Subject: Revisions to Participating Drug Company List for Medicaid Drug Rebate

Program

Banner Date: December 26, 2018 through January 15, 2019

Cycle: 27, 28, 29

Provider Types: 07, 08, 09, 24, 31

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For a drug product to be compensable through the Medical Assistance (MA) Program, the company (labeler) that markets the product must participate in the Federal Medicaid Drug Rebate Program.

The below revisions to the list, unless otherwise indicated, are effective January 1, 2019. Terminations and additions apply only to those National Drug Codes (NDCs) beginning with the five-digit labeler code indicated, and not to other NDCs that may be marketed by that company under a different labeler code.

NEW and REINSTATED LABELERS

PAR PHARMACEUTICAL, INC. (00254)

COTHERIX, INC. (10148)

ONSET DERMATOLOGICS LLC (16781)

APNAR PHARMA LP (24689)

SUN PHARMA GLOBAL, INC. (41616) (effective October 1, 2018)

ACELLA PHARMACEUTICALS, LLC (42192)

SCIEGEN PHARMACEUTICALS, INC. (50228)

LNK INTERNATIONAL, INC. (50844) (effective October 1, 2018)

PTC THERAPEUTICS, INC. (52856)

GALENA BIOPHARMA, INC. (57881) (effective October 1, 2018)

BIOCSL, INC. (61364) (effective October 1, 2018)

AMICI PHARMACEUTICALS LLC (69292)

SCILEX PHARMACEUTICALS (69557)

GRANULES PHARMACEUTICALS, INC. (70010)

GREENWICH BIOSCIENCES, INC. (70127)

DERMIRA, INC. (70428)

XELLIA PHARMACEUTICALS USA, LLC (70594)

BIOFRONTERA INC. (70621)

MCKESSON CORPORATION (70677)

ITF PHARMA, INC. (70726)

ACHAOGEN, INC. (71045)

PROGENICS PHARMACEUTICALS, INC. (71258)

ALNYLAM PHARMACEUTICALS, INC. (71336)

AKARX, INC. (71369)

INSMED INCORPORATED (71558)

MEGALITH PHARMACEUTICALS INC. (71717)

TETRAPHASE PHARMACEUTICALS, INC. (71773)

VERATERM, INC. (71779)
AMICUS THERAPEUTICS, INC. (71904)
AKCEA THERAPEUTICS, INC. (72126)
NOVADOZ PHARMACEUTICALS, LLC (72205)
FORTE BIO-PHARMA LLC (72245)
AMGEN USA INC. (72511)