

HUMAN SERVICES DEPARTMENT [441]

**Notice of Intended Action**

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services proposes to amend Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” Iowa Administrative Code.

The proposed amendments would change the list of covered nonprescription drugs under the Medicaid program to:

- Remove the nonprescription drug omeprazole magnesium delayed-release tablets 20 mg (base equivalent), as duplicative of the payable and less costly prescription product omeprazole.
- Remove the following nonprescription drugs because the products are no longer available: benzoyl peroxide 10% wash; ferrous sulfate tablets 300 mg; ferrous gluconate 300 mg; Niacin (nicotinic acid) tablets 25 mg; pseudoephedrine/dextromethorphan 15 mg/5 mg/5 ml syrup; sennosides granules 15 mg/5 ml; sennosides tablets 187 mg; and sodium chloride solution 0.9% for inhalation with metered dispensing valve 90 ml, 240ml.
- Add the following products established as preferred on the preferred drug list: cetirizine hydrochloride liquid 1 mg/ml; cetirizine hydrochloride tablets 5 mg; cetirizine hydrochloride tablets 10 mg; epinephrine racemic solution 2.25%; loratadine syrup 5 mg/5 ml; sennosides syrup 8.8 mg/5 ml; and sennosides tablets 8.6 mg.

Omeprazole magnesium delayed-release tablets 20 mg (base equivalent) are available by

prescription in a generic form that can have a state maximum allowable cost rate applied, resulting in significant savings to the Iowa Medicaid program. In addition, this drug is in the therapeutic class of proton pump inhibitors, which is a covered therapeutic class for prescription products under Medicare Part D. Therefore, removal of this product from the Medicaid nonprescription drug list also eliminates Medicaid payment for the drug for Medicare Part D dual eligibles, resulting in additional savings to the program.

These amendments do not provide for waivers in specified situations. Waivers may be requested under the Department's general rule on exceptions at 441—1.8(17A,217).

Any interested person may make written comments on the proposed amendments on or before June 24, 2009. Comments should be directed to Mary Ellen Imlau, Bureau of Policy Analysis and Appeals, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by E-mail to [policyanalysis@dhs.state.ia.us](mailto:policyanalysis@dhs.state.ia.us).

These amendments are intended to implement Iowa Code section 249A.4.

The following amendments are proposed.

ITEM 1. Rescind the following entries in subrule **78.2(5)**:

~~Omeprazole magnesium delayed-release tablets 20 mg (base equivalent)~~

~~Pseudoephedrine/dextromethorphan 15 mg/5 mg/5 mL syrup~~

~~Sennosides granules 15 mg/5 ml~~

~~Sodium chloride solution 0.9% for inhalation with metered dispensing valve 90 ml,~~

~~240ml~~

ITEM 2. Amend the following entries in subrule **78.2(5)**:

~~Benzoyl peroxide 10% gel, lotion, wash~~

Ferrous sulfate tablets ~~300 mg~~, 325 mg

Ferrous gluconate ~~300 mg~~, 325 mg

Niacin (nicotinic acid) tablets ~~25 mg~~, 50 mg, 100 mg, 250 mg, 500 mg

Sennosides tablets ~~187~~ 8.6 mg

ITEM 3. Adopt the following **new** entries in subrule **78.2(5)** in alphabetical order:

Cetirizine hydrochloride liquid 1 mg/ml

Cetirizine hydrochloride tablets 5 mg

Cetirizine hydrochloride tablets 10 mg

Epinephrine racemic solution 2.25%

Loratadine syrup 5 mg/5 ml

Sennosides syrup 8.8 mg/5 ml