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Pharmacy Adjustment Request Form

Published by EDS, fiscal agent for the North Carolina Medicaid Program
1-800-688-6696 or 919-851-8888

Changes in Drug Rebate Manufacturers

The following changes are being made in manufacturers with Drug Rebate agreements. They are listed by Manufacturer code, the first five digits of the NDC.

Additions

The following labelers have entered into drug rebate agreements and joined the rebate program effective on the dates indicated below:

Code	*Manufacturer*	*Date*
08290	BD Becton Dickinson	4/28/2000
60242	Neil Laboratories, Inc.	4/24/2000
64248	Women First Healthcare, Inc.	4/24/2000
65086	Santen Incorporated	4/24/2000
65473	Odyssey Pharmaceutical, Inc.	4/18/2000

Deletions

The following labelers are being terminated effective July 1, 2000:

Code	*Manufacturer*
62174	ProMetic Pharma USA, Inc.
62436	Bioglan Pharma, Inc.

The following labelers are being voluntarily terminated effective on the dates indicated below:

Code	*Manufacturer*	*Date*
54921	IPR Pharmaceuticals, Inc.	7/1/2000
57783	Bristol-Myers Squibb Company	7/1/2000
64836	Women's Capital Corporation	7/1/2000
37937	Medalist	10/1/2000

Explaining Denied Claims to the Recipient

When a pharmacy claim is denied for any reason, the pharmacist should explain to the recipient why the claim was denied rather than just telling them that Medicaid will not cover their prescription. When a recipient is instructed to call the county or State, those calls frequently end up being referred to Benny Ridout. He has to call the recipient, county, pharmacist and physician in most cases to obtain the necessary information in order to resolve the problem. Issues such as the six prescription limit and early refills should be handled at the local level by communication between the pharmacist and the physician. EDS Provider Services can be called at 919-851-8888 or 800-688-6696 for further clarification on a denial or drug coverage. If it is an eligibility problem, the recipient should be referred to Recipient Services at 1-800-662-7030.

Medicare Cost Avoidance Edit

There still seems to be some confusion concerning the billing of Medicare when only a certain diagnosis is covered for a drug. For example, Methotrexate is only covered by Medicare for the diagnosis of cancer. All other diagnoses should be billed to Medicaid and an override entered to indicate that it is not being used for cancer. Nursing homes will need to override the edit on all nebulizer drugs. Under no circumstances, should the recipient be charged for the medication.

There are also providers who continue to resubmit claims that have been denied for this edit. If the claim has denied once for the edit, it will deny for any subsequent billings, until either the override is entered to indicate special circumstances or the Medicare paid amount is entered in the other coverage field.

Pharmacists can override this edit in POS by placing a "1" (numeric) in the PA field. For ECS and paper claims, place an "O" (alpha) in the family planning field. Providers using the NCECS software must submit the override using a paper claim.

A copay should not be collected on any of the claims billed to Medicare. Once Medicare has paid, bill Medicaid for the remaining amount. The system will not deduct a copay for these crossover claims.

MAC List

The MAC list which was listed in the May 2000 Newsletter has been delayed until August 1, 2000. A revision of the list will be sent out once it is available.

New Billing Procedures for Compounds

A new procedure for billing compounds will be implemented in the September/October timeframe. The process will still require billing on paper or the use of electronic claims submission. ECS will be the preferred way to be bill since this will allow faster system processing and payment by reducing manual involvement for providers and Medicaid.

To qualify, <u>all</u> ingredients billed must be Federal Legend and have a NDC. However, all previous compound rules still apply. If the compound contains an OTC, you must bill as before, or elect to forfeit payment for OTC's and bill only the prescription items.

The new procedure will allow each drug in the compound to be billed separately with its own NDC. In addition, a compound indicator will need to be used to avoid duplicate denials and extra dispensing fee payment errors. This indicator will be the letters A-Z, <u>excluding N, X, and Y</u>, in the block formerly used for EPSDT. For example, the 1st compound for each recipient in each calendar month will be "A", the 2nd will be "B", etc. If the refill or new Rx # is an equivalent drug to "A", then it would be given the "A" indicator again.

As usual, quantities must be billed in round numbers, not decimals. If appropriate, round up to the nearest whole number. Otherwise, try combining the total quantity dispensed of the same drug for that recipient in a calendar month.

As you can see in the attached example, lines 0-2 are the drugs in the 1st compound and each is coded with an A in the EPSDT field. Lines 3-4 are the second compound and coded with a B. Lines 5-6 are the third compound, but is a refill of the second compound in the same month. The same code of B should be used. Only one dispensing fee will be paid per the same compound per month. The examples have the dispensing fee included with the 1st drug of each compound. The third compound will not pay a dispensing fee, since it is a refill within the same month.

Include pharmacy claim example

DESI List

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*********************************************************
* (MDRI)         MEDICAID DRUG REBATE INITIATIVE        *
*                                                       *
*      A LISTING OF ALL NDCS WHERE                      *
*            DESI INDICATOR VALUE IS EITHER             *
*               5 (LTE/IRS)   OR                        *
*               6 (LTE/IRS & WITHDRAWN FROM MARKET)     *
*                                                       *
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*    CURRENT DATE: 05/11/2000
*  ACCESSED FILES: MERPLABL,  MERPDRUG
    THE DESI LIST OF VALUES 5 AND/OR 6
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NDC	DESI	PRODUCT NAME	MFR NAME
00003-0486-60	6	MYCOLOG	ER SQUIBB AND SONS INC.
00003-0589-65	6	MYCOLOG	ER SQUIBB AND SONS INC.
00003-0779-50	6	MYSTECLIN	ER SQUIBB AND SONS INC.
00008-0261-02	5	MEPERGAN FORTIS CAP NDA-1	WYETH LABORATORIES
00015-5600-60	5	NALDECON	MEAD JOHNSON AND COMPANY
00015-5600-80	5	NALDECON	MEAD JOHNSON AND COMPANY
00015-5601-60	5	NALDECON	MEAD JOHNSON AND COMPANY
00015-5615-30	5	NALDECON	MEAD JOHNSON AND COMPANY
00015-5616-60	5	NALDECON	MEAD JOHNSON AND COMPANY
00015-5688-10	5	NALDECON	MEAD JOHNSON AND COMPANY
00024-1509-06	5	PEDIACOF	SANOFI PHARMACEUTICALS, I
00026-5005-12	5	HYDROCORTISONE ACETATE SU	BAYER CORPORATION PHARMAC
00029-4082-30	5	TIGAN(TRIMETHOBENZAMIDE)C	SMITHKLINE BEECHAM
00029-4083-30	5	TIGAN(TRIMETHOBENZAMIDE)C	SMITHKLINE BEECHAM
00029-4083-32	5	TIGAN(TRIMETHOBENZAMIDE)C	SMITHKLINE BEECHAM
00029-4084-38	5	TIGAN(TRIMETHOBENZAMIDE)S	SMITHKLINE BEECHAM
00029-4084-39	5	TIGAN(TRIMETHOBENZAMIDE)S	SMITHKLINE BEECHAM
00029-4088-38	5	TIGAN(TRIMETHOBENZAMIDE)P	SMITHKLINE BEECHAM
00031-4207-63	5	DONNATAL CAPSULES	A. H. ROBINS COMPANY
00031-4221-12	5	DONNATAL ELIXIR	A. H. ROBINS COMPANY
00031-4221-13	5	DONNATAL ELIXIR	A. H. ROBINS COMPANY
00031-4221-25	5	DONNATAL ELIXIR	A. H. ROBINS COMPANY
00031-4221-29	5	DONNATAL ELIXIR	A. H. ROBINS COMPANY
00031-4235-63	5	DONNATAL EXTENTABS	A. H. ROBINS COMPANY
00031-4235-70	5	DONNATAL EXTENTABS	A. H. ROBINS COMPANY
00031-4250-63	5	DONNATAL TABLETS	A. H. ROBINS COMPANY
00031-4250-64	5	DONNATAL TABLETS	A. H. ROBINS COMPANY
00031-4250-74	5	DONNATAL TABLETS	A. H. ROBINS COMPANY
00037-0046-60	5	BUTIBEL	CARTER-WALLACE, INC.
00037-0301-92	5	BARBIDONNA	CARTER-WALLACE, INC.
00037-0561-92	5	LUFYLLIN EPG	CARTER-WALLACE, INC.
00038-0220-10	5	KINESED TABLETS 100	STUART PHARMACEUTICALS
00043-0521-16	5	TRIAMINIC EXP DH	NOVARTIS CONSUMER HEALTH,
00044-1007-16	5	RU-TUSS WITH HYDROCODONE	KNOLL LABORATORIES
00044-4520-02	5	QUADRINAL TABS	KNOLL LABORATORIES
00049-2540-66	6	MARAX (ATARAX EPHEDRINE S	PFIZER-ROERIG
00049-2540-73	6	MARAX (ATARAX EPHEDRINE S	PFIZER-ROERIG
00049-2550-93	6	MARAX (ATARAX EPHEDRINE S	PFIZER-ROERIG
00071-1726-07	5	ANUSOL-HC SUPPOSITORIES	WARNER-LAMBERT COMPANY -
00071-1726-13	5	ANUSOL-HC SUPPOSITORIES	WARNER-LAMBERT COMPANY -
00074-6883-04	5	QUELIDRINE SYRUP NON-NARC	ABBOTT LABORATORIES
00078-0031-05	5	BELLERGAL S	NOVARTIS PHARMACEUTICALS
00085-0268-05	5	POLARAMINE EXPECTORANT 2M	SCHERING CORPORATION
00086-0120-05	5	ISOMETHEPTENE 65MG, DICHL	CARNRICK LABORATORIES INC
00086-0120-10	5	ISOMETHEPTENE 65MG, DICHL	CARNRICK LABORATORIES INC
00086-0120-25	5	ISOMETHEPTENE 65MG	CARNRICK LABORATORIES INC
00087-0518-01	5	QUIBRON PLUS	BRISTOL-MYERS SQUIBB COMP
00087-0543-01	5	VASODILAN	BRISTOL-MYERS SQUIBB COMP
00087-0544-01	5	VASODILAN	BRISTOL-MYERS SQUIBB COMP
00091-0202-01	5	CHARDONNA-2 TABLETS RX	SCHWARZ PHARMA, INC.
00091-3534-01	5	LEVSIN PHENOBARBITAL TABL	SCHWARZ PHARMA, INC.
00091-4536-15	5	LEVSIN PHENOBARBITAL DROP	SCHWARZ PHARMA, INC.
00115-7011-01	5	AMINOBENZOATE POTASSIUM	GLOBAL PHARMACEUTICAL COR
00115-7011-03	5	AMINOBENZOATE POTASSIUM	GLOBAL PHARMACEUTICAL COR
00115-7012-05	5	AMINOBENZOATE POTASSIUM	GLOBAL PHARMACEUTICAL COR
00115-7030-11	5	AMINOBENZOATE POTASSIUM	GLOBAL PHARMACEUTICAL COR
00143-1140-10	5	BELLADONNA, ALKALOIDS W/P	WEST-WARD PHARMACEUTICAL
00143-1140-51	5	BELLADONNA, ALKALOIDS W/P	WEST-WARD PHARMACEUTICAL

