Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
0.9 % SODIUM CHLORIDE INJECTION SYRINGE (ML) 0.9 %			0.05600	10/15/2015	10/09/2015
0.9 % SODIUM CHLORIDE INJECTION VIAL (ML) 0.9 %			0.01900	10/15/2015	10/09/2015
0.9 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 0.9 %			0.00200	10/15/2015	10/09/2015
0.9 % SODIUM CHLORIDE INTRAVENOUS PIGGYBACK WITH THREADED PORT (ML)			0.00700	10/15/2015	10/09/2015
0.9 % SODIUM CHLORIDE INTRAVENOUS PIGGYBACK WITH VIAL PORT (NON-THREADED)			0.03900	10/15/2015	10/09/2015
ACARBOSE ORAL TABLET 100 MG			0.66700	10/15/2015	10/09/2015
ACARBOSE ORAL TABLET 25 MG			0.46700	10/15/2015	10/09/2015
ACARBOSE ORAL TABLET 50 MG			0.54000	10/15/2015	10/09/2015
ACEBUTOLOL HCL ORAL CAPSULE 200 MG			0.20100	10/15/2015	10/09/2015
ACEBUTOLOL HCL ORAL CAPSULE 400 MG			0.29400	10/15/2015	10/09/2015
ACETAMINOPHEN RECTAL SUPPOSITORY, RECTAL 120 MG			0.29800	10/15/2015	10/09/2015
ACETAMINOPHEN RECTAL SUPPOSITORY, RECTAL 325 MG			0.33800	10/15/2015	10/09/2015
ACETAMINOPHEN RECTAL SUPPOSITORY, RECTAL 650 MG			0.25700	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL SOLUTION, ORAL 120-12MG/5			0.01500	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL SOLUTION, ORAL 240-24/10			0.01500	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL SOLUTION, ORAL 300MG/12.5			0.01500	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL SOLUTION, ORAL 360-36/15			0.01500	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL TABLET 300MG-15MG			0.07800	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL TABLET 300MG-30MG			0.14800	10/15/2015	10/09/2015
ACETAMINOPHEN WITH CODEINE PHOSPHATE ORAL TABLET 300MG-60MG			0.15800	10/15/2015	10/09/2015
ACETAZOLAMIDE ORAL CAPSULE, EXTENDED RELEASE 500 MG			4.18900	10/15/2015	10/09/2015
ACETAZOLAMIDE ORAL TABLET 250 MG			2.10500	10/15/2015	10/09/2015
ACETIC ACID IRRIGATION SOLUTION, IRRIGATION 0.25 %			0.00600	10/15/2015	10/09/2015
ACETIC ACID OTIC SOLUTION, NON-ORAL 2 %			1.86600	10/15/2015	10/09/2015
ACETIC ACID/ALUMINUM ACETATE OTIC DROPS 2 %			1.02700	10/15/2015	10/09/2015
ACETIC ACID/HYDROCORTISONE OTIC DROPS 2 %-1 %			14.49400	10/15/2015	10/09/2015
ACETYLCYSTEINE MISCELLANEOUS VIAL (ML) 100 MG/ML			0.35700	10/15/2015	10/09/2015
ACETYLCYSTEINE MISCELLANEOUS VIAL (ML) 200 MG/ML			0.26800	10/15/2015	10/09/2015
ACETYLCYSTEINE/MECOBALAMIN/LEVOMEFOLATE CALCIUM ORAL TABLET 600-2-6 MG			1.22600	10/15/2015	10/09/2015
ACYCLOVIR ORAL CAPSULE 200 MG			0.37600	10/15/2015	10/09/2015
ACYCLOVIR ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 200 MG/5ML			0.71600	10/15/2015	10/09/2015
ACYCLOVIR ORAL TABLET 400 MG			0.21600	10/15/2015	10/09/2015
ACYCLOVIR ORAL TABLET 800 MG			0.31500	10/15/2015	10/09/2015
ACYCLOVIR SODIUM INTRAVENOUS VIAL (EA) 1000 MG			42.84900	10/15/2015	10/09/2015
ACYCLOVIR SODIUM INTRAVENOUS VIAL (EA) 500 MG			21.42500	10/15/2015	10/09/2015
ADAPALENE TOPICAL CREAM (GRAM) 0.1 %			4.67200	10/15/2015	10/09/2015
ADAPALENE TOPICAL GEL (GRAM) 0.1 %			3.73900	10/15/2015	10/09/2015
ALBUTEROL SULFATE INHALATION SOLUTION, NON-ORAL 5 MG/ML			0.43700	10/15/2015	10/09/2015
ALBUTEROL SULFATE INHALATION VIAL, NEBULIZER (EA) 2.5 MG/0.5			0.43700	10/15/2015	10/09/2015
ALBUTEROL SULFATE INHALATION VIAL, NEBULIZER (ML) 0.63MG/3ML			0.47300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
ALBUTEROL SULFATE INHALATION VIAL, NEBULIZER (ML) 1.25MG/3ML			0.47400	10/15/2015	10/09/2015
ALBUTEROL SULFATE INHALATION VIAL, NEBULIZER (ML) 2.5 MG/3ML			0.08300	10/15/2015	10/09/2015
ALBUTEROL SULFATE ORAL SYRUP 2 MG/5 ML			0.03500	10/15/2015	10/09/2015
ALBUTEROL SULFATE ORAL TABLET 2 MG			0.03800	10/15/2015	10/09/2015
ALBUTEROL SULFATE ORAL TABLET 4 MG			4.70000	10/15/2015	10/09/2015
ALBUTEROL SULFATE ORAL TABLET, EXTENDED RELEASE 12 HR 8 MG			1.95700	10/15/2015	10/09/2015
ALCLOMETASONE DIPROPIONATE TOPICAL CREAM (GRAM) 0.05 %			0.69700	10/15/2015	10/09/2015
ALCLOMETASONE DIPROPIONATE TOPICAL OINTMENT (GRAM) 0.05 %			0.69700	10/15/2015	10/09/2015
ALENDRONATE SODIUM ORAL TABLET 10 MG			0.42900	10/15/2015	10/09/2015
ALENDRONATE SODIUM ORAL TABLET 35 MG			2.74700	10/15/2015	10/09/2015
ALENDRONATE SODIUM ORAL TABLET 40 MG			5.64800	10/15/2015	10/09/2015
ALENDRONATE SODIUM ORAL TABLET 5 MG			0.42900	10/15/2015	10/09/2015
ALENDRONATE SODIUM ORAL TABLET 70 MG			2.74700	10/15/2015	10/09/2015
ALLOPURINOL ORAL TABLET 100 MG	0.04100	10/15/2015	0.15550	10/28/2015	10/26/2015
ALLOPURINOL ORAL TABLET 300 MG			0.27200	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET 0.25 MG			0.04800	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET 0.5 MG			0.04900	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET 1 MG			0.06000	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET 2 MG			0.15600	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET, EXTENDED RELEASE 24 HR 0.5 MG			0.84500	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET, EXTENDED RELEASE 24 HR 1 MG			1.07900	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET, EXTENDED RELEASE 24 HR 2 MG			1.41700	10/15/2015	10/09/2015
ALPRAZOLAM ORAL TABLET, EXTENDED RELEASE 24 HR 3 MG			2.07700	10/15/2015	10/09/2015
ALUMINUM HYDROXIDE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 320 MG/5ML			0.00800	10/15/2015	10/09/2015
AMANTADINE HCL ORAL CAPSULE 100 MG			1.43500	10/15/2015	10/09/2015
AMANTADINE HCL ORAL SOLUTION, ORAL 50 MG/5 ML			0.06500	10/15/2015	10/09/2015
AMCINONIDE TOPICAL LOTION (ML) 0.1 %			0.80600	10/15/2015	10/09/2015
AMCINONIDE TOPICAL OINTMENT (GRAM) 0.1 %			0.64200	10/15/2015	10/09/2015
AMIKACIN SULFATE INJECTION VIAL (ML) 1000MG/4ML			4.00800	10/15/2015	10/09/2015
AMIKACIN SULFATE INJECTION VIAL (ML) 500 MG/2ML			4.00800	10/15/2015	10/09/2015
AMILORIDE HCL ORAL TABLET 5 MG			0.87800	10/15/2015	10/09/2015
AMILORIDE HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 5 MG-50 MG			0.06400	10/15/2015	10/09/2015
AMIODARONE HCL INTRAVENOUS AMPUL (ML) 50 MG/ML			0.93300	10/15/2015	10/09/2015
AMIODARONE HCL INTRAVENOUS VIAL (ML) 50 MG/ML			0.46900	10/15/2015	10/09/2015
AMIODARONE HCL ORAL TABLET 200 MG			0.24100	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 10 MG			0.12900	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 100 MG			1.12300	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 150 MG			1.69800	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 25 MG			0.28400	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 50 MG			0.55300	10/15/2015	10/09/2015
AMITRIPTYLINE HCL ORAL TABLET 75 MG			0.82500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
AMLODIPINE BESYLATE ORAL TABLET 10 MG			0.08600	10/15/2015	10/09/2015
AMLODIPINE BESYLATE ORAL TABLET 2.5 MG			0.08600	10/15/2015	10/09/2015
AMLODIPINE BESYLATE ORAL TABLET 5 MG			0.08600	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 10 MG-20MG			0.86500	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 10 MG-40MG			1.14800	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 2.5MG-10MG			0.73200	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 5 MG-10 MG			0.74600	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 5 MG-20 MG			0.78800	10/15/2015	10/09/2015
AMLODIPINE BESYLATE/BENAZEPRIL HCL ORAL CAPSULE 5 MG-40 MG			0.96700	10/15/2015	10/09/2015
AMMONIUM LACTATE TOPICAL CREAM (GRAM) 12 %			0.06200	10/15/2015	10/09/2015
AMMONIUM LACTATE TOPICAL LOTION (GRAM) 12 %			0.07600	10/15/2015	10/09/2015
AMOXAPINE ORAL TABLET 100 MG			0.77500	10/15/2015	10/09/2015
AMOXAPINE ORAL TABLET 150 MG			1.39000	10/15/2015	10/09/2015
AMOXAPINE ORAL TABLET 25 MG			0.28900	10/15/2015	10/09/2015
AMOXAPINE ORAL TABLET 50 MG			0.48700	10/15/2015	10/09/2015
AMOXICILLIN ORAL CAPSULE 250 MG			0.05900	10/15/2015	10/09/2015
AMOXICILLIN ORAL CAPSULE 500 MG			0.11500	10/15/2015	10/09/2015
AMOXICILLIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.01200	10/15/2015	10/09/2015
AMOXICILLIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 200 MG/5ML			0.05900	10/15/2015	10/09/2015
AMOXICILLIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.02900	10/15/2015	10/09/2015
AMOXICILLIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 400 MG/5ML			0.06600	10/15/2015	10/09/2015
AMOXICILLIN ORAL TABLET 875 MG			0.46600	10/15/2015	10/09/2015
AMOXICILLIN ORAL TABLET, CHEWABLE 125 MG			0.09800	10/15/2015	10/09/2015
AMOXICILLIN ORAL TABLET, CHEWABLE 250 MG			0.16000	10/15/2015	10/09/2015
AMOXICILLIN ORAL TABLET, CHEWABLE 400 MG			0.41000	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 200-28.5/5			0.28500	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250-62.5/5			0.73900	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 400-57MG/5			0.28500	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 600-42.9/5			0.29900	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET 250-125 MG			4.69500	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET 500-125 MG			1.11100	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET 875-125 MG			1.22200	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET, CHEWABLE 200-28.5MG			1.35700	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET, CHEWABLE 400-57MG			1.95300	10/15/2015	10/09/2015
AMOXICILLIN/POTASSIUM CLAVULANATE ORAL TABLET, EXTENDED RELEASE 12 HR 1000-62.5			3.20000	10/15/2015	10/09/2015
AMPICILLIN SODIUM INJECTION VIAL (EA) 1 G			5.35000	10/15/2015	10/09/2015
AMPICILLIN SODIUM INJECTION VIAL (EA) 10 G			69.55000	10/15/2015	10/09/2015
AMPICILLIN SODIUM INJECTION VIAL (EA) 125 MG			4.46800	10/15/2015	10/09/2015
AMPICILLIN SODIUM INJECTION VIAL (EA) 2 G			8.02500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
AMPICILLIN SODIUM INJECTION VIAL (EA) 250 MG			2.14000	10/15/2015	10/09/2015
AMPICILLIN SODIUM INJECTION VIAL (EA) 500 MG			3.21000	10/15/2015	10/09/2015
AMPICILLIN SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 1 G			12.75300	10/15/2015	10/09/2015
AMPICILLIN SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 2 G			24.73900	10/15/2015	10/09/2015
AMPICILLIN SODIUM/SULBACTAM SODIUM INJECTION VIAL (EA) 1.5 G			3.21000	10/15/2015	10/09/2015
AMPICILLIN SODIUM/SULBACTAM SODIUM INJECTION VIAL (EA) 15 G			43.38800	10/15/2015	10/09/2015
AMPICILLIN SODIUM/SULBACTAM SODIUM INJECTION VIAL (EA) 3 G			6.42000	10/15/2015	10/09/2015
AMPICILLIN SODIUM/SULBACTAM SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 1.5 G			7.09400	10/15/2015	10/09/2015
AMPICILLIN SODIUM/SULBACTAM SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 3 G			13.38500	10/15/2015	10/09/2015
AMPICILLIN TRIHYDRATE ORAL CAPSULE 250 MG			0.09600	10/15/2015	10/09/2015
AMPICILLIN TRIHYDRATE ORAL CAPSULE 500 MG			0.15500	10/15/2015	10/09/2015
AMPICILLIN TRIHYDRATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.01300	10/15/2015	10/09/2015
AMPICILLIN TRIHYDRATE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.04600	10/15/2015	10/09/2015
ANAGRELIDE HCL ORAL CAPSULE 0.5 MG			0.43900	10/15/2015	10/09/2015
ANAGRELIDE HCL ORAL CAPSULE 1 MG			0.87900	10/15/2015	10/09/2015
ANASTROZOLE ORAL TABLET 1 MG			1.01800	10/15/2015	10/09/2015
ANTIPYRINE/BENZOCAINE OTIC DROPS 5.4 %-1.4%			0.55900	10/15/2015	10/09/2015
APRACLONIDINE HCL OPHTHALMIC DROPS 0.5 %			15.07600	10/15/2015	10/09/2015
ARGININE ORAL TABLET 500 MG			0.05800	10/15/2015	10/09/2015
ASCORBIC ACID ORAL TABLET 250 MG			0.02600	10/15/2015	10/09/2015
ASCORBIC ACID ORAL TABLET 500 MG			0.02600	10/15/2015	10/09/2015
ASPIRIN ORAL TABLET 325 MG			0.01100	10/15/2015	10/09/2015
ASPIRIN ORAL TABLET, CHEWABLE 81 MG			0.02300	10/15/2015	10/09/2015
ASPIRIN ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 325 MG			0.01100	10/15/2015	10/09/2015
ASPIRIN ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 81 MG			0.00900	10/15/2015	10/09/2015
ATENOLOL ORAL TABLET 100 MG			0.04900	10/15/2015	10/09/2015
ATENOLOL ORAL TABLET 25 MG			0.02800	10/15/2015	10/09/2015
ATENOLOL ORAL TABLET 50 MG			0.03100	10/15/2015	10/09/2015
ATENOLOL/CHLORTHALIDONE ORAL TABLET 100MG-25MG			0.12900	10/15/2015	10/09/2015
ATENOLOL/CHLORTHALIDONE ORAL TABLET 50 MG-25MG			0.09900	10/15/2015	10/09/2015
ATORVASTATIN CALCIUM ORAL TABLET 10 MG			0.37600	10/15/2015	10/09/2015
ATORVASTATIN CALCIUM ORAL TABLET 20 MG			0.54000	10/15/2015	10/09/2015
ATORVASTATIN CALCIUM ORAL TABLET 40 MG			0.61700	10/15/2015	10/09/2015
ATORVASTATIN CALCIUM ORAL TABLET 80 MG			0.60800	10/15/2015	10/09/2015
ATROPINE SULFATE INJECTION VIAL (ML) 1 MG/ML			0.55300	10/15/2015	10/09/2015
ATROPINE SULFATE OPHTHALMIC DROPS 1 %			1.94000	10/15/2015	10/09/2015
ATROPINE SULFATE OPHTHALMIC OINTMENT (GRAM) 1 %			4.87000	10/15/2015	10/09/2015
AZATHIOPRINE ORAL TABLET 50 MG			0.28000	10/15/2015	10/09/2015
AZELASTINE HCL NASAL AEROSOL, SPRAY WITH PUMP (ML) 137 MCG			3.00100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
AZELASTINE HCL OPHTHALMIC DROPS 0.05 %			14.68000	10/15/2015	10/09/2015
AZITHROMYCIN INTRAVENOUS VIAL (EA) 500 MG			7.80000	10/15/2015	10/09/2015
AZITHROMYCIN INTRAVENOUS VIAL WITH THREADED PORT (EA) 500 MG			11.98400	10/15/2015	10/09/2015
AZITHROMYCIN ORAL PACKET (EA) 1 G			19.54500	10/15/2015	10/09/2015
AZITHROMYCIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 100 MG/5ML			1.88100	10/15/2015	10/09/2015
AZITHROMYCIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 200 MG/5ML			1.22200	10/15/2015	10/09/2015
AZITHROMYCIN ORAL TABLET 250 MG			0.95500	10/15/2015	10/09/2015
AZITHROMYCIN ORAL TABLET 500 MG			2.48700	10/15/2015	10/09/2015
AZITHROMYCIN ORAL TABLET 600 MG			4.92700	10/15/2015	10/09/2015
AZTREONAM INJECTION VIAL (EA) 1 G			35.25600	10/15/2015	10/09/2015
AZTREONAM INJECTION VIAL (EA) 2 G			71.63600	10/15/2015	10/09/2015
B COMPLEX WITH VITAMIN C ORAL CAPSULE			0.05300	10/15/2015	10/09/2015
B COMPLEX WITH VITAMIN C ORAL TABLET			0.05300	10/15/2015	10/09/2015
BACITRACIN INTRAMUSCULAR VIAL (EA) 50000 UNIT			12.34700	10/15/2015	10/09/2015
BACITRACIN OPHTHALMIC OINTMENT (GRAM) 500 UNIT/G			14.63700	10/15/2015	10/09/2015
BACITRACIN TOPICAL OINTMENT (GRAM) 500 UNIT/G			0.05000	10/15/2015	10/09/2015
BACITRACIN ZINC TOPICAL OINTMENT (GRAM) 500 UNIT/G			0.03400	10/15/2015	10/09/2015
BACITRACIN ZINC/POLYMYXIN B SULFATE TOPICAL OINTMENT (GRAM) 500-10K/G			0.63600	10/15/2015	10/09/2015
BACITRACIN/POLYMYXIN B SULFATE OPHTHALMIC OINTMENT (GRAM) 500-10K/G			6.54800	10/15/2015	10/09/2015
BACLOFEN ORAL TABLET 10 MG			0.21000	10/15/2015	10/09/2015
BACLOFEN ORAL TABLET 20 MG			0.39800	10/15/2015	10/09/2015
BACTERIOSTATIC SODIUM CHLORIDE INJECTION VIAL (ML) 0.9 %			0.02400	10/15/2015	10/09/2015
BALSALAZIDE DISODIUM ORAL CAPSULE 750 MG			1.07900	10/15/2015	10/09/2015
BENAZEPRIL HCL ORAL TABLET 10 MG			0.13100	10/15/2015	10/09/2015
BENAZEPRIL HCL ORAL TABLET 20 MG			0.13100	10/15/2015	10/09/2015
BENAZEPRIL HCL ORAL TABLET 40 MG			0.16100	10/15/2015	10/09/2015
BENAZEPRIL HCL ORAL TABLET 5 MG			0.15900	10/15/2015	10/09/2015
BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5MG			1.54500	10/15/2015	10/09/2015
BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-12.5 MG			1.53200	10/15/2015	10/09/2015
BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-25MG			1.57900	10/15/2015	10/09/2015
BENAZEPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 5-6.25MG			0.35400	10/15/2015	10/09/2015
BENZOCAINE OTIC DROPS 20 %			1.22100	10/15/2015	10/09/2015
BENZONATATE ORAL CAPSULE 100 MG			0.14000	10/15/2015	10/09/2015
BENZONATATE ORAL CAPSULE 200 MG			0.24600	10/15/2015	10/09/2015
BENZOYL PEROXIDE MICROSPHERES TOPICAL CLEANSER (GRAM) 7 %			0.53900	10/15/2015	10/09/2015
BENZOYL PEROXIDE MICROSPHERES TOPICAL KIT, CLEANSER & CREAM 7%-5.5%			92.28700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 10 %			0.08600	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 2.5 %			0.08700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 4 %			0.13200	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 5 %			0.09500	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 6 %			0.18000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 8 %			0.14300	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (GRAM) 9%			0.21300	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL CLEANSER (ML) 7 %			0.18200	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL GEL (GRAM) 10 %			0.23500	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL GEL (GRAM) 2.5 %			0.23900	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL GEL (GRAM) 4 %			1.34400	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL GEL (GRAM) 5 %			0.07700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL GEL (GRAM) 8 %			1.39200	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL KIT 4 %-5 %			69.48100	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL KIT 8%-5%			72.06600	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL LOTION (GRAM) 4 %			0.13200	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL LOTION (ML) 10 %			0.10100	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL LOTION (ML) 5 %			0.07700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL TOWELETTE (EA) 3 %			4.71700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL TOWELETTE (EA) 6 %			4.71700	10/15/2015	10/09/2015
BENZOYL PEROXIDE TOPICAL TOWELETTE (EA) 9%			4.71700	10/15/2015	10/09/2015
BENZOYL PEROXIDE/ALOE VERA TOPICAL SUSPENSION, TOPICAL (GRAM) 5.25 %			0.32200	10/15/2015	10/09/2015
BENZTROPINE MESYLATE INJECTION AMPUL (ML) 2 MG/2 ML			23.50000	10/15/2015	10/09/2015
BENZTROPINE MESYLATE INJECTION VIAL (ML) 2 MG/2 ML			25.14500	10/15/2015	10/09/2015
BENZTROPINE MESYLATE ORAL TABLET 0.5 MG			0.13300	10/15/2015	10/09/2015
BENZTROPINE MESYLATE ORAL TABLET 1 MG			0.15100	10/15/2015	10/09/2015
BENZTROPINE MESYLATE ORAL TABLET 2 MG			0.19500	10/15/2015	10/09/2015
BETA-CAROTENE(A) W-C & E/LUTEIN/MINERALS ORAL TABLET 1000-60-2			0.03400	10/15/2015	10/09/2015
BETAMETHASONE ACETATE/BETAMETHASONE SODIUM PHOSPHATE INJECTION VIAL (ML) 6 MG/ML			6.84800	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE TOPICAL CREAM (GRAM) 0.05 %			1.78700	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE TOPICAL GEL (GRAM) 0.05 %			1.94900	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE TOPICAL LOTION (ML) 0.05 %			0.15600	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE TOPICAL OINTMENT (GRAM) 0.05 %			2.59500	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE/PROPYLENE GLYCOL TOPICAL CREAM (GRAM) 0.05 %			0.69600	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE/PROPYLENE GLYCOL TOPICAL LOTION (ML) 0.05 %			1.63100	10/15/2015	10/09/2015
