Kevin Meyer Lieutenant Governor State Capitol Juneau, Alaska 99811 907.465.3520 WWW,LTGOV,ALASKA.GOV



530 West 7th Ave, Suite 1700 Anchorage, Alaska 99501 907.269.7460 LT,GOVERNOR@ALASKA.GOV

OFFICE OF THE LIEUTENANT GOVERNOR ALASKA

MEMORANDUM

TO:

Triptaa Surve

Department of Health and Social Services

FROM:

April Simpson, Office of the Lieutenant Governor

465.4081

DATE:

May 26, 2020

RE:

Filed Permanent Regulations: Department of Health and Social Services

Department of Health and Social Services Regulation re: Division of Health Care Services - Medicaid Pharmacy Preferred Drug List & Prior Authorization Medications

List (7 AAC 160.900)

Attorney General File:

2019200790

Regulation Filed:

5/26/2020

Effective Date:

6/25/2020

Print:

234, July 2020

cc with enclosures:

Harry Hale, Department of Law

Judy Herndon, LexisNexis

ORDER ADOPTING CHANGES TO REGULATIONS OF THE DEPARTMENT OF HEALTH & SOCIAL SERVICES

The attached one page of regulations, dealing with the Medicaid PharmacyPreferred Drug List & Prior Authorization Medications List, specifically, 7 AAC 160.900. Medicaid Program; General Provisions. Requirements adopted by reference, is adopted and certified to be a correct copy of the regulation changes that the Department of Health and Social Services adopts under the authority of AS 47.05.010, AS 47.05.012, AS 47.07.030, and AS 47.07.040, and after compliance with the Administrative Procedure Act (AS 44.62), specifically including notice under AS 44.62.190 and 44.62.200 and opportunity for public comment under AS 44.62.210.

This action is not expected to require an increased appropriation.

234 July 2020

Register:

Although no public comments were received, the Department of Health & Social Services paid special attention to the cost to private persons of the regulatory action being taken.

The regulation changes adopted under this order take effect on the 30th day after they have been filed by the lieutenant governor, as provided in AS 44.62.180.

Date:		
	Adam Crum	Digitally signed by Adam Crum Date: 2020,05.05 12:49:37 -08'00'
	[original or passwo	rd-protected electronic signature]
	Adam Crum, Com	nmissioner
	Department of He	ealth & Social Services
	•	
	*	
April Gunggar God FI	ING CERTIFICATION	
A Stark Soul Joh		Man ar m
I, Kevin Meyer, Lieutenant Governor for the	State of Alaska, certify that 1 on	11(N) 06
2010, at 11:554.m., I filed the attached reg		
2000, at n. 334.m., I med the attached reg	lations according to the provision	115 01 A3 44.02.040 -
44.62.120.		
	Bamio Grown	
	Lieutenant Governor Ke	VIM Meyer
Effective: Tune 25, 2000.		V

FOR DELEGATION OF THE LIEUTENANT GOVERNOR'S AUTHORITY

I, KEVIN MEYER, LIEUTENANT GOVERNOR OF THE STATE OF ALASKA, designate the following state employees to perform the Administrative Procedures Act filing functions of the Office of the Lieutenant Governor:

Josh Applebee, Chief of Staff
Kady Levale, Notary Administrator
April Simpson, Regulations and Initiatives Specialist

IN TESTIMONY WHEREOF, I have signed and affixed the Seal of the State of Alaska, in Juneau, on December 11th, 2018.

