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**State of Vermont**  
**Department of Vermont Health Access**  
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*Agency of Human Services*  
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Date: 06/27/2023

**\*\*IMPORTANT OVER THE COUNTER COVERAGE CHANGES\*\***

Dear Medicaid Provider,

Effective August 1, 2023, The Department of Vermont Health Access (DVHA) is **discontinuing coverage for over-the-counter melatonin, vitamin D, and antihistamine** products. This change to coverage is a result of changes to the State Fiscal Year 2024 Medicaid budget.

This coverage change applies to Medicaid members aged 21 and older and Medicare members enrolled in VPharm. These products are available for purchase out-of-pocket without a prescription.

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

30-day notice is being provided so you can prepare for this change.

For questions regarding change, please contact the Change Healthcare Pharmacy Help Desk at 1-844-679-5362. Vermont providers can also send inquiries via email to [PBA\\_VTHelpdesk@changehealthcare.com](mailto:PBA_VTHelpdesk@changehealthcare.com).

Thank you for your continued participation in Vermont's clinical pharmacy programs.