Region III/Division of Medicaid and Children’s Health Operations

SWIFT #030320144004

September 19, 2014

Cynthia Beane, MSW, LCSW
Acting Commissioner
Bureau for Medical Services
350 Capitol Street, Room 251
Charleston, West Virginia 25301-3706

Dear Acting Commissioner Beane:

The Centers for Medicare & Medicaid Services (CMS) would like to inform you of the approval of West Virginia’s State Plan Amendment (SPA) 14-002 entitled Tobacco Cessation for Pregnant Women. The Pharmacy Team at CMS approved this SPA on September 19, 2014 and you were duly notified. This SPA provides coverage of prescription tobacco/smoking cessation covered outpatient drugs, bupropion and legend nicotine replacement therapy, and over-the-counter (OTC) tobacco/smoking cessation covered outpatient drugs for pregnant women.

The effective date of this amendment is January 1, 2014. Enclosed are the approved State Plan page and a copy of the signed Form CMS-179.

If you have any questions about this SPA, please contact Margaret Kosherzenko of my staff at 215-861-4288.

Sincerely,

Francis McCullough
Associate Regional Administrator

Enclosures
**TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL**

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

<table>
<thead>
<tr>
<th>TRANSMITTAL NUMBER:</th>
<th>14-002</th>
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<tbody>
<tr>
<td>STATE:</td>
<td>West Virginia</td>
</tr>
<tr>
<td>PROGRAM IDENTIFICATION:</td>
<td>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</td>
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<tr>
<td>PROPOSED EFFECTIVE DATE:</td>
<td>01/01/2014</td>
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**TYPE OF PLAN MATERIAL (Check One):**

- [x] AMENDMENT
- [] NEW STATE PLAN
- [] AMENDMENT TO BE CONSIDERED AS NEW PLAN

**FEDERAL STATUTE/REGULATION CITATION:**

Section 1102 of the Patient Protection and Affordable Care Act, P.L. 111-145, which amended Title XIX of the Social Security Act.

**FEDERAL BUDGET IMPACT:**

- **a. FFY 2014:** $120,000
- **b. FFY 2015:** $240,000

**PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:**

Supplement 2 to Attachment 3.1-B, Pages 3d, 11a and 12

**PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):**

Supplement 2 to Attachment 3.1-A and 3.1-D, Pages 3d, 11a and 12

**SUBJECT OF AMENDMENT:**

This amendment is being submitted as verification of coverage for Tobacco Cessation for Pregnant Women as mandated in the Patient Protection and Affordable Care Act.

**GOVERNOR’S REVIEW (Check One):**

- [] GOVERNOR’S OFFICE REPORTED NO COMMENT
- [x] COMMENTS OF GOVERNOR’S OFFICE ENCLOSED
- [] NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITAL

**SIGNATURE OF STATE AGENCY OFFICIAL:**

[Signature]

**RETURN TO:**

Bureau for Medical Services
350 Capitol Street Room 251
Charleston West Virginia 25301

**DATE RECEIVED:**

February 28, 2014

**DATE APPROVED:**

September 19, 2014

**EFFECTIVE DATE OF APPROVED MATERIAL:**

January 1, 2014

**REMARKS:**

Pen and ink change - Section 8 and Section 9 - Remove Pages 11a and 12 (xyz)
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Supplement 2 to Attachments 3.1-A and 3.1-B

Page 3d

12. a. Prescribed Drugs

All covered outpatient drugs, whether legend or non-legend, must be prescribed by a physician, or other practitioner qualified under State law. Applicable State and Federal law governing dispensing of drugs and biological must be followed.

The prescribed use of the covered outpatient drug must be for a medically accepted indication as defined in Social Security Act §1927(k)(6).

b. Coverage of Smoking/Tobacco Cessation products

(1) The Medicaid agency provides coverage of selected prescription tobacco/smoking cessation covered outpatient drugs, bupropion and legend nicotine replacement therapy, for all Medicaid recipients except for full benefit dual eligible beneficiaries who receive this coverage under the Medicare Prescription Drug Benefit-Part D.

(2) The Medicaid agency provides coverage of over-the-counter (OTC) tobacco/smoking cessation covered outpatient drugs for all Medicaid recipients except for beneficiaries residing in skilled and intermediate nursing facilities.

(3) The Medicaid agency provides coverage of prescription tobacco/smoking cessation covered outpatient drugs, bupropion and legend nicotine replacement therapy, and over-the-counter (OTC) tobacco/smoking cessation covered outpatient drugs for pregnant women as recommended in "Treating Tobacco Use and Dependence: 2008 Update: a Clinical Practice Guideline" published by the Public Health Service in May 2008 or any subsequent modification of such guideline.

TN No: 14-002
Supersedes: 12-009
Approval Date: SEP 19 2014
Effective Date: 01/01/14