



## Discontinued Drug Coverage for Terminated Labelers per Medicaid National Drug Rebate Agreement

The Centers for Medicare and Medicaid Services (CMS), in compliance with Social Security Law Sec. 1927 [42 U.S.C. 1396r–8] (a), requires drug manufacturers to participate in the Medicaid Drug Rebate Program (MDRP) for their drugs to be eligible for coverage under the Medicaid program. **Prescribers and pharmacies are encouraged to assist members with a therapeutically equivalent generic, or to obtain a new prescription for an available alternative.**

**Effective April 1, 2025**, the following drug manufacturers voluntarily withdrew from participation in the [Medicaid Drug Rebate Program](#) (MDRP). As a result, NYRx, Medicaid Pharmacy Program will no longer provide coverage for drugs manufactured by the manufacturers listed below.

Manufacturer **WOODWARD PHARMA SERVICES LLC**. Labeler Code 69784

|                            |                            |                        |
|----------------------------|----------------------------|------------------------|
| Fluconazole IV Solution*   | Omeprazole-Bicarb Capsule* | Naproxen DR Tablet*    |
| Cromolyn Oral Concentrate* | Avodart Softgel+           | Naproxen Tablet*       |
| Cromolyn Neb Solution*     | Lovaza Capsule+            | Coreg CR Capsule+      |
| Sodium Acetate Vial*       | Ketorolac Tablet*          | Carvedilol ER Capsule* |

Manufacturer **EMC PHARMA, LLC**. Labeler Code 81288

|                   |                      |                    |
|-------------------|----------------------|--------------------|
| Acyclovir Tablet* | Rosuvastatin Tablet* | Celecoxib Capsule* |
|-------------------|----------------------|--------------------|

Manufacturer **MACROGENICS/TERSER, INC.** Labeler Code 74527

|               |
|---------------|
| Margenza Vial |
|---------------|

\*Other manufacturers produce this drug so there are alternate NDC's that will remain available.

+Generics for these drugs will remain available.

### Pharmacy Claim Edit

| Edit # | Edit Description            | NCPDP Reject Message                                   |
|--------|-----------------------------|--------------------------------------------------------|
| 02351  | NDC Not Federal Participant | AC: Product Not Covered Non-Participating Manufacturer |

### Questions and Information:

- The NYRx Pharmacy List of Reimbursable Drugs is found here: <https://www.emedny.org/info/formfile.aspx> and Physician Administered drugs can be searched here: <https://www.emedny.org/info/pad>
- The member website, including a tool to find covered drugs, is found here: <https://member.emedny.org/pharmacy/search-drugs>
- For claims processing questions, call the eMedNY Call Center at (800) 343-9000.
- For NYRx coverage or policy questions call (518) 486-3209 or email [NYRx@health.ny.gov](mailto:NYRx@health.ny.gov)

### Additional Resources:

CMS New/Reinstated & Terminated Labeler Information:

<https://www.medicaid.gov/medicaid/prescription-drugs/medicaid-drug-rebate-program/newreinstated-terminated-labeler-information/index.html>