

# PACE/CRDP/SPBP PROVIDER BULLETIN

August 13, 2015

## COMMONWEALTH OF PENNSYLVANIA DRUG MANUFACTURERS' REBATE PROGRAM NON PARTICIPATING MANUFACTURERS

Effective Tuesday September 1\*, 2015, PACE, CRDP and SPBP will no longer be permitted to reimburse for products from the following manufacturers. Listed below are *some* of the products manufactured by these companies.

Providers using products from these manufacturers may wish to explore alternative sources.

Labeler Number	Labeler Name	Products Covered
24987	Covis Pharmaceuticals	Lanoxin®
42195	Xspire Pharma	Ciprofloxacin
44946	Sancilio & Company, Inc.	Prenatal Plus
49401	Human Genome Sciences Inc.	Benlysta®
51660	OHM Laboratories	Valsartan
52565	IGI Laboratories	Fluocinolone
53451	Xenoport Inc.	Horizant®
76282	Exelan Pharmaceuticals	Finasteride
76388	Aspen Global Inc.	Leukeran
89109	Access Pharmaceuticals	Mugard®
35781	Rusi Pharma Pvt. Ltd.	LiDoRx®
08496	MHC Medical Product	Easy Touch Pen Needle
54162	Geritrex Corporation	GRx H.Cort 25
56151	Home Diagnostics, Inc.	Test Strips

**\*The effective date for the labeler below is October 1, 2015.**

66733	Bristol-Myers Squibb	Erbix®
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Claims submitted for pharmaceuticals manufactured by these companies will deny for NCPDP Error: "AC"—"Product Not Covered; Non Participating Manufacturer". As indicated above, this is not an all inclusive list of medications.

Questions may be directed to Provider Services at 1-800-835-4080.