



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

NEWSLETTER

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

SUBJECT: **Additions and Deletions to the Medicaid and NJ FamilyCare Drug Rebate Programs “Manufacturers’ Labeler Code List (APPENDIX F)”**

PURPOSE: This Newsletter is intended to replace the previously received remittance advice messages.

ADDITIONS: As previously communicated via Remittance Advice (RA) messages, the Manufacturers’ Labeler Codes listed below were **added** to the New Jersey Medicaid and the NJ FamilyCare fee-for-service programs as of the indicated effective date:

<u>LABELER</u>	<u>MANUFACTURER</u>	<u>EFFECTIVE DATE</u>
55298	3M Pharmaceuticals	01/24/2002
64406	IDEC Pharmaceuticals Corporation	01/31/2002
65893	Cody Laboratories, Inc.	02/05/2002
66203	Organon Sanofi-Synthelabo LLC	01/29/2002
66530	Spear Dermatology Products, Inc.	01/24/2002
66813	Athlon Pharmaceuticals, Inc.	02/04/2002

DELETIONS: As previously communicated via Remittance Advice (RA) messages, the Manufacturers’ Labeler Codes listed below will be **deleted** from the New Jersey Medicaid and the NJ FamilyCare fee-for-service programs. Drugs manufactured by the manufacturer **will not be reimbursed** by Medicaid or NJ FamilyCare fee-for-service as of the indicated date:

<u>LABELER</u>	<u>MANUFACTURER</u>	<u>EFFECTIVE DATE</u>
00263	Integra Lifesciences Company	04/01/2002
00524	Knoll Pharmaceutical Company	04/01/2002
00662, 00663 and 59012	Pfizer Pharmaceuticals Group	04/01/2002
00761	Basic Drugs Inc.	04/01/2002

10337	Bradley Pharmaceuticals, Inc.	04/01/2002
11414 and 52891	Baker Norton Pharmaceuticals, Inc.	04/01/2002
11793	Aventis Pasteur, Inc.	04/01/2002
54162	Geritrex Corporation	04/01/2002
58174	Baker Cummins Dermatologicals, Inc.	04/01/2002
58948 and 70030	L. Perrigo Company	04/01/2002
71114	Circa Pharmaceuticals, Inc.	04/01/2002

NOTE: The Medicaid/NJ FamilyCare fee-for-service, the PAAD Drug Rebate and the Senior Gold Prescription Discount programs **are not related.** Program coverage of drug products may be different, based on drug manufacturer participation in the respective Drug Rebate programs.

If you have any questions concerning this Newsletter, please do not hesitate to contact the Chief, Pharmaceutical Services, Division of Medical Assistance and Health Services, at (609) 588-2724, or Unisys Provider Services at (800) 776-6334

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(BLUE TAB MARKED "5")**