacy Beard Hall 200-H Chapel Hill 27514	Julis Howard Seashore Drug 2059 Carolina Beach Road Wilmington 28401
James Creech 109 South 3rd Street Smithfield 27577	Henry Leigh P. O. Box 62 Cullowhee 28723

Pharmaceutical Association Committee (continued):

Wade A. Gillian  
1416 Brook Town Avenue  
Winston-Salem 27101

Virginia Lockamy  
6708 Candlewood Drive  
Raleigh 27612

Zeb T. Keeter  
Route #7  
Box 18  
Lin 28072

A. H. Mebane, III  
376 N. Elm Street  
Greensboro 27401

Alfred G. Smith  
P. O. Box 426  
Elizabethtown 28337

Roger Spittle  
Route #3  
Box 289  
Weaverville 28787

Henry L. Smith  
628 Chateau Apt.  
Carboro 27510

B. Cade Brooks  
Consultant  
114 Gillispie Street  
Fayetteville 28301

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		
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	1975			1976		
	Persons <u>1/</u> Eligible	Drug <u>1/</u> Recipients	Amounts	Persons <u>1/</u> Eligible	Drug <u>1/</u> Recipients	Amounts
OAA	5,670	1,500	\$ 532	5,953	1,346	\$ 491
MA		8	3		10	3
AB		903	402		829	365
APTD		14,056	2,114		360	14,186
AFDC	4,151	1,488	689	4,159	1,370	641
MN Aged		5	2		3	2
MN Blind		281	148		219	124
MN Disabled		90	23		68	17
MN Children	697	77	10	663	61	8
Foster Care	24,574	6,466	\$2,169	24,961	5,799	\$1,979
Total						

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. (List of members not submitted to NPC)

\*Pharmaceutical Association Advisory Committee

Peer Review Committee:

Reviews all questionable aspects of pharmacy practice relating to Medicaid.

NORTHEAST DISTRICT

Paul Bilden	Northwood
Jack Kramer	Grand Forks
Jim Rystedt	Grafton
Betty Odegaard	Grafton
Merlen Clemenson	Devils Lake

NORTH CENTRAL DISTRICT

Bruce Rodenhizer	Stanley
Jim Irgens	Williston
Duane Baillie	Rugby
Odell Krohn	Harvey
Gene Neal	Minot

SOUTHEAST DISTRICT

John Lee	Forman
Jack Bernardy	Fargo
J. Lyle Lamoureux	Fargo
Reese Hawkins	Jamestown
Dave Doerr	Fargo

SOUTHWEST DISTRICT

Patricia Kramer	Dickinson
Dick McElmury	Bowman
Ed Plowman	Killdeer
Emil Zueger	New England
Jim Irsfeld	Dickinson

FIFTH DISTRICT

Jerry Robinson	Bismarck
Harlan Junker	Mandan
Duane Reister	Bismarck
Larry Moser	Napoleon
Howard Anderson, Jr.	Turtle Lake

\*Source: Social Service Board - Letter to all Pharmacists, dated March 8, 1977

3. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

Vern Wagner  
Executive Secretary  
North Dakota Medical Association  
420 North 4 Street  
(Box 1198)  
Bismarck 58501  
Phone: 701/223-9485

B. Pharmaceutical Association:

John Schuld  
Secretary-Treasurer  
North Dakota Pharmaceutical Association  
P. O. Box 148  
Dickinson 58601  
Phone: 701/225-8650



## 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA		109,529	\$19,856		102,114	\$18,753
MA						
AB		612	63		1,195	190
APTD		13,169	1,588		29,335	4,783
AFDC		402,839	12,865		445,261	15,863
Total		526,149	\$34,372		577,905	\$39,589

## 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.

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.

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.

NPC

Ohio - 4  
1977

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:

Kenneth B. Creasy Director-Designate	Department of Public Welfare 30 East Broad Street Columbus, Ohio 43215
---	--

(Vacant) Assistant Director	" "
--------------------------------	-----

Division of Medical Assistance

Joe Hoffa, Ph.D. Director	" "
------------------------------	-----

(Vacant) Deputy Director	" "
-----------------------------	-----

Stanley Sells, Acting Chief Division of Medical Assistance Bureau of Medical Program Development	" "
---	-----

(Vacant) 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:      B. Pharmaceutical Association

Hart F. Page  
Executive Director  
Ohio State Medical  
Association  
600 South High Street  
Columbus 43215  
Phone: 614/228-6971

Jerard Fee  
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 Recipients				Medically Needy (M N)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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 <sup>1/</sup>	X	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. <sup>2/</sup> Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons Eligible	Drug Recipients	Drug Amounts	Persons Eligible	Drug Recipients	Drug Amounts
OAA						
MA						
AB						
APTD						
AFDC						
Children under 21		1,544				
Total		1,544	\$14			\$4,056

<sup>1/</sup> For emergency care only in adults.

<sup>2/</sup> Vendor Drug Program instituted July 1, 1975.

<sup>3/</sup> DHEW SRS/NCSS - 2082 B(3) - Dependent Children under 21.

## OKLAHOMA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

Drug Program instituted July 1, 1975 under the Oklahoma Department of Institutions, Social and Rehabilitation Services (DIRS). The drug program is 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)

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 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 <sup>1/</sup>	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. <sup>2/</sup> Payments to Pharmacists by fiscal year ending June 30:

(Dollar Amounts in Thousands)

CATEGORY	1975		1976	
	Persons Eligible	Drug <sup>3/</sup> Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA				
MA				
AB				
APTD				
AFDC				
Children under 21		1,544		
Total		1,544	\$14	\$4,056

<sup>1/</sup> For emergency care only in adults.

<sup>2/</sup> Vendor Drug Program instituted July 1, 1975.

<sup>3/</sup> DHEW SRS/NCSS - 2082 B(3) - Dependent Children under 21.

## OKLAHOMA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

Drug Program instituted July 1, 1975 under the Oklahoma Department of Institutions, Social and Rehabilitation Services (DIRS). The drug program is 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
- J. New Categories (effective February 1, 1977):
  - (1) Broncho-Dilators and Antiasthmatics
  - (2) Antiarthritics
  - (3) Antigout
  - (4) Anticonvulsants

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 Committees

1. 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:

David Bickham  
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, 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: 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	1975			1976		
	Persons Eligible <sup>1/</sup>	Drug Recipients	Amounts <sup>2/</sup>	Persons Eligible	Drug Recipients	Amounts <sup>2/</sup>
OAA	13,905	14,568	\$1,605	14,391	15,134	\$1,989
MA						
AB	962	777	77	940	813	81
APTD <sup>3/</sup>	12,471	11,921	1,236	13,016	12,375	1,511
AFDC <sup>4/</sup>	114,668	77,270	1,723	119,309	80,244	1,510
Total	142,006	104,536	\$4,641	147,656	108,566	\$5,091

<sup>1/</sup> Average per month.

<sup>2/</sup> Unduplicated number (DHEW SRS/NCSS 2082-A(2) FY-1976.

<sup>3/</sup> AD.

<sup>4/</sup> ADC plus FC.