BETAMETHASONE DIPROPIONATE/PROPYLENE GLYCOL TOPICAL OINTMENT (GRAM) 0.05 %			0.40000	10/15/2015	10/09/2015
BETAMETHASONE VALERATE TOPICAL CREAM (GRAM) 0.1 %			0.84000	10/15/2015	10/09/2015
BETAMETHASONE VALERATE TOPICAL LOTION (ML) 0.1 %			0.85100	10/15/2015	10/09/2015
BETAMETHASONE VALERATE TOPICAL OINTMENT (GRAM) 0.1 %			0.95000	10/15/2015	10/09/2015
BETAXOLOL HCL OPHTHALMIC DROPS 0.5 %			2.80000	10/15/2015	10/09/2015
BETAXOLOL HCL ORAL TABLET 10 MG			0.59500	10/15/2015	10/09/2015
BETAXOLOL HCL ORAL TABLET 20 MG			0.87500	10/15/2015	10/09/2015
BETHANECHOL CHLORIDE ORAL TABLET 10 MG			0.45200	10/15/2015	10/09/2015
BETHANECHOL CHLORIDE ORAL TABLET 25 MG			0.53700	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
BETHANECHOL CHLORIDE ORAL TABLET 5 MG			0.25800	10/15/2015	10/09/2015
BETHANECHOL CHLORIDE ORAL TABLET 50 MG			1.12700	10/15/2015	10/09/2015
BICALUTAMIDE ORAL TABLET 50 MG			2.11400	10/15/2015	10/09/2015
BISACODYL ORAL TABLET 5 MG			0.01800	10/15/2015	10/09/2015
BISACODYL ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 5 MG			0.01000	10/15/2015	10/09/2015
BISACODYL RECTAL SUPPOSITORY, RECTAL 10 MG			0.07600	10/15/2015	10/09/2015
BISMUTH SUBSALICYLATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 262MG/15ML			0.01000	10/15/2015	10/09/2015
BISMUTH SUBSALICYLATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 525MG/15ML			0.01000	10/15/2015	10/09/2015
BISOPROLOL FUMARATE ORAL TABLET 10 MG			0.76200	10/15/2015	10/09/2015
BISOPROLOL FUMARATE ORAL TABLET 5 MG			0.76200	10/15/2015	10/09/2015
BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE ORAL TABLET 10-6.25MG			0.07900	10/15/2015	10/09/2015
BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE ORAL TABLET 2.5-6.25MG			0.07900	10/15/2015	10/09/2015
BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE ORAL TABLET 5-6.25MG			0.07900	10/15/2015	10/09/2015
BLEOMYCIN SULFATE INJECTION VIAL (EA) 15 UNIT			34.90600	10/15/2015	10/09/2015
BLEOMYCIN SULFATE INJECTION VIAL (EA) 30 UNIT			72.96800	10/15/2015	10/09/2015
BRIMONIDINE TARTRATE OPHTHALMIC DROPS 0.15 %			11.77000	10/15/2015	10/09/2015
BRIMONIDINE TARTRATE OPHTHALMIC DROPS 0.2 %			2.41200	10/15/2015	10/09/2015
BROMOCRIPTINE MESYLATE ORAL CAPSULE 5 MG			3.39300	10/15/2015	10/09/2015
BROMOCRIPTINE MESYLATE ORAL TABLET 2.5 MG			1.68900	10/15/2015	10/09/2015
BROMPHENIRAMINE MALEATE/PHENYLEPHRINE HCL/DEXTROMETHORPHAN ORAL LIQUID (ML) 2-5-10MG/5			0.07200	10/15/2015	10/09/2015
BROMPHENIRAMINE MALEATE/PHENYLEPHRINE HCL/DEXTROMETHORPHAN ORAL SOLUTION, ORAL 1-2.5-5/5			0.01400	10/15/2015	10/09/2015
BROMPHENIRAMINE MALEATE/PSEUDOEPHEDRINE HCL/CODEINE ORAL LIQUID (ML) 1.3-10-6.3			0.10200	10/15/2015	10/09/2015
BUDESONIDE INHALATION AMPUL FOR NEBULIZATION (ML) 0.25MG/2ML			2.64200	10/15/2015	10/09/2015
BUMETANIDE INJECTION VIAL (ML) 0.25 MG/ML			0.44000	10/15/2015	10/09/2015
BUMETANIDE ORAL TABLET 0.5 MG			0.58500	10/15/2015	10/09/2015
BUMETANIDE ORAL TABLET 1 MG			0.18700	10/15/2015	10/09/2015
BUMETANIDE ORAL TABLET 2 MG			0.47000	10/15/2015	10/09/2015
BUPIVACAINE HCL/PF INJECTION VIAL (ML) 2.5 MG/ML			0.37200	10/15/2015	10/09/2015
BUPIVACAINE HCL/PF INJECTION VIAL (ML) 7.5 MG/ML			0.42300	10/15/2015	10/09/2015
BUPRENORPHINE HCL SUBLINGUAL TABLET, SUBLINGUAL 2 MG			2.65700	10/15/2015	10/09/2015
BUPRENORPHINE HCL SUBLINGUAL TABLET, SUBLINGUAL 8 MG			4.96900	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET 100 MG			0.77200	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET 75 MG			0.46400	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET, EXTENDED RELEASE 100 MG			0.82600	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET, EXTENDED RELEASE 150 MG			0.92300	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET, EXTENDED RELEASE 200 MG			1.99200	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET, EXTENDED RELEASE 24 HR 150 MG			1.28700	10/15/2015	10/09/2015
BUPROPION HCL ORAL TABLET, EXTENDED RELEASE 24 HR 300 MG			1.48100	10/15/2015	10/09/2015
BUSPIRONE HCL ORAL TABLET 10 MG			0.07100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
BUSPIRONE HCL ORAL TABLET 15 MG			0.10200	10/15/2015	10/09/2015
BUSPIRONE HCL ORAL TABLET 30 MG			0.66600	10/15/2015	10/09/2015
BUSPIRONE HCL ORAL TABLET 5 MG			0.05200	10/15/2015	10/09/2015
BUSPIRONE HCL ORAL TABLET 7.5 MG			1.35200	10/15/2015	10/09/2015
BUTALBITAL/ACETAMINOPHEN ORAL TABLET 50MG-325MG			0.32400	10/15/2015	10/09/2015
BUTALBITAL/ACETAMINOPHEN ORAL TABLET 50MG-650MG			0.57300	10/15/2015	10/09/2015
BUTALBITAL/ACETAMINOPHEN/CAFFEINE ORAL TABLET 50-325-40			0.21600	10/15/2015	10/09/2015
BUTALBITAL/ACETAMINOPHEN/CAFFEINE ORAL TABLET 50-500-40			0.16700	10/15/2015	10/09/2015
BUTALBITAL/ASPIRIN/CAFFEINE ORAL CAPSULE 50-325-40			0.05000	10/15/2015	10/09/2015
BUTALBITAL/ASPIRIN/CAFFEINE ORAL TABLET 50-325-40			0.18100	10/15/2015	10/09/2015
BUTORPHANOL TARTRATE INJECTION VIAL (ML) 1 MG/ML			3.21000	10/15/2015	10/09/2015
BUTORPHANOL TARTRATE INJECTION VIAL (ML) 2 MG/ML			4.31700	10/15/2015	10/09/2015
BUTORPHANOL TARTRATE NASAL AEROSOL, SPRAY (ML) 10 MG/ML			12.22000	10/15/2015	10/09/2015
CABERGOLINE ORAL TABLET 0.5 MG			27.69100	10/15/2015	10/09/2015
CALCIPOTRIENE TOPICAL OINTMENT (GRAM) 0.005 %			4.83500	10/15/2015	10/09/2015
CALCIPOTRIENE TOPICAL SOLUTION, NON-ORAL 0.005 %			2.58600	10/15/2015	10/09/2015
CALCITONIN,SALMON,SYNTHETIC NASAL AEROSOL, SPRAY WITH PUMP (ML) 200/SPRAY			26.70200	10/15/2015	10/09/2015
CALCITRIOL ORAL CAPSULE 0.25 MCG			1.02200	10/15/2015	10/09/2015
CALCITRIOL ORAL CAPSULE 0.5 MCG			1.63400	10/15/2015	10/09/2015
CALCITRIOL ORAL SOLUTION, ORAL 1 MCG/ML			9.70400	10/15/2015	10/09/2015
CALCIUM CARBONATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 500 MG/5ML			0.02100	10/15/2015	10/09/2015
CALCIUM CARBONATE ORAL TABLET 260MG(648)			0.01500	10/15/2015	10/09/2015
CALCIUM CARBONATE ORAL TABLET 500(1250)			0.02200	10/15/2015	10/09/2015
CALCIUM CARBONATE ORAL TABLET 600 MG			0.01500	10/15/2015	10/09/2015
CALCIUM CARBONATE ORAL TABLET, CHEWABLE 500(1250)			0.02200	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VIT D3)/MINERALS ORAL TABLET, CHEWABLE 600 MG-400			0.02000	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 250 MG-125			0.01800	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 500 MG-200			0.03200	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 500 MG-400			0.01900	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 500 MG-600			0.02000	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 600 MG-200			0.02000	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 600 MG-400			0.01600	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET, CHEWABLE 500 MG-100			0.02200	10/15/2015	10/09/2015
CALCIUM CARBONATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET, CHEWABLE 500 MG-600			0.04400	10/15/2015	10/09/2015
CALCIUM CARBONATE/ERGOCALCIFEROL (VITAMIN D2) ORAL TABLET 250 MG-125			0.01800	10/15/2015	10/09/2015
CALCIUM CARBONATE/VIT D3/MAG OX/ZINC/COPPER/MANGANESE/BORON ORAL TABLET, CHEWABLE 600 MG-800			0.09700	10/15/2015	10/09/2015
CALCIUM CARBONATE/VIT D3/MAGOX/ZINC/COPPER/MANGANESE/BORON ORAL TABLET 600 MG-200			0.02000	10/15/2015	10/09/2015
CALCIUM CITRATE ORAL TABLET 200(950)MG			0.04700	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CALCIUM CITRATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 200 MG-250			0.04700	10/15/2015	10/09/2015
CALCIUM CITRATE/CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 315 MG-250			0.06000	10/15/2015	10/09/2015
CALCIUM GLUCONATE INTRAVENOUS VIAL (ML) 100 MG/ML			0.05200	10/15/2015	10/09/2015
CALCIUM GLUCONATE ORAL TABLET 60(648) MG			0.01500	10/15/2015	10/09/2015
CALCIUM LACTATE ORAL TABLET 650 MG			0.01700	10/15/2015	10/09/2015
CALCIUM LACTATE ORAL TABLET 84 MG(648)			0.01700	10/15/2015	10/09/2015
CALCIUM POLYCARBOPHIL ORAL TABLET 625 MG			0.07900	10/15/2015	10/09/2015
CAPSAICIN TOPICAL CREAM (GRAM) 0.025 %			0.09100	10/15/2015	10/09/2015
CAPSAICIN TOPICAL CREAM (GRAM) 0.075 %			0.15700	10/15/2015	10/09/2015
CAPTOPRIL ORAL TABLET 100 MG			0.10800	10/15/2015	10/09/2015
CAPTOPRIL ORAL TABLET 12.5 MG			0.81100	10/15/2015	10/09/2015
CAPTOPRIL ORAL TABLET 25 MG			0.49600	10/15/2015	10/09/2015
CAPTOPRIL ORAL TABLET 50 MG			1.15200	10/15/2015	10/09/2015
CAPTOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 25 MG-15MG			0.17100	10/15/2015	10/09/2015
CAPTOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 25 MG-25MG			0.17100	10/15/2015	10/09/2015
CAPTOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 50 MG-15MG			0.26800	10/15/2015	10/09/2015
CAPTOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 50 MG-25MG			0.26800	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 100 MG/5ML			0.14500	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 200MG/10ML			0.08300	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL TABLET 200 MG			1.02600	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL TABLET, CHEWABLE 100 MG			0.38200	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL TABLET, EXTENDED RELEASE 12 HR 200 MG			0.83100	10/15/2015	10/09/2015
CARBAMAZEPINE ORAL TABLET, EXTENDED RELEASE 12 HR 400 MG			1.66100	10/15/2015	10/09/2015
CARBAMIDE PEROXIDE OTIC DROPS 6.5 %			0.07100	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET 10MG-100MG			0.21300	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET 25MG-100MG			0.25700	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET 25MG-250MG			0.31700	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET, EXTENDED RELEASE 25MG-100MG			0.33300	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET, EXTENDED RELEASE 50MG-200MG			0.77800	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET,DISINTEGRATING 10MG-100MG			0.83100	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET,DISINTEGRATING 25MG-100MG			0.93900	10/15/2015	10/09/2015
CARBIDOPA/LEVODOPA ORAL TABLET,DISINTEGRATING 25MG-250MG			1.49500	10/15/2015	10/09/2015
CARBINOXAMINE MALEATE ORAL LIQUID (ML) 4 MG/5 ML			0.11300	10/15/2015	10/09/2015
CARBINOXAMINE MALEATE ORAL TABLET 4 MG			0.53700	10/15/2015	10/09/2015
CARBOPLATIN INTRAVENOUS VIAL (EA) 150 MG			62.96900	10/15/2015	10/09/2015
CARBOPLATIN INTRAVENOUS VIAL (ML) 10 MG/ML			2.25500	10/15/2015	10/09/2015
CARISOPRODOL ORAL TABLET 250 MG			2.82900	10/15/2015	10/09/2015
CARISOPRODOL ORAL TABLET 350 MG			0.06300	10/15/2015	10/09/2015
CARISOPRODOL/ASPIRIN ORAL TABLET 200-325 MG			1.56300	10/15/2015	10/09/2015
CARTEOLOL HCL OPHTHALMIC DROPS 1 %			1.99400	10/15/2015	10/09/2015
CARVEDILOL ORAL TABLET 12.5 MG			0.09900	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CARVEDILOL ORAL TABLET 25 MG			0.09900	10/15/2015	10/09/2015
CARVEDILOL ORAL TABLET 3.125 MG			0.09900	10/15/2015	10/09/2015
CARVEDILOL ORAL TABLET 6.25 MG			0.09900	10/15/2015	10/09/2015
CEFACLOR ORAL CAPSULE 250 MG			1.23100	10/15/2015	10/09/2015
CEFACLOR ORAL CAPSULE 500 MG			2.17400	10/15/2015	10/09/2015
CEFACLOR ORAL TABLET, EXTENDED RELEASE 12 HR 500 MG			3.28400	10/15/2015	10/09/2015
CEFADROXIL ORAL CAPSULE 500 MG			0.65000	10/15/2015	10/09/2015
CEFADROXIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.48700	10/15/2015	10/09/2015
CEFADROXIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 500 MG/5ML			0.67500	10/15/2015	10/09/2015
CEFADROXIL ORAL TABLET 1 G			4.17300	10/15/2015	10/09/2015
CEFAZOLIN SODIUM INJECTION VIAL (EA) 1 G			1.85100	10/15/2015	10/09/2015
CEFAZOLIN SODIUM INJECTION VIAL (EA) 10 G			10.70000	10/15/2015	10/09/2015
CEFAZOLIN SODIUM INJECTION VIAL (EA) 500 MG			1.55500	10/15/2015	10/09/2015
CEFDINIR ORAL CAPSULE 300 MG			2.53600	10/15/2015	10/09/2015
CEFDINIR ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.53600	10/15/2015	10/09/2015
CEFDINIR ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			1.10400	10/15/2015	10/09/2015
CEFDITOREN PIVOXIL ORAL TABLET 400 MG			12.61700	10/15/2015	10/09/2015
CEFEPIME HCL INJECTION VIAL (EA) 1 G			7.61800	10/15/2015	10/09/2015
CEFEPIME HCL INJECTION VIAL (EA) 2 G			15.11900	10/15/2015	10/09/2015
CEFEPIME HCL/DEXTROSE 5 % IN WATER INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (EA) 1 G/50 ML			12.08000	10/15/2015	10/09/2015
CEFEPIME HCL/DEXTROSE 5 % IN WATER INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (EA) 2 G/50 ML			18.59600	10/15/2015	10/09/2015
CEFOTAXIME SODIUM INJECTION VIAL (EA) 1 G			6.08800	10/15/2015	10/09/2015
CEFOTAXIME SODIUM INJECTION VIAL (EA) 500 MG			2.51800	10/15/2015	10/09/2015
CEFOXITIN SODIUM INTRAVENOUS VIAL (EA) 1 G			6.57700	10/15/2015	10/09/2015
CEFOXITIN SODIUM INTRAVENOUS VIAL (EA) 2 G			12.58100	10/15/2015	10/09/2015
CEFPODOXIME PROXETIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 100 MG/5ML			0.77000	10/15/2015	10/09/2015
CEFPODOXIME PROXETIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 50 MG/5 ML			0.39400	10/15/2015	10/09/2015
CEFPODOXIME PROXETIL ORAL TABLET 100 MG			2.98900	10/15/2015	10/09/2015
CEFPODOXIME PROXETIL ORAL TABLET 200 MG			3.94900	10/15/2015	10/09/2015
CEFPROZIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.29100	10/15/2015	10/09/2015
CEFPROZIL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.62700	10/15/2015	10/09/2015
CEFPROZIL ORAL TABLET 250 MG			2.29300	10/15/2015	10/09/2015
CEFPROZIL ORAL TABLET 500 MG			4.55900	10/15/2015	10/09/2015
CEFTAZIDIME INJECTION VIAL (EA) 2 G			17.09300	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INJECTION VIAL (EA) 1 G			5.40900	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INJECTION VIAL (EA) 10 G			47.35500	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INJECTION VIAL (EA) 2 G			9.02800	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INJECTION VIAL (EA) 250 MG			2.03100	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INJECTION VIAL (EA) 500 MG			3.41400	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CEFTRIAXONE SODIUM INTRAVENOUS IV SOLUTION, PIGGYBACK, BOTTLE (EA) 1 G			13.37500	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INTRAVENOUS IV SOLUTION, PIGGYBACK, BOTTLE (EA) 2 G			26.75000	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 1 G			5.40900	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 2 G			9.02800	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM/DEXTROSE, ISO-OSMOTIC INTRAVENOUS IV SOLUTION, PIGGYBACK PREMIX FROZEN(ML) 1 G/50 ML			0.26800	10/15/2015	10/09/2015
CEFTRIAXONE SODIUM/DEXTROSE, ISO-OSMOTIC INTRAVENOUS IV SOLUTION, PIGGYBACK PREMIX FROZEN(ML) 2 G/50 ML			0.53500	10/15/2015	10/09/2015
CEFUROXIME AXETIL ORAL TABLET 250 MG			1.43900	10/15/2015	10/09/2015
CEFUROXIME AXETIL ORAL TABLET 500 MG			2.70300	10/15/2015	10/09/2015
CEFUROXIME SODIUM INJECTION VIAL (EA) 1.5 G			5.37500	10/15/2015	10/09/2015
CEFUROXIME SODIUM INJECTION VIAL (EA) 750 MG			2.35400	10/15/2015	10/09/2015
CEFUROXIME SODIUM INTRAVENOUS VIAL (EA) 7.5 G			21.29300	10/15/2015	10/09/2015
CEPHALEXIN ORAL CAPSULE 250 MG			0.12100	10/15/2015	10/09/2015
CEPHALEXIN ORAL CAPSULE 500 MG			0.23400	10/15/2015	10/09/2015
CEPHALEXIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.14800	10/15/2015	10/09/2015
CEPHALEXIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.08900	10/15/2015	10/09/2015
CEPHALEXIN ORAL TABLET 250 MG			0.12100	10/15/2015	10/09/2015
CEPHALEXIN ORAL TABLET 500 MG			0.23400	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL SOLUTION, ORAL 1 MG/ML			0.04100	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL SOLUTION, ORAL 5 MG/5 ML			0.04100	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL TABLET 10 MG			0.06400	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL TABLET 5 MG			0.11200	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL TABLET, CHEWABLE 10 MG			1.77700	10/15/2015	10/09/2015
CETIRIZINE HCL ORAL TABLET, CHEWABLE 5 MG			3.55800	10/15/2015	10/09/2015
CETIRIZINE HCL/PSEUDOEPHEDRINE HCL ORAL TABLET, EXTENDED RELEASE 12 HR 5 MG-120MG			0.62900	10/15/2015	10/09/2015
CEVIMELINE HCL ORAL CAPSULE 30 MG			2.72100	10/15/2015	10/09/2015
CHLORDIAZEPOXIDE HCL ORAL CAPSULE 10 MG			0.05900	10/15/2015	10/09/2015
CHLORDIAZEPOXIDE HCL ORAL CAPSULE 25 MG			0.06600	10/15/2015	10/09/2015
CHLORDIAZEPOXIDE HCL ORAL CAPSULE 5 MG			0.05700	10/15/2015	10/09/2015
CHLORHEXIDINE GLUCONATE MUCOUS MEMBRANE MOUTHWASH 0.12 %			0.01000	10/15/2015	10/09/2015
CHLOROQUINE PHOSPHATE ORAL TABLET 250 MG			1.56800	10/15/2015	10/09/2015
CHLOROQUINE PHOSPHATE ORAL TABLET 500 MG			3.72900	10/15/2015	10/09/2015
CHLOROTHIAZIDE ORAL TABLET 250 MG			0.14600	10/15/2015	10/09/2015
CHLOROTHIAZIDE ORAL TABLET 500 MG			0.05700	10/15/2015	10/09/2015
CHLORPHENIRAMINE MALEATE ORAL SYRUP 2 MG/5 ML			0.01500	10/15/2015	10/09/2015
CHLORPHENIRAMINE MALEATE ORAL TABLET 4 MG			0.01200	10/15/2015	10/09/2015
CHLORPHENIRAMINE MALEATE ORAL TABLET, EXTENDED RELEASE 12 MG			0.25600	10/15/2015	10/09/2015
CHLORPROMAZINE HCL ORAL TABLET 10 MG			0.84900	10/15/2015	10/09/2015
CHLORPROMAZINE HCL ORAL TABLET 100 MG			7.11900	10/15/2015	10/09/2015
CHLORPROMAZINE HCL ORAL TABLET 200 MG			10.88400	10/15/2015	10/09/2015
CHLORPROMAZINE HCL ORAL TABLET 25 MG			3.60000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CHLORPROMAZINE HCL ORAL TABLET 50 MG			5.20800	10/15/2015	10/09/2015
CHLORPROPAMIDE ORAL TABLET 100 MG			0.16700	10/15/2015	10/09/2015
CHLORPROPAMIDE ORAL TABLET 250 MG			0.35300	10/15/2015	10/09/2015
CHLORTHALIDONE ORAL TABLET 25 MG			0.05100	10/15/2015	10/09/2015
CHLORZOXAZONE ORAL TABLET 500 MG			0.06900	10/15/2015	10/09/2015
CHOLECALCIFEROL (VITAMIN D3) ORAL CAPSULE 5000 UNIT			0.02100	10/15/2015	10/09/2015
CHOLECALCIFEROL (VITAMIN D3) ORAL DROPS 400/ML			0.09700	10/15/2015	10/09/2015
CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 1000 UNIT			0.04100	10/15/2015	10/09/2015
CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 2000 UNIT			0.04200	10/15/2015	10/09/2015
CHOLECALCIFEROL (VITAMIN D3) ORAL TABLET 5000 UNIT			0.05600	10/15/2015	10/09/2015
CHOLESTYRAMINE (WITH SUGAR) ORAL POWDER (GRAM) 4 G	0.08400	10/15/2015	0.20818	10/28/2015	10/26/2015
CHOLESTYRAMINE/ASPARTAME ORAL POWDER (GRAM) 4 G			0.12500	10/15/2015	10/09/2015
CHOLINE SALICYLATE/MAGNESIUM SALICYLATE ORAL LIQUID (ML) 500 MG/5ML			0.04600	10/15/2015	10/09/2015
CICLOPIROX OLAMINE TOPICAL CREAM (GRAM) 0.77 %			0.98300	10/15/2015	10/09/2015
CICLOPIROX OLAMINE TOPICAL SUSPENSION, TOPICAL (ML) 0.77 %			1.13800	10/15/2015	10/09/2015
CICLOPIROX TOPICAL GEL (GRAM) 0.77 %			2.07400	10/15/2015	10/09/2015
CICLOPIROX TOPICAL SHAMPOO 1 %			1.06100	10/15/2015	10/09/2015
CICLOPIROX TOPICAL SOLUTION, NON-ORAL 8 %			2.59300	10/15/2015	10/09/2015
