



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 10 No. 38

May 2000

TO: Providers of Pharmaceutical Services

SUBJECT: Additional Exemptions to the MPTP

EFFECTIVE: Immediately

PURPOSE: To notify providers of pharmaceutical services of additional exemptions to the Monthly Prescription Volume Threshold Process (MPTP).

BACKGROUND: In the Medicaid Newsletter, Volume 9, No. 70, dated November 1999, providers of pharmaceutical services were notified regarding implementation of a Monthly Prescription Volume Threshold Process (MPTP) for covered pharmaceutical services. Pharmacists may reference this Newsletter for procedures related to the MPTP.

ACTION: **Effective immediately**, the following drug classes are exempt from the Monthly Prescription Volume Threshold Process (MPTP). These exemptions shall apply to Error Codes 413-416.

- Oral Contraceptives
- Ophthalmic Preparations
- Otic Preparations
- Nitroglycerin Patches
- Vaginal Preparations
- Hemorrhoidal Preparations

Prescriptions for these products shall not be added to the monthly count of prescriptions for the MPTP.

If you have any questions concerning this Newsletter, please do not hesitate to contact First Health Services at 1-877-888-2939, or the Chief, Pharmaceutical Services, DMAHS, at (609) 588-2724.

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