## 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:

- open 9/1/77*
- A. Formulary: A formulary of approximately 655 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 10-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 estimated acquisition cost plus professional dispensing fee (\$2.35). 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:

Linda Kaeser Administrator	Public Welfare Division 422 Public Service Bldg. Salem, Oregon 97310
Hazel G. Hays Acting Assistant Administrator Health and Social Services	" "
Gary Gomez Assistant Administrator Field Operations	" "
William Todd Assistant Administrator Operations Review Section	" "
Leo T. Hegstrom Assistant Administrator Income Maintenance 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.	639 Oak Street, S.E. Salem 97301
James Hogue, M.D.	740 Winter Street, S.E. Salem 97301
Charles W. Norris, M.D.	141 Lancaster Drive, N.E. Salem 97301

## Physicians (Part-time) (continued):

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

James B. Landis, M.D.  
(Chief Medical Consultant) Route 1, Box 2073  
Sweet Home 97386

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
<u>Chairman</u>	
Charla Chamberlain (nurse)	- The Dalles
Judge Paul W. Jones	- Heppner
Daniel Billmeyer, M.D.	- Oregon City
Donald D. Parker, Ph.D.	- Lake Oswego
John Kaegi	- Eugene
James B. Landis, M.D.	- Salem
John McBee, D.M.D.	- Pendleton
Edward Van Orman (opt.)	- Eugene

## Governor's Advisory Committee (continued):

Irwin F. Wedel (Administrator, Memorial Hosp.)	- Salem
*Carol Batson-Gerious	- Portland
*Edsel Goldson	- Portland
Ralph Crawshaw, M.D.	- 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 Blvd. Beaverton
Elton McCawley, Ph.D. Professor of Pharmacology	University of Oregon 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  
5210 S.W. Corbett Street  
Portland 97201  
Phone: 503/226-1555

B. Pharmaceutical Association:

Henry A. Speckman  
Executive Secretary  
Oregon State Pharmaceutical Association  
1460 State Street  
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)					Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	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

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 - General Assistance (GA) - Federal matching for administrative costs.

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

(Dollar Amounts in Thousands)

CATEGORY	1975		1976	
	Persons Eligible	Drug Recipients*Amounts	Persons Eligible	Drug Recipients*Amounts
OAA		\$ 9,546		\$ 8,087
MA				
AB		1,115		1,076
APTD		8,317		8,035
AFDC		15,959		18,253
GA		9,526		9,179
Total		\$44,463		\$44,630

\*Not available for Fiscal Year

Source: Prepaid Drug Program Report #4 - Summary of Claim Payment to Pharmacies by Category of Assistance

## 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.

## 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 \$15.00 and exceeding a 45-day supply and specified non-drug items.

- B. Formulary: None.

## C. Prescribing or Dispensing Limitations:

1. Terminology: None.
2. Quantity of Medication: Maximum allowed is a 45-day supply. Exception: oral anovulatory drugs are compensable up to a maximum three-cycle but not to exceed \$15.00 limit.
3. Refills: Two refills are permitted.
4. Dollar Limits: Prescriptions for medications costing more than \$15.00 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 does not appear in the Redbook, then the 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 \$2.00 for legend items.
2. A hospital pharmacy is reimbursed the price of the item dispensed as described above plus a dispensing fee of \$1.35 for legend items.
3. For a compound prescription, an additional fee of \$1.00 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.

Reimbursement Categories:

1. Pharmacies' dollar volume up to \$25,000, Medicaid Rs:  
AWP plus \$2.00
2. Pharmacies' dollar volume greater than \$25,000  
Medicaid Rs: AWP plus \$2.00 less 2%
3. Pharmacies' dollar volume greater than \$50,000  
Medicaid Rs: AWP plus \$2.00 less 4%

## PENNSYLVANIA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Welfare Department Officials:

Frank S. Beal Secretary	Department of Public Welfare Health and Welfare Building Harrisburg, Pennsylvania 17120
Aldo Colautti Executive Deputy Secretary	" "
Norman Lourie Deputy Secretary for Federal Policies and Programs	" "
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 Myers Deputy Secretary for Mental Retardation	" "
Glenn Johnson Director Bureau of Medical Assistance	" "
Maurice E. Goulet, M.S., R.Ph. Chief, Division of Pharmaceutical Services	Department of Public Welfare* P. O. Box 2675 Harrisburg 17120
Paul D. Burkholder, R.Ph.	" "
Lloyd A. Kreider, R.Ph.	" "

---

\*Office: 25 North 32nd Street  
Camp Hill, Pennsylvania 17011

## 2. Title XIX Advisory Committees:

## A. Medical Assistance Advisory Council:

- |   |   |
|---|---|
| Frank S. Beal<br>#333 Health and Welfare Bldg.<br>Harrisburg 17120                          | - Secretary of Public<br>Welfare              |
| Roger A. Cutt, Ph.D.<br>#532 Health and Welfare Bldg.<br>Harrisburg 17120                   | - Commissioner, Office<br>of Medical Programs |
| Mohammad Mazaheri, D.D.S.<br>24 North Lime Street<br>Lancaster 17602                        | - Pennsylvania Dental<br>Association          |
| John B. Neff<br>Frankford Hospital<br>Frankford Ave. and Wakeling St.<br>Philadelphia 19124 | - Hospital Association<br>of Pennsylvania     |
| G. Winfield Yarnall, M.D.<br>1192 Lowther Road<br>Camp Hill 17011                           | - Pennsylvania Medical<br>Society             |
| Brooke Branon, R.N.<br>815 Union Place<br>Pittsburgh 15212                                  | - Pennsylvania Nurses<br>Association          |
| George D. Weaver, O.D.<br>36 North Beaver Street<br>York 17401                              | - Pennsylvania Optometric<br>Association      |
| James C. Miller, D.O.<br>120 Muench Street<br>Harrisburg 17102                              | - Pennsylvania Osteopathic<br>Association     |
| Monroe D. Lipman, R.Ph.<br>4611 Union Deposit Road<br>Harrisburg 17111                      | - Pennsylvania<br>Pharmaceutical Assoc.       |
| Daniel L. Carroll, D.P.M.<br>317 Highland Avenue<br>Hanover 17331                           | - Pennsylvania Podiatry<br>Association        |
| Honorable Charles F. Dougherty<br>535 Main Capital Building<br>Harrisburg 17120             | - The Senate of<br>Pennsylvania               |

## Medical Assistance Advisory Council (continued):

- Walter J. Lear, M.D. - Department of Health  
Assistant to the Commissioner  
of Planning and Development  
#1023 Health and Welfare Bldg.  
Harrisburg 17120
- Francis L. Drew, M.D. - School of Medicine  
3551 Terrace Street  
University of Pittsburgh  
Pittsburgh 15213
- Milton Jacobs - Health Care Facilities  
American Medical Affiliates  
Association  
Benjamin Fox Pavilion  
Foxcraft Square  
Jenkintown 19046
- Irene Rochelle - Welfare Rights Organization  
451 Century Building  
of Allegheny County  
Pittsburgh 15222
- Mattie McDaniels - Welfare Rights Organization  
2739 North Taylor Street  
for Philadelphia  
Philadelphia 19132
- Linda Winn - Welfare Rights Organization  
119 South Fraser Street  
for Centre County  
State College 16801
- The Reverend Harvey Kline - Non-Profit Nursing Home  
Brethren Home  
New Oxford 17350

Ex Officio

- Thomas L. Hooker - Deputy Secretary for  
#405 Health and Welfare Bldg.  
Family Assistance  
Harrisburg 17120
- Glenn Johnson - Director, Bureau of  
#523 Health and Welfare Bldg.  
Medical Assistance  
Harrisburg 17120  
Dept. of Public Welfare
- Leonard Bachman, M.D. - Secretary of Health and  
#802 Health and Welfare Bldg.  
The Governor's Health  
Harrisburg 17120  
Service Director