CICLOPIROX/VITAMIN E MIXED/NAIL LACQUER REMOVER, NON-ACET TOPICAL KIT 8%-5%			120.05400	10/15/2015	10/09/2015
CILOSTAZOL ORAL TABLET 100 MG			0.29900	10/15/2015	10/09/2015
CILOSTAZOL ORAL TABLET 50 MG			0.29900	10/15/2015	10/09/2015
CIMETIDINE HCL ORAL SOLUTION, ORAL 300 MG/5ML			0.12700	10/15/2015	10/09/2015
CIMETIDINE ORAL TABLET 200 MG	0.11800	10/15/2015	0.26936	10/28/2015	10/26/2015
CIMETIDINE ORAL TABLET 300 MG			0.11800	10/15/2015	10/09/2015
CIMETIDINE ORAL TABLET 400 MG			0.36300	10/15/2015	10/09/2015
CIMETIDINE ORAL TABLET 800 MG			0.15100	10/15/2015	10/09/2015
CIPROFLOXACIN HCL OPHTHALMIC DROPS 0.3 %			1.95100	10/15/2015	10/09/2015
CIPROFLOXACIN HCL ORAL TABLET 250 MG			0.10100	10/15/2015	10/09/2015
CIPROFLOXACIN HCL ORAL TABLET 500 MG			0.16000	10/15/2015	10/09/2015
CIPROFLOXACIN HCL ORAL TABLET 750 MG			0.24300	10/15/2015	10/09/2015
CIPROFLOXACIN LACTATE/DEXTROSE 5 % IN WATER INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 200MG/0.1L			0.07000	10/15/2015	10/09/2015
CIPROFLOXACIN LACTATE/DEXTROSE 5 % IN WATER INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 400MG/0.2L			0.07200	10/15/2015	10/09/2015
CIPROFLOXACIN/CIPROFLOXACIN HCL ORAL TABLET,EXTENDED RELEASE MULTIPHASE 24 HR 1000 MG			7.96700	10/15/2015	10/09/2015
CIPROFLOXACIN/CIPROFLOXACIN HCL ORAL TABLET,EXTENDED RELEASE MULTIPHASE 24 HR 500 MG			7.83800	10/15/2015	10/09/2015
CISPLATIN INTRAVENOUS VIAL (ML) 1 MG/ML			1.55400	10/15/2015	10/09/2015
CITALOPRAM HYDROBROMIDE ORAL SOLUTION, ORAL 10 MG/5 ML			0.21700	10/15/2015	10/09/2015
CITALOPRAM HYDROBROMIDE ORAL TABLET 10 MG			0.08800	10/15/2015	10/09/2015
CITALOPRAM HYDROBROMIDE ORAL TABLET 20 MG			0.08800	10/15/2015	10/09/2015
CITALOPRAM HYDROBROMIDE ORAL TABLET 40 MG			0.09800	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CITRIC ACID/SODIUM CITRATE ORAL SOLUTION, ORAL 334-500MG			0.01500	10/15/2015	10/09/2015
CLARITHROMYCIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 125 MG/5ML			0.44700	10/15/2015	10/09/2015
CLARITHROMYCIN ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 250 MG/5ML			0.82000	10/15/2015	10/09/2015
CLARITHROMYCIN ORAL TABLET 250 MG			3.92300	10/15/2015	10/09/2015
CLARITHROMYCIN ORAL TABLET 500 MG			4.65000	10/15/2015	10/09/2015
CLARITHROMYCIN ORAL TABLET, EXTENDED RELEASE 24 HR 500 MG			3.75000	10/15/2015	10/09/2015
CLEMASTINE FUMARATE ORAL SYRUP 0.67MG/5ML			0.12500	10/15/2015	10/09/2015
CLEMASTINE FUMARATE ORAL TABLET 1.34 MG			0.20700	10/15/2015	10/09/2015
CLEMASTINE FUMARATE ORAL TABLET 2.68 MG			0.27700	10/15/2015	10/09/2015
CLINDAMYCIN HCL ORAL CAPSULE 150 MG			0.14400	10/15/2015	10/09/2015
CLINDAMYCIN HCL ORAL CAPSULE 300 MG			0.65100	10/15/2015	10/09/2015
CLINDAMYCIN PALMITATE HCL ORAL SOLUTION, RECONSTITUTED, ORAL 75 MG/5 ML			0.50300	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE INJECTION VIAL (ML) 150 MG/ML			0.93400	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE INTRAVENOUS VIAL WITH THREADED PORT (ML) 300 MG/2ML			2.11400	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE INTRAVENOUS VIAL WITH THREADED PORT (ML) 600 MG/4ML			0.92800	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE INTRAVENOUS VIAL WITH THREADED PORT (ML) 900MG/6ML			0.83600	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE TOPICAL FOAM (GRAM) 1 %			2.35400	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE TOPICAL GEL (GRAM) 1 %			1.58000	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE TOPICAL SOLUTION, NON-ORAL 1 %			0.99500	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE TOPICAL SWAB, MEDICATED 1 %			0.58100	10/15/2015	10/09/2015
CLINDAMYCIN PHOSPHATE VAGINAL CREAM WITH APPLICATOR 2 %			1.52000	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE TOPICAL CREAM (GRAM) 0.05 %			4.52000	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE TOPICAL FOAM (GRAM) 0.05 %			2.12500	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE TOPICAL GEL (GRAM) 0.05 %			0.79800	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE TOPICAL OINTMENT (GRAM) 0.05 %			4.85000	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE TOPICAL SOLUTION, NON-ORAL 0.05 %			2.43100	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE/EMOLLIENT BASE TOPICAL CREAM (GRAM) 0.05 %			0.44600	10/15/2015	10/09/2015
CLOBETASOL PROPIONATE/EMOLLIENT BASE TOPICAL FOAM (GRAM) 0.05 %			2.12500	10/15/2015	10/09/2015
CLONAZEPAM ORAL TABLET 0.5 MG			0.06000	10/15/2015	10/09/2015
CLONAZEPAM ORAL TABLET 1 MG			0.07800	10/15/2015	10/09/2015
CLONAZEPAM ORAL TABLET 2 MG			0.10800	10/15/2015	10/09/2015
CLONIDINE HCL ORAL TABLET 0.1 MG			0.04200	10/15/2015	10/09/2015
CLONIDINE HCL ORAL TABLET 0.2 MG			0.07800	10/15/2015	10/09/2015
CLONIDINE HCL ORAL TABLET 0.3 MG			0.09900	10/15/2015	10/09/2015
CLOPIDOGREL BISULFATE ORAL TABLET 300 MG			0.27100	10/15/2015	10/09/2015
CLOPIDOGREL BISULFATE ORAL TABLET 75 MG			0.27100	10/15/2015	10/09/2015
CLORAZEPATE DIPOTASSIUM ORAL TABLET 15 MG			0.21900	10/15/2015	10/09/2015
CLORAZEPATE DIPOTASSIUM ORAL TABLET 3.75 MG			0.11900	10/15/2015	10/09/2015
CLORAZEPATE DIPOTASSIUM ORAL TABLET 7.5 MG			0.15900	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
CLOTRIMAZOLE MUCOUS MEMBRANE TROCHE 10 MG			1.22200	10/15/2015	10/09/2015
CLOTRIMAZOLE TOPICAL CREAM (GRAM) 1 %			0.17000	10/15/2015	10/09/2015
CLOTRIMAZOLE TOPICAL SOLUTION, NON-ORAL 1 %			1.82800	10/15/2015	10/09/2015
CLOTRIMAZOLE VAGINAL CREAM WITH APPLICATOR 1 %			0.17000	10/15/2015	10/09/2015
CLOTRIMAZOLE/BETAMETHASONE DIPROPIONATE TOPICAL CREAM (GRAM) 1 %-0.05 %			1.64100	10/15/2015	10/09/2015
CLOTRIMAZOLE/BETAMETHASONE DIPROPIONATE TOPICAL LOTION (ML) 1 %-0.05 %			3.57900	10/15/2015	10/09/2015
CLOZAPINE ORAL TABLET 100 MG			1.85000	10/15/2015	10/09/2015
CLOZAPINE ORAL TABLET 200 MG			3.54100	10/15/2015	10/09/2015
CLOZAPINE ORAL TABLET 25 MG			0.99000	10/15/2015	10/09/2015
CLOZAPINE ORAL TABLET 50 MG			1.33300	10/15/2015	10/09/2015
CODEINE PHOSPHATE/CARISOPRODOL/ASPIRIN ORAL TABLET 16-200-325			1.20000	10/15/2015	10/09/2015
CODEINE SULFATE ORAL TABLET 15 MG			0.24600	10/15/2015	10/09/2015
CODEINE SULFATE ORAL TABLET 30 MG			0.39500	10/15/2015	10/09/2015
CODEINE SULFATE ORAL TABLET 60 MG			0.60300	10/15/2015	10/09/2015
COLESTIPOL HCL ORAL GRANULES (GRAM) 5 G			0.22300	10/15/2015	10/09/2015
COLESTIPOL HCL ORAL PACKET (EA) 5 G			1.89100	10/15/2015	10/09/2015
COLESTIPOL HCL ORAL TABLET 1 G			0.50700	10/15/2015	10/09/2015
COLISTIN (AS COLISTIMETHATE SODIUM) INJECTION VIAL (EA) 150 MG			30.52000	10/15/2015	10/09/2015
CORTISONE ACETATE ORAL TABLET 25 MG			0.30000	10/15/2015	10/09/2015
CROMOLYN SODIUM NASAL AEROSOL, SPRAY WITH PUMP (ML) 5.2 MG			0.30400	10/15/2015	10/09/2015
CROMOLYN SODIUM OPHTHALMIC DROPS 4 %			1.01700	10/15/2015	10/09/2015
CYCLOBENZAPRINE HCL ORAL TABLET 10 MG			0.08500	10/15/2015	10/09/2015
CYCLOBENZAPRINE HCL ORAL TABLET 5 MG			0.15800	10/15/2015	10/09/2015
CYCLOPENTOLATE HCL OPHTHALMIC DROPS 1 %			1.86600	10/15/2015	10/09/2015
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG			1.73900	10/15/2015	10/09/2015
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG			3.19200	10/15/2015	10/09/2015
CYCLOSPORINE ORAL CAPSULE 100 MG			4.49600	10/15/2015	10/09/2015
CYCLOSPORINE, MODIFIED ORAL CAPSULE 100 MG			4.49600	10/15/2015	10/09/2015
CYCLOSPORINE, MODIFIED ORAL CAPSULE 25 MG			1.15800	10/15/2015	10/09/2015
CYCLOSPORINE, MODIFIED ORAL SOLUTION, ORAL 100 MG/ML			4.96300	10/15/2015	10/09/2015
CYPROHEPTADINE HCL ORAL TABLET 4 MG			0.56300	10/15/2015	10/09/2015
CYTARABINE/PF INJECTION VIAL (EA) 1 G			24.42000	10/15/2015	10/09/2015
CYTARABINE/PF INJECTION VIAL (EA) 100 MG			3.88500	10/15/2015	10/09/2015
CYTARABINE/PF INJECTION VIAL (EA) 500 MG			11.65500	10/15/2015	10/09/2015
DANAZOL ORAL CAPSULE 100 MG			2.14400	10/15/2015	10/09/2015
DANAZOL ORAL CAPSULE 200 MG			4.66800	10/15/2015	10/09/2015
DANAZOL ORAL CAPSULE 50 MG			1.42900	10/15/2015	10/09/2015
DANTROLENE SODIUM ORAL CAPSULE 100 MG			1.50900	10/15/2015	10/09/2015
DANTROLENE SODIUM ORAL CAPSULE 25 MG			0.80900	10/15/2015	10/09/2015
DANTROLENE SODIUM ORAL CAPSULE 50 MG			1.21200	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DEFEROXAMINE MESYLATE INJECTION VIAL (EA) 2 G			44.08400	10/15/2015	10/09/2015
DEFEROXAMINE MESYLATE INJECTION VIAL (EA) 500 MG			13.85600	10/15/2015	10/09/2015
DEMECLOCYCLINE HCL ORAL TABLET 150 MG			6.33700	10/15/2015	10/09/2015
DEMECLOCYCLINE HCL ORAL TABLET 300 MG			11.47900	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 10 MG			0.77400	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 100 MG			3.14800	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 150 MG			3.64900	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 25 MG			0.71000	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 50 MG			1.54200	10/15/2015	10/09/2015
DESIPRAMINE HCL ORAL TABLET 75 MG			0.36600	10/15/2015	10/09/2015
DESMOPRESSIN ACETATE (NON-REFRIGERATED) NASAL AEROSOL, SPRAY WITH PUMP (ML) 10/SPRAY			30.01000	10/15/2015	10/09/2015
DESMOPRESSIN ACETATE INJECTION AMPUL (ML) 4MCG/ML			6.49400	10/15/2015	10/09/2015
DESMOPRESSIN ACETATE NASAL AEROSOL, SPRAY WITH PUMP (ML) 10/SPRAY			30.01000	10/15/2015	10/09/2015
DESMOPRESSIN ACETATE ORAL TABLET 0.1 MG			1.48800	10/15/2015	10/09/2015
DESMOPRESSIN ACETATE ORAL TABLET 0.2 MG			1.98700	10/15/2015	10/09/2015
DESOGESTREL-ETHINYL ESTRADIOL ORAL TABLET 0.15-0.03			0.67100	10/15/2015	10/09/2015
DESONIDE TOPICAL CREAM (GRAM) 0.05 %			4.44300	10/15/2015	10/09/2015
DESONIDE TOPICAL LOTION (ML) 0.05 %			1.53600	10/15/2015	10/09/2015
DESONIDE TOPICAL OINTMENT (GRAM) 0.05 %			3.10600	10/15/2015	10/09/2015
DESOXIMETASONE TOPICAL CREAM (GRAM) 0.25 %			2.15200	10/15/2015	10/09/2015
DESOXIMETASONE TOPICAL GEL (GRAM) 0.05 %			2.81000	10/15/2015	10/09/2015
DESOXIMETASONE TOPICAL OINTMENT (GRAM) 0.25 %			5.03300	10/15/2015	10/09/2015
DEXAMETHASONE ORAL ELIXIR 0.5 MG/5ML			0.11500	10/15/2015	10/09/2015
DEXAMETHASONE ORAL SOLUTION, ORAL 0.5 MG/5ML			0.04000	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 0.5 MG			0.05300	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 0.75 MG			0.09600	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 1.5 MG			0.12200	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 2 MG			0.46400	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 4 MG			0.20500	10/15/2015	10/09/2015
DEXAMETHASONE ORAL TABLET 6 MG			0.25700	10/15/2015	10/09/2015
DEXAMETHASONE SOD PHOSPHATE INJECTION VIAL (ML) 4 MG/ML			0.41800	10/15/2015	10/09/2015
DEXCHLORPHENIRAMINE MALEATE ORAL SYRUP 2 MG/5 ML			0.02600	10/15/2015	10/09/2015
DEXMETHYLPHENIDATE HCL ORAL TABLET 10 MG			1.04900	10/15/2015	10/09/2015
DEXMETHYLPHENIDATE HCL ORAL TABLET 2.5 MG			0.51100	10/15/2015	10/09/2015
DEXMETHYLPHENIDATE HCL ORAL TABLET 5 MG			0.72900	10/15/2015	10/09/2015
DEXTRAN 70/HYPROMELLOSE OPHTHALMIC DROPS			0.12100	10/15/2015	10/09/2015
DEXTRAN 70/HYPROMELLOSE OPHTHALMIC DROPS 0.1%-0.3%			0.12100	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 10 MG			5.24800	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 15 MG			5.24800	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 20 MG			5.24800	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 25 MG			5.24800	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 30 MG			5.24800	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL CAPSULE, EXT RELEASE 24 HR 5 MG			5.24800	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 10 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 12.5 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 15 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 20 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 30 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 5 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF-ASPARTATE ORAL TABLET 7.5 MG			1.26900	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULFATE ORAL CAPSULE, EXTENDED RELEASE 10 MG			1.69500	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULFATE ORAL CAPSULE, EXTENDED RELEASE 15 MG			5.48400	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULFATE ORAL CAPSULE, EXTENDED RELEASE 5 MG			0.57400	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULFATE ORAL TABLET 10 MG			2.55200	10/15/2015	10/09/2015
DEXTROAMPHETAMINE SULFATE ORAL TABLET 5 MG			2.35200	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 15 MG/5 ML			0.01700	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR ORAL SYRUP 15 MG/5 ML			0.03800	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR ORAL SYRUP 5 MG/5 ML			0.01000	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/ACETAMINOPHEN ORAL LIQUID (ML) 30-1000/30			0.01500	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/ACETAMINOPHEN/CHLORPHENIRAMINE MALEATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 5-160-1/5			0.00800	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/ACETAMINOPHEN/DOXYLAMINE ORAL LIQUID (ML) 15-325/15			0.00900	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/ACETAMINOPHEN/DOXYLAMINE ORAL LIQUID (ML) 30-12.5/30			0.01300	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/CHLORPHENIRAMINE MALEATE ORAL LIQUID (ML) 7.5-1MG/5			0.03900	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/DOXYLAMINE SUCCINATE ORAL SOLUTION, ORAL 15-6.25/15			0.01000	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL ORAL LIQUID (ML) 5-2.5 MG/5			0.02000	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL LIQUID (ML) 5-325MG/15			0.00900	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL TABLET 10-5-325MG			0.08000	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/CHLORPHENIRAMINE ORAL DROPS 3-1.5-1/ML			0.44500	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/CHLORPHENIRAMINE ORAL DROPS 3-2-1MG/ML			0.51600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/CHLORPHENIRAMINE ORAL LIQUID (ML) 15-10-4/5			0.04200	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/CHLORPHENIRAMINE ORAL LIQUID (ML) 15-5-2MG/5			0.04000	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE HCL/CHLORPHENIRAMINE ORAL SYRUP 15-10-2/5			0.02400	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE/ACETAMINOPHEN/CHLORPHENIR ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 5-2.5-160			0.02600	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE/ACETAMINOPHEN/CHLORPHENIR ORAL TABLET 10-5-325-2			0.09100	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PHENYLEPHRINE/ACETAMINOPHEN/DOXYLAMINE ORAL LIQUID (ML) 5-325MG/15			0.01400	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PSEUDOEPHEDRINE HCL/BROMPHENIRAMINE ORAL ELIXIR 5-15-1MG/5			0.01300	10/15/2015	10/09/2015
DEXTROMETHORPHAN HBR/PSEUDOEPHEDRINE HCL/CHLORPHENIRAMINE ORAL SYRUP 15-15-2/5			0.04200	10/15/2015	10/09/2015
DEXTROMETHORPHAN/PSEUDOEPHRINE HCL/ACETAMINOPHEN/DOXYLAMINE ORAL LIQUID (ML) 15-500/15			0.01000	10/15/2015	10/09/2015
DEXTROSE 5 % AND 0.2 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 5 %-0.2 %			0.00900	10/15/2015	10/09/2015
DEXTROSE 5 % AND 0.3 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 5 %-0.3 %			0.00900	10/15/2015	10/09/2015
DEXTROSE 5 % AND 0.45 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 5 %-0.45 %			0.00900	10/15/2015	10/09/2015
DEXTROSE 5 % AND 0.9 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 5 %-0.9 %			0.00800	10/15/2015	10/09/2015
DEXTROSE 5 % IN LACTATED RINGERS INTRAVENOUS INTRAVENOUS SOLUTION 5 %			0.00500	10/15/2015	10/09/2015
DEXTROSE 5 % IN WATER INTRAVENOUS INTRAVENOUS SOLUTION 5 %			0.08500	10/15/2015	10/09/2015
DEXTROSE 5 % IN WATER INTRAVENOUS PIGGYBACK WITH THREADED PORT (ML)			0.00800	10/15/2015	10/09/2015
DEXTROSE 5 % IN WATER INTRAVENOUS PIGGYBACK WITH VIAL PORT (NON-THREADED)			0.08500	10/15/2015	10/09/2015
DEXTROSE 5 % IN WATER INTRAVENOUS VIAL (ML) 5 %			0.08500	10/15/2015	10/09/2015
DEXTROSE 50 % IN WATER INTRAVENOUS SYRINGE (ML) 50 %			0.05300	10/15/2015	10/09/2015
DEXTROSE ORAL TABLET, CHEWABLE 4 G			0.17000	10/15/2015	10/09/2015
DIAZEPAM INJECTION SYRINGE (ML) 5 MG/ML			1.48000	10/15/2015	10/09/2015
DIAZEPAM INJECTION VIAL (ML) 5 MG/ML			0.93800	10/15/2015	10/09/2015
DIAZEPAM ORAL SOLUTION, ORAL 5 MG/5 ML			0.28000	10/15/2015	10/09/2015
DIAZEPAM ORAL TABLET 10 MG			0.05700	10/15/2015	10/09/2015
DIAZEPAM ORAL TABLET 2 MG			0.03500	10/15/2015	10/09/2015
DIAZEPAM ORAL TABLET 5 MG			0.05900	10/15/2015	10/09/2015
DICLOFENAC POTASSIUM ORAL TABLET 50 MG			0.27300	10/15/2015	10/09/2015
DICLOFENAC SODIUM OPHTHALMIC DROPS 0.1 %			4.27200	10/15/2015	10/09/2015
DICLOFENAC SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 25 MG			0.37100	10/15/2015	10/09/2015
DICLOFENAC SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 50 MG			0.36000	10/15/2015	10/09/2015
DICLOFENAC SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 75 MG			0.40100	10/15/2015	10/09/2015
DICLOFENAC SODIUM ORAL TABLET, EXTENDED RELEASE 24 HR 100 MG			1.18300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DICLOXACILLIN SODIUM ORAL CAPSULE 250 MG			0.25900	10/15/2015	10/09/2015
DICLOXACILLIN SODIUM ORAL CAPSULE 500 MG			0.51800	10/15/2015	10/09/2015
DICYCLOMINE HCL ORAL CAPSULE 10 MG			0.06200	10/15/2015	10/09/2015
DICYCLOMINE HCL ORAL TABLET 20 MG			0.08500	10/15/2015	10/09/2015
DIDANOSINE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 125 MG			2.97300	10/15/2015	10/09/2015
DIDANOSINE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 200 MG			4.75700	10/15/2015	10/09/2015
DIDANOSINE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 250 MG			8.08800	10/15/2015	10/09/2015
DIDANOSINE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 400 MG			12.82800	10/15/2015	10/09/2015
DIFLUNISAL ORAL TABLET 500 MG			0.90700	10/15/2015	10/09/2015
DIGOXIN INJECTION AMPUL (ML) 250 MCG/ML			0.44400	10/15/2015	10/09/2015
DIGOXIN ORAL TABLET 125 MCG			1.18100	10/15/2015	10/09/2015
DIGOXIN ORAL TABLET 250 MCG			1.18500	10/15/2015	10/09/2015
DIHYDROCODEINE BITARTRATE/ACETAMINOPHEN/CAFFEINE ORAL TABLET 32-713-60			1.24300	10/15/2015	10/09/2015
