TITLE XIX
State: VERMONT

## Annotated

Attachment 3.1-A Page 5a(2)

ITEM 12.	PRESCRIBED DRUGS, DENTURES, AND PROSTHETIC DEVICES; EYEGLASSES
	PRESCRIBED BY A PHYSICIAN SKILLED IN DISEASES OF THE EYE OR BY AN
	OPTOMETRIST (Continued)

## A. Prescribed Drugs (Continued)

- 9. Medicaid Program: Requirements Relating To Covered Outpatient Drugs For The Categorically Needy (Continued)
  - Some drugs when used for the symptomatic relief of coughs and colds
    - Decongestants
    - Antihistamines

Cough suppressants

Selective OTC drugs will be covered are covered as listed on the State's website.

Drugs when used for cosmetic purposes or hair growth

Drugs when used to promote fertility

These services provided are identical in the amount, duration and scope of services as provided to the medically needy for prescription drugs.

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