

TITLE 1: GOVERNMENT
DIVISION 2: EXECUTIVE BRANCH

§ 20192. Establishment of the Commonwealth Medicaid Agency.

The Commonwealth Medicaid Agency shall have the following duties and responsibilities.

(a) Administer the Medicaid and Children's Health Insurance Programs of the Commonwealth of the Northern Mariana Islands under Title XIX and Title XXI of the Social Security Act.

(b) The responsibility for the planning, design, management, and operations of the program in accordance with the Medicaid and Children's Health Insurance Programs State Plan or Amendments, hereinafter referred to as "State Plan Amendment" and other plans and program activities approved by the Centers for Medicare and Medicaid Services. This includes, but is not limited to, the eligibility of beneficiaries, services provided, payment rates, provider agreements, procedures for authorized Medicaid providers, program administration, and other purposes.

(c) The responsibility for the planning, design, management, and operations of the federal-state Medicaid program is governed by the Centers for Medicare and Medicaid Services approved State Medicaid Plan and Amendments.

(d) The Commonwealth Medicaid Agency may adopt rules and regulations necessary for the, design, management, and operations of the Medicaid program consistent with the Medicaid State Plan Amendment(s) approved by the Centers for Medicare and Medicaid Services.

(e) The Commonwealth Medicaid Agency is authorized to limit eligibility, providers, services, and other activities in the event funding resources are insufficient to compensate providers for services.

(f) The Commonwealth Medicaid Agency is authorized to establish rates for any and all Mandatory and Optional Services for Medicaid and Children's Health Insurance Program as approved by Centers for Medicare and Medicaid Services as provided for and in accordance with the State Medicaid Plan Amendments.

(g) The Commonwealth Medicaid Agency is authorized to charge premiums and to establish out of pocket spending for Medicaid enrollees, and may establish a buy-in program to enable non-Medicaid persons to buy into the Medicaid program. Out of pocket spending may include copayments, coinsurance, deductibles, and other charges subject to federal limitation and/or as provided for in the Medicaid State Plan Amendments or waiver program.

(h) The Commonwealth Medicaid Agency is authorized to establish preferred drug lists or formularies and requirements for generic substitution; establish cost-sharing or copayments; participate in multi-state purchasing agreements; use a pharmacy benefit manager; require prior authorization; conduct drug utilization review; limit dispensing fees to providers and pharmacies; use other methods for managing pharmacy benefits, management, and costs; and, participate in supplemental rebates from manufacturers.

Source: PL 21-28, § 2 (May 22, 2020).

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Commission Comment: The Commission numbered this section pursuant to 1 CMC § 3806(a).