00143-1279-01	5	WEST DECON S.R. TABLETS	WEST-WARD PHARMACEUTICAL
00143-1279-10	5	WEST DECON S.R. TABLETS	WEST-WARD PHARMACEUTICAL
00144-0654-13	5	ANUZONE-HC SUPPOSITORIES	SUPERIOR PHARMACEUTICAL C
00144-0654-24	5	ANUZONE-HC SUPPOSITORIES	SUPERIOR PHARMACEUTICAL C
00149-0412-01	5	ENTEX	PROCTER & GAMBLE PHARMACE
00149-0412-05	5	ENTEX	PROCTER & GAMBLE PHARMACE
00149-0414-16	5	ENTEX LIQUID	PROCTER & GAMBLE PHARMACE
00182-0129-10	5	ANTISPASMODIC	GOLDLINE LABORATORIES INC
00182-0157-40	5	TRI-PHEN-PYRL HC LIQUID	GOLDLINE LABORATORIES INC
00182-0349-40	5	TERPIN HYDRATE AND CODEIN	GOLDLINE LABORATORIES INC
00182-0515-01	6	NYLIDRIN HYDROCHLORIDE	GOLDLINE LABORATORIES INC
00182-0686-40	5	ANTISPASMODIC ELIXIR	GOLDLINE LABORATORIES INC
00182-0686-41	5	ANTISPASMODIC	GOLDLINE LABORATORIES INC
00182-0874-48	5	VIOFORM-HC OINT	GOLDLINE LABORATORIES INC
00182-0875-34	5	HYDROCORTISONE 1% W/ IODO	GOLDLINE LABORATORIES INC
00182-0875-48	5	HYDROCORTISONE 1% W/ IODO	GOLDLINE LABORATORIES INC
00182-1002-01	5	TEDRIGEN TABLETS	GOLDLINE LABORATORIES INC
00182-1002-10	5	TEDRIGEN TABLETS	GOLDLINE LABORATORIES INC
00182-1055-01	5	ISOXSUPRINE HCL TABLETS 1	GOLDLINE LABORATORIES INC
00182-1055-10	5	ISOXSUPRINE HCL TABLETS 1	GOLDLINE LABORATORIES INC
00182-1056-01	5	ISOXSUPRINE HCL TABLETS 2	GOLDLINE LABORATORIES INC
00182-1056-10	5	ISOXSUPRINE HCL TABLETS 2	GOLDLINE LABORATORIES INC
00182-1094-01	5	TRI-PHEN-MINE SR TABLETS	GOLDLINE LABORATORIES INC
00182-1094-10	5	TRI-PHEN-MINE SR TABLETS	GOLDLINE LABORATORIES INC
00182-1234-01	5	ISOMETHEPTINE MUCATE DICH	GOLDLINE LABORATORIES INC
00182-1317-01	5	DECONHIST LA TABLETS	GOLDLINE LABORATORIES INC
00182-1344-01	6	THEOPHYLLINE, HYDROXYZINE	GOLDLINE LABORATORIES INC
00182-1344-05	6	THEOPHYLLINE, HYDROXYZINE	GOLDLINE LABORATORIES INC
00182-1396-01	5	TRIMETHOBENZAMIDE CAPSULE	GOLDLINE LABORATORIES INC
00182-1427-19	5	T-GEN	GOLDLINE LABORATORIES INC
00182-1427-23	5	T-GEN	GOLDLINE LABORATORIES INC
00182-1428-23	5	T-GEN	GOLDLINE LABORATORIES INC
00182-1452-01	5	TUSS-GENADE MODIFIED	GOLDLINE LABORATORIES INC
00182-1488-01	5	NEW-DECONGEST	GOLDLINE LABORATORIES INC
00182-1488-10	5	NEW-DECONGEST	GOLDLINE LABORATORIES INC
00182-1495-40	5	NEW-DECONGEST PEDIATRIC S	GOLDLINE LABORATORIES INC
00182-1496-40	5	NEW DECONGEST	GOLDLINE LABORATORIES INC
00182-1540-01	6	CYCLANDELATE	GOLDLINE LABORATORIES INC
00182-1540-10	6	CYCLANDELATE	GOLDLINE LABORATORIES INC
00182-1541-01	6	CYCLANDELATE	GOLDLINE LABORATORIES INC
00182-1847-01	5	BEL-PHEN-ERGOT S	GOLDLINE LABORATORIES INC
00182-1856-01	5	CHLORDIAZEPOXIDE AND CLID	GOLDLINE LABORATORIES INC
00182-1856-05	5	CHLORDIAZEPOXIDE AND CLID	GOLDLINE LABORATORIES INC
00182-1856-10	5	CHLORDIAZEPOXIDE AND CLID	GOLDLINE LABORATORIES INC
00182-1990-01	5	BEL-PHEN-ERGOT	GOLDLINE LABORATORIES INC
00182-1998-01	5	PHENYLFENESIN CAPSULES	GOLDLINE LABORATORIES INC
00182-2611-01	5	BELLADONNA ALKALOIDS/PHEN	GOLDLINE LABORATORIES INC
00182-6091-66	5	NEW DECONGEST PEDIATRIC D	GOLDLINE LABORATORIES INC
00182-6100-40	5	PHENYLFENESIN LIQUID	GOLDLINE LABORATORIES INC
00182-6122-40	5	TRI-PHEN-MINE PEDIATRIC S	GOLDLINE LABORATORIES INC
00182-6123-66	5	TRI-PHEN-MINE PEDIATRIC D	GOLDLINE LABORATORIES INC
00182-7038-11	5	HYDROCORTISONE ACETATE HE	GOLDLINE LABORATORIES INC
00182-7038-16	5	HYDROCORTISONE ACETATE HE	GOLDLINE LABORATORIES INC
00182-7049-64	6	NAPHAZOLINE HCL/PHENIRAMI	GOLDLINE LABORATORIES INC
00182-7060-64	6	NAPHAZOLINE HCL 0.05% AND	GOLDLINE LABORATORIES INC
00185-0345-01	5	ORDRINE AT (PPA/CARA)	EON LABS MANUFACTURING, I
00185-0345-05	5	ORDRINE AT (PPA/CARA)	EON LABS MANUFACTURING, I
00185-0345-53	5	ORDRINE AT (PPA/CARA)	EON LABS MANUFACTURING, I
00185-0530-01	5	ISOXSUPRINE 10MG CT	EON LABS MANUFACTURING, I
00185-0530-10	5	ISOXSUPRINE 10MG CT	EON LABS MANUFACTURING, I
00185-0531-01	5	ISOXSUPRINE 20MG CT	EON LABS MANUFACTURING, I
00185-0531-10	5	ISOXSUPRINE 20MG CT	EON LABS MANUFACTURING, I
00185-0617-01	5	CDP 5MG/CLIDINIUM 2.5MG W	EON LABS MANUFACTURING, I
00185-0617-05	5	CDP 5MG/CLIDINIUM 2.5MG W	EON LABS MANUFACTURING, I
00185-0617-10	5	CDP 5MG/CLIDINIUM 2.5MG W	EON LABS MANUFACTURING, I
00185-0968-01	5	CDP 5MG/CLIDINIUM 2.5MG G	EON LABS MANUFACTURING, I
00185-0968-05	5	CDP 5MG/CLIDINIUM 2.5MG G	EON LABS MANUFACTURING, I
00185-0968-10	5	CDP 5MG/CLIDINIUM 2.5MG G	EON LABS MANUFACTURING, I
00185-0968-30	5	CDP 5MG/CLIDINIUM 2.5MG G	EON LABS MANUFACTURING, I
00245-0111-12	5	HEMRIL-HC	UPSHER-SMITH LABORATORIES
00254-1551-45	5	NALDELATE PEDIATRIC DROPS	VINTAGE PHARMACEUTICALS,
00254-2320-28	5	BELLADONNA ALKA/PB TAB 10	VINTAGE PHARMACEUTICALS,
00254-2320-38	5	BELLADONNA ALKA/PB TAB 10	VINTAGE PHARMACEUTICALS,
00254-2732-28	5	CHLORDIAZEPOXIDE/CLID	VINTAGE PHARMACEUTICALS,
00254-2732-35	5	CHLORDIAZEPOXIDE/CLIDINIU	VINTAGE PHARMACEUTICALS,
00254-2732-38	5	CHLORDIAZEPOXIDE/CLID	VINTAGE PHARMACEUTICALS,
00254-4206-28	5	MEPROZINE 50/25MG	VINTAGE PHARMACEUTICALS,
00254-4270-28	5	MIGQUIN	VINTAGE PHARMACEUTICALS,

