

**HUMAN SERVICES DEPARTMENT[441]**

**Adopted and Filed Emergency**

Pursuant to the authority of Iowa Code section 249A.4 and 2011 Iowa Acts, House File 649, section 10, subsection 20(a), the Department of Human Services amends Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” Iowa Administrative Code.

These amendments affect Medicaid coverage for drugs by:

- Removing coverage for lipase inhibitor drugs when used to promote weight loss;
- Removing coverage for prescription drugs and certain nonprescription products used for symptomatic relief of cough and colds; and
- Updating the list of covered nonprescription drugs to reflect current rebatable drugs.

2011 Iowa Acts, House File 649, allows the Department to implement the Medicaid cost containment strategies recommended by Governor Branstad. Federal Medicaid law allows states to exclude coverage for these two categories of drugs, and eliminating coverage for them is one of the recommended strategies.

Lipase inhibitor drugs are the only weight-loss drug category currently covered in Iowa. There is one covered lipase inhibitor drug which will no longer be payable. This drug has minimal utilization (due to side effects) and effectiveness. Alternative nonpharmaceutical treatment options exist that are at least as effective as, if not more effective than, that drug.

Iowa presently covers a limited number of preferred nonprescription and prescription cough and cold products. These amendments retain coverage only for products that are both cost-effective and supported by sufficient clinical evidence. Coverage for all prescription cough and cold products is eliminated. These products tend to be combinations of multiple ingredients, some at subtherapeutic doses that have minimal effectiveness, with an increased tendency toward side effects and drug interactions. Alternative nonpharmaceutical options for treatment also exist.

Nonprescription products that contain only one or two ingredients, a decongestant and cough syrup containing dextromethorphan, will remain payable. There is evidence to support or expert opinion recommending treatment of symptomatic cold symptoms with a decongestant and some evidence to support the use of dextromethorphan.

The Council on Human Services adopted these amendments on August 10, 2011.

These amendments do not provide for waivers in specified situations because the savings assumed in the Department’s appropriations will not be achieved if waivers are provided. Requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

The Department finds that notice and public participation are impracticable because the Department’s appropriation for the fiscal year beginning July 1, 2011, assumes the implementation of the cost containment strategies recommended by the Governor without a delay for notice and public comment. Therefore, these amendments are filed pursuant to Iowa Code section 17A.4(3).

The Department also finds, pursuant to Iowa Code section 17A.5(2)“b”(1), that the normal effective date of these amendments should be waived, as authorized by 2011 Iowa Acts, House File 649, section 10, subsection 20(a).

These amendments are also published herein under Notice of Intended Action as **ARC 9700B** to allow for public comment.

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 249A.4 and 2011 Iowa Acts, House File 649, section 10, subsection 20(a).

These amendments became effective September 1, 2011.

The following amendments are adopted.

ITEM 1. Amend subparagraph **78.2(4)“b”(2)** as follows:

- (2) Drugs used to cause for anorexia, weight gain, or weight loss, ~~except for lipase inhibitor drugs prescribed for weight loss with prior authorization as provided in paragraph “a.”.~~

ITEM 2. Adopt the following **new** subparagraph **78.2(4)“b”(11)**:

(11) Drugs used for symptomatic relief of cough and colds, except for nonprescription drugs listed at subrule 78.2(5).

ITEM 3. Amend subrule 78.2(5) as follows:

**78.2(5) Nonprescription drugs.** The following drugs that may otherwise be dispensed without a prescription are covered subject to the prior authorization requirements stated below and as specified in the preferred drug list published by the department pursuant to Iowa Code section 249A.20A:

