

NYRx Notice to Prescribers and Pharmacies: tretinoin 0.08% micro gel pump

September 25, 2025

This notice is to provide information to prescribers and pharmacies about NYRx, the Medicaid Pharmacy Program and tretinoin 0.08% micro gel pump, a non-preferred product. The maximum quantity that can be dispensed for tretinoin 0.08% micro gel pump is **50 grams per 30-day supply**.

Information on prior authorization (PA) requirements related to clinical criteria for tretinoin 0.08% micro gel pump can be found in the [NYRx Preferred Drug List \(PDL\)](#). If a member requires more than the maximum quantity, a PA can be submitted to the NYRx Clinical Call Center for review. For more information on how to submit a PA, refer to [Three Ways to Submit a Prior Authorization to NYRx, the Medicaid Pharmacy Program](#).

Contact Information

The NYRx Education & Outreach Call Center is available by phone at 1-833-967-7310 or by email at NYRxEO@primetherapeutics.com from 8:00 AM to 5:00 PM ET, Monday through Friday, excluding holidays.

The NYRx Education & Outreach team hosts virtual office hours every week for stakeholders to ask questions related to NYRx and care coordination. Visit the [NYRx Education & Outreach website](#) for more information.