DILTIAZEM HCL INTRAVENOUS VIAL (ML) 5 MG/ML			0.19700	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXT RELEASE 24 HR 120 MG			0.77400	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXT RELEASE 24 HR 180 MG			0.93400	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXT RELEASE 24 HR 240 MG			1.32600	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXT RELEASE 24 HR 300 MG			1.71800	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 12 HR 120 MG			0.65200	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 12 HR 60 MG			0.56100	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 12 HR 90 MG			0.64200	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 120 MG			0.69800	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 180 MG			0.86000	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 240 MG			1.16100	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 300 MG			1.59800	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 360 MG			1.59800	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED RELEASE 420MG			1.13900	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED-RELEASE DEGRADABLE 120 MG			0.89300	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED-RELEASE DEGRADABLE 180 MG			0.89300	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL CAPSULE, EXTENDED-RELEASE DEGRADABLE 240 MG			1.39900	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET 120 MG			3.71100	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET 30 MG			0.06100	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET 60 MG			0.09200	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET 90 MG			0.12600	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET, EXTENDED RELEASE 24 HR 180 MG			2.54600	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET, EXTENDED RELEASE 24 HR 240 MG			2.85400	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET, EXTENDED RELEASE 24 HR 300 MG			3.71300	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET, EXTENDED RELEASE 24 HR 360 MG			3.99500	10/15/2015	10/09/2015
DILTIAZEM HCL ORAL TABLET, EXTENDED RELEASE 24 HR 420MG			4.32700	10/15/2015	10/09/2015
DIMENHYDRINATE INJECTION VIAL (ML) 50 MG/ML			5.69500	10/15/2015	10/09/2015
DIMENHYDRINATE ORAL TABLET 50 MG			0.01400	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DIPHENHYDRAMINE HCL INJECTION VIAL (ML) 50 MG/ML			1.35000	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL CAPSULE 25 MG			0.03600	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL CAPSULE 50 MG			0.03500	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL ELIXIR 12.5MG/5ML			0.00600	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL LIQUID (ML) 12.5MG/5ML			0.00400	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL SYRUP 12.5MG/5ML			0.00400	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL ORAL TABLET 25 MG			0.01500	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL/PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL LIQUID (ML) 25-650/30			0.01200	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL/PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL TABLET 25 -5-325MG			0.09600	10/15/2015	10/09/2015
DIPHENHYDRAMINE HCL/ZINC ACETATE TOPICAL CREAM (GRAM) 2 %-0.1 %			0.04600	10/15/2015	10/09/2015
DIPHENOXYLATE HCL/ATROPINE SULFATE ORAL LIQUID (ML) 2.5-.025/5			0.08500	10/15/2015	10/09/2015
DIPHENOXYLATE HCL/ATROPINE SULFATE ORAL TABLET 2.5-.025MG			0.38800	10/15/2015	10/09/2015
DIPYRIDAMOLE ORAL TABLET 25 MG			0.19900	10/15/2015	10/09/2015
DIPYRIDAMOLE ORAL TABLET 50 MG			0.31500	10/15/2015	10/09/2015
DIPYRIDAMOLE ORAL TABLET 75 MG			0.41700	10/15/2015	10/09/2015
DISOPYRAMIDE PHOSPHATE ORAL CAPSULE 100 MG			0.48800	10/15/2015	10/09/2015
DISOPYRAMIDE PHOSPHATE ORAL CAPSULE 150 MG			0.56900	10/15/2015	10/09/2015
DISULFIRAM ORAL TABLET 250 MG			3.19200	10/15/2015	10/09/2015
DISULFIRAM ORAL TABLET 500 MG			5.22100	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL CAPSULE, SPRINKLE 125 MG			0.49100	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 125 MG			0.11000	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 250 MG			0.20000	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 500 MG			0.31000	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL TABLET, EXTENDED RELEASE 24 HR 250 MG			1.69800	10/15/2015	10/09/2015
DIVALPROEX SODIUM ORAL TABLET, EXTENDED RELEASE 24 HR 500 MG			3.25900	10/15/2015	10/09/2015
DOBUTAMINE HCL INTRAVENOUS VIAL (ML) 250MG/20ML			0.23200	10/15/2015	10/09/2015
DOBUTAMINE HCL INTRAVENOUS VIAL (ML) 500MG/40ML			0.23200	10/15/2015	10/09/2015
DOCUSATE CALCIUM ORAL CAPSULE 240 MG			0.06600	10/15/2015	10/09/2015
DOCUSATE SODIUM ORAL CAPSULE 100 MG			0.01600	10/15/2015	10/09/2015
DOCUSATE SODIUM ORAL CAPSULE 250 MG			0.02800	10/15/2015	10/09/2015
DOCUSATE SODIUM ORAL LIQUID (ML) 50 MG/5 ML			0.01800	10/15/2015	10/09/2015
DOCUSATE SODIUM ORAL SYRUP 60 MG/15ML			0.00600	10/15/2015	10/09/2015
DOCUSATE SODIUM ORAL TABLET 100 MG			0.02100	10/15/2015	10/09/2015
DONEPEZIL HCL ORAL TABLET 10 MG			0.13800	10/15/2015	10/09/2015
DONEPEZIL HCL ORAL TABLET 5 MG			0.13800	10/15/2015	10/09/2015
DONEPEZIL HCL ORAL TABLET,DISINTEGRATING 10 MG			1.56100	10/15/2015	10/09/2015
DONEPEZIL HCL ORAL TABLET,DISINTEGRATING 5 MG			1.26500	10/15/2015	10/09/2015
DORZOLAMIDE HCL OPHTHALMIC DROPS 2 %			3.34400	10/15/2015	10/09/2015
DORZOLAMIDE HCL/TIMOLOL MALEATE OPHTHALMIC DROPS 22.3-6.8/1			4.92600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
DOXAZOSIN MESYLATE ORAL TABLET 1 MG			0.63600	10/15/2015	10/09/2015
DOXAZOSIN MESYLATE ORAL TABLET 2 MG			0.65400	10/15/2015	10/09/2015
DOXAZOSIN MESYLATE ORAL TABLET 4 MG			0.70700	10/15/2015	10/09/2015
DOXAZOSIN MESYLATE ORAL TABLET 8 MG			0.63500	10/15/2015	10/09/2015
DOXEPIN HCL ORAL CAPSULE 10 MG			0.27400	10/15/2015	10/09/2015
DOXEPIN HCL ORAL CAPSULE 100 MG			0.35200	10/15/2015	10/09/2015
DOXEPIN HCL ORAL CAPSULE 25 MG	0.35400	10/15/2015	0.38589	10/28/2015	10/26/2015
DOXEPIN HCL ORAL CAPSULE 75 MG			0.11700	10/15/2015	10/09/2015
DOXEPIN HCL ORAL CONCENTRATE, ORAL 10 MG/ML			0.11000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (EA) 10 MG			8.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (EA) 20 MG			17.50000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (EA) 50 MG			33.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (ML) 10 MG/5 ML			1.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (ML) 2 MG/ML			1.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (ML) 20 MG/10ML			1.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL INTRAVENOUS VIAL (ML) 50 MG/25ML			1.75000	10/15/2015	10/09/2015
DOXORUBICIN HCL PEGYLATED LIPOSOMAL INTRAVENOUS VIAL (ML) 2 MG/ML			1.75000	10/15/2015	10/09/2015
DOXYCYCLINE HYCLATE ORAL CAPSULE 50 MG			0.06600	10/15/2015	10/09/2015
DOXYCYCLINE HYCLATE ORAL TABLET 100 MG			2.50900	10/15/2015	10/09/2015
DOXYCYCLINE HYCLATE ORAL TABLET 20 MG			0.94400	10/15/2015	10/09/2015
DOXYCYCLINE HYCLATE ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 100 MG			8.33700	10/15/2015	10/09/2015
DOXYCYCLINE HYCLATE ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 75 MG			6.48200	10/15/2015	10/09/2015
DOXYCYCLINE MONOHYDRATE ORAL TABLET 150 MG			7.24400	10/15/2015	10/09/2015
DRONABINOL ORAL CAPSULE 10 MG			14.48100	10/15/2015	10/09/2015
DRONABINOL ORAL CAPSULE 2.5 MG			4.17500	10/15/2015	10/09/2015
DRONABINOL ORAL CAPSULE 5 MG			9.56900	10/15/2015	10/09/2015
DULOXETINE HCL ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 20 MG			1.33100	10/15/2015	10/09/2015
DULOXETINE HCL ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 30 MG			1.20700	10/15/2015	10/09/2015
DULOXETINE HCL ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 60 MG			1.20700	10/15/2015	10/09/2015
ECONAZOLE NITRATE TOPICAL CREAM (GRAM) 1 %			4.88800	10/15/2015	10/09/2015
ELECTROLYTE,ORAL ORAL SOLUTION, ORAL			0.00400	10/15/2015	10/09/2015
ENALAPRIL MALEATE ORAL TABLET 10 MG			0.24300	10/15/2015	10/09/2015
ENALAPRIL MALEATE ORAL TABLET 2.5 MG			0.11100	10/15/2015	10/09/2015
ENALAPRIL MALEATE ORAL TABLET 20 MG	0.23700	10/15/2015	0.45621	10/28/2015	10/26/2015
ENALAPRIL MALEATE ORAL TABLET 5 MG			0.18100	10/15/2015	10/09/2015
ENALAPRIL MALEATE/HYDROCHLOROTHIAZIDE ORAL TABLET 10 MG-25MG			0.25900	10/15/2015	10/09/2015
ENALAPRIL MALEATE/HYDROCHLOROTHIAZIDE ORAL TABLET 5MG-12.5MG			0.23900	10/15/2015	10/09/2015
EPHEDRINE SULFATE ORAL CAPSULE 25 MG			0.08000	10/15/2015	10/09/2015
EPINASTINE HCL OPHTHALMIC DROPS 0.05 %			18.31600	10/15/2015	10/09/2015
EPINEPHRINE INJECTION AMPUL (ML) 1 MG/ML(1)			0.63200	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
EPINEPHRINE INJECTION SYRINGE (ML) 0.1 MG/ML			0.21600	10/15/2015	10/09/2015
EPINEPHRINE INJECTION VIAL (ML) 1 MG/ML			0.26300	10/15/2015	10/09/2015
EPLERENONE ORAL TABLET 25 MG			2.99900	10/15/2015	10/09/2015
EPLERENONE ORAL TABLET 50 MG			3.01400	10/15/2015	10/09/2015
EPROSARTAN MESYLATE ORAL TABLET 600 MG			2.93200	10/15/2015	10/09/2015
ERGOCALCIFEROL (VITAMIN D2) ORAL CAPSULE 50000 UNIT			1.10000	10/15/2015	10/09/2015
ERGOLOID MESYLATES ORAL TABLET 1 MG			3.99100	10/15/2015	10/09/2015
ERGOTAMINE TARTRATE/CAFFEINE ORAL TABLET 1 MG-100MG			0.92100	10/15/2015	10/09/2015
ERGOTAMINE TARTRATE/CAFFEINE RECTAL SUPPOSITORY, RECTAL 2-100MG			4.59000	10/15/2015	10/09/2015
ERYTHROMYCIN BASE OPHTHALMIC OINTMENT (GRAM) 5 MG/G			4.58800	10/15/2015	10/09/2015
ERYTHROMYCIN BASE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 250 MG			0.13100	10/15/2015	10/09/2015
ERYTHROMYCIN BASE/BENZOYL PEROXIDE TOPICAL GEL (GRAM) 3 %-5 %			2.22000	10/15/2015	10/09/2015
ERYTHROMYCIN BASE/ETHYL ALCOHOL TOPICAL GEL (GRAM) 2 %			0.46700	10/15/2015	10/09/2015
ERYTHROMYCIN BASE/ETHYL ALCOHOL TOPICAL SOLUTION, NON-ORAL 2 %			0.60700	10/15/2015	10/09/2015
ERYTHROMYCIN BASE/ETHYL ALCOHOL TOPICAL SWAB, MEDICATED 2 %			1.19500	10/15/2015	10/09/2015
ERYTHROMYCIN ETHYLSUCCINATE/SULFISOXAZOLE ACETYL ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 200-600/5			0.19400	10/15/2015	10/09/2015
ESCITALOPRAM OXALATE ORAL SOLUTION, ORAL 5 MG/5 ML			0.63400	10/15/2015	10/09/2015
ESCITALOPRAM OXALATE ORAL TABLET 10 MG			0.26300	10/15/2015	10/09/2015
ESCITALOPRAM OXALATE ORAL TABLET 20 MG			0.28300	10/15/2015	10/09/2015
ESCITALOPRAM OXALATE ORAL TABLET 5 MG			0.23600	10/15/2015	10/09/2015
ESTAZOLAM ORAL TABLET 1 MG			0.32600	10/15/2015	10/09/2015
ESTAZOLAM ORAL TABLET 2 MG			0.37400	10/15/2015	10/09/2015
ESTRADIOL ORAL TABLET 0.5 MG			0.06900	10/15/2015	10/09/2015
ESTRADIOL ORAL TABLET 1 MG			0.08700	10/15/2015	10/09/2015
ESTRADIOL ORAL TABLET 2 MG			0.01900	10/15/2015	10/09/2015
ESTRADIOL/NORETHINDRONE ACETATE ORAL TABLET 1 MG-0.5MG			1.58400	10/15/2015	10/09/2015
ESTROPIPATE ORAL TABLET 0.75 MG			0.27600	10/15/2015	10/09/2015
ESTROPIPATE ORAL TABLET 1.5 MG			0.37000	10/15/2015	10/09/2015
ESTROPIPATE ORAL TABLET 3 MG			0.79500	10/15/2015	10/09/2015
ESZOPICLONE ORAL TABLET 1 MG			0.72300	10/15/2015	10/09/2015
ESZOPICLONE ORAL TABLET 2 MG			0.73100	10/15/2015	10/09/2015
ESZOPICLONE ORAL TABLET 3 MG			0.77900	10/15/2015	10/09/2015
ETHAMBUTOL HCL ORAL TABLET 100 MG			0.50600	10/15/2015	10/09/2015
ETHAMBUTOL HCL ORAL TABLET 400 MG			1.52800	10/15/2015	10/09/2015
ETHOSUXIMIDE ORAL CAPSULE 250 MG			0.81300	10/15/2015	10/09/2015
ETHYNODIOL DIACETATE-ETHINYL ESTRADIOL ORAL TABLET 1 MG-35MCG			0.86300	10/15/2015	10/09/2015
ETHYNODIOL DIACETATE-ETHINYL ESTRADIOL ORAL TABLET 1 MG-50MCG			0.86300	10/15/2015	10/09/2015
ETIDRONATE DISODIUM ORAL TABLET 200 MG			2.78300	10/15/2015	10/09/2015
ETIDRONATE DISODIUM ORAL TABLET 400 MG			5.56500	10/15/2015	10/09/2015
ETODOLAC ORAL CAPSULE 200 MG			1.07600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
ETODOLAC ORAL CAPSULE 300 MG			1.30700	10/15/2015	10/09/2015
ETODOLAC ORAL TABLET 400 MG			0.96600	10/15/2015	10/09/2015
ETODOLAC ORAL TABLET 500 MG			0.89900	10/15/2015	10/09/2015
ETODOLAC ORAL TABLET, EXTENDED RELEASE 24 HR 400 MG			2.48300	10/15/2015	10/09/2015
ETODOLAC ORAL TABLET, EXTENDED RELEASE 24 HR 500 MG			1.13100	10/15/2015	10/09/2015
ETODOLAC ORAL TABLET, EXTENDED RELEASE 24 HR 600 MG			1.96300	10/15/2015	10/09/2015
ETOPOSIDE INTRAVENOUS VIAL (ML) 20 MG/ML			2.25000	10/15/2015	10/09/2015
ETOPOSIDE ORAL CAPSULE 50 MG			40.77700	10/15/2015	10/09/2015
EXEMESTANE ORAL TABLET 25 MG			11.67000	10/15/2015	10/09/2015
FAMCICLOVIR ORAL TABLET 125 MG			1.58200	10/15/2015	10/09/2015
FAMCICLOVIR ORAL TABLET 250 MG			1.72000	10/15/2015	10/09/2015
FAMCICLOVIR ORAL TABLET 500 MG			3.45500	10/15/2015	10/09/2015
FAMOTIDINE IN SODIUM CHLORIDE, ISO-OSMOTIC/PF INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 20 MG/50ML			0.12000	10/15/2015	10/09/2015
FAMOTIDINE INTRAVENOUS VIAL (ML) 10 MG/ML			0.66100	10/15/2015	10/09/2015
FAMOTIDINE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 40MG/5ML			3.02500	10/15/2015	10/09/2015
FAMOTIDINE ORAL TABLET 10 MG			0.09500	10/15/2015	10/09/2015
FAMOTIDINE ORAL TABLET 20 MG			0.07300	10/15/2015	10/09/2015
FAMOTIDINE ORAL TABLET 40 MG			0.13900	10/15/2015	10/09/2015
FAMOTIDINE/PF INTRAVENOUS VIAL (ML) 20 MG/2 ML			0.66100	10/15/2015	10/09/2015
FELODIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 10 MG			1.55500	10/15/2015	10/09/2015
FELODIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 2.5 MG			0.86500	10/15/2015	10/09/2015
FELODIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 5 MG			0.86500	10/15/2015	10/09/2015
FENOFIBRATE NANOCRYSTALLIZED ORAL TABLET 145MG			3.68700	10/15/2015	10/09/2015
FENOFIBRATE NANOCRYSTALLIZED ORAL TABLET 48 MG			1.41400	10/15/2015	10/09/2015
FENOFIBRATE ORAL TABLET 160 MG			2.03400	10/15/2015	10/09/2015
FENOFIBRATE ORAL TABLET 54 MG			0.67800	10/15/2015	10/09/2015
FENOFIBRATE,MICRONIZED ORAL CAPSULE 130 MG			5.51400	10/15/2015	10/09/2015
FENOFIBRATE,MICRONIZED ORAL CAPSULE 134MG			1.24500	10/15/2015	10/09/2015
FENOFIBRATE,MICRONIZED ORAL CAPSULE 200 MG			1.94000	10/15/2015	10/09/2015
FENOFIBRATE,MICRONIZED ORAL CAPSULE 67 MG			0.05600	10/15/2015	10/09/2015
FENOFIBRIC ACID (CHOLINE) ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 135 MG			4.65600	10/15/2015	10/09/2015
FENOFIBRIC ACID (CHOLINE) ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 45 MG			1.50700	10/15/2015	10/09/2015
FENOFIBRIC ACID ORAL TABLET 105 MG			2.57000	10/15/2015	10/09/2015
FENOFIBRIC ACID ORAL TABLET 35 MG			0.85700	10/15/2015	10/09/2015
FENOPROFEN CALCIUM ORAL TABLET 600 MG			0.59600	10/15/2015	10/09/2015
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 1200 MCG			34.62900	10/15/2015	10/09/2015
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 1600 MCG			42.70900	10/15/2015	10/09/2015
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 200 MCG			14.48600	10/15/2015	10/09/2015
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 400 MCG			18.35300	10/15/2015	10/09/2015
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 600 MCG			24.97800	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
FENTANYL CITRATE BUCCAL LOZENGE ON A HANDLE 800 MCG			26.63500	10/15/2015	10/09/2015
FENTANYL TRANSDERMAL PATCH, TRANSDERMAL 72 HOURS 100 MCG/HR			36.96000	10/15/2015	10/09/2015
FENTANYL TRANSDERMAL PATCH, TRANSDERMAL 72 HOURS 12 MCG/HR			14.74300	10/15/2015	10/09/2015
FENTANYL TRANSDERMAL PATCH, TRANSDERMAL 72 HOURS 25MCG/HR			9.98700	10/15/2015	10/09/2015
FENTANYL TRANSDERMAL PATCH, TRANSDERMAL 72 HOURS 50MCG/HR			18.18300	10/15/2015	10/09/2015
FENTANYL TRANSDERMAL PATCH, TRANSDERMAL 72 HOURS 75MCG/HR			27.84000	10/15/2015	10/09/2015
FERROUS FUMARATE/ASCORBIC ACID/B12-IF/FOLIC ACID ORAL CAPSULE 110-0.5MG			0.32900	10/15/2015	10/09/2015
FERROUS FUMARATE/ASCORBIC ACID/CYANOCOBALAMIN/FOLIC ACID ORAL CAPSULE 200-250MG			0.28300	10/15/2015	10/09/2015
FERROUS FUMARATE/ASCORBIC ACID/CYANOCOBALAMIN/FOLIC ACID ORAL CAPSULE 460-60MG			0.39200	10/15/2015	10/09/2015
FERROUS FUMARATE/FOLIC ACID/MULTIVITAMINS WITH MIN NO. 15 ORAL CAPSULE 106 MG-1MG			0.49700	10/15/2015	10/09/2015
FERROUS GLUCONATE ORAL TABLET 236(27)MG			0.02200	10/15/2015	10/09/2015
FERROUS GLUCONATE ORAL TABLET 324(37.5)			0.03300	10/15/2015	10/09/2015
FERROUS GLUCONATE ORAL TABLET 325 MG			0.03300	10/15/2015	10/09/2015
FERROUS GLUCONATE ORAL TABLET 325(36)MG			0.03300	10/15/2015	10/09/2015
FERROUS SULFATE ORAL DROPS 15 MG/ML			0.04200	10/15/2015	10/09/2015
FERROUS SULFATE ORAL SOLUTION, ORAL 220(44)/5			0.00500	10/15/2015	10/09/2015
FERROUS SULFATE ORAL TABLET 325(65) MG			0.03400	10/15/2015	10/09/2015
FERROUS SULFATE ORAL TABLET, EXTENDED RELEASE 140(45)MG			0.09400	10/15/2015	10/09/2015
FERROUS SULFATE, DRIED ORAL TABLET, EXTENDED RELEASE 159(45)MG			0.03400	10/15/2015	10/09/2015
FERROUS SULFATE/ASCORBIC ACID/FOLIC ACID ORAL TABLET, EXTENDED RELEASE 105-500-.8			0.49300	10/15/2015	10/09/2015
FEXOFENADINE HCL ORAL TABLET 180 MG			0.33000	10/15/2015	10/09/2015
FEXOFENADINE HCL ORAL TABLET 30 MG			0.44600	10/15/2015	10/09/2015
FEXOFENADINE HCL ORAL TABLET 60 MG			0.87200	10/15/2015	10/09/2015
FINASTERIDE ORAL TABLET 5 MG			0.55000	10/15/2015	10/09/2015
FLAVOXATE HCL ORAL TABLET 100 MG			1.18500	10/15/2015	10/09/2015
FLECAINIDE ACETATE ORAL TABLET 100 MG			0.60000	10/15/2015	10/09/2015
FLECAINIDE ACETATE ORAL TABLET 150 MG			0.96800	10/15/2015	10/09/2015
FLECAINIDE ACETATE ORAL TABLET 50 MG			0.38000	10/15/2015	10/09/2015
FLUCONAZOLE IN DEXTROSE, ISO-OSMOTIC INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 200MG/0.1L			0.29600	10/15/2015	10/09/2015
FLUCONAZOLE IN DEXTROSE, ISO-OSMOTIC INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 400MG/0.2L			0.21200	10/15/2015	10/09/2015
FLUCONAZOLE IN SODIUM CHLORIDE, ISO-OSMOTIC INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 200MG/0.1L			0.16400	10/15/2015	10/09/2015
FLUCONAZOLE IN SODIUM CHLORIDE, ISO-OSMOTIC INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 400MG/0.2L			0.16400	10/15/2015	10/09/2015
FLUCONAZOLE IN SODIUM CHLORIDE, ISO-OSMOTIC INTRAVENOUS IV SOLUTION, PIGGYBACK, BOTTLE (ML) 100MG/50ML			0.21400	10/15/2015	10/09/2015
FLUCONAZOLE IN SODIUM CHLORIDE, ISO-OSMOTIC INTRAVENOUS IV SOLUTION, PIGGYBACK, BOTTLE (ML) 200MG/0.1L			0.16400	10/15/2015	10/09/2015
FLUCONAZOLE IN SODIUM CHLORIDE, ISO-OSMOTIC INTRAVENOUS IV SOLUTION, PIGGYBACK, BOTTLE (ML) 400MG/0.2L			0.16400	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
FLUCONAZOLE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 10 MG/ML			0.38000	10/15/2015	10/09/2015
FLUCONAZOLE ORAL SUSPENSION, RECONSTITUTED, ORAL (ML) 40 MG/ML			0.85900	10/15/2015	10/09/2015
FLUCONAZOLE ORAL TABLET 100 MG			1.57400	10/15/2015	10/09/2015
FLUCONAZOLE ORAL TABLET 150 MG			2.80000	10/15/2015	10/09/2015
FLUCONAZOLE ORAL TABLET 200 MG	0.32600	10/15/2015	2.71700	10/28/2015	10/26/2015
FLUCONAZOLE ORAL TABLET 50 MG			0.18600	10/15/2015	10/09/2015
FLUDROCORTISONE ACETATE ORAL TABLET 0.1 MG			0.49000	10/15/2015	10/09/2015
FLUNISOLIDE NASAL AEROSOL, SPRAY (ML) 25 MCG			1.25100	10/15/2015	10/09/2015
FLUNISOLIDE NASAL AEROSOL, SPRAY (ML) 29MCG			1.24200	10/15/2015	10/09/2015
