



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

New Hampshire Medicaid Program

To: NH Medicaid Enrolled Providers
From: NH Division of Medicaid Services
Date: April 13, 2023
Subject: Withdrawal of Makena Effective 4/6/2023

The US Food and Drug Administration (FDA) has decided to withdraw approval of Makena and generic versions of the drug, the agency announced April 6.

Effective April 6, 2023, Makena and its generics are no longer approved and cannot lawfully be distributed in interstate commerce.

Any medical or pharmacy claims for these products (including compounded products) will be denied after April 6, 2023.

The following HCPCS codes will be denied. Pharmacy claims with an NDC for Makena or 17-HP will be denied.

Code	Description
J1726	Injection, hydroxyprogesterone caproate, (Makena), 10 mg
J1729	Injection, hydroxyprogesterone caproate, not otherwise specified, 10 mg

If there are any questions on this notice, please contact the Provider Relations Unit at (603) 223-4774 or (866) 291-1674.

Thank you,

NH Medicaid Provider Relations