00254-4270-33	5	MIGQUIN	VINTAGE PHARMACEUTICALS,
00254-5325-28	5	Q-TUSS TAB 100	VINTAGE PHARMACEUTICALS,
00254-5325-35	5	Q-TUSS TAB 500	VINTAGE PHARMACEUTICALS,
00254-8400-06	5	HEMORRHOIDAL HC	VINTAGE PHARMACEUTICALS,
00254-8400-15	5	HEMORRHOIDAL HC	VINTAGE PHARMACEUTICALS,
00254-9035-58	5	BELADONNA ALKA/PB ELIX 16	VINTAGE PHARMACEUTICALS,
00254-9325-58	5	NALDELATE PED SYR 16OZ	VINTAGE PHARMACEUTICALS,
00254-9326-58	5	NALDELATE SYR 16OZ	VINTAGE PHARMACEUTICALS,
00254-9400-58	5	Q-TUSS HC LIQ 16OZ	VINTAGE PHARMACEUTICALS,
00254-9414-58	5	QUINTEX LIQUID LIQ 16OZ	VINTAGE PHARMACEUTICALS,
00277-0106-30	5	DONATUSSIN DROPS	LASER INC
00277-0139-41	5	DONATUSSIN SYRUP	LASER INC
00302-0460-01	5	BROM-TAP TD TABLETS	GENETCO, INC
00302-0460-10	5	BROM-TAP TD TABLETS	GENETCO, INC
00302-1280-01	6	CYCLANDELATE CAPSULES 200	GENETCO, INC
00302-1282-01	6	CYCLANDELATE CAPSULES 400	GENETCO, INC
00302-2620-01	5	GENCAP CAP CAPSULES	GENETCO, INC
00302-3671-01	5	ISOXSUPRINE TABLETS 20MG	GENETCO, INC
00302-3910-01	6	MARTABS TABLETS	GENETCO, INC
00302-4320-01	5	NALDORIN TABLETS	GENETCO, INC
00302-4550-01	6	NYLIDRIN TABLETS 6MG	GENETCO, INC
00302-6530-10	5	BELLADONNA ALK W/PHENOBAR	GENETCO, INC
00314-0001-16	5	BRONKOTUSS	HYREX PHARMACEUTICALS
00314-0001-28	5	BRONKOTUSS	HYREX PHARMACEUTICALS
00364-0559-01	5	CHLORDIAZEPOXIDE/CLI	SCHEIN PHARMACEUTICAL INC
00364-0559-05	5	CHLORDIAZEPOXIDE/CLI	SCHEIN PHARMACEUTICAL INC
00364-2342-01	5	MIDCHLOR CAPS	SCHEIN PHARMACEUTICAL INC
00364-2423-12	5	HEMORRHOIDAL HC SUPPOSITO	SCHEIN PHARMACEUTICAL INC
00364-2423-24	5	HEMORRHOIDAL HC SUPPOSITO	SCHEIN PHARMACEUTICAL INC
00364-7347-10	5	TRIMETHOBENZAMIDE SUPPOS	SCHEIN PHARMACEUTICAL INC
00372-0004-16	5	S-T FORTE SYRUP	SCOT-TUSSIN PHARMACAL CO.
00372-0005-16	5	S-T FORTE SUGAR FREE	SCOT-TUSSIN PHARMACAL CO.
00372-0017-16	5	TUSSIREX SYRUP WITH CODEI	SCOT-TUSSIN PHARMACAL CO.
00372-0018-16	5	TUSSIREX WITH CODEINE SUG	SCOT-TUSSIN PHARMACAL CO.
00396-5030-00	5	TRIMO-SAN VAGINAL JELLY	MILEX PRODUCTS INC.
00398-0006-80	6	CORTIN 1% CREAM	C&M PHARMACAL, INC.
00405-0045-01	5	CHLORDIAZEPOXIDE W/CLIDIN	ALIGEN INDEPENDENT LABORA
00405-0045-02	5	CHLORDIAZEPOXIDE W/CLIDIN	ALIGEN INDEPENDENT LABORA
00405-2350-16	5	BELLADONNA ALK W/PB ELIXI	ALIGEN INDEPENDENT LABORA
00405-4039-01	5	ALIDRIN	ALIGEN INDEPENDENT LABORA
00405-4284-01	6	CYCLANDELATE 200MG	ALIGEN INDEPENDENT LABORA
00405-4285-01	6	CYCLANDELATE 400MG	ALIGEN INDEPENDENT LABORA
00405-4575-01	5	ISOXSUPRINE HCL 10MG	ALIGEN INDEPENDENT LABORA
00405-4576-01	5	ISOXSUPRINE HCL 20MG	ALIGEN INDEPENDENT LABORA
00405-4794-01	5	PHENOBARB/ERGO TART/BELLA	ALIGEN INDEPENDENT LABORA
00414-0005-05	5	HYDROCORTISONE 0.5% & CLI	SUPPOSITORIA LABORATORIES
00414-0006-05	5	HYDROCORTISONE 1% & CLIOQ	SUPPOSITORIA LABORATORIES
00414-0723-90	5	TRIMETHO SUPP 100MG CHILD	SUPPOSITORIA LABORATORIES
00414-0725-31	5	HC ACETATE SUPP 25 MG	SUPPOSITORIA LABORATORIES
00463-3017-01	5	DECONGEST T.D.	C O TRUXTON INC
00472-0650-16	5	ENTAC LIQUID	ALPHARMA, USPD
00472-0801-16	5	NALDELATE SYRUP	ALPHARMA, USPD
00472-0809-31	5	NALDELATE PEDIATRIC DROPS	ALPHARMA, USPD
00472-1007-04	5	NALDELATE PEDIATRIC SYRUP	ALPHARMA, USPD
00472-1007-16	5	NALDELATE PEDIATRIC SYRUP	ALPHARMA, USPD
00478-5477-10	5	REXATAL	REXAR PHARMACAL CORP.
00478-5477-50	5	REXATAL	REXAR PHARMACAL CORP.
00516-0051-10	5	POTABA 0.5 GM/AMINOBENZOA	GLENWOOD
00516-0051-25	5	POTABA 0.5 GM/AMINOBENZOA	GLENWOOD
00516-0052-50	5	POTABA 2.0 GM/AMINOBENZOA	GLENWOOD
00516-0054-01	5	POTABA 0.5 GM/AMINOBENZOA	GLENWOOD
00516-0054-10	5	POTABA 0.5 GM/AMINOBENZOA	GLENWOOD
00516-0424-01	5	ISOCOM-ISOMETHEPTENE MUCA	GLENWOOD
00516-0424-05	5	ISOCOM-ISOMETHEPTENE MUCA	GLENWOOD
00516-0424-25	5	ISOCOM-ISOMETHEPTENE MUCA	GLENWOOD
00536-0211-19	5	TRIMETHOBENZAMIDE HCL 100	RUGBY LABORATORIES INC
00536-0221-19	5	TRIMETHOBENZAMIDE HCL 200	RUGBY LABORATORIES INC
00536-1001-99	5	HYDROCORTISONE 1 PCT W/IO	RUGBY LABORATORIES INC
00536-1406-12	5	HEMORRHOIDAL HC SUPPOSITO	RUGBY LABORATORIES INC
00536-3397-01	5	BROMOPHEN TD TABS DARK BL	RUGBY LABORATORIES INC
00536-3397-10	5	BROMOPHEN TD TABS DARK BL	RUGBY LABORATORIES INC
00536-3906-01	5	HYDROPHED TABS WHITE	RUGBY LABORATORIES INC
00536-3920-01	5	HYOSOPHEN TABS	RUGBY LABORATORIES INC
00536-3920-10	5	HYOSOPHEN TABS	RUGBY LABORATORIES INC
00536-3932-01	5	ISO-ACETAZONE CAPS	RUGBY LABORATORIES INC
00536-3932-05	5	ISO-ACETAZONE CAPS	RUGBY LABORATORIES INC
00536-4234-01	5	PHENERBEL-S TABS	RUGBY LABORATORIES INC
00536-4410-01	5	PHENCHLOR S H A TABS	RUGBY LABORATORIES INC