FLUOCINOLONE ACETONIDE TOPICAL CREAM (GRAM) 0.01 %			0.74100	10/15/2015	10/09/2015
FLUOCINONIDE TOPICAL CREAM (GRAM) 0.05 %			0.59500	10/15/2015	10/09/2015
FLUOCINONIDE TOPICAL GEL (GRAM) 0.05 %			1.11300	10/15/2015	10/09/2015
FLUOCINONIDE TOPICAL OINTMENT (GRAM) 0.05 %			2.43000	10/15/2015	10/09/2015
FLUOCINONIDE/EMOLLIENT BASE TOPICAL CREAM (GRAM) 0.05 %			0.39000	10/15/2015	10/09/2015
FLUORIDE/IRON/VITAMINS A,C,AND D ORAL DROPS 0.25 MG/ML			0.21900	10/15/2015	10/09/2015
FLUOROURACIL INTRAVENOUS VIAL (ML) 1 G/20 ML			0.27200	10/15/2015	10/09/2015
FLUOROURACIL INTRAVENOUS VIAL (ML) 2.5 G/50ML			0.11600	10/15/2015	10/09/2015
FLUOROURACIL INTRAVENOUS VIAL (ML) 5 G/100 ML			0.11600	10/15/2015	10/09/2015
FLUOROURACIL INTRAVENOUS VIAL (ML) 500MG/10ML			0.11600	10/15/2015	10/09/2015
FLUOROURACIL TOPICAL CREAM (GRAM) 5 %			5.14700	10/15/2015	10/09/2015
FLUOROURACIL TOPICAL SOLUTION, NON-ORAL 5 %			7.79300	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL CAPSULE 10 MG			0.05900	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL CAPSULE 20 MG			0.06900	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL CAPSULE 40 MG			0.49200	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 90 MG			23.37800	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL SOLUTION, ORAL 20 MG/5 ML			0.14400	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL TABLET 10 MG			0.13900	10/15/2015	10/09/2015
FLUOXETINE HCL ORAL TABLET 20 MG	0.55500	10/15/2015	1.68040	10/28/2015	10/26/2015
FLUOXYMESTERONE ORAL TABLET 10 MG			2.40000	10/15/2015	10/09/2015
FLUPHENAZINE DECANOATE INJECTION VIAL (ML) 25 MG/ML			12.35800	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL CONCENTRATE, ORAL 5 MG/ML			0.48300	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL ELIXIR 2.5 MG/5ML			0.23000	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL TABLET 1 MG			0.09300	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL TABLET 10 MG			0.16200	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL TABLET 2.5 MG			0.11500	10/15/2015	10/09/2015
FLUPHENAZINE HCL ORAL TABLET 5 MG			0.24600	10/15/2015	10/09/2015
FLURAZEPAM HCL ORAL CAPSULE 15 MG			0.05200	10/15/2015	10/09/2015
FLURAZEPAM HCL ORAL CAPSULE 30 MG			0.06700	10/15/2015	10/09/2015
FLURBIPROFEN ORAL TABLET 100 MG			0.15400	10/15/2015	10/09/2015
FLURBIPROFEN ORAL TABLET 50 MG			0.15400	10/15/2015	10/09/2015
FLURBIPROFEN SODIUM OPHTHALMIC DROPS 0.03 %			2.61100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
FLUTAMIDE ORAL CAPSULE 125 MG			0.87100	10/15/2015	10/09/2015
FLUTICASONE PROPIONATE NASAL SPRAY, SUSPENSION 50 MCG			1.19800	10/15/2015	10/09/2015
FLUTICASONE PROPIONATE TOPICAL CREAM (GRAM) 0.05 %			0.47100	10/15/2015	10/09/2015
FLUTICASONE PROPIONATE TOPICAL OINTMENT (GRAM) 0.005 %			0.60800	10/15/2015	10/09/2015
FLUVOXAMINE MALEATE ORAL TABLET 100 MG			0.46000	10/15/2015	10/09/2015
FLUVOXAMINE MALEATE ORAL TABLET 25 MG			0.42000	10/15/2015	10/09/2015
FLUVOXAMINE MALEATE ORAL TABLET 50 MG			0.42000	10/15/2015	10/09/2015
FOLIC ACID ORAL TABLET 0.8 MG			0.02000	10/15/2015	10/09/2015
FOLIC ACID ORAL TABLET 1 MG			0.03700	10/15/2015	10/09/2015
FOLIC ACID/MULTIVITS W-FE,OTHER MIN ORAL TABLET 0.4MG-18MG			0.02000	10/15/2015	10/09/2015
FOSCARNET SODIUM INTRAVENOUS INFUSION BOTTLE (ML) 24 MG/ML			0.24500	10/15/2015	10/09/2015
FOSINOPRIL SODIUM ORAL TABLET 10 MG			0.28000	10/15/2015	10/09/2015
FOSINOPRIL SODIUM ORAL TABLET 20 MG			0.28000	10/15/2015	10/09/2015
FOSINOPRIL SODIUM ORAL TABLET 40 MG			0.28000	10/15/2015	10/09/2015
FOSINOPRIL SODIUM/HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5MG			0.88800	10/15/2015	10/09/2015
FOSINOPRIL SODIUM/HYDROCHLOROTHIAZIDE ORAL TABLET 20-12.5 MG			1.11200	10/15/2015	10/09/2015
FOSPHENYTOIN SODIUM INJECTION VIAL (ML) 100MG PE/2			0.67800	10/15/2015	10/09/2015
FOSPHENYTOIN SODIUM INJECTION VIAL (ML) 500 PE/10			0.80600	10/15/2015	10/09/2015
FUROSEMIDE INJECTION SYRINGE (ML) 10 MG/ML			0.28700	10/15/2015	10/09/2015
FUROSEMIDE ORAL SOLUTION, ORAL 10 MG/ML			0.09600	10/15/2015	10/09/2015
FUROSEMIDE ORAL SOLUTION, ORAL 40MG/5ML			0.04900	10/15/2015	10/09/2015
FUROSEMIDE ORAL TABLET 20 MG			0.05000	10/15/2015	10/09/2015
FUROSEMIDE ORAL TABLET 40 MG			0.06000	10/15/2015	10/09/2015
FUROSEMIDE ORAL TABLET 80 MG			0.05000	10/15/2015	10/09/2015
GABAPENTIN ORAL CAPSULE 100 MG			0.07700	10/15/2015	10/09/2015
GABAPENTIN ORAL CAPSULE 300 MG			0.08500	10/15/2015	10/09/2015
GABAPENTIN ORAL CAPSULE 400 MG			0.14100	10/15/2015	10/09/2015
GABAPENTIN ORAL SOLUTION, ORAL 250 MG/5ML			0.25300	10/15/2015	10/09/2015
GABAPENTIN ORAL SOLUTION, ORAL 300 MG/6ML			0.25300	10/15/2015	10/09/2015
GABAPENTIN ORAL TABLET 600 MG			0.57100	10/15/2015	10/09/2015
GABAPENTIN ORAL TABLET 800 MG			0.70900	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 16 MG			4.52500	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 24 MG			4.52500	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 8 MG			4.52500	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL SOLUTION, ORAL 4 MG/ML			1.88700	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL TABLET 12 MG			2.11100	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL TABLET 4 MG			2.11500	10/15/2015	10/09/2015
GALANTAMINE HBR ORAL TABLET 8 MG			2.02700	10/15/2015	10/09/2015
GANCICLOVIR SODIUM INTRAVENOUS VIAL (EA) 500 MG			72.27800	10/15/2015	10/09/2015
GEMCITABINE HCL INTRAVENOUS VIAL (EA) 1 G			573.78700	10/15/2015	10/09/2015
GEMCITABINE HCL INTRAVENOUS VIAL (EA) 200 MG			26.16800	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
GEMFIBROZIL ORAL TABLET 600 MG			0.30800	10/15/2015	10/09/2015
GENTAMICIN SULFATE INJECTION VIAL (ML) 20 MG/2 ML			0.35400	10/15/2015	10/09/2015
GENTAMICIN SULFATE INJECTION VIAL (ML) 40 MG/ML			0.54900	10/15/2015	10/09/2015
GENTAMICIN SULFATE OPHTHALMIC DROPS 0.3 %			3.11500	10/15/2015	10/09/2015
GENTAMICIN SULFATE OPHTHALMIC OINTMENT (GRAM) 0.3 %			4.25000	10/15/2015	10/09/2015
GENTAMICIN SULFATE/PF INJECTION VIAL (ML) 20 MG/2 ML			0.35400	10/15/2015	10/09/2015
GLIMEPIRIDE ORAL TABLET 1 MG			0.05500	10/15/2015	10/09/2015
GLIMEPIRIDE ORAL TABLET 2 MG			0.08700	10/15/2015	10/09/2015
GLIMEPIRIDE ORAL TABLET 4 MG			0.11800	10/15/2015	10/09/2015
GLIPIZIDE ORAL TABLET 10 MG			0.08500	10/15/2015	10/09/2015
GLIPIZIDE ORAL TABLET 5 MG			0.06500	10/15/2015	10/09/2015
GLIPIZIDE ORAL TABLET, EXTENDED RELEASE 24 HR 10 MG			0.53600	10/15/2015	10/09/2015
GLIPIZIDE ORAL TABLET, EXTENDED RELEASE 24 HR 2.5 MG			0.31500	10/15/2015	10/09/2015
GLIPIZIDE ORAL TABLET, EXTENDED RELEASE 24 HR 5 MG			0.35400	10/15/2015	10/09/2015
GLIPIZIDE/METFORMIN HCL ORAL TABLET 2.5-250 MG			0.62500	10/15/2015	10/09/2015
GLIPIZIDE/METFORMIN HCL ORAL TABLET 2.5-500 MG			0.74500	10/15/2015	10/09/2015
GLIPIZIDE/METFORMIN HCL ORAL TABLET 5 MG-500MG			0.74500	10/15/2015	10/09/2015
GLYBURIDE ORAL TABLET 1.25 MG			0.07500	10/15/2015	10/09/2015
GLYBURIDE ORAL TABLET 2.5 MG			0.15900	10/15/2015	10/09/2015
GLYBURIDE ORAL TABLET 5 MG			0.23300	10/15/2015	10/09/2015
GLYBURIDE,MICRONIZED ORAL TABLET 1.5 MG			0.05200	10/15/2015	10/09/2015
GLYBURIDE,MICRONIZED ORAL TABLET 3 MG			0.05200	10/15/2015	10/09/2015
GLYBURIDE,MICRONIZED ORAL TABLET 6 MG			0.10400	10/15/2015	10/09/2015
GLYBURIDE/METFORMIN HCL ORAL TABLET 1.25-250MG			0.14100	10/15/2015	10/09/2015
GLYBURIDE/METFORMIN HCL ORAL TABLET 2.5-500 MG			0.16100	10/15/2015	10/09/2015
GLYBURIDE/METFORMIN HCL ORAL TABLET 5 MG-500MG			0.17100	10/15/2015	10/09/2015
GLYCINE UROLOGIC SOLUTION IRRIGATION SOLUTION, IRRIGATION 1.5 %			0.00500	10/15/2015	10/09/2015
GLYCOPYRROLATE ORAL TABLET 1 MG			0.70100	10/15/2015	10/09/2015
GLYCOPYRROLATE ORAL TABLET 2 MG			1.19600	10/15/2015	10/09/2015
GRANISETRON HCL INTRAVENOUS VIAL (ML) 1 MG/ML			6.68700	10/15/2015	10/09/2015
GRANISETRON HCL INTRAVENOUS VIAL (ML) 1 MG/ML(1)			15.24700	10/15/2015	10/09/2015
GRANISETRON HCL ORAL TABLET 1 MG			14.88800	10/15/2015	10/09/2015
GRANISETRON HCL/PF INTRAVENOUS VIAL (ML) 1 MG/ML(1)			10.70000	10/15/2015	10/09/2015
GRANISETRON HCL/PF INTRAVENOUS VIAL (ML) 100 MCG/ML			3.42400	10/15/2015	10/09/2015
GRISEOFULVIN, MICROSIZE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 125 MG/5ML			0.26900	10/15/2015	10/09/2015
GUAIFENESIN ORAL LIQUID (ML) 100 MG/5ML			0.00700	10/15/2015	10/09/2015
GUAIFENESIN ORAL TABLET 200 MG			0.09100	10/15/2015	10/09/2015
GUAIFENESIN ORAL TABLET 400 MG			0.07000	10/15/2015	10/09/2015
GUAIFENESIN ORAL TABLET, EXTENDED RELEASE 12 HR 600 MG			0.34200	10/15/2015	10/09/2015
GUAIFENESIN/CODEINE PHOSPHATE ORAL LIQUID (ML) 100-10MG/5			0.04600	10/15/2015	10/09/2015
GUAIFENESIN/CODEINE PHOSPHATE ORAL LIQUID (ML) 200-20/10			0.04600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 100-10MG/5			0.00800	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 100-5 MG/5			0.03200	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 200-10/15			0.00800	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 200-10MG/5			0.01300	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 300-20MG/5			0.03400	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL SYRUP 100-10MG/5			0.00800	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR ORAL TABLET 400MG-20MG			0.06400	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR/PHENYLEPHRINE ORAL LIQUID (ML) 100-10-5MG			0.01400	10/15/2015	10/09/2015
GUAIFENESIN/DEXTROMETHORPHAN HBR/PSEUDOEPHEDRINE HCL ORAL SOLUTION, ORAL 200-15-30			0.03200	10/15/2015	10/09/2015
GUAIFENESIN/PHENYLEPHRINE HCL ORAL LIQUID (ML) 100-5 MG/5			0.03600	10/15/2015	10/09/2015
GUAIFENESIN/PSEUDOEPHEDRINE HCL ORAL TABLET 400MG-60MG			0.35400	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET 1 MG			0.12400	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET 2 MG			0.28000	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 1 MG			0.73400	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 2 MG			0.73400	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 3 MG			0.73400	10/15/2015	10/09/2015
GUANFACINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 4 MG			0.73400	10/15/2015	10/09/2015
HALOBETASOL PROPIONATE TOPICAL CREAM (GRAM) 0.05 %			0.48000	10/15/2015	10/09/2015
HALOBETASOL PROPIONATE TOPICAL OINTMENT (GRAM) 0.05 %			0.54500	10/15/2015	10/09/2015
HALOPERIDOL DECANOATE INTRAMUSCULAR VIAL (ML) 100 MG/ML			29.95000	10/15/2015	10/09/2015
HALOPERIDOL DECANOATE INTRAMUSCULAR VIAL (ML) 50 MG/ML			15.00000	10/15/2015	10/09/2015
HALOPERIDOL LACTATE ORAL CONCENTRATE, ORAL 2 MG/ML			0.13600	10/15/2015	10/09/2015
HALOPERIDOL ORAL TABLET 0.5 MG	0.07700	10/15/2015	0.26765	10/28/2015	10/26/2015
HALOPERIDOL ORAL TABLET 1 MG			0.36800	10/15/2015	10/09/2015
HALOPERIDOL ORAL TABLET 10 MG			1.22800	10/15/2015	10/09/2015
HALOPERIDOL ORAL TABLET 2 MG			0.48000	10/15/2015	10/09/2015
HALOPERIDOL ORAL TABLET 20 MG			2.13400	10/15/2015	10/09/2015
HALOPERIDOL ORAL TABLET 5 MG			0.19500	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INJECTION CARTRIDGE (ML) 5000/ML(1)			3.57400	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INJECTION VIAL (ML) 1000/ML			0.14000	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INJECTION VIAL (ML) 10000/ML			3.62800	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INJECTION VIAL (ML) 20000/ML			16.13900	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INJECTION VIAL (ML) 5000/ML			0.39800	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS SYRINGE (ML) 10 UNIT/ML			1.11700	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS SYRINGE (ML) 100/ML (1)			0.86500	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS SYRINGE (ML) 200/2 ML			0.43200	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS SYRINGE (ML) 300/3 ML			0.39200	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS SYRINGE (ML) 500/5 ML			0.26600	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS VIAL (ML) 10 UNIT/ML			0.04200	10/15/2015	10/09/2015
HEPARIN SODIUM,PORCINE INTRAVENOUS VIAL (ML) 100/ML			0.13300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
HEPARIN SODIUM,PORCINE/PF INJECTION VIAL (ML) 1000/ML			0.14000	10/15/2015	10/09/2015
HYDRALAZINE HCL INJECTION VIAL (ML) 20 MG/ML			6.78100	10/15/2015	10/09/2015
HYDRALAZINE HCL ORAL TABLET 10 MG			0.15800	10/15/2015	10/09/2015
HYDRALAZINE HCL ORAL TABLET 100 MG			0.49100	10/15/2015	10/09/2015
HYDRALAZINE HCL ORAL TABLET 25 MG			0.19900	10/15/2015	10/09/2015
HYDRALAZINE HCL ORAL TABLET 50 MG			0.28100	10/15/2015	10/09/2015
HYDROCHLOROTHIAZIDE ORAL CAPSULE 12.5 MG			0.12000	10/15/2015	10/09/2015
HYDROCHLOROTHIAZIDE ORAL TABLET 12.5 MG			0.12000	10/15/2015	10/09/2015
HYDROCHLOROTHIAZIDE ORAL TABLET 25 MG			0.01800	10/15/2015	10/09/2015
HYDROCHLOROTHIAZIDE ORAL TABLET 50 MG			0.03700	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL SOLUTION, ORAL 2.5-167/5			0.07900	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL SOLUTION, ORAL 7.5-325/15			0.23400	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL SOLUTION, ORAL 7.5-500/15			0.07900	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 10MG-300MG			2.13400	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 10MG-325MG			0.24400	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 5 MG-325MG			0.26700	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 5MG-300MG			1.51000	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 7.5-300MG			1.65400	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/ACETAMINOPHEN ORAL TABLET 7.5-325MG			0.35400	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/HOMATROPINE METHYLBROMIDE ORAL SYRUP 5-1.5 MG/5			0.15600	10/15/2015	10/09/2015
HYDROCODONE BITARTRATE/HOMATROPINE METHYLBROMIDE ORAL TABLET 5 MG-1.5MG			0.46300	10/15/2015	10/09/2015
HYDROCODONE POLISTIREX/CHLORPHENIRAMINE POLISTIREX ORAL SUSPENSION, EXTENDED RELEASE 12 HR 10-8MG/5ML			0.52200	10/15/2015	10/09/2015
HYDROCODONE/IBUPROFEN ORAL TABLET 7.5-200 MG			0.65000	10/15/2015	10/09/2015
HYDROCORTISONE ACETATE TOPICAL CREAM (GRAM) 0.5 %			0.02200	10/15/2015	10/09/2015
HYDROCORTISONE ACETATE TOPICAL CREAM (GRAM) 1 %			0.05200	10/15/2015	10/09/2015
HYDROCORTISONE ACETATE/UREA TOPICAL CREAM (GRAM) 1 %-10 %			0.65000	10/15/2015	10/09/2015
HYDROCORTISONE BUTYRATE TOPICAL CREAM (GRAM) 0.1 %			1.11700	10/15/2015	10/09/2015
HYDROCORTISONE BUTYRATE TOPICAL OINTMENT (GRAM) 0.1 %			0.62500	10/15/2015	10/09/2015
HYDROCORTISONE BUTYRATE TOPICAL SOLUTION, NON-ORAL 0.1 %			0.37800	10/15/2015	10/09/2015
HYDROCORTISONE ORAL TABLET 10 MG			0.46600	10/15/2015	10/09/2015
HYDROCORTISONE ORAL TABLET 20 MG			0.82300	10/15/2015	10/09/2015
HYDROCORTISONE RECTAL ENEMA (ML) 100MG/60ML			0.09900	10/15/2015	10/09/2015
HYDROCORTISONE SOD SUCCINATE INJECTION VIAL (EA) 100 MG			1.09100	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL CREAM (GRAM) 0.5 %			0.05000	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL CREAM (GRAM) 1 %			0.05200	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL CREAM (GRAM) 2.5 %			0.18200	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL LOTION (ML) 1 %			0.06400	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL LOTION (ML) 2.5 %			0.33300	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL OINTMENT (GRAM) 0.5 %			0.04200	10/15/2015	10/09/2015
HYDROCORTISONE TOPICAL OINTMENT (GRAM) 1 %			0.05200	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
HYDROCORTISONE TOPICAL OINTMENT (GRAM) 2.5 %			0.18200	10/15/2015	10/09/2015
HYDROCORTISONE VALERATE TOPICAL CREAM (GRAM) 0.2 %			0.73300	10/15/2015	10/09/2015
HYDROCORTISONE/ALOE VERA TOPICAL CREAM (GRAM) 1 %			0.05200	10/15/2015	10/09/2015
HYDROMORPHONE HCL INJECTION SYRINGE (ML) 1 MG/ML			1.35800	10/15/2015	10/09/2015
HYDROMORPHONE HCL INJECTION SYRINGE (ML) 4 MG/ML			1.05900	10/15/2015	10/09/2015
HYDROMORPHONE HCL INJECTION VIAL (ML) 2 MG/ML			0.47100	10/15/2015	10/09/2015
HYDROMORPHONE HCL ORAL TABLET 2 MG			0.20400	10/15/2015	10/09/2015
HYDROMORPHONE HCL ORAL TABLET 4 MG			0.33400	10/15/2015	10/09/2015
HYDROMORPHONE HCL ORAL TABLET 8 MG			0.86900	10/15/2015	10/09/2015
HYDROMORPHONE HCL/PF INJECTION AMPUL (ML) 1 MG/ML			0.94800	10/15/2015	10/09/2015
HYDROMORPHONE HCL/PF INJECTION AMPUL (ML) 10 MG/ML			2.34100	10/15/2015	10/09/2015
HYDROMORPHONE HCL/PF INJECTION AMPUL (ML) 2 MG/ML			0.95900	10/15/2015	10/09/2015
HYDROMORPHONE HCL/PF INJECTION AMPUL (ML) 4 MG/ML			1.41500	10/15/2015	10/09/2015
HYDROMORPHONE HCL/PF INJECTION VIAL (ML) 10 MG/ML			2.21700	10/15/2015	10/09/2015
HYDROXYCHLOROQUINE SULFATE ORAL TABLET 200 MG			2.35900	10/15/2015	10/09/2015
HYDROXYPROGESTERONE CAPROATE MISCELLANEOUS POWDER (GRAM) 100 %			43.20000	10/15/2015	10/09/2015
HYDROXYUREA ORAL CAPSULE 500 MG			0.40900	10/15/2015	10/09/2015
HYDROXYZINE HCL INTRAMUSCULAR VIAL (ML) 25 MG/ML			0.72000	10/15/2015	10/09/2015
HYDROXYZINE HCL INTRAMUSCULAR VIAL (ML) 50 MG/ML			1.50000	10/15/2015	10/09/2015
HYDROXYZINE HCL ORAL SOLUTION, ORAL 10 MG/5 ML			0.06900	10/15/2015	10/09/2015
HYDROXYZINE HCL ORAL SOLUTION, ORAL 50 MG/25ML			0.06900	10/15/2015	10/09/2015
HYDROXYZINE HCL ORAL TABLET 10 MG			0.23100	10/15/2015	10/09/2015
HYDROXYZINE HCL ORAL TABLET 25 MG			0.50200	10/15/2015	10/09/2015
HYDROXYZINE HCL ORAL TABLET 50 MG			0.78000	10/15/2015	10/09/2015
HYDROXYZINE PAMOATE ORAL CAPSULE 25 MG			0.07400	10/15/2015	10/09/2015
HYDROXYZINE PAMOATE ORAL CAPSULE 50 MG			0.15700	10/15/2015	10/09/2015
HYOSCYAMINE SULFATE ORAL DROPS 0.125MG/ML			1.26000	10/15/2015	10/09/2015
HYOSCYAMINE SULFATE ORAL ELIXIR 125MCG/5ML			0.06600	10/15/2015	10/09/2015
HYOSCYAMINE SULFATE ORAL TABLET 0.125 MG			0.73000	10/15/2015	10/09/2015
HYOSCYAMINE SULFATE ORAL TABLET,DISINTEGRATING 0.125 MG			0.37400	10/15/2015	10/09/2015
HYOSCYAMINE SULFATE SUBLINGUAL TABLET, SUBLINGUAL 0.125 MG			0.67300	10/15/2015	10/09/2015
IBUPROFEN ORAL CAPSULE 200 MG			0.01800	10/15/2015	10/09/2015
IBUPROFEN ORAL SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 50 MG/1.25			0.21900	10/15/2015	10/09/2015
IBUPROFEN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 100 MG/5ML			0.02700	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET 100 MG			0.10500	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET 200 MG			0.01800	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET 400 MG			0.02900	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET 600 MG			0.03100	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET 800 MG			0.04600	10/15/2015	10/09/2015
IBUPROFEN ORAL TABLET, CHEWABLE 100 MG			0.10500	10/15/2015	10/09/2015