OF THE STATE OF TH

KEVIN MEYER LIEUTENANT GOVERNOR

HEALTH AND SOCIAL SERVICES

7 AAC 160.900 (d)(1) is amended to read:

- (d) The following department documents are adopted by reference:
- (1) the Alaska Medicaid Preferred Drug List, <u>as amended from time to time</u>
 [REVISED AS OF AUGUST 8, 2014];

7 AAC 160.900 (d)(2) is amended to read:

(2) the Alaska Medicaid Prior-Authorization Medications List, <u>as amended from</u>
<u>time to time</u> [DATED MAY 8, 2013];

(Eff. 2/1/2010, Register 193; am 8/25/2010, Register 195; am 12/1/2010, Register 196; am 1/1/2011, Register 196; am 1/15/2011, Register 197; am 2/9/2011, Register 197; am 3/1/2011, Register 197; am 10/1/2011, Register 199; am 12/1/2011, Register 200; am 1/26/2012, Register 201; am 3/8/2012, Register 201; am 4/1/2012, Register 201; add'1 am 4/1/2012, Register 201; am 5/11/2012, Register 202; am 10/16/2012, Register 204; am 11/3/2012, Register 204; am 12/1/2012, Register 204; am 12/1/2012, Register 204; am 12/1/2013, Register 204; am 1/16/2013, Register 205; am 7/1/2013, Register 206; add'1 am 7/1/2013, Register 206; am 11/3/2013, Register 208; am 1/1/2014, Register 208; am 2/2/2014, Register 209; am 3/19/2014, Register 209; am 3/22/2014, Register 209; am 5/18/2014, Register 210; am 2/26/2015, Register 213; am 3/15/2015, Register 213; am 7/1/2015, Register 214; am 5/1/2016, Register 218; am 6/16/2016, Register 218; am 7/22/2017, Register 223; am 11/5/2017, Register 224; am 3/1/2018, Register 225; am 10/1/2018, Register 227; am 1/1/2019, Register 228; am

AS 47.05.012

Register 234; am 5/21/2020, Register 234; am 6/25/2020

BHSS Proposed Changes to Regulations. HCS, Medicaid Pharmacy Preferred Drug List & Prior Authorization Medications List, ADOPTEL REGULATIONS DRAFT. ***Pre-Adoption DRAFT for SOA GOV Review***.2019:200790.02/25/2020; Approval info. 05/04/2020.

MEMORANDUM

State of Alaska Department of Law

To: The Honorable Kevin Meyer Lieutenant Governor

Date: May 22, 2020

File No.: 2019200790

Tel. No.: 465-3600

From: Susan R. Pollard SRP

Chief Assistant Attorney General and Regulations Attorney
Legislation and Regulations Section

Department of Health and Social Services Regulation re: 7 AAC 160.900: Division of Health Care Services - Medicaid Pharmacy Preferred Drug List & Prior Authorization Medications List

The Department of Law has reviewed the attached regulations of the Department of Health and Social Services against the statutory standards of the Administrative Procedure Act. Based upon our review, we find no legal problems. This memorandum constitutes the written statement of approval under AS 44.62.060(b) and (c) that authorizes your office to file the attached regulations. The regulations were adopted by the Department of Health and Social Services after the close of the public comment period. The regulations concern incorporating future amended versions of the Alaska Medicaid Preferred Drug List and Prior-Authorization Medications List, as provided for in AS 47.05.012 (15).

The November 26, 2019 public notice and the May 5, 2020 adoption order both state that this action is not expected to require an increased appropriation. Therefore, a fiscal note under AS 44.62.195 is not required.

SRP:siw

NOTICE OF PROPOSED CHANGES ON MEDICAID PHARMACY PREFERRED DRUG LIST & PRIOR AUTHORIZATION MEDICATIONS LIST IN THE REGULATIONS OF THE DEPARTMENT OF HEALTH & SOCIAL SERVICES

BRIEF DESCRIPTION

The Department of Health & Social Services proposes to change regulations on the Alaska Medicaid preferred drug list and prior authorization medications list.

The Department of Health & Social Services proposes to adopt regulation changes in Title 7 of the Alaska Administrative Code, dealing with the Alaska Medicaid preferred drug list and prior authorization medications list, including the following:

- 7 AAC 160.900. Medicaid Program; General Provisions. Requirements adopted by reference, are proposed to be changed as follows:
 - Remove specific version dates to allow for adoption of updated versions following each
 Pharmacy and Therapeutics Committee and Drug Utilization Review Committee meeting.