00536-4410-05	5	PHENCHLOR S H A TABS	RUGBY LABORATORIES INC
00536-4459-01	5	GUIATEX CAPSULES	RUGBY LABORATORIES INC
00536-4727-01	5	TRIMETHOBENZAMIDE HCL 250	RUGBY LABORATORIES INC
00556-0053-04	5	HYOSCYAMINE COMPOUND ELIX	H R CENCI LABORATORIES
00556-0053-16	5	HYOSCYAMINE COMPOUND ELIX	H R CENCI LABORATORIES
00556-0053-28	5	HYOSCYAMINE COMPOUND ELIX	H R CENCI LABORATORIES
00574-7090-12	5	HYDROCORTISONE ACETATE SU	PADDOCK LABORATORIES, INC
00574-7090-24	5	HYDROCORTISONE ACETATE SU	PADDOCK LABORATORIES, INC
00574-7090-50	5	HYDROCORTISONE ACETATE SU	PADDOCK LABORATORIES, INC
00574-7220-10	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00574-7220-12	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00574-7220-50	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00574-7222-10	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00574-7222-12	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00574-7222-50	5	TRIMETHOBENZAMIDE SUPPOSI	PADDOCK LABORATORIES, INC
00603-1030-58	5	BELLADONNA ALKA/PB ELIX	QUALITEST PRODUCTS, INC.
00603-1464-58	5	NALDELATE SYR	QUALITEST PRODUCTS, INC.
00603-1465-45	5	NALDELATE PEDIATRIC DROP	QUALITEST PRODUCTS, INC.
00603-1466-58	5	NALDELATE PEDIATRIC SYR	QUALITEST PRODUCTS, INC.
00603-1596-58	5	Q-TUSS HC LIQ C3 LIQUID	QUALITEST PRODUCTS, INC.
00603-1608-58	5	Q V TUSSIN SYRUP	QUALITEST PRODUCTS, INC.
00603-1634-58	5	QUINTEX LIQUID	QUALITEST PRODUCTS, INC.
00603-2315-21	5	ANTI-TUSSIVE CAP	QUALITEST PRODUCTS, INC.
00603-2418-21	5	BELLADONNA ALK/PB TAB 100	QUALITEST PRODUCTS, INC.
00603-2418-32	5	BELLADONNA ALK/PB TABLET	QUALITEST PRODUCTS, INC.
00603-2424-21	5	BELLASPAS	QUALITEST PRODUCTS, INC.
00603-2503-21	5	BROMATAPP TAB	QUALITEST PRODUCTS, INC.
00603-2503-32	5	BROMATAPP TAB	QUALITEST PRODUCTS, INC.
00603-2714-21	5	CHLORDIAZEPOXIDE/CLIDINIU	QUALITEST PRODUCTS, INC.
00603-2714-32	5	CHLORDIAZEPOXIDE/CLIDINIU	QUALITEST PRODUCTS, INC.
00603-3075-21	6	CYCLANDELATE 200MG CAP	QUALITEST PRODUCTS, INC.
00603-3076-21	6	CYCLANDELATE 400MG CAP	QUALITEST PRODUCTS, INC.
00603-3120-21	5	DECONGESTANT TAB	QUALITEST PRODUCTS, INC.
00603-3120-32	5	DECONGESTANT TABLETS	QUALITEST PRODUCTS, INC.
00603-3948-21	5	HYDROXY COMPOUND TAB	QUALITEST PRODUCTS, INC.
00603-4146-21	5	ISOXSUPRINE TAB	QUALITEST PRODUCTS, INC.
00603-4146-32	5	ISOXSUPRINE 10MG TAB	QUALITEST PRODUCTS, INC.
00603-4147-21	5	ISOXSUPRINE TAB	QUALITEST PRODUCTS, INC.
00603-4147-32	5	ISOXSUPRINE TAB	QUALITEST PRODUCTS, INC.
00603-4424-21	5	MEPERIDINE/PROMETHAZINE 5	QUALITEST PRODUCTS, INC.
00603-4664-21	5	MIGQUIN CAP	QUALITEST PRODUCTS, INC.
00603-4664-24	5	MIGQUIN CAPSULES	QUALITEST PRODUCTS, INC.
00603-4806-21	6	NYLIDRIN 6MG TAB	QUALITEST PRODUCTS, INC.
00603-4807-21	6	NYLIDRIN 12MG TAB	QUALITEST PRODUCTS, INC.
00603-5549-21	5	Q TUSS TABLET	QUALITEST PRODUCTS, INC.
00603-5549-28	5	Q-TUSS TAB 500	QUALITEST PRODUCTS, INC.
00603-5665-21	5	QUINTEX CAPSULE	QUALITEST PRODUCTS, INC.
00603-6256-21	5	TRIMETHOBENZAMIDE CAP	QUALITEST PRODUCTS, INC.
00603-7179-41	6	NAPHAZOLINE-A SOLN	QUALITEST PRODUCTS, INC.
00603-7800-78	5	IODOCHLORHYDROXYQUIN/H .5	QUALITEST PRODUCTS, INC.
00603-7801-76	5	IODOCHLORHYDROXYQUIN /H	QUALITEST PRODUCTS, INC.
00603-8127-11	5	HEMORRHOIDAL HC SUPP	QUALITEST PRODUCTS, INC.
00603-8127-18	5	HEMORRHOIDAL HC	QUALITEST PRODUCTS, INC.
00603-8150-10	5	TRIMETHOBEN 100MG SUPP	QUALITEST PRODUCTS, INC.
00603-8151-10	5	TRIMETHOBEN 200MG SUPP	QUALITEST PRODUCTS, INC.
00677-0074-10	5	HAPONAL	UNITED RESEARCH LABORATOR
00677-0472-01	5	UNI DECON	UNITED RESEARCH LABORATOR
00677-0472-10	5	UNI DECON	UNITED RESEARCH LABORATOR
00677-0776-33	5	NALDELATE PEDIATRIC	UNITED RESEARCH LABORATOR
00677-1125-01	5	ISOMETHEPTENE MUCATE W/ D	UNITED RESEARCH LABORATOR
00677-1171-01	5	BEL-TABS	UNITED RESEARCH LABORATOR
00677-1247-01	5	CHLORDIAZEPOXIDE 5MG WITH	UNITED RESEARCH LABORATOR
00677-1247-10	5	CHLORDIAZEPOXIDE 5MG WITH	UNITED RESEARCH LABORATOR
00677-1377-12	5	HYDROCORTISONE ACETATE 25	UNITED RESEARCH LABORATOR
00677-1383-01	5	TRIMETHOBENZAMIDE HCL 250	UNITED RESEARCH LABORATOR
00677-1418-01	5	PRO TUSS	UNITED RESEARCH LABORATOR
00677-1566-33	5	PHENOBARBITAL W/BELLADONN	UNITED RESEARCH LABORATOR
00677-1739-01	5	ISOMETHEP/SICHLOR/ APPAP	UNITED RESEARCH LABORATOR
00677-1740-01	5	PRO TUSS	UNITED RESEARCH LABORATOR
00713-0107-09	5	TRIMETHOBENZAMIDE HCL 100	G&W LABORATORIES INC
00713-0108-09	5	TRIMETHOBENZAMIDE HCL 200	G&W LABORATORIES INC
00713-0108-50	5	TRIMETHOBENZAMIDE HCL 200	G&W LABORATORIES INC
00713-0503-01	5	HYDROCORTISONE ACETATE 25	G&W LABORATORIES INC
00713-0503-12	5	HYDROCORTISONE ACETATE 25	G&W LABORATORIES INC
00713-0503-24	5	HYDROCORTISONE ACETATE 25	G&W LABORATORIES INC
00781-1153-01	5	TAMINE S.R. TABS	GENEVA PHARMACEUTICALS, I
00781-1153-10	5	TAMINE S.R. TABS	GENEVA PHARMACEUTICALS, I
00781-1406-01	6	NYLIDRIN 6MG	GENEVA PHARMACEUTICALS, I