IBUPROFEN/OXYCODONE HCL ORAL TABLET 400MG-5MG			1.13500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
IBUTILIDE FUMARATE INTRAVENOUS VIAL (ML) 0.1 MG/ML			31.91800	10/15/2015	10/09/2015
IMIPRAMINE HCL ORAL TABLET 10 MG			0.15500	10/15/2015	10/09/2015
IMIPRAMINE HCL ORAL TABLET 25 MG			0.17500	10/15/2015	10/09/2015
IMIPRAMINE HCL ORAL TABLET 50 MG			0.36600	10/15/2015	10/09/2015
IMIPRAMINE PAMOATE ORAL CAPSULE 100 MG			11.38700	10/15/2015	10/09/2015
IMIPRAMINE PAMOATE ORAL CAPSULE 125 MG			11.38700	10/15/2015	10/09/2015
IMIPRAMINE PAMOATE ORAL CAPSULE 150 MG			11.38700	10/15/2015	10/09/2015
IMIPRAMINE PAMOATE ORAL CAPSULE 75 MG			11.38700	10/15/2015	10/09/2015
IMIQUIMOD TOPICAL CREAM IN PACKET (EA) 5 %			22.75000	10/15/2015	10/09/2015
INDAPAMIDE ORAL TABLET 1.25 MG			0.06900	10/15/2015	10/09/2015
INDAPAMIDE ORAL TABLET 2.5 MG			0.10900	10/15/2015	10/09/2015
INDOMETHACIN ORAL CAPSULE 25 MG			0.16000	10/15/2015	10/09/2015
INDOMETHACIN ORAL CAPSULE 50 MG			0.20000	10/15/2015	10/09/2015
INDOMETHACIN ORAL CAPSULE, EXTENDED RELEASE 75 MG			1.55300	10/15/2015	10/09/2015
IPRATROPIUM BROMIDE INHALATION SOLUTION, NON-ORAL 0.2 MG/ML			0.09100	10/15/2015	10/09/2015
IPRATROPIUM BROMIDE NASAL AEROSOL, SPRAY (ML) 21 MCG			1.09100	10/15/2015	10/09/2015
IPRATROPIUM BROMIDE NASAL AEROSOL, SPRAY (ML) 42MCG			1.87100	10/15/2015	10/09/2015
IPRATROPIUM BROMIDE/ALBUTEROL SULFATE INHALATION AMPUL FOR NEBULIZATION (ML) 0.5-3MG/3			0.14100	10/15/2015	10/09/2015
IRBESARTAN ORAL TABLET 150 MG			0.32200	10/15/2015	10/09/2015
IRBESARTAN ORAL TABLET 300 MG			0.44800	10/15/2015	10/09/2015
IRBESARTAN ORAL TABLET 75 MG			0.24900	10/15/2015	10/09/2015
IRBESARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 150-12.5MG			0.55800	10/15/2015	10/09/2015
IRBESARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 300-12.5MG			0.54800	10/15/2015	10/09/2015
IRINOTECAN HCL INTRAVENOUS VIAL (ML) 100 MG/5ML			7.58900	10/15/2015	10/09/2015
IRINOTECAN HCL INTRAVENOUS VIAL (ML) 40 MG/2 ML			6.98800	10/15/2015	10/09/2015
IRON ASP GLY&PS CMPLX/ASCORB.CAL/VIT B12/FA/CA-THR/SUCC.ACID ORAL CAPSULE 150-25-1			1.08700	10/15/2015	10/09/2015
IRON ASP GLY/ASCORB.CAL/VIT B12/FA/CA-THREONTE/SUCCINIC ACID ORAL TABLET 70-150-1MG			1.06800	10/15/2015	10/09/2015
IRON ASP.GLYCIN & FUMARATE /VIT C/FA/MV COMB 11/CA-THREONATE ORAL TABLET 151-200-1			0.88500	10/15/2015	10/09/2015
IRON FUMARATE-IRON POLYSACCHAR/FOLIC ACID/MV COMB18 ORAL CAPSULE 106 MG-1MG			0.44900	10/15/2015	10/09/2015
IRON POLYSACCHARIDE COMPLEX ORAL CAPSULE 150 MG			0.16000	10/15/2015	10/09/2015
IRON POLYSACCHARIDE COMPLEX/CYANOCOBALAMIN/FOLIC ACID ORAL CAPSULE 150-25-1			0.20200	10/15/2015	10/09/2015
IRON,CARBONYL/FOLIC ACID/VIT C/PYRIDOXINE HCL/VIT B12/ZINC ORAL TABLET 150-1.25MG			0.93300	10/15/2015	10/09/2015
ISONIAZID ORAL SOLUTION, ORAL 50 MG/5 ML			0.08800	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE ORAL TABLET 10 MG			0.75500	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE ORAL TABLET 20 MG			0.88300	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE ORAL TABLET 30 MG			0.77600	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE ORAL TABLET 5 MG			0.69200	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE ORAL TABLET, EXTENDED RELEASE 40 MG			0.59100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
ISOSORBIDE DINITRATE SUBLINGUAL TABLET, SUBLINGUAL 2.5 MG			0.04800	10/15/2015	10/09/2015
ISOSORBIDE DINITRATE SUBLINGUAL TABLET, SUBLINGUAL 5 MG			0.03700	10/15/2015	10/09/2015
ISOSORBIDE MONONITRATE ORAL TABLET 10 MG			0.40200	10/15/2015	10/09/2015
ISOSORBIDE MONONITRATE ORAL TABLET 20 MG			0.10100	10/15/2015	10/09/2015
ISOSORBIDE MONONITRATE ORAL TABLET, EXTENDED RELEASE 24 HR 120 MG			0.37900	10/15/2015	10/09/2015
ISOSORBIDE MONONITRATE ORAL TABLET, EXTENDED RELEASE 24 HR 30 MG			0.26300	10/15/2015	10/09/2015
ISOSORBIDE MONONITRATE ORAL TABLET, EXTENDED RELEASE 24 HR 60 MG			0.20200	10/15/2015	10/09/2015
ISOTRETINOIN ORAL CAPSULE 10 MG			5.73800	10/15/2015	10/09/2015
ISOTRETINOIN ORAL CAPSULE 20 MG			6.80600	10/15/2015	10/09/2015
ISOTRETINOIN ORAL CAPSULE 40 MG			9.99900	10/15/2015	10/09/2015
ISRADIPINE ORAL CAPSULE 2.5 MG			0.96000	10/15/2015	10/09/2015
ISRADIPINE ORAL CAPSULE 5 MG			1.40000	10/15/2015	10/09/2015
ITRACONAZOLE ORAL CAPSULE 100 MG			7.44200	10/15/2015	10/09/2015
KETOCONAZOLE ORAL TABLET 200 MG			0.37700	10/15/2015	10/09/2015
KETOCONAZOLE TOPICAL CREAM (GRAM) 2 %			0.46200	10/15/2015	10/09/2015
KETOCONAZOLE TOPICAL SHAMPOO 2 %			0.17500	10/15/2015	10/09/2015
KETOPROFEN ORAL CAPSULE 50 MG			0.12100	10/15/2015	10/09/2015
KETOPROFEN ORAL CAPSULE 75 MG			0.12100	10/15/2015	10/09/2015
KETOPROFEN ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 200 MG			3.66700	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INJECTION CARTRIDGE (ML) 15 MG/ML			1.45500	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INJECTION CARTRIDGE (ML) 30 MG/ML			0.88200	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INJECTION VIAL (ML) 15 MG/ML			1.04500	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INJECTION VIAL (ML) 30 MG/ML			1.11300	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INJECTION VIAL (ML) 30MG/ML(1)			1.11300	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE INTRAMUSCULAR VIAL (ML) 60 MG/2 ML			0.60300	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE OPHTHALMIC DROPS 0.4 %			2.74000	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE OPHTHALMIC DROPS 0.5 %			2.25600	10/15/2015	10/09/2015
KETOROLAC TROMETHAMINE ORAL TABLET 10 MG			0.60500	10/15/2015	10/09/2015
KETOTIFEN FUMARATE OPHTHALMIC DROPS 0.025 %			1.74700	10/15/2015	10/09/2015
LABETALOL HCL ORAL TABLET 100 MG			0.44500	10/15/2015	10/09/2015
LABETALOL HCL ORAL TABLET 200 MG			0.46700	10/15/2015	10/09/2015
LABETALOL HCL ORAL TABLET 300 MG			0.68500	10/15/2015	10/09/2015
LACTULOSE ORAL SOLUTION, ORAL 10 G/15 ML			0.01400	10/15/2015	10/09/2015
LACTULOSE ORAL SOLUTION, ORAL 20 G/30 ML			0.01400	10/15/2015	10/09/2015
LAMIVUDINE ORAL TABLET 150 MG			5.78800	10/15/2015	10/09/2015
LAMIVUDINE ORAL TABLET 300 MG			10.52600	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET 100 MG			0.20300	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET 150 MG			0.18900	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET 200 MG			0.20600	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET 25 MG			0.17300	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET, CHEWABLE DISPERSIBLE 25 MG			0.46100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
LAMOTRIGINE ORAL TABLET, CHEWABLE DISPERSIBLE 5 MG			0.44100	10/15/2015	10/09/2015
LAMOTRIGINE ORAL TABLET, DOSE PACK 25MG (35)			0.17300	10/15/2015	10/09/2015
LANOLIN/MINERAL OIL/PETROLATUM,WHITE OPHTHALMIC OINTMENT (GRAM)			0.73300	10/15/2015	10/09/2015
LANSOPRAZOLE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 15 MG			0.61100	10/15/2015	10/09/2015
LANSOPRAZOLE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 30 MG			0.82100	10/15/2015	10/09/2015
LATANOPROST OPHTHALMIC DROPS 0.005 %			3.70100	10/15/2015	10/09/2015
LEFLUNOMIDE ORAL TABLET 10 MG			0.50200	10/15/2015	10/09/2015
LEFLUNOMIDE ORAL TABLET 20 MG			0.50200	10/15/2015	10/09/2015
LETROZOLE ORAL TABLET 2.5 MG			0.36600	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM INJECTION VIAL (EA) 100 MG			7.42000	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM INJECTION VIAL (EA) 200 MG			14.48000	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM INJECTION VIAL (EA) 350 MG			23.75000	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM INJECTION VIAL (EA) 50 MG			3.71000	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM ORAL TABLET 25 MG			8.92400	10/15/2015	10/09/2015
LEUCOVORIN CALCIUM ORAL TABLET 5 MG			1.66100	10/15/2015	10/09/2015
LEUPROLIDE ACETATE SUBCUTANEOUS KIT 1 MG/0.2ML			128.40000	10/15/2015	10/09/2015
LEVETIRACETAM INTRAVENOUS VIAL (ML) 500 MG/5ML			7.10900	10/15/2015	10/09/2015
LEVETIRACETAM ORAL SOLUTION, ORAL 100 MG/ML			0.29800	10/15/2015	10/09/2015
LEVETIRACETAM ORAL SOLUTION, ORAL 500 MG/5ML			0.29800	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET 1000 MG			1.36200	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET 250 MG			0.38300	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET 500 MG			0.46900	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET 750 MG			0.63500	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET, EXTENDED RELEASE 24 HR 500 MG			0.78200	10/15/2015	10/09/2015
LEVETIRACETAM ORAL TABLET, EXTENDED RELEASE 24 HR 750 MG			1.09100	10/15/2015	10/09/2015
LEVOBUNOLOL HCL OPHTHALMIC DROPS 0.25 %			0.99000	10/15/2015	10/09/2015
LEVOBUNOLOL HCL OPHTHALMIC DROPS 0.5 %			3.70400	10/15/2015	10/09/2015
LEVOCARNITINE (WITH SUGAR) ORAL SOLUTION, ORAL 100 MG/ML			0.18400	10/15/2015	10/09/2015
LEVOCARNITINE INTRAVENOUS VIAL (ML) 200 MG/ML			3.98000	10/15/2015	10/09/2015
LEVOCARNITINE ORAL TABLET 330 MG			0.63200	10/15/2015	10/09/2015
LEVOCETIRIZINE DIHYDROCHLORIDE ORAL TABLET 5 MG			1.31600	10/15/2015	10/09/2015
LEVOFLOXACIN OPHTHALMIC DROPS 0.5 %			13.37500	10/15/2015	10/09/2015
LEVOFLOXACIN ORAL TABLET 250 MG			0.34700	10/15/2015	10/09/2015
LEVOFLOXACIN ORAL TABLET 500 MG			0.39900	10/15/2015	10/09/2015
LEVOFLOXACIN ORAL TABLET 750 MG			0.85000	10/15/2015	10/09/2015
LEVORPHANOL TARTRATE ORAL TABLET 2 MG			1.37600	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 100 MCG			0.30300	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 112 MCG			0.51000	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 125 MCG			0.52400	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 137 MCG			0.35500	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 150 MCG			0.36500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
LEVOTHYROXINE SODIUM ORAL TABLET 175MCG			0.42700	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 200 MCG			0.64000	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 25 MCG			0.35700	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 300 MCG			0.59100	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 50 MCG			0.39600	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 75 MCG			0.43400	10/15/2015	10/09/2015
LEVOTHYROXINE SODIUM ORAL TABLET 88 MCG			0.44700	10/15/2015	10/09/2015
LIDOCAINE HCL INJECTION VIAL (ML) 10 MG/ML			0.02700	10/15/2015	10/09/2015
LIDOCAINE HCL MUCOUS MEMBRANE JEL (ML) 2 %			0.37100	10/15/2015	10/09/2015
LIDOCAINE HCL MUCOUS MEMBRANE SOLUTION, ORAL 2 %			0.05100	10/15/2015	10/09/2015
LIDOCAINE HCL TOPICAL CREAM (GRAM) 3 %			1.51900	10/15/2015	10/09/2015
LIDOCAINE HCL/HYDROCORTISONE ACETATE TOPICAL CREAM (GRAM) 3 %-0.5 %			1.96200	10/15/2015	10/09/2015
LIDOCAINE HCL/PF INJECTION AMPUL (ML) 10 MG/ML			0.02700	10/15/2015	10/09/2015
LIDOCAINE HCL/PF INJECTION VIAL (ML) 10 MG/ML			0.02700	10/15/2015	10/09/2015
LIDOCAINE HCL/PF INTRAVENOUS SYRINGE (ML) 50 MG/5 ML			0.02700	10/15/2015	10/09/2015
LIDOCAINE TOPICAL CREAM (GRAM) 4 %			0.99100	10/15/2015	10/09/2015
LIDOCAINE/PRILOCAINE TOPICAL CREAM (GRAM) 2.5 %-2.5%			1.19000	10/15/2015	10/09/2015
LINDANE TOPICAL LOTION (ML) 1 %			1.88800	10/15/2015	10/09/2015
LINDANE TOPICAL SHAMPOO 1 %			1.88800	10/15/2015	10/09/2015
LIOTHYRONINE SODIUM ORAL TABLET 25 MCG			0.86300	10/15/2015	10/09/2015
LIOTHYRONINE SODIUM ORAL TABLET 5 MCG			0.65700	10/15/2015	10/09/2015
LIOTHYRONINE SODIUM ORAL TABLET 50 MCG			1.37400	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 10 MG			0.04400	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 2.5 MG			0.02500	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 20 MG			0.06300	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 30 MG			0.10900	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 40 MG			0.12000	10/15/2015	10/09/2015
LISINOPRIL ORAL TABLET 5 MG			0.03200	10/15/2015	10/09/2015
LISINOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5MG			0.09400	10/15/2015	10/09/2015
LISINOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-12.5 MG			0.13000	10/15/2015	10/09/2015
LISINOPRIL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-25MG			0.14600	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL CAPSULE 150 MG			0.12100	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL CAPSULE 300 MG			0.13900	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL CAPSULE 600 MG			0.30700	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL TABLET 300 MG			0.13900	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL TABLET, EXTENDED RELEASE 300 MG			0.32400	10/15/2015	10/09/2015
LITHIUM CARBONATE ORAL TABLET, EXTENDED RELEASE 450 MG			0.42700	10/15/2015	10/09/2015
LITHIUM CITRATE ORAL SOLUTION, ORAL 8 MEQ/5 ML			0.03100	10/15/2015	10/09/2015
LOPERAMIDE HCL ORAL CAPSULE 2 MG			0.12500	10/15/2015	10/09/2015
LOPERAMIDE HCL ORAL LIQUID (ML) 1 MG/5 ML			0.04300	10/15/2015	10/09/2015
LOPERAMIDE HCL ORAL LIQUID (ML) 1MG/7.5ML			0.02600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
LOPERAMIDE HCL ORAL TABLET 2 MG			0.12500	10/15/2015	10/09/2015
LORATADINE ORAL SOLUTION, ORAL 5 MG/5 ML			0.04200	10/15/2015	10/09/2015
LORATADINE ORAL TABLET 10 MG			0.05100	10/15/2015	10/09/2015
LORATADINE ORAL TABLET,DISINTEGRATING 10 MG			0.37900	10/15/2015	10/09/2015
LORATADINE/PSEUDOEPHEDRINE SULFATE ORAL TABLET, EXTENDED RELEASE 24 HR 10MG-240MG			0.87100	10/15/2015	10/09/2015
LORAZEPAM INJECTION SYRINGE (ML) 2 MG/ML			2.22700	10/15/2015	10/09/2015
LORAZEPAM INJECTION SYRINGE (ML) 4 MG/ML			4.11000	10/15/2015	10/09/2015
LORAZEPAM INJECTION VIAL (ML) 2 MG/ML			1.19800	10/15/2015	10/09/2015
LORAZEPAM INJECTION VIAL (ML) 4 MG/ML			1.70400	10/15/2015	10/09/2015
LORAZEPAM ORAL CONCENTRATE, ORAL 2 MG/ML			1.07100	10/15/2015	10/09/2015
LORAZEPAM ORAL TABLET 0.5 MG			0.04700	10/15/2015	10/09/2015
LORAZEPAM ORAL TABLET 1 MG			0.06200	10/15/2015	10/09/2015
LORAZEPAM ORAL TABLET 2 MG			0.09600	10/15/2015	10/09/2015
LOSARTAN POTASSIUM ORAL TABLET 100 MG			0.48900	10/15/2015	10/09/2015
LOSARTAN POTASSIUM ORAL TABLET 25 MG			0.26500	10/15/2015	10/09/2015
LOSARTAN POTASSIUM ORAL TABLET 50 MG			0.35900	10/15/2015	10/09/2015
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE ORAL TABLET 100-12.5MG			0.34000	10/15/2015	10/09/2015
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE ORAL TABLET 100MG-25MG			0.34000	10/15/2015	10/09/2015
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE ORAL TABLET 50-12.5 MG			0.25000	10/15/2015	10/09/2015
LOVASTATIN ORAL TABLET 10 MG			0.22700	10/15/2015	10/09/2015
LOVASTATIN ORAL TABLET 20 MG			0.39500	10/15/2015	10/09/2015
LOVASTATIN ORAL TABLET 40 MG			0.55500	10/15/2015	10/09/2015
LOXAPINE SUCCINATE ORAL CAPSULE 10 MG			0.74700	10/15/2015	10/09/2015
LOXAPINE SUCCINATE ORAL CAPSULE 25 MG			1.15000	10/15/2015	10/09/2015
LOXAPINE SUCCINATE ORAL CAPSULE 5 MG			0.58100	10/15/2015	10/09/2015
LOXAPINE SUCCINATE ORAL CAPSULE 50 MG			1.50000	10/15/2015	10/09/2015
MAGNESIUM CARBONATE/ALUMINUM HYDROXIDE/ALGINIC ACID ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 358-95/15			0.00700	10/15/2015	10/09/2015
MAGNESIUM CHLORIDE ORAL TABLET, EXTENDED RELEASE 64 MG			0.08100	10/15/2015	10/09/2015
MAGNESIUM CITRATE ORAL SOLUTION, ORAL			0.00300	10/15/2015	10/09/2015
MAGNESIUM GLUCONATE ORAL TABLET 27 MG(500)			0.04600	10/15/2015	10/09/2015
MAGNESIUM HYDROXIDE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 2400 MG/10			0.00400	10/15/2015	10/09/2015
MAGNESIUM HYDROXIDE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 400 MG/5ML			0.00400	10/15/2015	10/09/2015
MAGNESIUM HYDROXIDE/ALUMINUM HYDROXIDE/SIMETHICONE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 200-200-20			0.00600	10/15/2015	10/09/2015
MAGNESIUM HYDROXIDE/ALUMINUM HYDROXIDE/SIMETHICONE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 400-400-40			0.00700	10/15/2015	10/09/2015
MAGNESIUM HYDROXIDE/ALUMINUM HYDROXIDE/SIMETHICONE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 450-500-40			0.01100	10/15/2015	10/09/2015
MAGNESIUM OXIDE ORAL TABLET 400 MG			0.07900	10/15/2015	10/09/2015
MAGNESIUM SULFATE INJECTION VIAL (ML) 4 MEQ/ML			0.20000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
MAGNESIUM TRISILICATE/AL HYDROX/SOD BICARB/ALGINIC ACID ORAL TABLET, CHEWABLE 20-80MG			0.02000	10/15/2015	10/09/2015
MALATHION TOPICAL LOTION (ML) 0.5 %			2.26900	10/15/2015	10/09/2015
MAPROTILINE HCL ORAL TABLET 25 MG			0.20600	10/15/2015	10/09/2015
MAPROTILINE HCL ORAL TABLET 50 MG			0.89600	10/15/2015	10/09/2015
MAPROTILINE HCL ORAL TABLET 75 MG			0.63800	10/15/2015	10/09/2015
MECHLORETHAMINE HCL MISCELLANEOUS POWDER (GRAM) 98 %			29.96000	10/15/2015	10/09/2015
MECLIZINE HCL ORAL TABLET 12.5 MG			0.25500	10/15/2015	10/09/2015
MECLIZINE HCL ORAL TABLET 25 MG			0.33900	10/15/2015	10/09/2015
MECLIZINE HCL ORAL TABLET, CHEWABLE 25 MG			0.06900	10/15/2015	10/09/2015
MECLOFENAMATE SODIUM ORAL CAPSULE 50 MG			0.23800	10/15/2015	10/09/2015
MECOBALAMIN/LEVOMEFOLATE CALCIUM/PYRIDOXAL PHOSPHATE ORAL TABLET 2-3-35 MG			0.65400	10/15/2015	10/09/2015
MEDROXYPROGESTERONE ACETATE INTRAMUSCULAR SYRINGE (ML) 150 MG/ML			49.84000	10/15/2015	10/09/2015
MEDROXYPROGESTERONE ACETATE ORAL TABLET 10 MG			0.22500	10/15/2015	10/09/2015
MEDROXYPROGESTERONE ACETATE ORAL TABLET 2.5 MG			0.15000	10/15/2015	10/09/2015
MEDROXYPROGESTERONE ACETATE ORAL TABLET 5 MG			0.22500	10/15/2015	10/09/2015
MEFENAMIC ACID ORAL CAPSULE 250 MG			11.01000	10/15/2015	10/09/2015
MEFLOQUINE HCL ORAL TABLET 250 MG			8.49700	10/15/2015	10/09/2015
MEGESTROL ACETATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 400MG/10ML			0.45000	10/15/2015	10/09/2015
MEGESTROL ACETATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 800MG/20ML			0.45000	10/15/2015	10/09/2015
MEGESTROL ACETATE ORAL TABLET 20 MG			0.21400	10/15/2015	10/09/2015
MEGESTROL ACETATE ORAL TABLET 40 MG			0.31300	10/15/2015	10/09/2015
MELOXICAM ORAL TABLET 15 MG			0.08500	10/15/2015	10/09/2015
MELOXICAM ORAL TABLET 7.5 MG			0.07100	10/15/2015	10/09/2015
MELPHALAN HCL INTRAVENOUS VIAL (EA) 50 MG			1645.66000	10/15/2015	10/09/2015
MEPERIDINE HCL INJECTION CARTRIDGE (ML) 10 MG/ML			0.24500	10/15/2015	10/09/2015
MEPERIDINE HCL ORAL SOLUTION, ORAL 50 MG/5 ML			0.08800	10/15/2015	10/09/2015
MEPERIDINE HCL ORAL TABLET 100 MG			0.62900	10/15/2015	10/09/2015
MEPERIDINE HCL ORAL TABLET 50 MG			0.31800	10/15/2015	10/09/2015
MEPERIDINE HCL/PF INJECTION VIAL (ML) 100 MG/ML			0.50600	10/15/2015	10/09/2015
MEPERIDINE HCL/PF INJECTION VIAL (ML) 25 MG/ML			0.50800	10/15/2015	10/09/2015