## B. Pharmaceutical Advisory Committee:

Anthony P. Sorrentino, Pharm.D.  
Chairman  
c/o Hausmann's Pharmacy  
534 West Girard Avenue  
Philadelphia 19123  
10/4/74 - 9/30/78

Frank Adams, R.Ph.  
Sun Drug  
P. O. Box 751  
Butler 16001  
11/1/76 - 10/31/77

Thomas R. Kim, Jr., R.Ph.  
Amsler Pharmacy  
818 Warrington Avenue  
Pittsburgh 15210  
12/1/76 - 11/30/77

David M. King, R.Ph.  
155 North Maple Street  
Mercer 16137  
7/1/76 - 6/30/77

John Letizia, R.Ph.  
Vinco Pharmacy-Vinco, R.D.#1  
Conemaugh 15909  
10/4/74 - 9/30/77

Monroe Lipman, R.Ph.  
4611 Union Deposit Rd.  
Harrisburg 17111  
10/4/74 - 9/30/77

Steven Loevner, R.Ph.  
2752 North Kent Road  
Broomall 19008  
10/9/74 - 9/30/77

Bruce Miller, R.Ph.  
813 Condoquinet Drive  
Camp Hill 17011  
6/4/75 - 9/30/77

Ruth Moses, R.Ph.  
Wilson Drug Company  
5601 Market Street  
Philadelphia 19139  
12/1/76 - 11/30/77

Edward Popielarski, R.Ph.  
422 Anthwyn Road  
Naberth 19072  
10/9/74 - 9/30/78

## 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:

Stanley Singer  
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					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	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: 1/

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA			\$			\$
MA						
AB	156	97	2			
APTD	16,728	12,753	235	5,833	3,551	58
AFDC	201,957	171,435	2,373	122,785	80,320	1,591
MN Aged						
MN Blind	325	292	4	221	147	15
MN Disabled	26,532	19,957	581	19,570	12,081	297
MN Children	1,042,628	768,975	11,302	934,490	628,531	13,094
Total	1,288,326	973,509	\$14,497	1,082,899	724,630	\$15,055

1/ Does not include Puerto Rico O-category and OAA, both ineligible for Federal monies.

## 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. Jaime Rivera Dueño  
Secretary

Department of Health  
Stop 19  
P. O. Box 9342  
Santurce, Puerto Rico 00908

Medical Assistance Program:

Emilia Hoyos Rucabado, M.S.  
Pharmacist Consultant

" "

Luis A. Cruz Cuevas, M.H.A.  
Coordinator

P. O. Box 10037  
Caparra Heights Station  
Rio Piedras 00920

Irma Revilla de Ferrer, M.S.W.  
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. Genaro Collazo	- Secretary Dept. of Social Services
Arq. Joaquín Benítez	- Consumer
Dr. José A. Lomba	- Dentist
Sra. Angela Díaz de Gutiérrez	- Nurse
Lcda. Adelaida Vicente de Souffront	- Consumer
Sor Isolina Ferré	- Consumer
Rubén Elí Matos	- Hospital Administration

Medical Assistance Advisory Committee (continued):

Lcda. María D. García de Pacheco - 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. Ramírez  
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 Children					Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC	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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA	7,074	\$1,041	6,691	\$1,338
MA				
AB	202	22	181	24
APTD	8,694	994	8,634	1,255
AFDC	53,641	1,253	52,498	1,442
MN Aged	14,004)		12,936)	
MN Blind	92)		86)	
MN Disabled	3,132)	2,049	3,381)	1,880
MN Children	6,745)		5,585)**	
GA	15,144	469	9,315*	470
Total	108,728	\$5,828	99,307	\$6,409

\*November '76 (Dec's estimated).  
\*\*Includes estimate.

## 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 II, III), expensive costeroids 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 \$2.15 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 \$1.70 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 AWP listings in the Red Book, except for direct purchases from the following manufacturers:

Abbott-Ross	Pfipharmics
Lederle	Pfizer-Roerig
Merck, Sharp & Dohme	Squibb
Parke Davis & Co.	Upjohn
	Wyeth

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.
- g. Prenatal vitamins

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:

John J. Affleck 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 S. Montgomery, M.D.

B. Medical Assistance Committees:

(1) Medical Advisory Committee on Pharmacy:

Dr. Herber W. Youngken, Jr., Chairman

Vincent Alianiello	Louis Jeffrey
Walter Carnevale	Peter Mathieu, M.D.
John DeFeo, Ph.D.	Joseph Navach
John DePasquale	Anthony Solomon
Joseph Galina, Pharm.D.	Ira Wellins
Russell Hager, M.D.	Richard Yacino

(2) Rhode Island Pharmaceutical Association:

George Ferri, 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 and Pharmaceutical Societies:

A. Medical Society:

Timothy B. Norbeck  
Executive Director  
Rhode Island Medical Society  
106 Francis Street  
Providence 02903  
Phone: 401/331-3208

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)				Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related Children				
					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

Other Benefits: Prothesis; 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	1975			1976		
	Persons 1/ Eligible	Drug 2/ Recipients	Amounts	Persons 1/ Eligible	Drug 3/ Recipients	Amounts
OAA	39,095	38,897	\$3,366	47,241	50,015	\$ 4,900
MA						
AB	25,465 }	1,756	186	34,880 }	2,018	210
APTD		22,332	2,095		31,456	3,262
AFDC	134,034	73,469	1,679	139,357	83,439	2,005
All Other	2,561	1,860	43	2,462	1,788	42
Total	201,155 <sup>4/</sup>	138,314	\$7,371 <sup>4/</sup>	223,940	168,716	\$10,419

1/ Estimated monthly average.

2/ DHEW, SRS/NCSS 2082 (A-2 and B-3) - FY-1975.

3/ DHEW, SRS/NCSS 2082 (A-2 and B-3) - FY-1976.

4/ Revised in submitting FY 1976 data from 233,993 and \$8,542.

## SOUTH CAROLINA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

By the South Carolina Department of Social Services.

## IV. Provisions Relating to Prescribed Drugs:

## A. CO-PAY:

Providers are authorized to collect a CO-PAY of fifty cents (.50) per prescription from the client. Since the CO-PAY is instituted to augment the provider's fee toward the level established as equitable, waiver of CO-PAY shall be limited to an individual situation on a compassionate basis. An established policy of waiver of CO-PAY by a provider will indicate a lack of need for an augmented fee, and his reimbursement formula will be subject to adjustment based on an individual audit of his cost of dispensing.

## 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.

## 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 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

## Quantity of Medication (continued):

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.

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:

Robert D. Floyd, ACSW Interim Commissioner	Department of Social Services P. O. Box 1520 Columbia, South Carolina 29202
Vacant Deputy Commissioner Support Services	" "
Horace F. Jackson Deputy Commissioner Bureau of Finance and Management	" "
Blanche G. McCullough Deputy Commissioner Bureau of Public and Medical Assistance	" "
Charles L. Oswald, Chief Medical Assistance Division	" "
Roy T. Lloyd, Director Public Assistance Division	" "
John F. Riley, R.Ph. Medical Assistance Division	" "
Herbert Martinson, Chief Data Processing Division	" "

## 2. Social Services Department Consultants:

## A. Physicians (Part-time):

Robert A. Fredericks, M.D.	2719 Middleburg Drive Columbia 29204
Bernard Frank, O.D.	1615 Pickens Street Columbia 29201

## Physicians (Part-time) (continued):

Arthur J. Dean, M.D.

