Effective October 1, 2008, federal law requires that all written, non-electronic outpatient Medicaid prescriptions be tamper-resistant. This form is designed to assist the Program in coordinating educational efforts for noncompliant providers in conjunction with provider associations. Questions about this form or its use should be directed to the Maryland Medicaid Pharmacy Program at 410-767-1455.

**Fill in the information and fax to: 410-333-5398.** Submitting Pharmacy should provide the following information for non-compliant prescribers (* denotes required information):

Prescriber name * ____________________________________________________________________________
NPI number * ___________________________________ Phone # with area code ________________________
Address ____________________________________________________________________________________

Prescriber name *
NPI number * ___________________________________ Phone # with area code ________________________
Address ____________________________________________________________________________________

Prescriber name *
NPI number * ___________________________________ Phone # with area code ________________________
Address ____________________________________________________________________________________

Prescriber name *
NPI number * ___________________________________ Phone # with area code ________________________
Address ____________________________________________________________________________________

Prescriber name *
NPI number * ___________________________________ Phone # with area code ________________________
Address ____________________________________________________________________________________

Submiting Pharmacy* ___________________________________________ Date ________________________
Provider NPI # ___________________________________________ Phone # with area code__________________

**Fill in the information and fax to: 410-333-5398**