00781-1576-01	5	DECONGESTANT S.R. TABS	GENEVA PHARMACEUTICALS, I
00781-1701-01	5	PHENOBARB ERGOTA & BELLA	GENEVA PHARMACEUTICALS, I
00781-1840-01	5	ISOXSUPRINE 10MG	GENEVA PHARMACEUTICALS, I
00781-1840-13	5	ISOXSUPRINE 10MG	GENEVA PHARMACEUTICALS, I
00781-1842-01	5	ISOXSUPRINE 20MG	GENEVA PHARMACEUTICALS, I
00781-1842-10	5	ISOXSUPRINE 20MG	GENEVA PHARMACEUTICALS, I
00781-1842-13	5	ISOXSUPRINE 20MG	GENEVA PHARMACEUTICALS, I
00781-1988-01	6	T.E.H. TABLETS	GENEVA PHARMACEUTICALS, I
00781-2847-01	5	RESCAPS-D S.R. CAPS	GENEVA PHARMACEUTICALS, I
00781-7007-22	5	CORQUE CREAM 1	GENEVA PHARMACEUTICALS, I
00781-7700-32	5	HEMORRHOIDAL HC 25MG SUP	GENEVA PHARMACEUTICALS, I
00781-7700-40	5	HEMORRHOIDAL HC 25MG SUP	GENEVA PHARMACEUTICALS, I
00839-1106-01	5	BROMATAPP TABS/OTC	MOORE MEDICAL CORP.
00839-1217-06	6	CYCLANDELATE 200MG CAPS	MOORE MEDICAL CORP.
00839-1217-16	6	CYCLANDELATE 200MG CAPS	MOORE MEDICAL CORP.
00839-1382-06	5	ISOXSUPRINE HCL 10MG TABS	MOORE MEDICAL CORP.
00839-1382-16	5	ISOXSUPRINE HCL 10MG TABS	MOORE MEDICAL CORP.
00839-1430-06	5	DECONGESTABS CT	MOORE MEDICAL CORP.
00839-1430-16	5	DECONGESTABS CT	MOORE MEDICAL CORP.
00839-5018-69	5	ANTISPASMODIC ELIX	MOORE MEDICAL CORP.
00839-5055-04	5	ANTISPASMODIC TABS	MOORE MEDICAL CORP.
00839-5055-06	5	ANTISPASMODIC TABS	MOORE MEDICAL CORP.
00839-5055-16	5	SPASMOLIN	MOORE MEDICAL CORP.
00839-5055-19	5	ANTISPASMODIC TABS	MOORE MEDICAL CORP.
00839-5055-20	5	SPASMOLIN	MOORE MEDICAL CORP.
00839-5111-06	5	THEOPHENYLLIN TABS	MOORE MEDICAL CORP.
00839-5111-16	5	THEOPHENYLLIN TABS	MOORE MEDICAL CORP.
00839-5508-45	5	HYDRO 1% IODO 3% CRM	MOORE MEDICAL CORP.
00839-5509-45	5	HYDRO 1% IODO 3% OINT	MOORE MEDICAL CORP.
00839-5513-49	5	HYDRO 1/2% IODO 3% CRM	MOORE MEDICAL CORP.
00839-6027-06	6	CYCLANDELATE 400MG CAPS	MOORE MEDICAL CORP.
00839-6027-16	6	CYCLANDELATE 400MG CAPS	MOORE MEDICAL CORP.
00839-6055-69	5	NALDELATE SYRUP	MOORE MEDICAL CORP.
00839-6055-70	5	NALDELATE SYR	MOORE MEDICAL CORP.
00839-6182-06	5	ISOXSUPRINE HCL 20MG TABS	MOORE MEDICAL CORP.
00839-6182-16	5	ISOXSUPRINE HCL 20MG TABS	MOORE MEDICAL CORP.
00839-6211-06	5	CHLORDIAZEPOXIDE W/CLID B	MOORE MEDICAL CORP.
00839-6211-16	5	CHLORDIAZEPOXIDE W/CLID B	MOORE MEDICAL CORP.
00839-6216-06	5	HYDROXYZINE COMPOUND TABS	MOORE MEDICAL CORP.
00839-6216-16	5	HYDROXYZINE COMPOUND TABS	MOORE MEDICAL CORP.
00839-6372-12	5	DE-TUSS CAPS	MOORE MEDICAL CORP.
00839-6540-95	5	TEBAMIDE 100MG SUPP	MOORE MEDICAL CORP.
00839-6541-95	5	TEBAMIDE 200MG SUPP	MOORE MEDICAL CORP.
00839-7033-69	5	NALDELATE SYRUP PED	MOORE MEDICAL CORP.
00839-7158-31	6	NAPHAZOLINE/PHENIR OPHTH	MOORE MEDICAL CORP.
00839-7201-06	5	PHENYLEPHRINE PPA & GUI C	MOORE MEDICAL CORP.
00839-7370-06	5	BELLAMOR TABS	MOORE MEDICAL CORP.
00839-7440-06	5	RU TABS	MOORE MEDICAL CORP.
00839-7483-69	5	HEXATUSSIN SYRUP	MOORE MEDICAL CORP.
00839-7561-04	5	MIGRAZONE CAPS	MOORE MEDICAL CORP.
00839-7561-06	5	MIGRAZONE CAPS	MOORE MEDICAL CORP.
00839-7561-09	5	MIGRAZONE CAPS	MOORE MEDICAL CORP.
00839-7562-69	5	CRANTEX LIQ	MOORE MEDICAL CORP.
00839-7603-12	5	HYDROCORTISONE ACETATE SU	MOORE MEDICAL CORP.
00839-7648-63	5	NALDELATE DROPS PED	MOORE MEDICAL CORP.
00839-7850-70	5	ANTISPASMODIC ELIX	MOORE MEDICAL CORP.
00839-7974-06	5	ANTISPASMODIC EXTENTABS	MOORE MEDICAL CORP.
00839-8085-95	5	TRIMETHOBENZAMIDE 100MG S	MOORE MEDICAL CORP.
00839-8086-95	5	TRIMETHOBENZAMIDE 200MG S	MOORE MEDICAL CORP.
00879-0059-16	5	SUSANO ELIXIR	HALSEY DRUG COMPANY, INC.
00879-0059-28	5	SUSANO ELIXIR	HALSEY DRUG COMPANY, INC.
00904-0160-12	5	HYDROCORTISONE ACETATE	MAJOR PHARMACEUTICALS
00904-0160-60	5	HYDROCORTISONE ACETATE	MAJOR PHARMACEUTICALS
00904-0301-40	5	LIDOX	MAJOR PHARMACEUTICALS
00904-0301-60	5	LIDOX	MAJOR PHARMACEUTICALS
00904-0301-80	5	LIDOX	MAJOR PHARMACEUTICALS
00904-0322-40	5	TUSSOGEST EXTENDED-RELEAS	MAJOR PHARMACEUTICALS
00904-0322-60	5	TUSSOGEST EXTENDED-RELEAS	MAJOR PHARMACEUTICALS
00904-0623-60	5	MOXY COMPOUND	MAJOR PHARMACEUTICALS
00904-0635-60	5	VOXSUPRINE	MAJOR PHARMACEUTICALS
00904-0635-80	5	VOXSUPRINE	MAJOR PHARMACEUTICALS
00904-0636-60	5	VOXSUPRINE	MAJOR PHARMACEUTICALS
00904-0636-61	5	VOXSUPRINE	MAJOR PHARMACEUTICALS
00904-0636-80	5	VOXSUPRINE	MAJOR PHARMACEUTICALS
00904-0753-29	5	IODO 3% W/HC 1% CREAM	MAJOR PHARMACEUTICALS
00904-0774-60	5	AZMA-AID TABS	MAJOR PHARMACEUTICALS
00904-0981-16	5	DONNAPINE	MAJOR PHARMACEUTICALS
00904-0981-28	5	DONNAPINE	MAJOR PHARMACEUTICALS

00904-1003-60	5	NALGEST	MAJOR PHARMACEUTICALS
00904-1003-80	5	NALGEST	MAJOR PHARMACEUTICALS
00904-1004-16	5	NALDEC SYRUP	MAJOR PHARMACEUTICALS
00904-1010-16	5	NALGEST PEDIATRIC	MAJOR PHARMACEUTICALS
00904-1010-28	5	NALGEST PEDIATRIC	MAJOR PHARMACEUTICALS
00904-1011-30	5	NALDEC PEDIATRIC DROP SUG	MAJOR PHARMACEUTICALS
00904-1198-40	5	ROLATUSS	MAJOR PHARMACEUTICALS
00904-1198-60	5	ROLATUSS	MAJOR PHARMACEUTICALS
00904-1201-16	5	BAN-TUSS HC	MAJOR PHARMACEUTICALS
00904-1239-16	5	PEDITUSS COUGH SYRUP	MAJOR PHARMACEUTICALS
00904-1239-28	5	PEDITUSS COUGH SYRUP	MAJOR PHARMACEUTICALS
00904-1750-89	5	CAFATINE-PB	MAJOR PHARMACEUTICALS
00904-2503-40	5	CHLORDIAZEPOXIDE HCL AND	MAJOR PHARMACEUTICALS
00904-2503-60	5	CHLORDIAZEPOXIDE HCL AND	MAJOR PHARMACEUTICALS
00904-2503-80	5	CHLORDIAZEPOXIDE HCL AND	MAJOR PHARMACEUTICALS
00904-2548-60	5	BELLAMINE	MAJOR PHARMACEUTICALS
00904-2735-15	5	TEGAMIDE 100MG SUPP	MAJOR PHARMACEUTICALS
00904-2736-15	5	TEGAMIDE 200MG SUPP	MAJOR PHARMACEUTICALS
00904-3262-16	5	ENOMINE LIQUID	MAJOR PHARMACEUTICALS
00904-3263-40	5	ENOMINE	MAJOR PHARMACEUTICALS
00904-3263-60	5	ENOMINE	MAJOR PHARMACEUTICALS
00904-3291-60	5	TRIMETHOBENZAMIDE 250MG C	MAJOR PHARMACEUTICALS
00904-3741-61	5	DONNAPINE TABLET	MAJOR PHARMACEUTICALS
00904-3741-80	5	DONNAPINE TABLET	MAJOR PHARMACEUTICALS
00904-5008-60	6	CYCLANDELATE 200MG CAPSUL	MAJOR PHARMACEUTICALS
00904-5009-60	6	CYCLANDELATE 400MG CAPSUL	MAJOR PHARMACEUTICALS
00904-5384-12	5	CAFFEINE/ERGOTAMINE/PENTO	MAJOR PHARMACEUTICALS
00904-7622-60	5	MIGRATINE CAPSULE	MAJOR PHARMACEUTICALS
00904-7622-70	5	MIGRATINE CAPSULE	MAJOR PHARMACEUTICALS
10038-0035-06	5	STEROFORM CREAM	AMBIX LABORATORIES
10038-0035-07	5	STEROFORM CREAM	AMBIX LABORATORIES
10038-0035-16	5	STEROFORM CREAM	AMBIX LABORATORIES
10038-0036-07	5	STEROFORM CREAM-HALF STRE	AMBIX LABORATORIES
10038-0146-06	5	STEROFORM OINTMENT	AMBIX LABORATORIES
10038-0146-16	5	STEROFORM OINTMENT	AMBIX LABORATORIES
10337-0440-21	5	UNGUENTUM BOSSI 2OZ TUBE	DOAK DERMATOLOGICS DIVISI
10956-0725-04	5	ADULT COLD MEDICINE	THE REESE CHEMICAL COMPAN
10956-0725-08	5	ADULT COLD MEDICINE	THE REESE CHEMICAL COMPAN
12939-0128-42	5	BRONCOMAR ELIXIR	MARLOP PHARMACEUTICALS, I
12939-0128-45	5	BRONCOMAR ELIXIR	MARLOP PHARMACEUTICALS, I
29294-0101-03	5	PEDICON DROPS	PHARM TECH INCORPORATED
43797-0372-06	5	MALATAL	ROBERTS PHARMACEUTICAL CO
44437-0246-01	5	PROP-A-HIST CAPLET	BOLAN PHARMACEUTICAL INC
45802-0005-03	5	HYDROCORTISONE 0.5% & CLI	CLAY-PARK LABS INC
45802-0005-05	5	HYDROCORTISONE 0.5% & CLI	CLAY-PARK LABS INC
45802-0006-02	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0006-03	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0006-05	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0007-03	5	HYDROCORTISONE 0.5% & CLI	CLAY-PARK LABS INC
45802-0016-02	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0016-03	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0016-05	5	HYDROCORTISONE 1% & CLIOQ	CLAY-PARK LABS INC
45802-0723-32	5	TRIMETHO 100MG (CHLD) 50'	CLAY-PARK LABS INC
45802-0723-90	5	TRIMETHO SUPP 100MG CHILD	CLAY-PARK LABS INC
45802-0724-32	5	TRIMETH 200MG SUP (ADULT)	CLAY-PARK LABS INC
45802-0724-90	5	TRIMETH 200 MG SUP (ADULT	CLAY-PARK LABS INC
45802-0725-14	5	HC AC SUPP 25MG 1000'S	CLAY-PARK LABS INC
45802-0725-30	5	HC ACETATE SUPP 25MG	CLAY-PARK LABS INC
45802-0725-31	5	HC ACETATE SUPP 25 MG	CLAY-PARK LABS INC
45802-0725-33	5	HC ACETATE 25MG SUPP 100	CLAY-PARK LABS INC
46672-0608-16	5	FENTEX LIQUID	MIKART INC.
47028-0015-16	5	LEMOTUSSIN DM	SENECA PHARMACEUTICALS IN
47028-0019-01	5	LEMOHIST PLUS CAPS	SENECA PHARMACEUTICALS IN
49158-0104-07	5	CLIOQUINOL 3% WITH HYDOCO	THAMES PHARMACAL COMPANY,
49158-0104-08	5	CLIOQUINOL 3% WITH HYDROC	THAMES PHARMACAL COMPANY,
49158-0104-16	5	CLIOQUINOL 3% WITH HYDROC	THAMES PHARMACAL COMPANY,
49483-0039-01	5	DIME-TIME TABLETS	TIME-CAP LABS, INC.
49483-0039-10	5	DIME-TIME TABLETS	TIME-CAP LABS, INC.
50111-0321-01	5	ISOXSUPRINE 10MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0321-02	5	ISOXSUPRINE 10MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0321-03	5	ISOXSUPRINE 10MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0322-01	5	ISOXSUPRINE 20MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0322-02	5	ISOXSUPRINE 20MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0322-03	5	ISOXSUPRINE 20MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0329-01	6	CYCLANDELATE 200MG CAPSUL	SIDMAK LABORATORIES, INC.
50111-0329-03	6	CYCLANDELATE 200MG CAPSUL	SIDMAK LABORATORIES, INC.
50111-0330-01	6	CYCLANDELATE 400MG CAPSUL	SIDMAK LABORATORIES, INC.
50111-0330-02	6	CYCLANDELATE 400MG CAPSUL	SIDMAK LABORATORIES, INC.