6600 Longbrood Road  
Columbia 29206

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. Commission on Aging  
Harry R. Bryan, Director  
915 Main Street  
Columbia 29201

S.C. Department of Mental  
Health  
William S. Hall, M.D.  
Commissioner  
2414 Bull Street  
Columbia 29201

S.C. Department of Health  
and Environmental Control  
James E. Padgett, Jr., M.D.,  
M.P.H.  
Deputy Commissioner  
J. Marion Sims Building  
2600 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. State Senate  
Senator John Drummond  
The State House  
Columbia 29202  
or  
P. O. Box 748  
Greenwood 29646

S.C. Department of Vocational  
Rehabilitation  
Joe Dusenbury  
Commissioner  
P. O. Box 4945  
Columbia 29240

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

S.C. Human Affairs Commission  
Virginia Newman  
P. O. Drawer 11528  
Columbia 29211

or  
Box 751  
Kingstree 29556

## Medical 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

H. O. Taylor  
Byerly Hospital  
Hartsville

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  
R. D. Floyd, ACSW  
Commissioner

Office of the Governor  
State of South Carolina  
Director, Division of  
Health and Social  
Development

Vacant  
Chief Deputy Commissioner

S.C. Senate  
Director, Research and  
Administration to Finance

Blanche G. McCullough (Mrs.)  
Deputy Commissioner  
Bureau of Public and  
Medical Assistance

Director, Research and  
Administration to Standing  
Committees Generally

Vice-Chairman of the State  
Board

S.C. State House of  
Representatives

Robert A. Frederick, M.D.  
Medical Consultant

Director, Research and  
Administration to Ways  
and Means Committee

Horace M. Kaiser  
Pharmaceutical Consultant

Director, Research and  
Administration to Medical,  
Military, Public and Municipal  
Affairs Committee

Chief, Medical Assistance  
Division

Staff, Medical Assistance  
Division, as required

## 4. Executive Officers of State Medical and Pharmaceutical Societies:

## A. Medical Association:

Charles Johnson  
Executive Director  
South Carolina Medical  
Association  
3325 Medical Park Road  
Columbia 29201  
Phone: 803/252-6311

## 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)			Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related	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 <u>1/</u>	X	X	X					
Physician Services	X	X	X	X				
Dental Services <u>2/ 3/</u>				X				

Other Benefits: Prothesis; home health care; rental of durable medical equipment; ambulance; EPSDT.

\*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	1975			1976		
	Persons Eligible	Drug Recipients	Drug <u>4/</u> Amounts	Persons Eligible	Drug Recipients	Drug <u>4/</u> Amounts
OAA	8,386	4,138	\$ 973	8,328	3,755	\$ 839
MA						
AB	119	34	8	119	36	9
APTD	2,995	1,068	297	3,468	1,092	254
AFDC	24,167	2,488	270	24,740	1,668	156
Foster Care	975	112	13	975	108	7
Total	36,642	7,840	\$1,561	37,630	6,659	\$1,265

- 1/ Over 21 only.
- 2/ Under 21 only.
- 3/ Dental surgery available to all recipients.
- 4/ Monthly average.

## 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:

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 allowed for legend drugs and insulin, except 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.

A copayment of 50¢/R is required except for prescriptions for children or for family planning drugs.

## 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 (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		
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 <u>1/</u>				X				X		

Other Benefits: Home Health Services; 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	1975			1976		
	Persons Eligible	Drug <u>2/</u> Recipients	Amounts	Persons Eligible	Drug <u>3/</u> Recipients	Amounts <u>3/</u>
OAA	82,725	71,952	\$ 9,043	78,095		\$11,844
MA		582	8	123		2
AB	1,737	1,146	121	1,262		150
APTD	48,165	42,435	5,326	51,734		7,695
AFDC	200,649	118,112	3,353	134,502		4,098
Total	333,276	234,227	\$17,851	265,716		\$23,789

1/ Age under 21.

2/ Unduplicated.

3/ DHEW-SRS/NCSS 2082 A(1)(2) FY-1976.

## 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 a 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.

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.

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
(Vacant) Deputy Commissioner Bureau of Medical Care Services	" "
(Vacant) Director Division of Medical Assistance- Medicaid	" "
Ray C. Hall Assistant Director	" "
Frank L. Jones, Jr. Health Administrator Division of Medical Assistance- Medicaid	" "
S. S. Shannon Chief, Research and Statistics	" "
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
Dr. Harold W. Jordan	- Dept. of Mental Health
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, 1976

## I. BENEFITS PROVIDED AND GROUPS ELIGIBLE

Type of Benefit	Money Payment Recipients				Medically Needy (M N)			Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related	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	X				
Physician Services	X	X	X	X				
Dental Services <sup>1/</sup>	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 June 30:

(Dollar Amounts in Thousands)

CATEGORY	1975			1976		
	Persons <sup>2/</sup> Eligible	Drug Recipients	Amounts	Persons <sup>2/</sup> Eligible	Drug <sup>3/</sup> Recipients	Amounts
OAA	232,636	211,598	\$24,563	235,059	223,895	\$29,443
MA						
AB	4,186	3,213	294	4,207	3,444	353
APTD	70,550	58,983	5,700	85,618	75,533	8,079
AFDC	392,385	293,111	7,812	352,718	284,825	8,250
Total	699,757	566,905	\$38,369	627,601	587,697	\$46,125

<sup>1/</sup> Limited to oral surgery and dentures.

<sup>2/</sup> Average number of eligibles per month.

<sup>3/</sup> Average number of recipients was 241,493/month.

## 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 Texas Department Human Resources through 12 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.

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 \$2.75 per prescription (range \$2.25 - \$2.75, 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 \$1.35 or usual and customary price, whichever is lower.

Acquisition Cost: MAC or EAC on the package size used in dispensing. EAC based on wholesale or direct cost as indicated by the provider.

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.

The State assisted an average of about 241,493/month.

TEXAS

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Human Resources Department Officials:

Raymond W. Vowell Commissioner	Texas Dept. of Human Resources John H. Reagan Building Austin, Texas 78701
-----------------------------------	--

Jerome D. Chapman Deputy Commissioner	" "
--	-----

Executive Assistant:

Jack Blanton	" "
--------------	-----

Deputy Commissioners:

Philip A. Gates, M.D. Health, Policy, Planning and Consultation	" "
---	-----

Emmett W. Greif, M.D. Deputy, Medical Programs	" "
---	-----

Merle E. Springer Financial and Social Programs	" "
--	-----

L. David England Management	" "
--------------------------------	-----

Wesley Hjernevik Planning and Management Systems	" "
---	-----

Assistant Commissioners:

D. W. Bond Personnel Administration	" "
--	-----

C. L. Friou Fiscal Affairs	" "
-------------------------------	-----

John Townsend Coordination	" "
-------------------------------	-----



Welfare Department Officials (continued):

Assistant Deputy Commissioner:

Burton F. Raiford

Texas Dept. of Human Resources  
John H. Reagan Building  
Austin 78701

Medical Programs:

Marlin W. Johnston  
Executive Director

" "

