

**KMAP GENERAL BULLETIN 21001**

**KanCare Coverage of  
Ferrous Sulfate Products**

Effective February 1, 2021, the following ten, single agent ferrous sulfate product National Drug Codes (NDCs) will be covered by the Managed Care Organizations (MCOs). This applies to the pharmacy benefit only (no associated HCPCS codes).

Active Ingredient	Manufacturer/ Distributor	NDC	Form	Strength	Package Size
ferrous sulfate	LANNETT COMPANY INC.	54838-0011-50	SOL	75 mg/1 ml	50 ml
ferrous sulfate	AKORN, INC.	50383-0778-16	ELI	220 mg/5 ml	480 ml
ferrous sulfate	MAJOR PHARMACEUTICALS	00904-7590-80	TAB	325 mg	1000s ea
ferrous sulfate	MARLEX PHARMACEUTICALS, INC.	10135-0690-01	TAB	325 mg	100s ea
ferrous sulfate	MAJOR PHARMACEUTICALS	00904-7591-60	TAB	325 mg	100s ea
ferrous sulfate	WESTMINSTER PHARMACEUTICALS, LLC	69367-0166-07	ECT	325 mg	1000s ea
ferrous sulfate	UPSHER-SMITH LABORATORIES, LLC	00245-0108-10	ECT	325 mg	1000s ea
ferrous sulfate	MARLEX PHARMACEUTICALS, INC.	10135-0161-01	ECT	325 mg	100s ea
ferrous sulfate	WESTMINSTER PHARMACEUTICALS, LLC	69367-0166-04	ECT	325 mg	100s ea
ferrous sulfate	UPSHER-SMITH LABORATORIES, LLC	00245-0108-11	ECT	325 mg	100s ea

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**Customer Service**

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.  
Monday - Friday



## KanCare Coverage of Ferrous Sulfate Products continued

**Note:** The effective date of the policy is February 1, 2021. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

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