50111-0330-03	6	CYCLANDELATE 400MG CAPSULE	SIDMAK LABORATORIES, INC.
50111-0337-01	6	NYLIDRIN 6MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0337-02	6	NYLIDRIN 6MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0337-03	6	NYLIDRIN 6MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0338-01	6	NYLIDRIN 12MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0338-02	6	NYLIDRIN 12MG TABLETS	SIDMAK LABORATORIES, INC.
50111-0338-03	6	NYLIDRIN 12MG TABLETS	SIDMAK LABORATORIES, INC.
50313-0093-42	5	LIQUITEX	PROPHARMA, INC.
50383-0111-16	5	PHENTEX LIQUID 16 OZ.	HI-TECH PHARMACAL CO. INC
50383-0763-16	5	NALPHEN SYRUP	HI-TECH PHARMACAL CO. INC
50383-0763-28	5	NALPHEN SYRUP	HI-TECH PHARMACAL CO. INC
50383-0764-04	5	NALPHEN PEDIATRIC SYRUP	HI-TECH PHARMACAL CO. INC
50383-0764-16	5	NALPHEN PEDIATRIC SYRUP	HI-TECH PHARMACAL CO. INC
50383-0764-28	5	NALPHEN PEDIATRIC SYRUP	HI-TECH PHARMACAL CO. INC
50383-0765-01	5	NALPHEN PEDIATRIC DROPS	HI-TECH PHARMACAL CO. INC
50564-0508-01	5	ACETAMINOPHEN-ISOMETHEPTE	JEROME STEVENS PHARMACEUT
50991-0101-01	5	POLY HIST FORTE TABLETS	POLY PHARMACEUTICAL CO.,
51079-0290-72	5	TRIMETHOBENZAMIDE HCL SUP	UDL LABORATORIES, INC.
51079-0290-79	5	TRIMETHOBENZAMIDE HCL SUP	UDL LABORATORIES, INC.
51079-0655-71	5	HEMORRHOIDAL HC SUPPOSITO	UDL LABORATORIES, INC.
51189-0016-01	5	T-KOFF	T E WILLIAMS PHARMACEUTIC
51285-0293-02	5	DURATEX CAPSULES	DURAMED PHARMACEUTICALS I
51285-0364-02	5	DURADRIN CAPSULES	DURAMED PHARMACEUTICALS I
51285-0364-04	5	DURADRIN CAPSULES	DURAMED PHARMACEUTICALS I
51285-0364-05	5	DURADRIN CAPSULES	DURAMED PHARMACEUTICALS I
51285-0907-02	5	DURAGAL-S 0.6/0.2/40MG 10	DURAMED PHARMACEUTICALS I
51285-0995-57	5	DURATEX LIQUID 5/20/100MG	DURAMED PHARMACEUTICALS I
51432-0036-06	5	BELLADONNA ALKA W/PHENO	HARBER PHARMACEUTICALS IN
51432-0050-03	5	HARBERTAPP TABS	HARBER PHARMACEUTICALS IN
51432-0050-06	5	HARBERTAPP TABS	HARBER PHARMACEUTICALS IN
51432-0116-03	6	CYCLANDELATE 200MG	HARBER PHARMACEUTICALS IN
51432-0116-06	6	CYCLANDELATE 200MG	HARBER PHARMACEUTICALS IN
51432-0117-10	5	TRIBAN SUPP 100MG	HARBER PHARMACEUTICALS IN
51432-0118-03	6	CYCLANDELATE 400MG	HARBER PHARMACEUTICALS IN
51432-0118-06	6	CYCLANDELATE 400MG	HARBER PHARMACEUTICALS IN
51432-0254-03	5	ISOXSUPRINE 10MG TABS	HARBER PHARMACEUTICALS IN
51432-0254-06	5	ISOXSUPRINE 10MG TABS	HARBER PHARMACEUTICALS IN
51432-0256-03	5	ISOXSUPRINE 20MG TABS	HARBER PHARMACEUTICALS IN
51432-0256-06	5	ISOXSUPRINE 20MG TABS	HARBER PHARMACEUTICALS IN
51432-0310-03	6	NYLIDRIN HCL 6MG	HARBER PHARMACEUTICALS IN
51432-0310-06	6	NYLIDRIN HCL 6MG	HARBER PHARMACEUTICALS IN
51432-0312-03	6	NYLIDRIN HCL 12MG	HARBER PHARMACEUTICALS IN
51432-0450-06	5	THEOPHYL EPHED PB TABS	HARBER PHARMACEUTICALS IN
51432-0474-03	5	TUSS DANABE CAPS	HARBER PHARMACEUTICALS IN
51432-0474-06	5	TUSS DANABE CAPS	HARBER PHARMACEUTICALS IN
51479-0005-01	5	DURA-GEST CAPSULES	DURA PHARMACEUTICALS INC
51479-0005-05	5	DURA-GEST CAPSULES	DURA PHARMACEUTICALS INC
51479-0030-01	5	ENTEX CAPSULES 100'S	DURA PHARMACEUTICALS INC
51479-0030-05	5	ENTEX CAPSULES 500'S	DURA PHARMACEUTICALS INC
51479-0031-48	5	ENTEX LIQUID 16 OZ	DURA PHARMACEUTICALS INC
51991-0625-01	5	TRIMETHOBENZAMIDE	BRECKENRIDGE INC.
52152-0009-02	5	ISOXSUPRINE HCL 10MG	AMIDE PHARMACEUTICAL INC.
52152-0009-05	5	ISOXSUPRINE HCL 10MG	AMIDE PHARMACEUTICAL INC.
52152-0010-02	5	ISOXSUPRINE HCL 20MG	AMIDE PHARMACEUTICAL INC.
52152-0010-04	5	ISOXSUPRINE HCL 20MG	AMIDE PHARMACEUTICAL INC.
52152-0010-05	5	ISOXSUPRINE HCL 20MG	AMIDE PHARMACEUTICAL INC.
52152-0013-02	6	AMI-RAX	AMIDE PHARMACEUTICAL INC.
52152-0013-04	6	AMI RAX	AMIDE PHARMACEUTICAL INC.
52152-0013-05	6	AMI-RAX	AMIDE PHARMACEUTICAL INC.
52152-0018-02	5	CHLORDIAZ HCL W/CDB	AMIDE PHARMACEUTICAL INC.
52152-0018-04	5	CHLORDIAZ HCL W/CDB	AMIDE PHARMACEUTICAL INC.
52152-0018-05	5	CHLORDIAZ HCL W/CDB	AMIDE PHARMACEUTICAL INC.
52152-0039-02	5	AMIDRIN	AMIDE PHARMACEUTICAL INC.
52152-0039-03	5	AMIDRIN	AMIDE PHARMACEUTICAL INC.
52152-0059-02	5	AMITEX	AMIDE PHARMACEUTICAL INC.
52152-0059-04	5	AMITEX	AMIDE PHARMACEUTICAL INC.
52152-0115-02	5	BELLAMINE S TABLET	AMIDE PHARMACEUTICAL INC.
52152-0130-04	5	AMI-TEX PSE TABLETS	AMIDE PHARMACEUTICAL INC.
52152-0143-02	5	HYOSCYAMINE SULFATE	AMIDE PHARMACEUTICAL INC.
52152-0166-02	5	TRIMETHOBENZAMIDE CAPSULE	AMIDE PHARMACEUTICAL INC.
52604-0126-01	5	VANEX FORTE R	JONES PHARMA, INCORPORATE
52604-0127-01	5	VANEX FORTE D	JONES PHARMA, INCORPORATE
52604-0240-06	5	VANEX GRAPE	JONES PHARMA, INCORPORATE
52604-0406-01	5	DRIZE	JONES PHARMA, INCORPORATE
52735-0752-26	5	ANTI ITCH CREAM 2%	FAMILY PHARMACY
52747-0610-60	5	NOREL CAPSULES	U.S. PHARMACEUTICAL CORPO
53014-0024-10	5	ATROHIST PLUS	MEDEVA PHARMACEUTICALS
53014-0024-50	5	ATROHIST PLUS 500 TABLETS	MEDEVA PHARMACEUTICALS
53020-0113-10	5	TRINTEX CAPSULES	TRINITY TECHNOLOGIES CORP