Dennis W. Short, M.D.  
Program Manager  
Medical Liaison

" "

John Boff, Coordinator  
Medical Care Advisory Committee

" "

Medical Services Division:

James W. Williams, M.D.  
Director

" "

Medical Specialties Division:

Robert J. Smith  
Program Manager

" "

Long Term Care Division:

Harold Raines  
Program Manager

" "

Pharmacy Services Division:

Roy Wiese, Jr., R.Ph.  
Program Manager

" "

Joseph F. Renfro, R.Ph.  
Assistant Director

" "

W. Blount Barner, R.Ph.  
Pharmacist Consultant

" "

## Welfare Department Officials (continued):

Utilization Control DivisionErvin E. Baden, M.D.  
Program ManagerTexas Dept. of Human Resources  
John H. Reagan Building  
Austin 78701Surveillance and Utilization  
Control DivisionRobert W. Tyndall  
Director, Utilization Review

" "

Regional Medical Assistance  
Units:L. G. Johnson, M.D.  
Program DirectorMedical Assistance Unit 015  
2404 West 6th Street  
Amarillo 29101Leaton Clark, R.Ph.  
MAU Pharmacist

" "

Thomas L. Williams, R.Ph.  
MAU PharmacistMedical Assistance Unit 025  
800 Broadway, Room 302  
Lubbock 79401Edwin S. Chapman, M.D.  
Program DirectorMedical Assistance Unit 095  
603 North St. Mary's Street  
(P. O. Box 2410)  
San Antonio 78204James T. Richards, R.Ph.  
MAU Pharmacist

" "

Patrick Trevino  
MAU Pharmacist

" "

Cesar Elizondo, M.D.  
Program DirectorMedical Assistance Unit 065  
510 South Congress  
Austin 78704Frank H. Reese, R.Ph.  
MAU Pharmacist

" "

Woody Shultz, R.Ph.  
MAU Pharmacist3316 Franklin Avenue  
Waco 76703

Regional Medical Assistance Units (continued):

John E. Worthen, M.D. Program Director	Medical Assistance Unit 045 4113 Jacksboro Highway Wichita Falls 76302
Louis Allison, R.Ph. MAU Pharmacist	" "
James K. Richardson, M.D. Assistant Program Director	25455 Danville Abilene 79605
Richard D. Thompson, R.Ph. MAU Pharmacist	" "
Mary Killingsworth, M.D. Program Director	Medical Assistance Unit 054 711 West 7th Street (P. O. Box 17129) Fort Worth 76102
Robert H. Sedwick, R.Ph. MAU Pharmacist	" "
Robert E. Cohenour, M.D. Program Director	Medical Assistance Unit 055 330 West Mockingbird, #100 Dallas 75235
Betty Gould, R.Ph. MAU Pharmacist	" "
Joe Gaulden, R.Ph. MAU Pharmacist	" "
(vacant) Program Director	Medical Assistance Unit 075 228 Hinnant Street (P. O. Box 484) Sulphur Springs 75482
Verdon R. Graves, R.Ph. MAU Pharmacist	" "
Wayne Gentsch, R.Ph. MAU Pharmacist	309 Pine Tree Road Longview 75601
Roy J. Catizone, M.D. Program Director	Medical Assistance Unit 105 550 Fannin, Petroleum Bldg. Beaumont 77701
Howard L. Gentry, R.Ph. MAU Pharmacist	" "

Regional Medical Assistance Units (continued):

William E. Hughes, M.D. Program Director	Medical Assistance Unit 115 3004 Yale Street, Bldg. N Houston 77018
Edward E. Jenkins, M.D. Assistant Program Director	" "
Edward Hunter, R.Ph. MAU Pharmacist	" "
George F. Dillon, M.D. Program Director	Medical Assistance Unit 125 2301 North Big Spring (P. O. Box 2880) Midland 79701
Bobby L. Payne, R.Ph. MAU Pharmacist	" "
G. J. Reyna, M.D. Program Director	Medical Assistance Unit 085 4410 Dillon Lane, #52 Corpus Christi 78404
Herbert Cable, M.D. Assistant Program Director	" "
Jeff I. Coats, R.Ph. MAU Pharmacist	" "
Raul Martinez, R.Ph. MAU Pharmacist	" "

2. Medical Care Advisory Committee:

The Committee is composed of physicians, dentists, hospital administrators and representatives of the nursing professional and allied fields.

Texas Medical Association

Milton V. Davis, M.D. P. O. Box 64569 Dallas 75206 214/824-4541	Raymond Cohen, M.D. 1003 Medical Towers Bldg. Houston 77030 713/797-0647
Cayetano E. Barrera, M.D. 606 South Broadway McAllen 78501	A. Rex Kirkley, M.D. P. O. Box 538 Belton 76513 817/939-3715

Texas Osteopathic Medical Association

Luz A. Candelaria, D.O.  
7722 North Loop Drive  
El Paso 79915  
915/779-2424

Roy C. Mathews, D.O.  
2105 North Anlin  
Bonham 75418  
214/583-3191

Jimmy D. Johnson, D.O.  
2317 Mountain Lake Road  
Dallas 75224  
214/330-9201

Texas Dental Association

Alton L. Flynn, Jr., D.D.S.  
651 Randol Mill Road  
Arlington 76010  
(817) 275-2013

Texas Hospital Association

William K. Brown, FACHA  
Administrator  
Brackenridge Hospital  
15th and East Avenue  
Austin 78701  
512/476-6461

Boone Powell, Jr., FACHA  
Administrator  
Hendrick Memorial Hospital  
19th and Hickory  
Abilene 79601  
915/677-3551

Texas Osteopathic Hospital Association

Patty Borden  
Administrator  
Doctors Community Hospital  
P. O. Box 639  
Euless 76039  
817/283-5311

Texas Nursing Home Assoc.

Thomas N. Taylor, FACHA  
Austin Nursing & Convalescent Center  
110 East Live Oak  
Austin 78704  
512/444-3511

Texas Association of Homes for the Aging

Tom Drewett  
Administrator  
Buckner Siesta Retirement Homes  
P. O. Box 14468  
Austin 78761  
512/836-1515 or 892-1131

Texas Pharmaceutical Assoc.

Lonnie J. Yarbrough, R.Ph.  
117 Piner Street  
Denton 76201  
817/382-5033

Texas Optometric Association

John L. Hester, O.D.  
P. O. Box 1180  
Beeville 78102  
512/358-3218

Texas Podiatry Association

Douglas Guthrie, Jr., D.P.M.  
2323 Austin Avenue  
Waco 76701

Texas Chiropractic Assoc.

Bob Glaze, D.C.  
P. O. Box 959  
Gilmer 75644  
214/843-2011

## Medical Care Advisory Committee (continued):

Social Work Profession

Charlotte Clarke, A.C.S.W.  
4210 Speedway  
Austin 78751  
512/471-5456

Texas Nurses Association

Betty Dunn, R.N.  
Route 5, Box 77  
Austin 78704  
512/892-1155

Consumer Representative

Melba Alardin  
1405 San Dario Avenue  
Laredo 78040  
512/724-5864

Walter C. Coers  
1625 Wooded Acres, Apt. 110  
Waco 76710  
817/772-6837

Texas Speech and Hearing Association

Richard Stream, Ph.D.  
Center for Audiology and  
Speech Pathology  
University of Texas Medical  
Branch  
Galveston 77550  
713/765-2711

Texas Hearing Aid Association

Ted Lucenay, M.A.  
819 Austin  
Waco 76701  
817/752-3315

Certified Ophthalmic Dispenser's Association

Bill Van Cleave  
222 Westwood Drive  
Abilene 79607  
915/673-4934

Ex-Officio Members

Ex-Officio Members serve until they resign or are replaced by the Commissioner.