Acetaminophen tablets 325 mg, 500 mg  
Acetaminophen elixir 160 mg/5 ml  
Acetaminophen solution 100 mg/ml  
Acetaminophen suppositories 120 mg  
Artificial tears ophthalmic solution  
Artificial tears ophthalmic ointment  
Aspirin tablets 325 mg, 650 mg, 81 mg (chewable)  
Aspirin tablets, enteric coated 325 mg, 650 mg, 81 mg  
Aspirin tablets, buffered 325 mg  
Bacitracin ointment 500 units/gm  
Benzoyl peroxide 5%, gel, lotion  
Benzoyl peroxide 10%, gel, lotion  
Calcium carbonate chewable tablets ~~1250 mg (500 mg elemental calcium)~~ 500 mg, 750 mg, 1000 mg, 1250 mg  
Calcium carbonate suspension 1250 mg/5 ml  
Calcium carbonate tablets 600 mg  
Calcium carbonate-vitamin D tablets 500 mg-200 units  
Calcium carbonate-vitamin D tablets 600 mg-200 units  
Calcium citrate tablets 950 mg (200 mg elemental calcium)  
Calcium gluconate tablets 650 mg  
Calcium lactate tablets 650 mg  
Cetirizine hydrochloride liquid 1 mg/ml  
Cetirizine hydrochloride tablets 5 mg  
Cetirizine hydrochloride tablets 10 mg  
Chlorpheniramine maleate tablets 4 mg  
Clotrimazole vaginal cream 1%  
Diphenhydramine hydrochloride capsules 25 mg  
Diphenhydramine hydrochloride elixir, liquid, and syrup 12.5 mg/5 ml  
Epinephrine racemic solution 2.25%  
Ferrous sulfate tablets 325 mg  
Ferrous sulfate elixir 220 mg/5 ml  
Ferrous sulfate drops 75 mg/0.6 ml  
Ferrous gluconate tablets 325 mg  
Ferrous fumarate tablets 325 mg  
Guaifenesin 100 mg/5 ml with dextromethorphan 10 mg/5 ml liquid  
Ibuprofen suspension 100 mg/5 ml  
Ibuprofen tablets 200 mg  
Insulin  
Lactic acid (ammonium lactate) lotion 12%  
Loperamide hydrochloride liquid 1 mg/5 ml  
Loperamide hydrochloride tablets 2 mg  
Loratadine syrup 5 mg/5 ml  
Loratadine tablets 10 mg  
Magnesium hydroxide suspension 400 mg/5 ml

Magnesium oxide capsule 140 mg (85 mg elemental magnesium)  
Magnesium oxide tablets 400 mg  
Meclizine hydrochloride tablets 12.5 mg, 25 mg oral and chewable  
Miconazole nitrate cream 2% topical and vaginal  
Miconazole nitrate vaginal suppositories, 100 mg  
Multiple vitamin and mineral products with prior authorization  
Neomycin-bacitracin-polymyxin ointment  
Niacin (nicotinic acid) tablets 50 mg, 100 mg, 250 mg, 500 mg  
Nicotine gum 2 mg, 4 mg  
Nicotine lozenge 2 mg, 4 mg  
Nicotine patch 7 mg/day, 14 mg/day and 21 mg/day  
Pediatric oral electrolyte solutions  
Permethrin ~~liquid~~ lotion 1%  
Polyethylene glycol 3350 powder  
Pseudoephedrine hydrochloride tablets 30 mg, 60 mg  
Pseudoephedrine hydrochloride liquid 30 mg/5 ml  
Pseudoephedrine/dextromethorphan 15 mg/7.5 mg/5 mL liquid  
Pseudoephedrine/dextromethorphan 20 mg/10 mg/5 mL liquid  
Pseudoephedrine/dextromethorphan 30 mg/15 mg/5 mL liquid  
Pseudoephedrine/dextromethorphan 20 mg/10 mg/5 mL elixir  
Pseudoephedrine/dextromethorphan 15 mg/7.5 mg/5 mL syrup  
Pseudoephedrine/dextromethorphan 30 mg/15 mg/5 mL syrup  
Pseudoephedrine/dextromethorphan 7.5 mg/2.5 mg/0.8 mL solution  
Pyrethrins-piperonyl butoxide liquid 0.33-4%  
Pyrethrins-piperonyl butoxide shampoo 0.3-3%  
Pyrethrins-piperonyl butoxide shampoo 0.33-4%  
Salicylic acid liquid 17%  
Senna tablets 187 mg  
Sennosides-docusate sodium tablets 8.6 mg-50 mg  
Sennosides syrup 8.8 mg/5 ml  
Sennosides tablets 8.6 mg  
Sodium bicarbonate tablets 325 mg  
Sodium bicarbonate tablets 650 mg  
Sodium chloride hypertonic ophthalmic ointment 5%  
Sodium chloride hypertonic ophthalmic solution 5%  
Tolnaftate 1% cream, solution, powder  
Other nonprescription drugs listed as preferred in the preferred drug list published by the department pursuant to Iowa Code section 249A.20A.

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 9/7/11.