You may comment on the proposed regulation changes, including the potential costs to private persons of complying with the proposed changes, by submitting written comments to Ms. Jolene Withers at the Department of Health & Social Services, Division of Health Care Services, 4501 Business Park Blvd., Building L, Attention: Jolene Withers, Anchorage, AK 99503. Additionally, the Department of Health & Social Services will accept comments by electronic mail at jolene.withers@alaska.gov. The comments must be received not later than 5 p.m. on January 10, 2020.

You may submit written questions relevant to the proposed action to Ms. Jolene Withers by e-mail at jolene.withers@alaska.gov or at the Department of Health & Social Services, Division of Health Care Services, 4501 Business Park Blvd., Building L, Attention: Jolene Withers, Anchorage, AK 99503. The questions must be received at least 10 days before the end of the public comment period. The Department of Health & Social Services will aggregate its response to substantially similar questions and make the questions and responses available on the Alaska Online Public Notice System and agency website at http://www.dhss.alaska.gov/dhcs/Pages/default.aspx.

If you are a person with a disability who needs a special accommodation in order to participate in this process, please contact Ms. Jolene Withers at jolene.withers@alaska.gov or at (907) 334-2446 not later than December 30, 2019, to ensure that any necessary accommodations can be provided.

A copy of the proposed regulation changes is available on the Alaska Online Public Notice System and by contacting Ms. Jolene Withers at jolene.withers@alaska.gov or by telephone at (907) 334-2446.

After the public comment period ends, the Department of Health & Social Services will either adopt the proposed regulation changes or other provisions dealing with the same subject, without further notice, or decide to take no action. The language of the final regulation may be different from that of the proposed

regulation. You should comment during the time allowed if your interests could be affected. Written comments received are public records and are subject to public inspection.

Statutory authority: AS 47.05.010; AS 47.05.012; AS 47.07.030; AS 47.07.040.

Statutes being implemented, interpreted, or made specific: AS 47.05.010; AS 47.05.012; AS 47.07.030; AS 47.07.040.

Fiscal information: The proposed regulation changes are not expected to require an increased appropriation.

The Department of Health & Social Services, Division of Health Care Services, keeps a list of individuals and organizations interested in its regulations. Those on the list will automatically be sent a copy of all of the Department of Health & Social Services, Division of Health Care Services, notices of proposed regulation changes. To be added to or removed from the list, send a request to the Department of Health & Social Services, Division of Health Care Services at jolene.withers@alaska.gov, giving your name, and either your e-mail address or mailing address, as you prefer for receiving notices.

Date: November 22, 2019. /s/Adam Crum Commissioner, Department of Health & Social Services

ADDITIONAL REGULATION NOTICE INFORMATION (AS 44.62.190(d))

1. 2. 3. 4.	Adopting agency: <u>Department of</u> General subject of regulation: <u>Medications List.</u> Citation of regulation (may be go Department of Law file number,	ledicaid Pharmadrouped): 7 AAC	cy Preferred Drug List & Prior Authorization 60.900.		
5.	Reason for the proposed action: () Compliance with federal law or action (identify):				
6.	Appropriation/Allocation: N/A				
7	Estimated annual cost to comply with the proposed action to: A private person: \$0. Another state agency: \$0. A municipality: \$0.				
8.	Cost of implementation to the st	ate agency and a Initial Year FY			
	Operating Cost Capital Cost	\$ \$	\$ \$		
	1002 Federal receipts 1003 General fund match 1004 General fund 1005 General fund/	\$ \$	\$ \$ \$		
	program Other (identify)	\$	\$ \$		
9.	The name of the contact person Name: Erin Narus Title: Lead Pharmacist Address: 4501 Business Park B Telephone: (907) 334-2425 E-mail address: erin.narus@ala	lvd., Bldg. L, And			