Medical Schools

William C. Levin, M.D.  
President  
Medical Branch  
University of Texas  
Galveston 77550  
713/675-1902

Health Services Contractors

Fred Rodgers  
Blue Cross-Blue Shield  
Main at North Central  
Dallas 75222  
214/741-8950

Texas State Department of Health

Fratris Duff, M.D.  
Commissioner  
110 West 49th Street  
Austin 78756  
512/454-3781

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 7th 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)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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
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	1975		1976		
	Persons Eligible	Drug 1/ Recipients Amounts	Persons Eligible	Drug 1/ Recipients Amounts	
OAA		2,490	\$ 779	2,872	\$ 971
MA					
AB		62	20	55	19
APTD		2,601	748	2,731	852
AFDC		7,299	878	8,115	1,008
MN				131	16
Total		12,452	\$2,425	13,904	\$2,866

1/ Average recipients per month

2/ Unduplicated total: 38,512 - DHEW, SRS/NCSS 2082 A(2) FY-1976.

## 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.): Common cold remedies, simple analgesics (except nursing home patients), oral antiseptics, multiple vitamins, simple laxatives, anorectics (except for amphetamines and derivatives for only specific indications of narcolepsy and the hyperkinetic child).
- B. Formulary: None. There are no restrictions on the physician or other licensed practitioners to prescribe; however, the Utah 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. May prescribe and dispense brand name drugs, but encourage usage of generic drugs for potential cost savings.
  2. 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.
- D. Prescription Charge Formula:
  1. Wholesale price plus professional fee of \$2.20 not to exceed charges in the private sector.
  2. Reduced Fee: For birth control pills and insulin the pharmacist will be reimbursed at the wholesale price plus \$1.00 professional fee not to exceed charges in the private sector.
  3. MAC Drugs: A selection of approximately 75 drugs for which a maximum allowable cost will be paid is included in the Utah Drug Code Index.

Prescription Charge Formula (continued):

4. **Generic Drugs:** A selected generic listing of approximately 80 dosage forms of drugs for which the program has set the reimbursable price is included in the Utah Drug Code Index.
5. **Unit Dose:** Unit dose reimbursement will be on a cumulative basis, a month's supply plus one dispensing fee of \$2.20. A special pricing list of over 500 unit dosage drugs must be utilized.
6. **Selected OTC Drugs:** These drugs will be reimbursed at the wholesale cost plus 50% or the charge to private sector whichever is lower.

V. Miscellaneous Remarks:

Major emphasis is placed on utilization review through the Surveillance and Utilization Review Reports generated from the MMIS System which was implemented in August, 1975.

Medical Assistance Program Data (FY 1976):

Total Welfare Expenditures	-----	\$85,592,968
*Administration Costs (6.3%)	-----	5,353,270
<u>Assistance Payments (44.6%)</u>	-----	38,195,030

Average persons/month - 38,540  
Average payment/month - \$82.59

Medical Assistance (49.1%) ----- \$42,044,668

Average persons/month - 55,040  
Average payment/month - \$151.28/person

Payments by Type of Service (Gross Totals)Average Persons

7,256 Physicians	\$ 3,023,540	\$ 34.72
955 Inpatient Hospital	8,971,904	782.96
3,690 Outpatient Hospital	1,527,962	34.50
13,914 Drugs	2,867,000	17.17
1,328 Skilled Nursing Homes	8,108,651	675.72
2,422 Intermediate Care Facilities	10,861,498	905.72
2,360 Dental Insurance	2,228,881	78.71

\*Does not include expenditures for the Office of Administrative Services.

Payments by Type of Service (Gross Totals) (continued):

<u>Average Persons</u>	<u>Amount</u>	<u>Average/ Month</u>
3,619 HMOs	\$1,006,754	\$23.18
5,360 Medicare Insurance Premiums	501,059	7.79
4,922 Other	1,540,352	26.08

Source of Data: Fiscal Year Report 1975-76, Vol. 37, No. 2,  
Utah Report of Assistance, Medical and  
Food Stamp Report.

## UTAH

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Social Services Department Officials:

Anthony W. Mitchell, Ph.D. Executive Director	Dept. of Social Services Box 2500 Salt Lake City, Utah 84111
Lloyd H. Nelsen Acting 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
Neal F. Christensen, Director Office of Medical Services	Box 2500 Salt Lake City 84111
John D. Hunter, R.Ph., Director Bureau of Medical Review Services Division of Health	44 Medical Drive Salt Lake City 84113
Roy Cooper, Director Office of Assistance Payments	Box 2500 Salt Lake City 84111
Melvin M. Owens, Director Office of Administrative Services	Box 2500 Salt Lake City 84111

## 2. Social Services Department Consultants:

## A. Physician:

Harold E. Merkeley, M.D.	2020 South 13th East Salt Lake City 84105
--------------------------	--

## 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 Medical Association  
Thomas L. Jones, M.D.  
166 East 5900 South  
Salt Lake City 84107

Utah State Pharmaceutical Association  
Lynn H. Sartor, Chairman  
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 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  
Mrs. Carol Ashworth  
P. O. Box 822  
Provo 84601

Raymond F. Bowden  
3740 Yosemite Drive  
Salt Lake City 84109

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 Assoc.  
Charles E. Parkin, D.D.S.  
President  
Delta Dental Plan of Utah  
65 West Louise Avenue  
Salt Lake City 84115

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' Assoc.  
Carol Malbone  
2215 East 2100 South  
Salt Lake City 84109  
Vice-Chairman

Social Services Department Medical Care Advisory  
Committee (continued):

University of Utah College  
of Medicine

B. Saunders Midyette  
Associate Administrator  
University of Utah Medical Center  
50 North Medical Drive  
Salt Lake City 84112

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:

Fred R. Homer, R.Ph.  
Executive Secretary (Interim)  
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)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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		
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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA		4,179 \$ 561		4,784 \$ 647
MA		3,044 491		2,982 502
All Other		584 11		610 13
APTD		4,428 686		5,240 804
AFDC		21,947 671		26,756 829
Total		34,182 <sup>1/</sup> \$2,420 <sup>1/</sup>		40,372 \$2,795

<sup>1/</sup> Corrected figures from 1976 report.

## 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)					Other* (SFO)
	OAA	AB	APTD	AFDC	Category Related				Children Under 21	
					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										
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 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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts
OAA		\$ 14		
MA				
AB <sup>1/</sup>				
APTD		3		
AFDC		32		
MN		252 <sup>2/</sup>		
Total		9,804 <sup>3/</sup>		\$466 <sup>4/</sup>

<sup>1/</sup> Miniscale sum only.

<sup>2/</sup> Includes \$68 in the non-matching category.

<sup>3/</sup> DHEW - SRS/NCSS Report B-5 (FY-1975) - Preliminary.

