

January 9, 2023  
Web Announcement 2976

## OTC Coverage and Reimbursement Changes Effective January 9, 2023

Effective January 9, 2023, Nevada Medicaid Fee-for-Service (FFS) will implement the following coverage and reimbursement changes for over-the-counter (OTC) products. OTC drugs and supplies will be covered with the following limitations:

- OTC drugs and supplies will be subject to any applicable PA, quantity, and age limits. Approvals will be for a one-month limit.
- Any more than two prescription requests for medications within the same therapeutic class will require PA.
- Insulin will be exempt from any clinical PA requirements.

Nevada Medicaid FFS will reimburse pharmacies up to the **OTC Maximum Allowable Cost (MAC) Program** limits outlined below for OTC products within each class.

OTC Therapeutic Class	MAC
Irritants/Counterirritants	\$50
Topical local anesthetics	\$50
Antidiarrheal	\$25
All other OTC drugs/supplies (excluding insulins) *	\$500

\*Note: for *All other OTC drugs/supplies (excluding insulins)*, a cost ceiling edit of \$500 will be applied. Please refer to the specific reject response or contact the PSC for assistance.

Please refer to Medicaid Services Manual (MSM) Chapter 1200 and the [Nevada Medicaid Nevada Check Up Pharmacy Manual](#) for more information.