

**Medicaid Outpatient Drug Coverage
Excluded Drug Coverage Information By State
January 1, 2006**

NEW HAMPSHIRE

DESCRIPTION

This chart provides information on coverage of excluded drugs for this State. If additional information is required, please see the address for the State Medicaid's website.

MEDICAID ELIGIBILITY

This state provides coverage for both the Categorically Needy and the Medically Needy

EXCLUDED DRUG COVERAGE

Drugs when used for anorexia, weight loss, weight gain

All anorexia and weight gain drugs are covered.

Drugs when used to promote fertility

None

Drugs when used for cosmetic purposes or hair growth

None

Drugs when used for the symptomatic relief of cough and colds

None, unless prescriber fills out an exception form

Prescription vitamins and mineral products

All

Nonprescription drugs (Over-the-Counter)

Some – see below. For those not listed, they can be covered if prescriber fills out an exception form.

New Hampshire Non-Legend Drug List

Below is a list of non-legend drugs that are covered by New Hampshire Medicaid.

Insulins are covered for recipients. Please refer to the New Hampshire Preferred Drug List (PDL) for the insulins that are available without prior authorization.

The items in this appendix are listed alphabetically by therapeutic class, then by the generic name of the drug or drug ingredients. New Hampshire Medicaid pays only for generic versions of these non-legend drugs, singly or in combination, regardless of strength or dosage form.

Combination products that contain active ingredients that are not covered will not be covered.

Analgesics:

acetaminophen

aspirin

aspirin with buffers

ibuprofen

ketoprofen

naproxen

Antihistamines:

brompheniramine

chlorpheniramine

diphenhydramine

loratadine

Antimicrobials/Antifungals, Topical

bacitracin

clotrimazole

miconazole

neomycin

polymixin B

tolnaftate

Spermicides:

nonoxynol-9

Gastrointestinal Products:

alginic acid

aluminum carbonate

aluminum hydroxide

bisacodyl

calcium carbonate

calcium polycarbophil

casanthranol

cellulose

cimetidine

docusate calcium

docusate sodium

famotidine

glycerin suppositories

magaldrate

magnesium citrate

magnesium hydroxide

magnesium trisalicylate

meclizine

methylcellulose

nizatadine

omeprazole

psyllium

ranitidine

sennosides

Vitamins and Nutrients:

calcium carbonate

calcium carbonate/vit D

calcium citrate

calcium glubionate

calcium gluconate

calcium phosphate
ferrous fumarate
ferrous gluconate
ferrous sulfate
magnesium chloride
magnesium gluconate
magnesium oxide
niacin
niacinamide
nicotinic acid
Miscellaneous Products:
A&D ointment
ammonium lactate 12%
hydrocortisone
instant dextrose/glucose
lanolin
nicotine
permethrin
salicylic acid
sodium chloride solution
for inhalation
water for inhalation
zinc oxide

Barbiturates (drugs used before surgery to relieve anxiety or tension, to help control seizures in certain disorders or diseases, sometimes used to relieve nervousness or restlessness during the daytime)

All

Benzodiazepines (drugs used to relieve anxiety, treat insomnia (trouble in sleeping), or help relax muscles or relieve muscle spasms)

All

Smoking Cessation (except dual eligibles as Part D will cover)

All

STATE WEBSITE

http://www.dhhs.state.nh.us/DHHS/DHHS_SITE/default.htm