<sup>4/</sup> DHEW - SRS/NCSS Report B-5 (FY-1976) - 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
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Dr. Herbert Michelman	- Provider of MAP
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Hermaine Capdeville (Mrs.)	- Social Worker St. Croix
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Alla Rie Cass (Mrs.)	- Social Worker St. Thomas
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Beryl Kean Vice Chairman	- Representative Government Health Insurance
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## 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:

Cora Le Ethel Christian, M.D.  
Secretary  
Virgin Islands Medical Society  
P.O. Box 520  
Christiansted  
St. Croix  
Virgin Islands 00840  
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 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		
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; clinics; transportation; family planning; limited medical supplies; whole blood; optometrist; podiatrist; EPSDT.

\*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	1975			1976		
	Persons Eligible <sup>1/</sup>	Drug Recipients <sup>2/</sup>	Amounts	Persons Eligible <sup>1/</sup>	Drug Recipients <sup>2/</sup>	Amounts
OAA	67,249	49,040	\$ 6,063	67,982	49,345	\$ 5,580
MA						
AB	1,993	1,554	181	1,965	1,383	148
APTD	40,602	25,571	3,263	41,528	27,467	3,155
AFDC	259,456	141,941	4,227	270,095	141,347	3,721
Total	369,300	218,106	\$13,734	381,570	219,542	\$12,604

<sup>1/</sup> Total eligible during fiscal year.

<sup>2/</sup> Unduplicated count.

## VIRGINIA

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

## III. How Administered:

By the Bureau of Medical Assistance of 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.\* Usual and customary charge.\*

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. Usual and customary charge.

Dispensing physicians: Reimbursement same as that for pharmacies.

NOTE: Usual and customary charge or allowed cost, determined by the State, plus fee reimbursement, whichever is the lower.

\*50¢ co-pay by recipient; otherwise, no claim is to be submitted for reimbursement. Does not apply to family planning drugs and supplies.

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V. Miscellaneous Remarks:

Drug Utilization Data (FY 1976):

Average monthly number of users	-	86,394
Average monthly number of prescriptions	-	220,552
Average number of prescriptions/user	-	2.55



## 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 Association  
Charles P. Cardwell, Jr.  
Harold Prather

Virginia Pharmaceutical Association  
Thomas A. Abbott, R.Ph.  
Harvey Morgan, R.Ph.

Participants Advisory Council  
Mamie King  
Henry Quicke

Ex Officio

William L. Lukhard	Commissioner State Department of Welfare
Leo E. Kirven, Jr., M.D.	Acting Commissioner State Department of Mental Health and Mental Retardation
James B. Kenley, M.D.	Commissioner State Department of Health

## B. Welfare Department Officials:

William L. Lukhard Commissioner	State Department of Welfare 8007 Discovery Drive Blair Building Richmond 23288
------------------------------------	---

## C. Executive Officers of State Medical and Pharmaceutical Societies:

- |   |  |
|---|--|
| 1. Medical Society:   | 2. Pharmaceutical Association:   |
| Robert I. Howard<br>Executive Vice President<br>Medical Society of Virginia<br>4205 Dover Road<br>Richmond 23221<br>Phone: 804/343-2721 | Sam W. Crickenberger<br>Executive Director<br>Va. Pharmaceutical Association<br>3119 West Clay Street<br>Richmond 23230<br>Phone: 804/355-7942 |





WASHINGTON

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)					Other* (SFO)	
	OAA	AB	APTD	AFDC	Category Related				Children Under 21		
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:											

\*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	1975			1976		
	Persons <sub>1/</sub> Eligible	Drug Recipients	Amounts	Persons <sub>1/</sub> Eligible	Drug Recipients	Amounts
OAA	35,180	33,280	\$ 4,476	37,011	Not Available	\$ 5,188
MA					At This Time	
AB	711	520	49	681		54
APTD	37,824	31,480	3,677	37,573		4,094
AFDC	149,148	110,660	2,890	152,221		3,239
Other-Title XIX	12,709	11,740	261	14,527		303
Other (SOF)	5,360	8,700	413	6,511		481
Total	240,932	196,380	\$11,766	248,524		\$13,359

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 40 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 \$25 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 \$2.23 for outpatient R's and \$1.97 for nursing home patient R's (SNF and ICF).

The dispensing fee of \$2.23 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.

WASHINGTON

MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

1. Social and Health Services Department Officials:

Harlan P. McNutt, M.D., M.P.H. Secretary	Department of Social and Health Services MS 440 Olympia, Washington 98504
---	--

John A. Beare, M.D., M.P.H. Director Health Services Division	Health Services Division MS 440 Olympia 98504
---	---

Richard Ned Nelson, Chief Office of Medical Assistance	Health Services Division MS 10-1 Olympia 98504
---	--

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: Local Office

Paul Ferse, M.D.	King
Harry P. Harper, M.D.	Spokane
Edward P. Palmason, M.D.	Seattle
Robert A. Reynolds, M.D.	Tacoma - Bremerton

B. Part-Time:

J. Morrison Brady, M.D.	Olympia
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
John W. Erickson, M.D.	Vancouver
Lawrence Ettelson, M.D.	Seattle
Burton A. Foote, M.D.	Ellensburg
Mark L. Gabrielson, M.D.	Oak Harbor - Bellingham

V. Miscellaneous Remarks:

Medical care program is a limited program to meet essential, chronic, emergent and acute conditions - not intended to provide all drugs.

## WASHINGTON

## MEDICAL ASSISTANCE DRUG PROGRAM UNDER TITLE XIX

Officials, Consultants and Committees

## 1. Social and Health Services Department Officials:

Harlan P. McNutt, M.D., M.P.H. Secretary	Department of Social and Health Services MS 440 Olympia, Washington 98504
John A. Beare, M.D., M.P.H. Director Health Services Division	Health Services Division MS 440 Olympia 98504
Richard Ned Nelson, Chief Office of Medical Assistance	Health Services Division MS 10-1 Olympia 98504
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:

Local Office

Paul Ferse, M.D.	King
Harry P. Harper, M.D.	Spokane
Edward P. Palmason, M.D.	Seattle
Robert A. Reynolds, M.D.	Tacoma - Bremerton

## B. Part-Time:

J. Morrison Brady, M.D.	Olympia
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
John W. Erickson, M.D.	Vancouver
Lawrence Ettelson, M.D.	Seattle
Burton A. Foote, M.D.	Ellensburg
Mark L. Gabrielson, M.D.	Oak Harbor - Bellingham

## Medical Consultants - Part-Time (continued):

Kenneth H. Kinard, M.D.	Everett
David Loree, M.D.	Vancouver
S. A. McCool, M.D.	Elma
Albert V. Mills, M.D.	Pasco
Clarence Olsen, M.D.	Seattle
Jerman Rose, M.D.	Tacoma
Carl C. Walters, M.D.	Yakima
Harry C. Watkins, Jr., M.D.	Aberdeen

## 3. Social and Health Services Department Title XIX Advisory Committee:

Members

Paul R. Lauer, M.D. (Chairman)  
Colby at 39th  
Everett 98201 259-0966  
Term expires: July 1, 1978

Elaine Burkhead  
22406 - 37th Place West  
Mountlake Terrace 98043  
774-9447  
Term expires: July 1, 1977

Ludwig Lobe  
Plaza 600 Building, Suite 1200  
Seattle 98101  
622-3385 Scan--576-6832  
Term expires: July 1, 1977

Robert Day, M.D.  
School of Public Health and  
Community Medicine  
University of Washington  
Seattle 98195  
543-1144 Scan--323-1144  
Term expires: July 1, 1977

