



# MARYLAND MEDICAID PHARMACY PROGRAM

No. 76  
October 9, 2009

## ADVISORY

In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Department of Health and Mental Hygiene's (DHMH) **Maryland Pharmacy Program (MPP)** has developed the **Maryland Pharmacy Program Advisory**. To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations. It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via DHMH, please contact the MPP representative at 410-767-1455.

### Update on Mass Adjustments of Legend Insulins

On Monday September 28, ACS, The Maryland Medicaid Pharmacy Program claims processor, adjusted pricing of all incorrectly priced point-of-service claims that were submitted for the following insulin products for dates of service between May 6 and August 26, 2009. If your pharmacy submitted any claims for these drugs during this period, and the claim was priced incorrectly, you saw the original payments reversed on the October 3 remittance advice. Unfortunately the reprocessing of those reversed claims did not result in payment in the same remittance advice. This omission will be corrected and the corrected payments will appear in your remittance advice of October 17.

<u>NDC</u>	<u>Drug Name</u>	<u>NDC</u>	<u>Drug Name</u>
00088250033	APIDRA 100 UNITS/ML VIAL	00002751659	HUMALOG 100 UNITS/ML CARTRI
00002751001	HUMALOG 100 UNITS/ML VIAL	00002751101	HUMALOG MIX 75-25 VIAL
00002879459	HUMALOG MIX 75-25 PEN	00002872559	HUMALOG 100 UNITS/ML PEN
00002879859	HUMALOG MIX 50-50 KWIKPEN	00002850101	HUMULIN R 500 UNITS/ML VIAL
00088222033	LANTUS 100 UNITS/ML VIAL	00088222052	LANTUS 100 UNITS/ML CARTRID
00088222060	LANTUS SOLOSTAR100 UNITS/M	00169368712	LEVEMIR 100 UNITS/ML VIAL
00169368512	NOVOLOG MIX 70-30 VIAL	00169643910	LEVEMIR FLEXPEN 100 UNITS/M
00169633910	NOVOLOG FLEXPEN SYRINGE	00169369619	NOVOLOG MIX 70-30 FLEXPEN S
00169750111	NOVOLOG 100 UNIT/ML VIAL	00169330312	NOVOLOG 100 UNIT/ML CARTRID