MEPROBAMATE ORAL TABLET 200 MG			1.09000	10/15/2015	10/09/2015
MEPROBAMATE ORAL TABLET 400 MG			1.46700	10/15/2015	10/09/2015
MERCAPTOPURINE ORAL TABLET 50 MG			2.83300	10/15/2015	10/09/2015
MEROPENEM INTRAVENOUS VIAL (EA) 1 G			39.55700	10/15/2015	10/09/2015
MEROPENEM INTRAVENOUS VIAL (EA) 500 MG			18.61800	10/15/2015	10/09/2015
MESALAMINE RECTAL ENEMA (ML) 4 G/60 ML			0.22500	10/15/2015	10/09/2015
MESALAMINE WITH CLEANSING WIPES RECTAL ENEMA KIT 4 G/60 ML			572.98500	10/15/2015	10/09/2015
MESNA INTRAVENOUS VIAL (ML) 100 MG/ML			3.18000	10/15/2015	10/09/2015
METAPROTERENOL SULFATE ORAL SYRUP 10 MG/5 ML			0.01400	10/15/2015	10/09/2015
METAPROTERENOL SULFATE ORAL TABLET 10 MG			0.31600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
METAPROTERENOL SULFATE ORAL TABLET 20 MG			0.32200	10/15/2015	10/09/2015
METAXALONE ORAL TABLET 800 MG			3.19600	10/15/2015	10/09/2015
METFORMIN HCL ORAL TABLET 1000 MG			0.06900	10/15/2015	10/09/2015
METFORMIN HCL ORAL TABLET 500 MG			0.04900	10/15/2015	10/09/2015
METFORMIN HCL ORAL TABLET 850 MG			0.06600	10/15/2015	10/09/2015
METFORMIN HCL ORAL TABLET, EXTENDED RELEASE 24 HR 500 MG			0.08400	10/15/2015	10/09/2015
METFORMIN HCL ORAL TABLET, EXTENDED RELEASE 24 HR 750 MG			0.22000	10/15/2015	10/09/2015
METHADONE HCL INJECTION VIAL (ML) 10 MG/ML			6.66500	10/15/2015	10/09/2015
METHADONE HCL ORAL CONCENTRATE, ORAL 10 MG/ML			0.07200	10/15/2015	10/09/2015
METHADONE HCL ORAL SOLUTION, ORAL 10 MG/5 ML			0.15400	10/15/2015	10/09/2015
METHADONE HCL ORAL SOLUTION, ORAL 5 MG/5 ML			0.08300	10/15/2015	10/09/2015
METHADONE HCL ORAL TABLET 10 MG			0.12600	10/15/2015	10/09/2015
METHADONE HCL ORAL TABLET 5 MG			0.07500	10/15/2015	10/09/2015
METHAMPHETAMINE HCL ORAL TABLET 5 MG			3.08300	10/15/2015	10/09/2015
METHAZOLAMIDE ORAL TABLET 25 MG			1.21900	10/15/2015	10/09/2015
METHAZOLAMIDE ORAL TABLET 50 MG			2.44000	10/15/2015	10/09/2015
METHENAMINE HIPPURATE ORAL TABLET 1 G			1.71900	10/15/2015	10/09/2015
METHENAMINE MANDELATE ORAL TABLET 1 G			0.23700	10/15/2015	10/09/2015
METHENAMINE/METHYLENE BLUE/SODIUM PHOS/PNYL SAL/HYOSC SUL ORAL TABLET 81.6-10.8			0.81300	10/15/2015	10/09/2015
METHENAMINE/SODIUM PHOSPHATE,MONOBASIC/METH BLUE/HYOSC SUL ORAL TABLET 81.6-.12MG			0.48100	10/15/2015	10/09/2015
METHIMAZOLE ORAL TABLET 10 MG			0.50000	10/15/2015	10/09/2015
METHIMAZOLE ORAL TABLET 5 MG			0.29100	10/15/2015	10/09/2015
METHOCARBAMOL ORAL TABLET 500 MG			0.09900	10/15/2015	10/09/2015
METHOCARBAMOL ORAL TABLET 750 MG			0.10900	10/15/2015	10/09/2015
METHOTREXATE SODIUM INJECTION VIAL (ML) 25 MG/ML			2.34300	10/15/2015	10/09/2015
METHOTREXATE SODIUM ORAL TABLET 2.5 MG			2.35400	10/15/2015	10/09/2015
METHOTREXATE SODIUM/PF INJECTION VIAL (ML) 25 MG/ML			0.93600	10/15/2015	10/09/2015
METHSCOPOLAMINE BROMIDE ORAL TABLET 2.5 MG			1.43100	10/15/2015	10/09/2015
METHSCOPOLAMINE BROMIDE ORAL TABLET 5 MG			1.85900	10/15/2015	10/09/2015
METHYCLOTHIAZIDE ORAL TABLET 5 MG			0.29000	10/15/2015	10/09/2015
METHYLCELLULOSE ORAL TABLET 500 MG			0.07900	10/15/2015	10/09/2015
METHYLDOPA ORAL TABLET 250 MG			0.11100	10/15/2015	10/09/2015
METHYLDOPA ORAL TABLET 500 MG			0.21100	10/15/2015	10/09/2015
METHYLDOPA/HYDROCHLOROTHIAZIDE ORAL TABLET 250MG-15MG			0.11300	10/15/2015	10/09/2015
METHYLDOPA/HYDROCHLOROTHIAZIDE ORAL TABLET 250MG-25MG			0.12100	10/15/2015	10/09/2015
METHYLPHENIDATE HCL ORAL TABLET 20 MG			1.21000	10/15/2015	10/09/2015
METHYLPHENIDATE HCL ORAL TABLET 5 MG			0.58200	10/15/2015	10/09/2015
METHYLPHENIDATE HCL ORAL TABLET, EXTENDED RELEASE 10 MG			0.71500	10/15/2015	10/09/2015
METHYLPHENIDATE HCL ORAL TABLET, EXTENDED RELEASE 20 MG			1.65500	10/15/2015	10/09/2015
METHYLPREDNISOLONE ACETATE INJECTION VIAL (ML) 40 MG/ML			1.54000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
METHYLPREDNISOLONE ACETATE INJECTION VIAL (ML) 80 MG/ML			10.35000	10/15/2015	10/09/2015
METHYLPREDNISOLONE ORAL TABLET 16 MG			2.65800	10/15/2015	10/09/2015
METHYLPREDNISOLONE ORAL TABLET 32 MG			3.36600	10/15/2015	10/09/2015
METHYLPREDNISOLONE ORAL TABLET 4 MG			0.99700	10/15/2015	10/09/2015
METHYLPREDNISOLONE ORAL TABLET, DOSE PACK 4 MG			0.99700	10/15/2015	10/09/2015
METHYLPREDNISOLONE SODIUM SUCCINATE INTRAVENOUS VIAL (EA) 1000 MG			12.00000	10/15/2015	10/09/2015
METIPRANOLOL OPHTHALMIC DROPS 0.3 %			1.82700	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL INJECTION SYRINGE (ML) 10 MG/2 ML			0.40100	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL INJECTION VIAL (ML) 5 MG/ML			0.23500	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL ORAL SOLUTION, ORAL 10 MG/10ML			0.01500	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL ORAL SOLUTION, ORAL 5 MG/5 ML			0.01500	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL ORAL TABLET 10 MG			0.06500	10/15/2015	10/09/2015
METOCLOPRAMIDE HCL ORAL TABLET 5 MG			0.06500	10/15/2015	10/09/2015
METOLAZONE ORAL TABLET 10 MG			0.82800	10/15/2015	10/09/2015
METOLAZONE ORAL TABLET 2.5 MG	0.43300	10/15/2015	1.36018	10/28/2015	10/26/2015
METOLAZONE ORAL TABLET 5 MG			0.88300	10/15/2015	10/09/2015
METOPROLOL SUCCINATE ORAL TABLET, EXTENDED RELEASE 24 HR 100 MG			1.15900	10/15/2015	10/09/2015
METOPROLOL SUCCINATE ORAL TABLET, EXTENDED RELEASE 24 HR 200 MG			1.84400	10/15/2015	10/09/2015
METOPROLOL SUCCINATE ORAL TABLET, EXTENDED RELEASE 24 HR 25 MG			0.74500	10/15/2015	10/09/2015
METOPROLOL SUCCINATE ORAL TABLET, EXTENDED RELEASE 24 HR 50 MG			0.77100	10/15/2015	10/09/2015
METOPROLOL TARTRATE ORAL TABLET 100 MG			0.05500	10/15/2015	10/09/2015
METOPROLOL TARTRATE ORAL TABLET 25 MG			0.03600	10/15/2015	10/09/2015
METOPROLOL TARTRATE ORAL TABLET 50 MG			0.03000	10/15/2015	10/09/2015
METOPROLOL TARTRATE/HYDROCHLOROTHIAZIDE ORAL TABLET 100MG-25MG			1.40100	10/15/2015	10/09/2015
METOPROLOL TARTRATE/HYDROCHLOROTHIAZIDE ORAL TABLET 100MG-50MG			1.50800	10/15/2015	10/09/2015
METOPROLOL TARTRATE/HYDROCHLOROTHIAZIDE ORAL TABLET 50 MG-25MG			0.89600	10/15/2015	10/09/2015
METRONIDAZOLE ORAL TABLET 250 MG			0.27800	10/15/2015	10/09/2015
METRONIDAZOLE ORAL TABLET 500 MG			0.49400	10/15/2015	10/09/2015
METRONIDAZOLE TOPICAL CREAM (GRAM) 0.75 %			2.99400	10/15/2015	10/09/2015
METRONIDAZOLE TOPICAL LOTION (ML) 0.75 %			0.77900	10/15/2015	10/09/2015
MEXILETINE HCL ORAL CAPSULE 150 MG			0.25100	10/15/2015	10/09/2015
MEXILETINE HCL ORAL CAPSULE 200 MG			0.27700	10/15/2015	10/09/2015
MEXILETINE HCL ORAL CAPSULE 250 MG			0.37700	10/15/2015	10/09/2015
MICONAZOLE NITRATE TOPICAL CREAM (GRAM) 2 %			0.07500	10/15/2015	10/09/2015
MICONAZOLE NITRATE TOPICAL OINTMENT (GRAM) 2 %			0.05900	10/15/2015	10/09/2015
MICONAZOLE NITRATE TOPICAL POWDER (GRAM) 2 %			0.04900	10/15/2015	10/09/2015
MICONAZOLE NITRATE VAGINAL COMBINATION PACK, PREFILLED APPL.& CREAM 200 MG-2 %			7.44100	10/15/2015	10/09/2015
MICONAZOLE NITRATE VAGINAL CREAM WITH APPLICATOR 2 %			0.17600	10/15/2015	10/09/2015
MICONAZOLE NITRATE VAGINAL KIT 1200MG-2%			13.77000	10/15/2015	10/09/2015
MICONAZOLE NITRATE VAGINAL KIT 200 MG-2 %			7.44100	10/15/2015	10/09/2015
MICONAZOLE NITRATE VAGINAL SUPPOSITORY, VAGINAL 100 MG			0.39100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
MICONAZOLE NITRATE VAGINAL SUPPOSITORY, VAGINAL 200 MG			9.76900	10/15/2015	10/09/2015
MIDAZOLAM HCL INJECTION VIAL (ML) 10 MG/2 ML			1.60900	10/15/2015	10/09/2015
MIDAZOLAM HCL INJECTION VIAL (ML) 5 MG/ML			1.60900	10/15/2015	10/09/2015
MIDAZOLAM HCL INJECTION VIAL (ML) 5 MG/ML(1)			1.60900	10/15/2015	10/09/2015
MIDAZOLAM HCL ORAL SYRUP 10 MG/5 ML			0.82600	10/15/2015	10/09/2015
MIDAZOLAM HCL ORAL SYRUP 2 MG/ML			0.82600	10/15/2015	10/09/2015
MIDAZOLAM HCL ORAL SYRUP 5 MG/2.5ML			0.82600	10/15/2015	10/09/2015
MIDAZOLAM HCL/PF INJECTION VIAL (ML) 10 MG/2 ML			1.60900	10/15/2015	10/09/2015
MIDODRINE HCL ORAL TABLET 10 MG			3.13300	10/15/2015	10/09/2015
MIDODRINE HCL ORAL TABLET 2.5 MG			0.88300	10/15/2015	10/09/2015
MIDODRINE HCL ORAL TABLET 5 MG			1.77800	10/15/2015	10/09/2015
MINERAL OIL RECTAL ENEMA (ML)			0.01000	10/15/2015	10/09/2015
MINERAL OIL/PETROLATUM,WHITE OPHTHALMIC OINTMENT (GRAM) 15 %-83 %			0.73300	10/15/2015	10/09/2015
MINERAL OIL/PETROLATUM,WHITE TOPICAL CREAM (GRAM)			0.00900	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL CAPSULE 100 MG			0.44400	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL CAPSULE 50 MG			0.44400	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL CAPSULE 75 MG			0.61700	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET 100 MG			3.64100	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET 50 MG			2.42500	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET 75 MG			2.55000	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 135 MG			17.26200	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 45 MG			17.26200	10/15/2015	10/09/2015
MINOCYCLINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 90 MG			17.26200	10/15/2015	10/09/2015
MINOXIDIL ORAL TABLET 10 MG			0.41800	10/15/2015	10/09/2015
MINOXIDIL ORAL TABLET 2.5 MG			0.29700	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET 15 MG			0.17100	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET 30 MG			0.34200	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET 45 MG			0.41100	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET 7.5 MG			0.89100	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET,DISINTEGRATING 15 MG			1.21000	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET,DISINTEGRATING 30 MG			1.31000	10/15/2015	10/09/2015
MIRTAZAPINE ORAL TABLET,DISINTEGRATING 45 MG			1.71000	10/15/2015	10/09/2015
MISOPROSTOL ORAL TABLET 100 MCG			0.66200	10/15/2015	10/09/2015
MISOPROSTOL ORAL TABLET 200 MCG			0.96500	10/15/2015	10/09/2015
MITOMYCIN INTRAVENOUS VIAL (EA) 20 MG			160.00000	10/15/2015	10/09/2015
MITOMYCIN INTRAVENOUS VIAL (EA) 5 MG			26.08600	10/15/2015	10/09/2015
MITOXANTRONE HCL INTRAVENOUS VIAL (ML) 2 MG/ML			36.48500	10/15/2015	10/09/2015
MOEXIPRIL HCL ORAL TABLET 15 MG			0.65900	10/15/2015	10/09/2015
MOEXIPRIL HCL ORAL TABLET 7.5 MG			0.65900	10/15/2015	10/09/2015
MOEXIPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 15-12.5MG			0.80000	10/15/2015	10/09/2015
MOEXIPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 15-25MG			0.79700	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
MOEXIPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 7.5-12.5MG			0.80000	10/15/2015	10/09/2015
MOMETASONE FUROATE TOPICAL CREAM (GRAM) 0.1 %			0.67400	10/15/2015	10/09/2015
MOMETASONE FUROATE TOPICAL OINTMENT (GRAM) 0.1 %			0.71900	10/15/2015	10/09/2015
MOMETASONE FUROATE TOPICAL SOLUTION, NON-ORAL 0.1 %			0.41200	10/15/2015	10/09/2015
MONTELUKAST SODIUM ORAL TABLET 10 MG			0.66700	10/15/2015	10/09/2015
MONTELUKAST SODIUM ORAL TABLET, CHEWABLE 4 MG			0.72300	10/15/2015	10/09/2015
MONTELUKAST SODIUM ORAL TABLET, CHEWABLE 5 MG			0.71600	10/15/2015	10/09/2015
MORPHINE SULFATE INJECTION VIAL (ML) 10 MG/ML			0.68600	10/15/2015	10/09/2015
MORPHINE SULFATE INJECTION VIAL (ML) 15 MG/ML			0.89100	10/15/2015	10/09/2015
MORPHINE SULFATE INJECTION VIAL (ML) 5 MG/ML			0.67500	10/15/2015	10/09/2015
MORPHINE SULFATE INJECTION VIAL (ML) 8 MG/ML			0.80300	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS CARTRIDGE (ML) 15 MG/ML			0.89100	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS CARTRIDGE (ML) 4 MG/ML			0.61400	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS PATIENT CONTROLLED ANALGESIA SYRINGE 30 MG/30ML			0.42800	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS VIAL (ML) 25 MG/ML			0.47000	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS VIAL (ML) 50 MG/ML			1.32000	10/15/2015	10/09/2015
MORPHINE SULFATE INTRAVENOUS VIAL WITH THREADED PORT (ML) 250MG/10ML			1.10000	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL SOLUTION, ORAL 10 MG/5 ML			0.04600	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL SOLUTION, ORAL 100 MG/5ML			0.52900	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL SOLUTION, ORAL 20 MG/5 ML			0.09300	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL SYRINGE (ML) 20 MG/ML			0.52900	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET 15 MG			0.19100	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET 30 MG			0.32000	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET, EXTENDED RELEASE 100 MG			1.70000	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET, EXTENDED RELEASE 15 MG			0.47000	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET, EXTENDED RELEASE 200 MG			3.00000	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET, EXTENDED RELEASE 30 MG			0.60300	10/15/2015	10/09/2015
MORPHINE SULFATE ORAL TABLET, EXTENDED RELEASE 60 MG			1.65100	10/15/2015	10/09/2015
MORPHINE SULFATE RECTAL SUPPOSITORY, RECTAL 10 MG			0.77600	10/15/2015	10/09/2015
MORPHINE SULFATE RECTAL SUPPOSITORY, RECTAL 20 MG			0.91800	10/15/2015	10/09/2015
MORPHINE SULFATE RECTAL SUPPOSITORY, RECTAL 30 MG			1.22500	10/15/2015	10/09/2015
MORPHINE SULFATE RECTAL SUPPOSITORY, RECTAL 5 MG			0.70000	10/15/2015	10/09/2015
MORPHINE SULFATE/PF INJECTION AMPUL (ML) 0.5 MG/ML			0.23200	10/15/2015	10/09/2015
MORPHINE SULFATE/PF INJECTION VIAL (ML) 0.5 MG/ML			0.23200	10/15/2015	10/09/2015
MORPHINE SULFATE/PF INJECTION VIAL (ML) 1 MG/ML			0.35600	10/15/2015	10/09/2015
MORPHINE SULFATE/PF INTRAVENOUS PATIENT CONTROLLED ANALGESIA VIAL 150MG/30ML			0.67500	10/15/2015	10/09/2015
MORPHINE SULFATE/PF INTRAVENOUS PATIENT CONTROLLED ANALGESIA VIAL 30 MG/30ML			0.35600	10/15/2015	10/09/2015
MULTIVIT WITH CALCIUM, IRON, AND OTHER MINERALS ORAL TABLET 18MG-0.4MG			0.03500	10/15/2015	10/09/2015
MULTIVIT,CALCIUM,OTHER MIN/FERROUS FUMARATE/FA/LYCOPENE/LUT ORAL TABLET 18-500-300			0.04400	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
MULTIVIT,THERAPEUTIC WITH IRON,CALCIUM,FOLIC ACID & MINERALS ORAL TABLET 27MG-0.4MG			0.03800	10/15/2015	10/09/2015
MULTIVITAMIN ORAL LIQUID (ML)			0.01400	10/15/2015	10/09/2015
MULTIVITAMIN ORAL TABLET			0.01600	10/15/2015	10/09/2015
MULTIVITAMIN ORAL TABLET, CHEWABLE			0.02000	10/15/2015	10/09/2015
MULTIVITAMIN W-MINERALS/FERROUS GLUCONATE ORAL LIQUID (ML) 9 MG/15 ML			0.01400	10/15/2015	10/09/2015
MULTIVITAMIN WITH IRON AND OTHER MINERALS ORAL LIQUID (ML)			0.00900	10/15/2015	10/09/2015
MULTIVITAMIN WITH IRON AND OTHER MINERALS ORAL LIQUID (ML)			0.01400	10/15/2015	10/09/2015
MULTIVITAMIN WITH IRON AND OTHER MINERALS ORAL TABLET			0.03300	10/15/2015	10/09/2015
MULTIVITAMIN WITH IRON AND OTHER MINERALS ORAL TABLET, CHEWABLE			0.04500	10/15/2015	10/09/2015
MULTIVITAMIN WITH MINERALS ORAL TABLET			0.03400	10/15/2015	10/09/2015
MULTIVITAMIN WITH MINERALS/FOLIC ACID/LYCOPENE/LUTEIN ORAL TABLET 500-300MCG			0.05300	10/15/2015	10/09/2015
MULTIVITAMIN/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 18MG-0.4MG			0.02000	10/15/2015	10/09/2015
MULTIVITAMINS WITH FLUORIDE ORAL DROPS 0.25 MG/ML			0.08000	10/15/2015	10/09/2015
MULTIVITAMINS WITH IRON ORAL DROPS			0.07000	10/15/2015	10/09/2015
MULTIVITAMINS WITH IRON ORAL TABLET			0.01700	10/15/2015	10/09/2015
MULTIVITAMINS WITH IRON ORAL TABLET, CHEWABLE			0.02200	10/15/2015	10/09/2015
MULTIVITAMINS WITH MIN NO.7/FOLIC ACID ORAL CAPSULE 1 MG			0.05700	10/15/2015	10/09/2015
MULTIVITAMINS,THERAPEUTIC ORAL LIQUID (ML)			0.01400	10/15/2015	10/09/2015
MULTIVITAMINS,THERAPEUTIC ORAL TABLET			0.03800	10/15/2015	10/09/2015
MULTIVITS W-IRON,HEMATINIC ORAL TABLET 27MG-0.4MG			0.01900	10/15/2015	10/09/2015
MULTIVITS, CA, MINERALS/IRON FUMARATE/FOLIC ACID ORAL TABLET 9MG-400MCG			0.03800	10/15/2015	10/09/2015
MULTIVITS, IRON, MINERALS COMBO NO. 8, FOLIC ACID ORAL TABLET 9MG-0.4MG			0.01900	10/15/2015	10/09/2015
MULTIVITS,STRESS FORMULA ORAL TABLET			0.05300	10/15/2015	10/09/2015
MULTIVITS,STRESS FORMULA/ZINC ORAL TABLET			0.05300	10/15/2015	10/09/2015
MULTIVITS,TH W-FE,OTHER MIN ORAL TABLET			0.01900	10/15/2015	10/09/2015
MULTIVITS,THERAP W-FE,HEMATIN ORAL TABLET			0.02800	10/15/2015	10/09/2015
MUPIROCIN TOPICAL OINTMENT (GRAM) 2 %			0.47900	10/15/2015	10/09/2015
MYCOPHENOLATE MOFETIL ORAL CAPSULE 250 MG			0.52900	10/15/2015	10/09/2015
MYCOPHENOLATE MOFETIL ORAL TABLET 500 MG			1.04400	10/15/2015	10/09/2015
NABUMETONE ORAL TABLET 500 MG			0.52300	10/15/2015	10/09/2015
NABUMETONE ORAL TABLET 750 MG			0.54300	10/15/2015	10/09/2015
NADOLOL ORAL TABLET 20 MG			2.11200	10/15/2015	10/09/2015
NADOLOL ORAL TABLET 40 MG			3.01900	10/15/2015	10/09/2015
NADOLOL ORAL TABLET 80 MG			3.88000	10/15/2015	10/09/2015
NADOLOL/BENDROFLUMETHIAZIDE ORAL TABLET 40 MG-5 MG			1.99500	10/15/2015	10/09/2015
NADOLOL/BENDROFLUMETHIAZIDE ORAL TABLET 80 MG-5 MG			2.63200	10/15/2015	10/09/2015
NALBUPHINE HCL INJECTION AMPUL (ML) 10 MG/ML			1.41800	10/15/2015	10/09/2015
NALBUPHINE HCL INJECTION AMPUL (ML) 20 MG/ML			3.00000	10/15/2015	10/09/2015
NALBUPHINE HCL INJECTION VIAL (ML) 10 MG/ML			1.41800	10/15/2015	10/09/2015
NALBUPHINE HCL INJECTION VIAL (ML) 20 MG/ML			2.09000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
NALTREXONE HCL ORAL TABLET 50 MG			1.76900	10/15/2015	10/09/2015
NAPROXEN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 125 MG/5ML			0.06600	10/15/2015	10/09/2015
NAPROXEN ORAL TABLET 250 MG			0.05700	10/15/2015	10/09/2015
NAPROXEN ORAL TABLET 375 MG			0.05900	10/15/2015	10/09/2015
NAPROXEN ORAL TABLET 500 MG			0.06300	10/15/2015	10/09/2015
NAPROXEN ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 375 MG			0.35000	10/15/2015	10/09/2015
NAPROXEN ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 500 MG			0.06300	10/15/2015	10/09/2015
NAPROXEN SODIUM ORAL CAPSULE 220 MG			0.07000	10/15/2015	10/09/2015
NAPROXEN SODIUM ORAL TABLET 220 MG			0.07000	10/15/2015	10/09/2015
NAPROXEN SODIUM ORAL TABLET 275 MG			0.11900	10/15/2015	10/09/2015
NAPROXEN SODIUM ORAL TABLET 550 MG			0.29300	10/15/2015	10/09/2015
NARATRIPTAN HCL ORAL TABLET 1 MG			10.74900	10/15/2015	10/09/2015
NARATRIPTAN HCL ORAL TABLET 2.5 MG			7.70900	10/15/2015	10/09/2015
NATEGLINIDE ORAL TABLET 120 MG			1.05800	10/15/2015	10/09/2015
NATEGLINIDE ORAL TABLET 60 MG			1.09900	10/15/2015	10/09/2015
NEFAZODONE HCL ORAL TABLET 100 MG			0.44900	10/15/2015	10/09/2015
NEFAZODONE HCL ORAL TABLET 150 MG			0.45500	10/15/2015	10/09/2015
NEFAZODONE HCL ORAL TABLET 200 MG			0.47900	10/15/2015	10/09/2015
NEFAZODONE HCL ORAL TABLET 250 MG			0.50100	10/15/2015	10/09/2015
NEFAZODONE HCL ORAL TABLET 50 MG			0.41400	10/15/2015	10/09/2015
NEOMYCIN SULF/BACITRACIN ZINC/POLYMYXIN B SULF/PRAMOXINE HCL TOPICAL OINTMENT (GRAM) 3.5-10K-10			0.09000	10/15/2015	10/09/2015
NEOMYCIN SULFATE ORAL TABLET 500 MG			1.10600	10/15/2015	10/09/2015
