



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO. 1022

DATE: August 1, 2011

TO: Iowa Medicaid Physician, Dentist, Advanced Registered Nurse Practitioner, Therapeutically Certified Optometrist, Podiatrist, Pharmacy, Home Health Agency, Rural Health Clinic, Clinic, Skilled Nursing Facility, Intermediate Care Facility, Community Mental Health, Family Planning, Residential Care Facility, ICF MR State and Community Based ICF/MR Providers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Dispensing Fee, Fifteen Day Initial Supply Limit and Noncoverage of Cough and Cold and Weight Loss Drugs

EFFECTIVE: August 1 and September 1, 2011

EFFECTIVE AUGUST 1, 2011

Pharmacy Dispensing Fee: The pharmacy dispensing fee will be increased from \$4.34 to \$6.20. The department does not plan to implement these changes until approval has been received from the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS). Once approval has been received the increase shall be applied retroactively back to the effective date of August 1, 2011.

EFFECTIVE SEPTEMBER 1, 2011

1. Fifteen (15) Day Supply Limit on Initial Fill

A fifteen (15) day supply limit on the initial fill of select prescriptions will be implemented. These drugs will be identified on the Fifteen Day Initial Prescriptions Supply Limit List located on the website www.iowamedicaidpdl.com under the Preferred Drug Lists (PDL) tab.

The medications selected are those with high side effect profiles, high discontinuation rates, or frequent dose adjustments. These changes will be implemented to ensure cost effectiveness without wasting or discarding un-used medications. Subsequent refills of these products are at the usual allowed days supply.

2. Coverage of Optional Covered Outpatient Drug Categories

The following (PDL) Drug Categories will be removed from Iowa Medicaid coverage:

- Cough and Cold (excluding OTC payable pseudoephedrine products and dextromethorphan-guaifenesin syrup) and;
- Weight Loss

We encourage providers to go to the website at www.iowamedicaidpdl.com to view all recent changes to the PDL. If you have questions, please contact the Pharmacy Prior Authorization Helpdesk at 877-776-1567 or 515-256-4607 (local in Des Moines) or email info@iowamedicaidpdl.com.