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Remittance Advice (RA) Message

Title: **Pharmacy Program Updates – August 2020**

Issue Date: 08/17/2020

Run Length: 8 weeks

Provider Type(s): 001, 002, 003, 005, 008, 010, 012, 020, 021, 025, 028, 030, 033, 034, 035, 036, 039, 040, 041, 042, 045, 051, 053, 054, 055, 056, 059, 062, 068, 070, 072, 078, 080, 107

Message: The Alaska Medicaid Pharmacy Program August 2020 Update is now available on the [Provider Updates](#) page.