10.	The origin of the proposed action: X Staff of state agency Federal government General public Petition for regulation change ⁷ Other (identify):					
11.	Date: 11-14-19 Prepared by: En Non					
	([signáture]					
	Name (printed): Erin Narus					
	Title (printed): Lead Pharmacist					
	Telephone: (907) 334-2425					

AFFIDAMT OF NOTICE OF PROPOSED REGULATION AND FURNISHING OF ADDITIONAL INFORMATION

I, Jolene Withers, Program Coordinator, of the Department of Health & Social Services, under penalty of perjury, certify the following:

As required by AS 44.62.190, notice of the proposed adoption of changes to 7 AAC 160.900. Medicaid Program; General Provisions. Requirements adopted by reference, has been given by being

- (1) published in a newspaper or trade publication;
- (2) furnished to every person who has filed a request for notice of proposed action with the state agency;
- (3) furnished to appropriate state officials;
- (4) furnished to interested persons;
- (5) furnished to the Department of Law, along with a copy of the proposed regulation;
- (6) furnished electronicallyto incumbent State of Alaska legislators;
- (7) posted on the Alaska Online Public Notice System as required by AS 44.62.175(a)(1) and (b) and 44.62.190(a)(1).

As required by AS 44.62.190, additional regulation notice information regarding the proposed adoption of the regulation changes described above has been furnished to interested persons and those in (2), (4) and (6) of the list above. The additional regulation notice information also has been posted on the Alaska Online Public Notice System.

There is no notary public or other official empowered to administer oaths available to notarize this document as a result of social distancing requirements implemented statewide.

I certify under penalty of perjury that the foregoing is true.

Date:	
	Jolene Withers Date: 2020.05.05 09:54:33 -08'00'
	[original or password-protected electronic signature]
	Jolene Withers Program Coordinator

State of Alaska Anchorage, AK 99503.

AFFIDAVIT OF AGENCY RECORD OF PUBLIC COMMENT

I, Jolene Withers, Program Coordinator, of the Department of Health & Social Services, under penalty of perjury, state the following:

The Department of Health & Social Services did not receive any factual or other substantive information that was submitted in writing or orally as public comment and that was relevant to the accuracy, coverage, or other aspect of the Department of Health & Social Services regulation on 7 AAC 160.900. Medicaid Program; General Provisions. Requirements adopted by reference.

There is no notary public or other official empowered to administer oaths available to notarize this document as a result of social distancing requirements implemented statewide.

I certify under penalty of perjury that the foregoing is true,

Date:		
	Jolene Withers Digitally signed by Jolene Withers Date: 2020.05.05 09:56:00 -08'00'	
		-

[original or password-protected electronic signature] Jolene Withers, Program Coordinator.

State of Alaska Anchorage, AK 99053.

ANCHORAGE DAILY NEWS AFFIDAVIT OF PUBLICATION

Account #: 270229 ST OF AK/DHSS/COMMISSIONERS 3601 C STREET STE 902, ANCHORAGE, AK 99503

Order #: W0012526

Cost: \$433.3

STATE OF ALASKA THIRD JUDICIAL DISTRICT

Lisi Misa being first duly sworn on oath deposes and says that she is a representative of the Anchorage Daily News, a daily newspaper. That said newspaper has been approved by the Third Judicial Court, Anchorage, Alaska, and it now and has been published in the English language continually as a daily newspaper in Anchorage, Alaska, and it is now and during all said time was printed in an office maintained at the aforesaid place of publication of said newspaper. That the annexed is a copy of an advertisement as it was published in regular issues (and not in supplemental form) of said newspaper on

11/26/2019

and that such newspaper was regularly distributed to its subscribers during all of said period. That the full amount of the fee charged for the foregoing publication is not in excess of the rate charged private individuals.

Signed

Subscribed and sworn to before me this 26th day of November 2019.

Notary Public in and for

The State of Alaska. Third Division

Anchorage, Alaska

MY COMMISSION EXPIRES

NOTARY

PUBLIC

Soo L. Nowling

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Date: November 22, 2019. /s/Adam Crum Commissione Department of Health & Social Services

Published: November 26, 2019