



State of Vermont
Agency of Human Services
280 State Drive, Center Building
Waterbury, VT 05671-1000

Global Commitment Register

August 10, 2023

GCR 23-055
FINAL

Pharmacy Over-the-Counter Drug Changes

Policy Summary:

The Vermont Medicaid program has discontinued coverage for over-the-counter melatonin, vitamin D, and antihistamine products for Medicaid members aged 21 and older. This coverage change is a result of changes to the State Fiscal Year 2024 Medicaid budget. These items are available for purchase in grocery stores and pharmacies without a prescription. This change also applies to Medicare beneficiaries enrolled in VPharm.

Coverage of these over-the-counter items will remain in place for Medicaid members under the age of 21, as medically necessary, according to Health Care Administrative Rule 4.106 Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services.

See additional information below for the Vermont Medicaid covered drugs lists and HCAR rule.

Effective Date:

August 1, 2023

Authority/Legal Basis:

[H.494](#) An act relating to making appropriation for the support of government

[Medicaid State Plan](#)

[Global Commitment to Health 1115 Waiver](#)

Populations Affected:

Medicaid adults aged 21 and older and Medicare beneficiaries enrolled in VPharm.

Fiscal Impact:

The estimated gross annualized budget impact is a savings of \$700,000.

Public Comment Period:

The public comment period ended July 26, 2023. No comments were received.

To be added to the GCR email list, send an email to AHS.MedicaidPolicy@vermont.gov.

Additional Information:

[Vermont Medicaid Drug Coverage Lists](#)

HCAR Rule 4.106 [Early and Periodic Screening, Diagnostic and Treatment \(EPSDT\) Services](#).

The draft SPA provides additional details on the proposed changes; copies of the draft SPA can be requested from local Department for Children and Families (DCF) offices or from DVHA at (802) 355-8843, or can be found on the [Agency of Human Services website](#).