James L. Lord, D.D.S.  
10212 Fifth Avenue NE, Suite 2-E  
Seattle 98125  
522-5300  
Term expires: July 1, 1977

Hal King, Administrator  
Riverwood Care Center  
114 Fourth Avenue NW  
Puyallup 98371  
848-4551  
Term expires: July 1, 1977

Donald W. Murray, R.Ph.  
Wenatchee Clinic Pharmacy  
9th at Chelan  
Wenatchee 98801  
662-5801  
Term expires: July 1, 1977

Anne Larson  
4131 South Yakima  
Tacoma 98408  
572-4343  
Term expires: July 1, 1977

Alice W. Sandstrom  
Associate Administrator-Finance  
Children's Orthopedic Hospital  
and Medical Center  
4800 Sand Point Way NE  
Seattle 98105  
634-5000  
Term expires: July 1, 1977

Cleo Sandwick  
923 - 96th Place SW  
Seattle 98106  
762-0489  
Term expires: July 1, 1978

4. Executive Officers of State Medical and Pharmaceutical Societies:

A. Medical Association:

H. R. Knudson  
Executive Director  
Washington State Medical Association  
900 United Airlines Building  
2033 Sixth Avenue  
Seattle, Washington 98121  
Phone: 206/623-4801

B. Pharmaceutical Association:

Raymond A. Olson  
Executive Director  
Washington State Pharmaceutical Association  
1305 Third Avenue, #204  
Seattle, Washington 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)				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	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	1975			1976		
	Persons Eligible <sup>2/</sup>	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	( 38,380	32,089	\$1,682	( 48,223	42,157	\$2,231
AB	(			(		
APTD	(			(		
AFDC	( 72,199	50,327	1,630	( 79,082	71,858	3,802
UF <sup>3/</sup>	(			(		
Others <sup>4/</sup>	11,689	532	445	33,267	3,283	1,761
Total	122,268	82,948 <sup>5/</sup>	\$3,757	160,572	117,298	\$7,794

1/ Excludes State Pharmacy Program (SFO) which is circa \$843,000 for FY 1976 and includes drugs to approximately 11,850 elderly persons.  
 2/ June 1976 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:

Leon H. Ginsberg, Ph.D. 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, <u>Chairman</u><br>346 Cherokee Trail<br>Huntington 25705 | Robert Lowe, R.Ph.<br>West Virginia University<br>School of Pharmacy<br>Morgantown 26505 |
| Ed Toompas, Co-Chairman<br>115 Mandan Road<br>Clarksburg 26301               | William G. Copper<br>1502 Village Drive<br>South Charleston 25309                        |
| William Plyburns<br>611 Central Avenue<br>Barboursville 25504                | Arlie Winters<br>212 Union Street<br>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:

Robert E. Hickman, Pres.  
\*Jack S. Huggins, Pres.-Elect  
West Virginia Pharmaceutical  
Association  
205 13th Street  
Glendale 26038

\*Assumes Presidency -  
September 1977

## WISCONSIN

## 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)					Other* (SFO)
	Recipients				Category Related				Children Under 21	
	OAA	AB	APTD	AFDC	OAA	AB	APTD	AFDC		
Prescribed Drugs	X	X	X	X	X	X	X	X	X	
Inpatient 1/ 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	1975			1976		
	Persons Eligible	Drug Recipients	Amounts	Persons Eligible	Drug Recipients	Amounts
OAA	55,504	29,614	\$ 2,961	54,495	28,199	\$ 3,327
MA						
AB	1,831	718	66	1,841	613	68
APTD	34,420	17,093	2,096	42,219	21,785	2,958
AFDC	212,782	111,179	3,163	221,229	137,631	3,100
MN Aged <u>2/</u>	39,750	33,298	5,443	57,241	45,189	5,649
MN Blind <u>2/</u>	269	138	18	205	103	15
MN Disabled <u>2/</u>	14,484	9,463	1,496	12,520	10,261	1,500
MN Children <u>2/</u>	89,040	38,115	933	91,843 <sup>3/</sup>	43,116 <sup>4/</sup>	890
Total	448,080	239,618	\$16,176	481,593	286,897	\$17,507

1/ Does not include mental.2/ Includes Categorically Related cases not receiving a money payment.3/ Includes 11,138 adults C.R. to AFDC.4/ Includes 6,878 adults who received \$218,000.

Note: Last year's figures did not agree with footnote as C.R. cases not receiving a money payment were included with money payment cases.

## 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.

Drug Program Policy Clarifications - Effective May 1, 1977I. Usual and Customary Charge

This is to remind you that in no case shall charges to the Wisconsin Medical Assistance Program exceed the provider's usual and customary charge to the general public for similar services. This rule is mandated by Federal regulation:

45 C.F.R. 250.30 (b) (2)

"The upper limit for payment for prescribed drugs - whether legend items . . . or non-legend items - shall be based on the lower of the cost of the drug . . . plus a dispensing fee established by the State, or the provider's usual and customary charge to the public ..."

II. Over-the-Counter Products

Beginning May 1, 1977, payment for non-legend drugs dispensed on prescription of a licensed practitioner will be as follows:

Cost of the product (estimated to be 94% of current Blue Book and Supplements) plus the dispensing fee or the provider's usual and customary charge, whichever is lower.

"...Reimbursement for non-legend drugs shall be set at the lower of shelf price or the estimated acquisition cost of the product plus a dispensing fee."

III. Unit Dose Reimbursement

Beginning May 1, 1977, drugs which have a federally-set EAC, and which are available in unit dose, will be reimbursed as follows:

1. Drugs made by Abbott, Lederle, Merck-Sharp-Dohme, Parke, Davis, Pfizer, Roerig, Squibb, Upjohn and Wyeth and purchased in unit dose packages will be assigned a Wisconsin EAC based on 100% of the direct price for unit dose packages in 100's.
2. Drugs made by all other drug companies and purchased in unit dose packages will be assigned a Wisconsin EAC based on 94% of Blue Book AWP for unit dose packages of 100's.

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 H. Lizon Deputy Administrator Operations	" "
Bernard Stumbras Deputy Administrator Planning and Development Division of Family Services	" "
Martin A. Preizler, Director Medical Services	" "
John Allen, M.D. Physician Consultant (Part-time)	" "
Margaret B. Card, R.Ph. Pharmacist Consultant	" "

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 Probstein  
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) Category Related			Children Under 21	Other* (SFO)
	OAA	AB	APTD	AFDC	OAA	AB	APTD		
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	1975		1976	
	Persons Eligible	Drug Recipients Amounts	Persons Eligible	Drug Recipients Amounts

OAA

MA

AB

APTD No Vendor Drug Program

AFDC

Total

## 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	- Hospital Administrator
Donald Hunton, M.D.	- Physician
Lawrence J. Cohen, M.D.	- Administrator, Division 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
James Norris	- State Senator
Warren J. Hickman, D.D.S., Chairman	- Dentist
Jermy B. Wight	- Administrator, Div. of Public Assistance & Social Services
Mrs. J. J. Hickey	- County Commissioner
Steve Cranfill	- State Representative
John Vinich	- State Representative

## Medical Advisory Committee (continued):

Ray Ring	- 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:

## 1. 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

## 2. Pharmaceutical Association:

Thomas J. Murphy  
Secretary-Treasurer  
Wyoming Pharmaceutical Association  
Box 480  
Gillette 82716  
Phone: 307/682-4777