



**Center for Medicaid and State Operations**

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October 16, 2008

TO: Drug Rebate Technical Contacts  
FROM: Medicaid Drug Rebate Program  
SUBJECT: Deleted Products-Immediate Action Required

We previously notified you of some drug products containing carbinoxamine that did not meet the definition of a covered outpatient drug. Following are two additional NDCs that labelers added with their Q2/2008 submission. These NDCs do not meet the definition of a covered outpatient drug as defined in Section 1927(k) of the Social Security Act and are therefore no longer eligible for inclusion in the rebate program. **Consequently, these NDCs should be deleted from your state Medicaid Drug Rebate system as of the date of this notice.** The labelers of these products are responsible for paying rebates on these NDCs if they were dispensed prior to the date of this notice. In addition, states should be aware that the fourth quarter 2008 tape to states will be the last quarterly tape that will include these NDCs in order to facilitate rebate billing for any utilization that occurred in good faith prior to the date of this notice. However, states are reminded that no Federal Financial Participation will be available for this drug after the date of this notice.

NDC	Product Name
51991-0426	MINTEX DM
64376-0605	CARBINOXAMINE MALEATE 4 MG