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Governor

STATE OF NEVADA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH CARE FINANCING AND POLICY
NEVADA MEDICAID

MICHAEL J. WILLDEN
Director

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Administrator

December 16, 2003

To: Pharmacy Providers

Regarding: **Maximum Allowable Cost Program**

As indicated in a previous notice dated November 6, 2003, Nevada Medicaid will expand the MAC program to include an additional listing of multiple source drug products. Final approval occurred at today's public hearing with the implementation date being December 17, 2003.

Providers will be able to access a current MAC listing via the First Health Services secure website at <https://medicaid.nv.gov>. If you have not already obtained access, please contact the First Health Provider Relations Department at (877) 638-3472. The on-line listing will be updated monthly to reflect any changes, additions, or deletions.

Program policy will remain in effect regarding generic substitution and prescriber brand certification as detailed in Section 1203.1B.3. of Chapter 1200 of the Medicaid Services Manual. Chapter 1200 can be accessed on-line at <http://dhcfp.state.nv.us>.

An appeals process will be available if you determine that a particular generic drug is not available at current MAC pricing. A provider can appeal by calling the First Health Services Technical Call Center at (800) 884-3238. Providers are reminded that the National Drug Code (NDC) submitted to Medicaid for payment must be identical to the NDC on the package from which the prescription was dispensed.

Your continued participation and support of the Nevada Medicaid Program are appreciated.

Sincerely,

Charles Duarte, Administrator
Division of Health Care Financing and Policy