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# Newsletter

Volume 9 No. 65

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**TO:** Fee-for-Service Providers of Pharmaceutical Services

**SUBJECT:** Form FD-70, Pharmacy Provider Certification Statement (Rev. 10/99)

**BACKGROUND:** Annually, each participating Medicaid/NJ KidCare pharmacy provider and, on behalf of the Department of Health and Senior Services (DHSS), each Pharmaceutical Assistance to the Aged and Disabled (PAAD) pharmacy provider, must submit to the Division of Medical Assistance and Health Services (DMAHS) information concerning the level of pharmacy services which are provided. This information is used by the Division to determine the appropriate dispensing fee for Medicaid, NJ KidCare and PAAD pharmacy claims submitted to the State for payment considerations, as described in N.J.A.C. 10:51-1.7 and 8:83C-1, respectively.

To qualify for optional increments to the basic dispensing fee, information relevant to 24-hour emergency service, patient consultation, and impact allowance is required. (See Form FD-70, Section I.) **IN ADDITION, EACH PHARMACY PROVIDER MUST ATTACH TO THE PHARMACY PROVIDER CERTIFICATION STATEMENT A COPY OF ITS VALID PHARMACY PERMIT.**

**ACTION:** Each pharmacy provider must complete and return the Pharmacy Provider Certification Statement and attach a copy of its valid pharmacy permit **no later than December 1, 1999.** Please forward the documents to:

**Unisys  
P. O. Box 4804  
Trenton, NJ 08650-4804  
Attn: Form FD-70**

**ALL QUESTIONS ON THE FORM FD-70 MUST BE ANSWERED OR IT WILL BE RETURNED TO YOU FOR INCLUSION OF THE MISSING INFORMATION.**

**NOTE:** Failure to complete and return the Pharmacy Provider Certification Statement will automatically place the pharmacy provider in the basic dispensing fee category without qualifying for increments. Changes cannot be effective until a properly completed Pharmacy Provider Certification Statement including a copy of its valid pharmacy permit is received by Unisys.

If you have any questions regarding this Newsletter, please do not hesitate to contact the Chief, Pharmaceutical Services, DMAHS, at (609) 588-2724, or the Unisys Pharmacy Consultant at (609) 588-6039.

If you have any questions regarding PAAD, please contact PAAD Pharmacy Consultant, DHSS, at (609) 588-7034.

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