53020-0113-50	5	TRINTEX CAPSULES	TRINITY TECHNOLOGIES CORP
53265-0761-10	5	HYDROCORTISONE ACETATE 25	ABLE LABORATORIES INC.
53265-0761-12	5	HYDROCORTISONE ACETATE 25	ABLE LABORATORIES INC.
53265-0761-24	5	HYDROCORTISONE ACETATE 25	ABLE LABORATORIES INC.
53489-0293-01	5	TRIMETHOBENZAMIDE 250MG C	MUTUAL PHARMACEUTICAL COM
54092-0186-01	5	TIGAN CAPS 100MG 100'S	ROBERTS PHARMACEUTICAL CO
54092-0187-01	5	TIGAN 250MG 100'S	ROBERTS PHARMACEUTICAL CO
54092-0187-05	5	TIGAN 250MG 500'S	ROBERTS PHARMACEUTICAL CO
54092-0503-02	5	TIGAN PED SUPPOS 100MG 2'	ROBERTS PHARMACEUTICAL CO
54092-0504-02	5	TIGAN SUPPOS 200MG 8'S	ROBERTS PHARMACEUTICAL CO
54092-0504-10	5	TIGAN SUPPOS 200MG 10'S	ROBERTS PHARMACEUTICAL CO
54092-0504-50	5	TIGAN SUPPOS 200MG 50'S	ROBERTS PHARMACEUTICAL CO
54198-0134-30	5	NALDA RELIEF PEDIATRIC DR	LIQUIPHARM INC
54198-0160-16	5	CALCIUM IODIDE W/CODIENE	LIQUIPHARM INC
54807-0125-16	5	ANTISPASMODIC COMPOUND EL	R.I.D., INC.
54807-0126-01	5	ANTISPAS TABS	R.I.D., INC.
54838-0503-80	5	SIL-TEX LIQUID	SILARX PHARMACEUTICALS, I
55053-0073-01	5	PROTUSS	ECONOLAB
55053-0073-10	5	PROTUSS	ECONOLAB
55053-0124-01	5	SPASTRIN	ECONOLAB
55053-0290-12	5	MICOMP PB SUPPOSITORIES	ECONOLAB
55053-0444-01	5	TRIMETHOBENZAMIDE	ECONOLAB
55053-0525-90	5	MICOMP PB	ECONOLAB
55053-0610-16	5	DEMI COF	ECONOLAB
55053-0650-16	5	CRANTEX	ECONOLAB
55654-0005-05	5	TRI-TEX LIQUID	TRI-MED LABORATORIES, INC
56126-0090-11	5	CDP W/CLIDINIUM 5 MG/2.5	UNITED STATES TRADING COR
57779-0112-09	5	EQUITEX	EQUIPHARM CORP
58118-0608-16	5	MAXCOSIN LIQUID	JOHNSON LABORATORIES, INC
58154-0536-64	6	INFA-CON-A	INFINITY PHARMACEUTICALS
58177-0027-04	5	MEPERIDINE HCI AND PROMET	ETHEX CORPORATION
58177-0037-04	5	TRIMETHOBENZAMIDE HCI	ETHEX CORPORATION
58298-0140-10	5	TRIMETHOBENZAMIDE HCL 100	ELGE INC.
58298-0145-10	5	TRIMETHOBENZAMIDE HCL 200	ELGE INC.
58298-0145-50	5	TRIMETHOBENZAMIDE HCL 200	ELGE INC.
58298-0150-12	5	ANUTONE-HC 25MG SUPPOSITO	ELGE INC.
58407-0370-01	5	STAHIST	HUCKABY PHARMACAL, INC.
58407-0372-16	5	STATUSS GREEN	HUCKABY PHARMACAL, INC.
58407-0377-16	5	ZTUSS EXPECTORANT	HUCKABY PHARMACAL, INC.
58521-0575-01	5	ISOXSUPRINE HCL 10MG	SHIRE RICHWOOD INC.
58521-0575-10	5	ISOXSUPRINE HCL 10MG	SHIRE RICHWOOD INC.
58521-0576-01	5	ISOXSUPRINE HCL 20MG	SHIRE RICHWOOD INC.
58521-0576-10	5	ISOXSUPRINE HCL 20MG	SHIRE RICHWOOD INC.
58521-0754-10	5	REXATAL	SHIRE RICHWOOD INC.
58634-0036-01	5	PROCTOSOL-HC SUPPOSITORIE	AMERICAN GENERICS, INC.
58634-0036-02	5	PROCTOSOL-HC SUPPOSITORIE	AMERICAN GENERICS, INC.
59618-0460-15	5	MIGAIN	GLOBAL SOURCE MNGMT. & CO
59741-0301-12	5	HYDROCORTISONE ACETATE, 2	BIO-PHARM, INCORPORATED
59741-0301-24	5	HYDROCORTISONE ACETATE SU	BIO-PHARM, INCORPORATED
59741-0301-50	5	HYDROCORTISONE ACETATE SU	BIO-PHARM, INCORPORATED
59741-0304-50	5	TRIMETHOBENZANIDE HYDROCH	BIO-PHARM, INCORPORATED
59741-0305-50	5	TRIMETHOBENZANIDE HYDROCH	BIO-PHARM, INCORPORATED
59741-315--12	5	ERGOCAFF PB SUPPOSITORIES	BIO-PHARM, INCORPORATED
59743-0027-10	5	DONNAPHEN TABLETS	ALPHAGEN LABORATORIES, IN
59879-0106-01	5	MIGRAINE	PECOS PHARMACEUTICAL
59879-0110-01	5	PHENOBEL	PECOS PHARMACEUTICAL
59879-0115-01	5	TRIMETHOBENZAMIDE	PECOS PHARMACEUTICAL
59879-0121-01	5	BELLAPHEN-S TABLETS	PECOS PHARMACEUTICAL
60104-2002-02	5	ANTITUSSIVE TD CAPSULES	PIONEER PHARMACEUTICALS I
60104-2002-06	5	ANTITUSSIVE TD CAPSULES	PIONEER PHARMACEUTICALS I
60104-2002-08	5	ANTITUSSIVE TD CAPSULES	PIONEER PHARMACEUTICALS I
60104-3001-02	5	DECONGESTABS TD TABLETS	PIONEER PHARMACEUTICALS I
60104-3001-04	5	DECONGESTABS TD TABLETS	PIONEER PHARMACEUTICALS I
60104-3001-05	5	DECONGESTABS TD TABLETS	PIONEER PHARMACEUTICALS I
60104-3001-06	5	DECONGESTABS TD TABLETS	PIONEER PHARMACEUTICALS I
60104-3001-08	5	DECONGESTABS TD TABLETS	PIONEER PHARMACEUTICALS I
60104-3008-02	5	PIOTEN TR TABLETS	PIONEER PHARMACEUTICALS I
60104-3008-06	5	PIOTEN TR TABLETS	PIONEER PHARMACEUTICALS I
60104-3008-08	5	PIOTEN TR TABLETS	PIONEER PHARMACEUTICALS I
60104-4001-02	6	CYCLANDELATE CAPSULES 200	PIONEER PHARMACEUTICALS I
60104-4001-06	6	CYCLANDELATE CAPSULES 200	PIONEER PHARMACEUTICALS I
60104-4001-08	6	CYCLANDELATE CAPSULES 200	PIONEER PHARMACEUTICALS I
60104-4002-02	6	CYCLANDELATE CAPSULES 400	PIONEER PHARMACEUTICALS I
60104-4002-06	6	CYCLANDELATE CAPSULES 400	PIONEER PHARMACEUTICALS I
60104-4002-08	6	CYCLANDELATE CAPSULES 400	PIONEER PHARMACEUTICALS I
60104-4009-02	5	CHLORDIAZEPOXIDE/CLIDINIU	PIONEER PHARMACEUTICALS I
60104-4009-06	5	CHLORDIAZEPOXIDE/CLIDINIU	PIONEER PHARMACEUTICALS I

