## Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES I	OTICE FILING		
AGENCY NAME Division of Medicaid		CONTACT PERSON Robin Bradshaw	TELEPHONE NUMBER 601-359-3984
ADDRESS 550 High Street, Suite 1000		CITY Jackson	STATE ZIP MS 39201
EMAIL DOMPolicy@medicaid.ms.gov	OCT 2 3 2023	Name or number of rule(s): Title 23: Medicaid, Part 214: Pharm 1.3: Drugs Subject to Exclusion or C	acy; Chapter 1: General Pharmacy; Rule(s)
Short explanation of rule/amendment/repeal and 23-0013 (effective July 1, 2023) which adds covera Specific legal authority authorizing the promulgation List all rules repealed, amended, or suspended by the state of the suspended by the suspende	ge for selected drugs then of rule: 42 C.F.R.§ 44	rule/amendment/repeal: This Admin nat treat obesity.	istrative Code is being filed to correspond with MS SPA
ORAL PROCEEDING:			
ten (10) or more persons. The written request sho notice of proposed rule adoption and should include	cheduled on this r eeding must be held if uld be submitted to th le the name, address, i ss, and telephone num	ule.  a written request for an oral proceedi e agency contact person at the above email address, and telephone number ber of the party or parties you represe	ng is submitted by a political subdivision, an agency or address within twenty (20) days after the filing of this of the person(s) making the request; and, if you are ar ent. At any time within the twenty-five (25) day public
ECONOMIC IMPACT STATEMENT:			
☐ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.			
TEMPORARY RULES  Original filing Renewal of effectiveness To be in effect in days Effective date: Immediately upon filing Other (specify):	Action propos  New ru Amend Repeal Adopti Proposed fina		FINAL ACTION ON BULES Date Proposed Rule Filed. 2023 Action taken:  X Adopted with no changes in text Adopted with changes Adopted by reference Withdrawn Repeal adopted as proposed Effective date:
	A CONTRACTOR OF THE PARTY OF TH	(specify):	30 days after filing 0 1 2023
Printed name and Title of person aut Signature of person authorized to file	- (7	les: <u>Drew L. Snyder, Exec</u>	cutive Director
	DO NOT	WRITE BELOW THIS LINE	
OFFICIAL FILING STAMP	CONTRACTO ACRUMICACIO	ICIAL FILING STAMP	OFFICIAL FILING STAMP
			OCT 2 3 2023  MISSISSIPPI SECRETARY OF STATE
Accepted for filing by	Accepted for	r filing by	Accepted for filing by

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.