



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

# NEWSLETTER

Volume 10 No. 72

September 2000

**TO:** Providers of Pharmaceutical Services - **For Action**  
Health Maintenance Organizations - **For Information Only**

**SUBJECT:** **Reinstatement of Edit 577**

**EFFECTIVE:** Claims with service dates on or after October 1, 2000

**PURPOSE:** To notify providers of pharmaceutical services of the decision by the Division of Medical Assistance and Health Services (DMAHS) to reinstate Edit 577 for certain pharmacy claims for Newark, East Orange, Camden City, and Trenton Work First New Jersey/General Assistance (WFNJ/GA) beneficiaries.

**BACKGROUND:** The Medicaid Newsletter Volume 10, No. 56, dated July 2000, notified providers of pharmaceutical services of a change in prior authorization (PA) procedures for drug claims formerly subject to Edit 577. The Newsletter indicated that (1) the DMAHS Prior Authorization Unit discontinued processing PA requests for drugs found on the Edit 577 list, effective August 1, 2000; and (2) these claims would be subject to the State's Medical Exception Process (MEP).

To ensure that pharmacy claims formerly subject to Edit 577 receive a comprehensive drug utilization review, DMAHS is reinstating Edit 577 for those drugs formerly subject to this Edit.

**ACTION:** **Effective for claims with service dates on or after October 1, 2000,** Edit 577 shall be reinstated for those drugs formerly subject to this Edit. Edit 423 shall post to these claims requiring the pharmacist to request prior authorization from First Health Services. To request prior authorization, pharmacists are required to contact First Health Services at 1-877-888-2939. For your information, please find attached the list of drugs subject to Edit 577.

Please note:

- 1) Prior authorizations for Edit 577 claims shall not exceed 30 days.
- 2) The Medical Exception Process (MEP) will continue to apply to Edit 577 claims. For information concerning the MEP, please see the Medicaid/PAAD Newsletter Volume 9, No. 67, dated November 1999.

If you have any questions concerning this Newsletter, please do not hesitate to contact the Chief, Pharmaceutical Services, at (609) 588-2724.

Attachment

**RETAIN THIS NEWSLETTER NUMERICALLY BEHIND THE NEWSLETTER TAB  
(BLUE TAB MARKED "5")**