60104-4009-08	5	CHLORDIAZEPOXIDE/CLIDINIU	PIONEER PHARMACEUTICALS I
60104-6001-02	6	THERAX TABLETS	PIONEER PHARMACEUTICALS I
60104-6001-06	6	THERAX TABLETS	PIONEER PHARMACEUTICALS I
60104-6001-08	6	THERAX TABLETS	PIONEER PHARMACEUTICALS I
60258-0320-16	5	CYNTEX LIQUID	CYPRESS PHARMACEUTICAL, I
60258-0501-12	5	HYDROCORTISONE ACETATE 25	CYPRESS PHARMACEUTICAL, I
60258-0502-10	5	TRIMETHOBENZAMIDE HCL 200	CYPRESS PHARMACEUTICAL, I
60258-0503-10	5	TRIMETHOBENZAMIDE HCL 100	CYPRESS PHARMACEUTICAL, I
60258-0767-16	5	VETUSS HC SYRUP	CYPRESS PHARMACEUTICAL, I
60432-0009-04	5	ANTISPASMODIC ELIXIR	MGP - MORTON GROVE PHARMA
60432-0009-16	5	ANTISPASMODIC ELIXIR	MGP - MORTON GROVE PHARMA
60432-0009-28	5	ANTISPASMODIC ELIXIR	MGP - MORTON GROVE PHARMA
60432-0011-30	5	NALSPAN PEDIATRIC DROPS	MGP - MORTON GROVE PHARMA
60432-0012-16	5	NALSPAN PEDIATRIC SYRUP	MGP - MORTON GROVE PHARMA
60432-0051-08	5	MYTEX LIQUID	MGP - MORTON GROVE PHARMA
60432-0051-16	5	MYTEX LIQUID	MGP - MORTON GROVE PHARMA
60575-0790-19	5	RESPA-ARM	RESPA PHARMACEUTICAL, INC
61355-0101-10	5	ISOXUPRINE HCL 10MG	TRINITY TECHNOLOGIES CORP
61355-0101-11	5	ISOXUPRINE HCL 10MG	TRINITY TECHNOLOGIES CORP
61355-0102-10	5	ISOXUPRINE HCL 20MG	TRINITY TECHNOLOGIES CORP
61355-0102-11	5	ISOXUPRINE HCL 20MG	TRINITY TECHNOLOGIES CORP
61570-0025-12	5	PROTOCORT SUPPOSITORIES 3	MONARCH PHARMACEUTICAL CO
61570-0025-25	5	PROCTOCORT SUPPOSITORIES	MONARCH PHARMACEUTICAL CO
61570-0172-61	5	ANUSOL-HC 25 MG SUPPOSITO	MONARCH PHARMACEUTICAL CO
61570-0172-62	5	ANUSOL-HC 25 MG SUPPOSITO	MONARCH PHARMACEUTICAL CO
61646-0308-01	5	TRIMETHOBENZAMIDE HYDROCH	IOPHARM LABORATORIES, INC
61646-0504-16	5	IOGREEN LIQUID CIII	IOPHARM LABORATORIES, INC
64455-0005-01	5	DURA-GEST CAPSULES	D J PHARMA, INC.
64455-0005-05	5	DURA-GEST CAPSULES	D J PHARMA, INC.
64731-0575-01	5	ISOXSUPRINE 10MG	INTEGRITY PHARMACEUTICAL
64731-0575-10	5	ISOXUPRINE 10MG	INTEGRITY PHARMACEUTICAL
64731-0576-01	5	ISOXSUPRINE 20MG	INTEGRITY PHARMACEUTICAL
64731-0576-10	5	ISOXSUPRINE 20MG	INTEGRITY PHARMACEUTICAL
64731-0754-01	5	BELLATAL	INTEGRITY PHARMACEUTICAL
64731-0754-10	5	BELLATAL	INTEGRITY PHARMACEUTICAL

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*** # OF DESI = 5 RECORDS:     573
*** # OF DESI = 6 RECORDS:     66
*** TOTAL RECORDS (DESI=5,6):  639
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New Pharmacy Adjustment Form

Attached is the new Pharmacy Adjustment Form. The form is intentionally off center to allow space for an internal scanning code to be placed down the right side. Initially, there will be more space than is needed for the ICN, but these extra spaces will eventually be used. This form may be reproduced.

Pharmacy Adjustment Request Form Instructions

A Pharmacy Adjustment Request Form is used to request adjustment to a Medicaid payment. Medicaid denials with no payment can be rebilled instead of adjusted. Examples of when to use the Pharmacy Adjustment Request Form are:

- Overriding MAC payment when "Dispense As Written" or "Brand Medically Necessary" is properly documented
- Correcting an erroneous quantity or NDC for a paid prescription
- Crediting Medicaid for a billed and paid prescription that was never dispensed
- Crediting Medicaid for a billed and paid prescription for Unit-dose drugs that were unused
- Correcting Pharmacy of Record denials when submitted with copy of Medicaid card stub

Use the following instructions and form to submit adjustment requests for pharmacy claims. Only one recipient per form with up to 4 adjusted claims for the recipient.

Recipient Medicaid Number - The 10 character recipient identification number on the card consisting of nine numeric characters with an alpha letter as the 10th character

Recipient's Name - Recipient's name on the card with the last name entered first, followed by the first name, with the middle initial last

Pharmacy Name - Pharmacy Name

Pharmacy Number - Medicaid pharmacy provider number

Rx Number - Prescription Number assigned by pharmacy of claim to be adjusted

Drug Name - Name of the drug dispensed with the Strength and dosage form abbreviation

NDC - 11 digit NDC number

Quantity - Up to five digits for correct quantity to be billed

Billed Amt. - Correct amount to be billed for the prescription claim

Date Filled - Numeric month and day and last two digits of the year

Claim Number - The ICN (Internal Control Number) of the previous paid or denied claim

Denial EOB - Use only if denied for 985 Exceeding Prescription Limitation

Ins. Paid - Check here to indicate correction of omission of Other Payor Amount. The "Adjustment Reason" should be used with documentation of Other Payor Amount

Paid Amount - Fill in the amount of the last Medicaid payment for the claim for the claim number indicated

Adjustment Reason - Describe why a correction is needed

The form is intentionally off center to allow space for an internal scanning code to be placed down the right side.

PHARMACY ADJUSTMENT REQUEST

MAIL TO :
EDS CORPORATION
POST OFFICE BOX 300009
RALEIGH, NORTH CAROLINA 27622

ATTN: ADJUSTMENT UNIT

RECIPIENT MEDICAID NUMBER

PHARMACY NAME AND PROVIDER NUMBER

RECIPIENT NAME
LAST FIRST
MIDDLE

PLEASE PRINT OR TYPE (BLACK OR DARK BLUE ONLY) **LIST INFORMATION AS GIVEN ON RA**

0

Rx NUMBER	DRUG NAME-STRENGTH-DOSAGE-MFG	NDC	QUANTITY	BILLED AMOUNT

DATE FILLED MO DAY YR	CLAIM NUMBER	DENIAL EOB	INS PAID

ADJUSTMENT REASON (BRIEFLY DESCRIBE REASON FOR ADJUSTMENT) PAID AMOUNT

1

Rx NUMBER	DRUG NAME-STRENGTH-DOSAGE-MFG	NDC	QUANTITY	BILLED AMOUNT

DATE FILLED MO DAY YR	CLAIM NUMBER	DENIAL EOB	INS PAID

ADJUSTMENT REASON (BRIEFLY DESCRIBE REASON FOR ADJUSTMENT) PAID AMOUNT

2

Rx NUMBER	DRUG NAME-STRENGTH-DOSAGE-MFG	NDC	QUANTITY	BILLED AMOUNT

DATE FILLED MO DAY YR	CLAIM NUMBER	DENIAL EOB	INS PAID

ADJUSTMENT REASON (BRIEFLY DESCRIBE REASON FOR ADJUSTMENT) PAID AMOUNT

3

Rx NUMBER	DRUG NAME-STRENGTH-DOSAGE-MFG	NDC	QUANTITY	BILLED AMOUNT

DATE FILLED MO DAY YR	CLAIM NUMBER	DENIAL EOB	INS PAID

ADJUSTMENT REASON (BRIEFLY DESCRIBE REASON FOR ADJUSTMENT) PAID AMOUNT

"This is to certify that the foregoing information is true, accurate, and complete. I understand that payment will be from Federal and State funds, and that any false claims, statements, or documents, or concealment, of a material fact, may be prosecuted under applicable Federal or State laws."

X_____
CLAIMANT SIGNATURE

DATE

IMPORTANT: THIS FORM WILL BE RETURNED IF THE REQUIRED INFORMATION AND DOCUMENTATION FOR PROCESSING IS NOT PRESENT.

FORM NO. 372-200 (REVISED 5-2000)

Checkwrite Schedule

June 13, 2000	July 11, 2000	August 8, 2000
June 20, 2000	July 18, 2000	August 15, 2000
June 29, 2000	July 27, 2000	August 24, 2000

Electronic Cut-Off Schedule

June 9, 2000	July 7, 2000	August 4, 2000
June 16, 2000	July 14, 2000	August 11, 2000
June 23, 2000	July 21, 2000	August 18, 2000

Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.

Paul R. Perruzzi, Director
Division of Medical Assistance
Department of Health and Human Services

John W. Tsikerdanos
Executive Director
EDS

EDS

Bulk Rate
U.S. POSTAGE
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Raleigh, N.C.
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