




**MEDICAL CARE POLICY ADMINISTRATION  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

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Governor

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Secretary

April 30, 1999

**MARYLAND MEDICAL ASSISTANCE PROGRAM  
Maryland Pharmacy Assistance Program Transmittal No. 40**

**TO:** Physicians Hospitals  
Pharmacists Clinics

**FROM:** Martin P. Wasserman, M.D., J.D. *MPW*  
Secretary

**NOTE:** Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

**RE:** Update of List of Covered Drugs under the Pharmacy Assistance Program

**ACTION:** Proposed Regulations (Permanent Status)      **EFFECTIVE DATE:** April 5, 1999

**COMMENT PERIOD EXPIRED:** February 4, 1999      **PROGRAM CONTACT PERSON:** Frank Tetkoski (410) 767-1455

Pharmacy Transmittal No. 38, dated January 22, 1999, announced proposed amendments to Regulations .03 Conditions for Participation and .04 Covered Services under COMAR 10.45.02 Services (Maryland Pharmacy Assistance Program.)

The purpose of these amendments is to add to the list of covered drugs, thereby allowing recipients to have more access to these needed products. The Program continues to receive comments from interested parties concerning drug products that were not included in the listing of maintenance drugs. Upon review of these comments and after consultation with the Maryland Pharmacists Association, the Program has evaluated the list of maintenance drugs and is prepared to add certain products.

While anti-infective products are covered for both acute and chronic care, maintenance drugs are only covered for the treatment of chronic conditions over a long period of time. Some

example, Opiate Agonists are only covered for use in chronic pain experienced by the terminally ill. Therefore, notation of the indication for use must be made on the prescription by the prescriber or pharmacist where limited indications for use are listed in the category. Pharmacists will need this indication on the prescription before they can fill the prescription. Once noted, the prescription must be maintained on file for auditing purposes. These prescriptions can continue to be billed through the Program's point-of-sale system.

These amendments also require the pharmacy provider to inform a recipient when a prescription is not covered before it is dispensed to allow the recipient to decide if they want the prescription before they become financially responsible for it. The Program recommends that institutional pharmacies document this notification so that residents billed for drugs not covered by the Pharmacy Assistance Program cannot claim they were not informed.

These amendments have been adopted as proposed.

JMM/