



Products excluded from coverage through the Arkansas Medicaid Pharmacy Program.¹

212.000 Exclusions

- A. Products manufactured by non-rebating pharmaceutical companies.
- B. Effective January 1, 2006, the Medicaid agency will not cover any drug covered by Medicare Part D for full-benefit dual eligible individuals who are entitled to receive Medicare benefits under Part A or Part B.
- C. The Medicaid agency provides coverage, to the same extent that it provides coverage for all Medicaid beneficiaries under § 1927 (d) of the Social Security Act, for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses; with the exception of those covered by Part D plans as supplemental benefits through enhanced alternative coverage as provided in 42 CFR § 423.104 (f) (1) (ii) (A) to full benefit dual eligible beneficiaries under the Medicare Prescription Drug Benefit- Part D.

The following excluded drugs set forth on the Arkansas Medicaid website (www.medicaid.state.ar.us), are covered:

- 1. select agents when used for weight gain
 - 2. select agents when used for the symptomatic relief of cough and colds
 - 3. select prescription vitamins and mineral products, except prenatal vitamins and fluoride
 - 4. select nonprescription drugs
 - 5. select agents when used to promote smoking cessation
- D. Medical accessories are not covered under the Arkansas Medicaid Pharmacy Program. Typical examples of medical accessories are atomizers, nebulizers, hot water bottles, fountain syringes, ice bags and caps, urinals, bedpans, glucose monitoring devices and supplies, cotton, gauze and bandages, wheelchairs, crutches, braces, supports, diapers and nutritional products.

¹ Taken from Section Two of the Arkansas Medicaid Pharmacy Provider Manual