

State of Mississippi**DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND SERVICES PROVIDED**12a. **Prescribed Drugs:**

- (1) Covered outpatient drugs are those produced by any manufacturer which has entered into and complies with an agreement under Section 1927 (a) of the Act which are prescribed for a medically acceptable indication. Compounded prescriptions (mixtures of two (2) or more ingredients) except for hyperalimentation are not covered.
- (2) All Medicaid non-Early and Period Screening, Diagnostic and Treatment (EPSDT)-eligible beneficiaries are limited to six (6) prescriptions, which includes legend and prescribed OTC drugs, per month with no more than two (2) brand name (single source or innovator multiple source) drugs per month. Beneficiaries may exceed the prescription limits when prior authorized as medically necessary.
 1. Preferred brand drugs listed on the Universal Preferred Drug List (PDL) do not count toward the two (2) brand limit, and
 2. Over-the-counter (OTC) drugs prescribed by a physician listed on the Division of Medicaid's OTC PDL do not count toward the two (2) brand limit.
- (3) Prescription limits are not applicable for Medicaid beneficiaries receiving institutional long-term care services.
- (4) Drug Shortages: Prescribed drugs that are not covered outpatient drugs (including drugs authorized for import by the Food and Drug Administration) are covered when medically necessary during drug shortages identified by the Food and Drug Administration.
- (5) As provided in Section 1935 (d) (1) of the Act, effective January 1, 2006, the Medicaid agency will not cover any Part D drug for full-benefit dual eligible under Part A or Part B.
- (6) As provided by Sections 1927 (d)(2) and 1935 (d)(2) of the Act, the Medicaid agency provides coverage for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses, to all Medicaid beneficiaries including full benefit dual eligible beneficiaries under the Medicare prescription Drug Benefit-Part D.
 - Select obesity drugs will be covered as listed on the state's website.
 - Agents when used to promote fertility;
 - Covered outpatient drugs which the manufacturer seeks to require as a condition of sale that associated tests or monitoring services be purchased exclusively from the manufacturer or its designee;
 - Those drugs designated less than effective by the FDA as a result of the Drug Efficacy Study Implementation (DESI) program;