NEOMYCIN SULFATE/BACITRACIN ZINC/POLYMYXIN B TOPICAL OINTMENT (GRAM) 3.5-400-5K			0.09000	10/15/2015	10/09/2015
NEOMYCIN SULFATE/BACITRACIN ZINC/POLYMYXIN B TOPICAL OINTMENT IN PACKET (EA) 3.5-400-5K			0.09000	10/15/2015	10/09/2015
NEOMYCIN SULFATE/BACITRACIN ZINC/POLYMYXIN B/HYDROCORTISONE OPHTHALMIC OINTMENT (GRAM) 3.5-10K-1			4.89000	10/15/2015	10/09/2015
NEOMYCIN SULFATE/BACITRACIN/POLYMYXIN B OPHTHALMIC OINTMENT (GRAM) 3.5MG-400			13.02000	10/15/2015	10/09/2015
NEOMYCIN SULFATE/POLYMYXIN B SULFATE/GRAMICIDIN D OPHTHALMIC DROPS 1.75MG-10K			0.86000	10/15/2015	10/09/2015
NEOMYCIN SULFATE/POLYMYXIN B SULFATE/HYDROCORTISONE OTIC SOLUTION, NON-ORAL 3.5-10K-1			1.66500	10/15/2015	10/09/2015
NEOMYCIN SULFATE/POLYMYXIN B SULFATE/HYDROCORTISONE OTIC SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 3.5-10K-1			2.10800	10/15/2015	10/09/2015
NEOMYCIN/POLYMYXIN B SULFATE/DEXAMETHASONE OPHTHALMIC OINTMENT (GRAM) 3.5-10K-.1			4.18100	10/15/2015	10/09/2015
NEOMYCIN/POLYMYXIN B SULFATE/DEXAMETHASONE OPHTHALMIC SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 0.1 %			2.84600	10/15/2015	10/09/2015
NIACIN (INOSITOL NIACINATE) ORAL CAPSULE 400(500MG)			0.06500	10/15/2015	10/09/2015
NIACIN ORAL CAPSULE, EXTENDED RELEASE 125 MG			0.02500	10/15/2015	10/09/2015
NIACIN ORAL CAPSULE, EXTENDED RELEASE 250 MG			0.02900	10/15/2015	10/09/2015
NIACIN ORAL CAPSULE, EXTENDED RELEASE 500 MG			0.04400	10/15/2015	10/09/2015
NIACIN ORAL TABLET 500 MG			0.03300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
NIACIN ORAL TABLET, EXTENDED RELEASE 500 MG			0.04400	10/15/2015	10/09/2015
NICARDIPINE HCL INTRAVENOUS AMPUL (ML) 25 MG/10ML			21.41100	10/15/2015	10/09/2015
NICARDIPINE HCL INTRAVENOUS VIAL (ML) 25 MG/10ML			1.84500	10/15/2015	10/09/2015
NICARDIPINE HCL ORAL CAPSULE 20 MG			0.10300	10/15/2015	10/09/2015
NICARDIPINE HCL ORAL CAPSULE 30 MG			0.59400	10/15/2015	10/09/2015
NICOTINE POLACRILEX BUCCAL GUM 2 MG			0.34900	10/15/2015	10/09/2015
NICOTINE POLACRILEX BUCCAL GUM 4 MG			0.37600	10/15/2015	10/09/2015
NICOTINE POLACRILEX BUCCAL LOZENGE 2 MG			0.39900	10/15/2015	10/09/2015
NICOTINE POLACRILEX BUCCAL LOZENGE 4 MG			0.39900	10/15/2015	10/09/2015
NICOTINE TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 14MG/24HR			1.83300	10/15/2015	10/09/2015
NICOTINE TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 21 MG/24HR			1.67600	10/15/2015	10/09/2015
NICOTINE TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 7MG/24HR			1.83300	10/15/2015	10/09/2015
NICOTINE TRANSDERMAL PATCH, TRANSDERMAL DAILY, SEQUENTIAL 21-14-7MG			1.67600	10/15/2015	10/09/2015
NIFEDIPINE ORAL CAPSULE 10 MG			0.61000	10/15/2015	10/09/2015
NIFEDIPINE ORAL CAPSULE 20 MG			1.20600	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 30 MG			0.80300	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 60 MG			1.57500	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 90 MG			1.98900	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 30 MG			0.80300	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 60 MG			1.44400	10/15/2015	10/09/2015
NIFEDIPINE ORAL TABLET, EXTENDED RELEASE 90 MG			2.09700	10/15/2015	10/09/2015
NIMODIPINE ORAL CAPSULE 30 MG			7.46300	10/15/2015	10/09/2015
NISOLDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 17 MG			6.17700	10/15/2015	10/09/2015
NISOLDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 25.5 MG			6.73600	10/15/2015	10/09/2015
NISOLDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 34 MG			5.20700	10/15/2015	10/09/2015
NISOLDIPINE ORAL TABLET, EXTENDED RELEASE 24 HR 8.5MG			3.80900	10/15/2015	10/09/2015
NITROFURANTOIN MACROCRYSTAL ORAL CAPSULE 100 MG			1.28100	10/15/2015	10/09/2015
NITROFURANTOIN MACROCRYSTAL ORAL CAPSULE 50 MG			0.76600	10/15/2015	10/09/2015
NITROFURANTOIN MONOHYDRATE/MACROCRYSTALS ORAL CAPSULE 100 MG			2.24200	10/15/2015	10/09/2015
NITROFURANTOIN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 25 MG/5 ML			2.26500	10/15/2015	10/09/2015
NITROGLYCERIN ORAL CAPSULE, EXTENDED RELEASE 6.5 MG			0.09800	10/15/2015	10/09/2015
NITROGLYCERIN SUBLINGUAL TABLET, SUBLINGUAL 0.3 MG			0.12900	10/15/2015	10/09/2015
NITROGLYCERIN SUBLINGUAL TABLET, SUBLINGUAL 0.4 MG			0.32700	10/15/2015	10/09/2015
NITROGLYCERIN TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 0.1MG/HR			0.71400	10/15/2015	10/09/2015
NITROGLYCERIN TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 0.2MG/HR			0.75600	10/15/2015	10/09/2015
NITROGLYCERIN TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 0.4MG/HR			1.03300	10/15/2015	10/09/2015
NITROGLYCERIN TRANSDERMAL PATCH, TRANSDERMAL 24 HOURS 0.6MG/HR			1.29800	10/15/2015	10/09/2015
NIZATIDINE ORAL CAPSULE 150 MG			0.98600	10/15/2015	10/09/2015
NIZATIDINE ORAL CAPSULE 300 MG			1.26700	10/15/2015	10/09/2015
NIZATIDINE ORAL SOLUTION, ORAL 150MG/10ML			0.58900	10/15/2015	10/09/2015
NORETHINDRONE ACETATE ORAL TABLET 5 MG			1.98300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
NORETHINDRONE ACETATE-ETHINYL ESTRADIOL ORAL TABLET 1MG-5MCG			2.00500	10/15/2015	10/09/2015
NORETHINDRONE-ETHINYL ESTRADIOL ORAL TABLET 0.5-0.035			0.92800	10/15/2015	10/09/2015
NORETHINDRONE-ETHINYL ESTRADIOL ORAL TABLET 1 MG-35MCG			0.66600	10/15/2015	10/09/2015
NORGESTIMATE-ETHINYL ESTRADIOL ORAL TABLET 0.25-0.035			0.84500	10/15/2015	10/09/2015
NORTRIPTYLINE HCL ORAL CAPSULE 10 MG			0.10200	10/15/2015	10/09/2015
NORTRIPTYLINE HCL ORAL CAPSULE 25 MG			0.12100	10/15/2015	10/09/2015
NORTRIPTYLINE HCL ORAL CAPSULE 50 MG			0.17200	10/15/2015	10/09/2015
NORTRIPTYLINE HCL ORAL CAPSULE 75 MG			0.17200	10/15/2015	10/09/2015
NORTRIPTYLINE HCL ORAL SOLUTION, ORAL 10 MG/5 ML			0.06700	10/15/2015	10/09/2015
NYSTATIN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 100000/ML			0.18300	10/15/2015	10/09/2015
NYSTATIN ORAL TABLET 500K UNIT			0.46900	10/15/2015	10/09/2015
NYSTATIN TOPICAL CREAM (GRAM) 100000/G			0.93400	10/15/2015	10/09/2015
NYSTATIN TOPICAL POWDER (GRAM) 100000/G			1.40000	10/15/2015	10/09/2015
NYSTATIN VAGINAL TABLET 100K UNIT			2.27500	10/15/2015	10/09/2015
NYSTATIN/TRIAMCINOLONE ACETONIDE TOPICAL CREAM (GRAM) 100000-0.1			3.71100	10/15/2015	10/09/2015
OFLOXACIN OPHTHALMIC DROPS 0.3 %			2.00000	10/15/2015	10/09/2015
OFLOXACIN ORAL TABLET 200 MG			3.58700	10/15/2015	10/09/2015
OFLOXACIN ORAL TABLET 300 MG			4.26900	10/15/2015	10/09/2015
OFLOXACIN ORAL TABLET 400 MG			4.50200	10/15/2015	10/09/2015
OFLOXACIN OTIC DROPS 0.3 %			3.63800	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 10 MG			0.61200	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 15 MG			0.83300	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 2.5 MG			0.39800	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 20 MG			0.98500	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 5 MG			0.39300	10/15/2015	10/09/2015
OLANZAPINE ORAL TABLET 7.5 MG			0.45600	10/15/2015	10/09/2015
OMEGA-3 FATTY ACIDS/DOCOSAHEXANOIC ACID/EPA/FISH OIL ORAL CAPSULE 300 -1000MG			0.06300	10/15/2015	10/09/2015
OMEGA-3 FATTY ACIDS/DOCOSAHEXANOIC ACID/EPA/FISH OIL ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 300-1000MG			0.08900	10/15/2015	10/09/2015
OMEPRAZOLE MAGNESIUM ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 20 MG			0.49300	10/15/2015	10/09/2015
OMEPRAZOLE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 10 MG			0.42000	10/15/2015	10/09/2015
OMEPRAZOLE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 20 MG			0.21300	10/15/2015	10/09/2015
OMEPRAZOLE ORAL CAPSULE,DELAYED RELEASE (ENTERIC COATED) 40 MG			0.36400	10/15/2015	10/09/2015
OMEPRAZOLE ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG			0.49300	10/15/2015	10/09/2015
OMEPRAZOLE/SODIUM BICARBONATE ORAL CAPSULE 20MG-1.1G			0.38600	10/15/2015	10/09/2015
ONDANSETRON HCL INTRAVENOUS VIAL (ML) 2 MG/ML			0.27000	10/15/2015	10/09/2015
ONDANSETRON HCL ORAL SOLUTION, ORAL 4 MG/5 ML			1.76200	10/15/2015	10/09/2015
ONDANSETRON HCL ORAL TABLET 4 MG			0.35900	10/15/2015	10/09/2015
ONDANSETRON HCL ORAL TABLET 8 MG			0.40400	10/15/2015	10/09/2015
ONDANSETRON HCL/DEXTROSE 5%-WATER/PF INTRAVENOUS INTRAVENOUS SOLUTION, PIGGYBACK (ML) 32 MG/50ML			0.31500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
ONDANSETRON HCL/PF INJECTION AMPUL (ML) 4 MG/2 ML			0.35800	10/15/2015	10/09/2015
ONDANSETRON HCL/PF INJECTION SYRINGE (ML) 4 MG/2 ML			0.35800	10/15/2015	10/09/2015
ONDANSETRON HCL/PF INJECTION VIAL (ML) 4 MG/2 ML			0.35800	10/15/2015	10/09/2015
ONDANSETRON ORAL TABLET,DISINTEGRATING 4 MG			0.41800	10/15/2015	10/09/2015
ONDANSETRON ORAL TABLET,DISINTEGRATING 8 MG			0.56300	10/15/2015	10/09/2015
ORPHENADRINE CITRATE INJECTION VIAL (ML) 30 MG/ML			8.18000	10/15/2015	10/09/2015
ORPHENADRINE CITRATE ORAL TABLET, EXTENDED RELEASE 100 MG			0.69100	10/15/2015	10/09/2015
ORPHENADRINE CITRATE/ASPIRIN/CAFFEINE ORAL TABLET 50-770-60			1.82100	10/15/2015	10/09/2015
OXALIPLATIN INTRAVENOUS VIAL (ML) 100MG/20ML			66.15800	10/15/2015	10/09/2015
OXALIPLATIN INTRAVENOUS VIAL (ML) 50 MG/10ML			63.55800	10/15/2015	10/09/2015
OXANDROLONE ORAL TABLET 10 MG			15.87200	10/15/2015	10/09/2015
OXANDROLONE ORAL TABLET 2.5 MG			4.68000	10/15/2015	10/09/2015
OXAZEPAM ORAL CAPSULE 15 MG			1.18900	10/15/2015	10/09/2015
OXAZEPAM ORAL CAPSULE 30 MG			1.52100	10/15/2015	10/09/2015
OXCARBAZEPINE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 300 MG/5ML			0.65900	10/15/2015	10/09/2015
OXCARBAZEPINE ORAL TABLET 150 MG			0.63300	10/15/2015	10/09/2015
OXCARBAZEPINE ORAL TABLET 300 MG			1.14100	10/15/2015	10/09/2015
OXCARBAZEPINE ORAL TABLET 600 MG			2.24100	10/15/2015	10/09/2015
OXYBUTYNIN CHLORIDE ORAL SYRUP 5 MG/5 ML			0.02700	10/15/2015	10/09/2015
OXYBUTYNIN CHLORIDE ORAL TABLET 5 MG			0.45700	10/15/2015	10/09/2015
OXYBUTYNIN CHLORIDE ORAL TABLET, EXTENDED RELEASE 24 HR 10 MG			2.46800	10/15/2015	10/09/2015
OXYBUTYNIN CHLORIDE ORAL TABLET, EXTENDED RELEASE 24 HR 15 MG			2.53000	10/15/2015	10/09/2015
OXYBUTYNIN CHLORIDE ORAL TABLET, EXTENDED RELEASE 24 HR 5 MG			2.46500	10/15/2015	10/09/2015
OXYCODONE HCL ORAL CAPSULE 5 MG			0.18400	10/15/2015	10/09/2015
OXYCODONE HCL ORAL CONCENTRATE, ORAL 20 MG/ML			1.66000	10/15/2015	10/09/2015
OXYCODONE HCL ORAL SOLUTION, ORAL 5 MG/5 ML			0.23500	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET 10 MG			0.47200	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET 15 MG			0.44400	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET 20 MG			0.78100	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET 30 MG			0.54400	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET 5 MG			0.18400	10/15/2015	10/09/2015
OXYCODONE HCL ORAL TABLET, EXTENDED RELEASE 12 HR 10 MG			1.63300	10/15/2015	10/09/2015
OXYCODONE HCL/ACETAMINOPHEN ORAL TABLET 10MG-325MG			0.94200	10/15/2015	10/09/2015
OXYCODONE HCL/ACETAMINOPHEN ORAL TABLET 2.5-325MG			1.75400	10/15/2015	10/09/2015
OXYCODONE HCL/ACETAMINOPHEN ORAL TABLET 5 MG-325MG			0.21600	10/15/2015	10/09/2015
OXYCODONE HCL/ACETAMINOPHEN ORAL TABLET 7.5-325MG			0.96600	10/15/2015	10/09/2015
OXYCODONE HCL/ASPIRIN ORAL TABLET 4.8355-325			0.75800	10/15/2015	10/09/2015
OXYMETAZOLINE HCL NASAL SPRAY, NON-AEROSOL (ML) 0.05 %			0.07100	10/15/2015	10/09/2015
OXYMORPHONE HCL ORAL TABLET 10 MG			4.57900	10/15/2015	10/09/2015
OXYMORPHONE HCL ORAL TABLET 5 MG			2.52100	10/15/2015	10/09/2015
PANTOPRAZOLE SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 20 MG			0.16300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PANTOPRAZOLE SODIUM ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 40 MG			0.29200	10/15/2015	10/09/2015
PAREGORIC ORAL LIQUID (ML) 2 MG/5 ML			0.20000	10/15/2015	10/09/2015
PAROMOMYCIN SULFATE ORAL CAPSULE 250 MG			4.33300	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET 10 MG			0.34200	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET 20 MG			0.35700	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET 30 MG			0.42000	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET 40 MG			0.48700	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 12.5 MG			3.09900	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 25 MG			3.23400	10/15/2015	10/09/2015
PAROXETINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 37.5 MG			3.32700	10/15/2015	10/09/2015
PEDIATRIC MULTIVIT COMB NO.20 ORAL DROPS 1500-400/1			0.07000	10/15/2015	10/09/2015
PEDIATRIC MULTIVIT COMB NO.46/FERROUS SULFATE ORAL DROPS 1500-10/ML			0.07000	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMB NO.24/FERROUS SULFATE/FOLIC ACID ORAL TABLET, CHEWABLE 9MG-200MCG			0.05900	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBINATION NO.17/IRON ORAL TABLET, CHEWABLE 15 MG			0.03700	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBINATION NO.2/SODIUM FLUORIDE ORAL DROPS 0.25 MG/ML			0.33700	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBINATION NO.2/SODIUM FLUORIDE ORAL DROPS 0.5 MG/ML			0.33700	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBINATION NO.23/FOLIC ACID ORAL TABLET, CHEWABLE 300 MCG			0.04600	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBINATION NO.25/FOLIC ACID ORAL TABLET, CHEWABLE 300 MCG			0.04100	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBO NO.45/FLUORIDE/FERROUS SULFATE ORAL DROPS 0.25-10/ML			0.33700	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMIN COMBO NO.75/FLUORIDE/FERROUS SULFATE ORAL DROPS 0.25-10/ML			0.33700	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS A,C,& D3 NO.21 ORAL DROPS 1500-35/ML			0.07000	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS A,C,& D3 NO.21 WITH SODIUM FLUORIDE ORAL DROPS 0.25 MG/ML			0.20500	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS A,C,& D3 NO.21 WITH SODIUM FLUORIDE ORAL DROPS 0.5 MG/ML			0.20500	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.16 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.25 MG			0.05400	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.16 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.5 MG			0.19200	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.16 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 1 MG			0.16100	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.17 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.25 MG			0.16100	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.17 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.5 MG			0.16100	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.17 WITH SODIUM FLUORIDE ORAL TABLET, CHEWABLE 1 MG			0.16100	10/15/2015	10/09/2015
PEDIATRIC MULTIVITAMINS NO.82 WITH SODIUM FLUORIDE ORAL DROPS 0.25 MG/ML			0.20500	10/15/2015	10/09/2015
PEG 3350/SOD SULF/SOD BICARBONATE/SOD CHLORIDE/POTASSIUM CHL ORAL SOLUTION, RECONSTITUTED, ORAL 236-22.74G			0.00300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PEG 3350/SOD SULF/SOD BICARBONATE/SOD CHLORIDE/POTASSIUM CHL ORAL SOLUTION, RECONSTITUTED, ORAL 240-22.72G			0.00400	10/15/2015	10/09/2015
PENICILLIN G POTASSIUM INJECTION VIAL (EA) 20MM UNIT			139.74600	10/15/2015	10/09/2015
PENICILLIN G POTASSIUM INJECTION VIAL (EA) 5MM UNIT			2.96000	10/15/2015	10/09/2015
PENICILLIN G PROCAINE INTRAMUSCULAR SYRINGE (ML) 1.2MM/2 ML			10.17600	10/15/2015	10/09/2015
PENICILLIN G PROCAINE INTRAMUSCULAR SYRINGE (ML) 600000/ML			12.22300	10/15/2015	10/09/2015
PENICILLIN V POTASSIUM ORAL SOLUTION, RECONSTITUTED, ORAL 125 MG/5ML			0.01300	10/15/2015	10/09/2015
PENICILLIN V POTASSIUM ORAL SOLUTION, RECONSTITUTED, ORAL 250 MG/5ML			0.03900	10/15/2015	10/09/2015
PENICILLIN V POTASSIUM ORAL TABLET 250 MG			0.11700	10/15/2015	10/09/2015
PENICILLIN V POTASSIUM ORAL TABLET 500 MG			0.24700	10/15/2015	10/09/2015
PENTAZOCINE HCL/NALOXONE HCL ORAL TABLET 50MG-0.5MG			0.68900	10/15/2015	10/09/2015
PENTOXIFYLLINE ORAL TABLET, EXTENDED RELEASE 400 MG			0.27400	10/15/2015	10/09/2015
PERINDOPRIL ERBUMINE ORAL TABLET 2 MG			1.02000	10/15/2015	10/09/2015
PERINDOPRIL ERBUMINE ORAL TABLET 4 MG			1.07400	10/15/2015	10/09/2015
PERINDOPRIL ERBUMINE ORAL TABLET 8 MG			1.18400	10/15/2015	10/09/2015
PERMETHRIN TOPICAL CREAM (GRAM) 5 %			1.65000	10/15/2015	10/09/2015
PERMETHRIN TOPICAL LIQUID (ML) 1 %			0.11100	10/15/2015	10/09/2015
PERPHENAZINE ORAL TABLET 16 MG			2.07500	10/15/2015	10/09/2015
PERPHENAZINE ORAL TABLET 2 MG			1.00200	10/15/2015	10/09/2015
PERPHENAZINE ORAL TABLET 4 MG			1.26300	10/15/2015	10/09/2015
PERPHENAZINE ORAL TABLET 8 MG			1.65300	10/15/2015	10/09/2015
PETROLATUM,WHITE/MINERAL OIL/SODIUM CHLORIDE OPHTHALMIC OINTMENT (GRAM)			0.73300	10/15/2015	10/09/2015
PHENAZOPYRIDINE HCL ORAL TABLET 100 MG			0.06500	10/15/2015	10/09/2015
PHENAZOPYRIDINE HCL ORAL TABLET 200 MG			1.64000	10/15/2015	10/09/2015
PHENAZOPYRIDINE HCL ORAL TABLET 95 MG			0.09400	10/15/2015	10/09/2015
PHENELZINE SULFATE ORAL TABLET 15 MG			0.71400	10/15/2015	10/09/2015
PHENOBARBITAL ORAL ELIXIR 20 MG/5 ML			0.16100	10/15/2015	10/09/2015
PHENOBARBITAL ORAL TABLET 100 MG			0.31300	10/15/2015	10/09/2015
PHENOBARBITAL ORAL TABLET 15 MG			0.14600	10/15/2015	10/09/2015
PHENOBARBITAL ORAL TABLET 16.2 MG			0.14600	10/15/2015	10/09/2015
PHENOBARBITAL ORAL TABLET 60 MG			0.07400	10/15/2015	10/09/2015
PHENOBARBITAL ORAL TABLET 97.2MG			0.31300	10/15/2015	10/09/2015
PHENOBARBITAL SODIUM INJECTION VIAL (ML) 130MG/ML			3.85200	10/15/2015	10/09/2015
PHENOBARBITAL SODIUM INJECTION VIAL (ML) 65 MG/ML			1.45400	10/15/2015	10/09/2015
PHENYLEPHRINE HCL NASAL DROPS 1 %			0.00800	10/15/2015	10/09/2015
PHENYLEPHRINE HCL OPHTHALMIC DROPS 10 %			1.16500	10/15/2015	10/09/2015
PHENYLEPHRINE HCL OPHTHALMIC DROPS 2.5 %			1.71600	10/15/2015	10/09/2015
PHENYLEPHRINE HCL ORAL TABLET 10 MG			0.03400	10/15/2015	10/09/2015
PHENYLEPHRINE HCL RECTAL SUPPOSITORY, RECTAL 0.25 %			0.11200	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL CAPSULE 5 MG-325MG			0.13200	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/ACETAMINOPHEN ORAL TABLET 5 MG-325MG			0.07600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PHENYLEPHRINE HCL/ACETAMINOPHEN/CHLORPHENIRAMINE ORAL TABLET 5-325-2MG			0.06500	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/BROMPHENIRAMINE MALEATE ORAL LIQUID (ML) 10-4MG/5ML			0.10600	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/BROMPHENIRAMINE MALEATE ORAL SOLUTION, ORAL 2.5-1MG/5			0.00800	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/CHLORPHENIRAMINE MALEATE ORAL DROPS 2.5-1MG/ML			0.35900	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/CHLORPHENIRAMINE MALEATE ORAL DROPS 2MG-1MG/ML			0.40100	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/CHLORPHENIRAMINE MALEATE ORAL DROPS 3.5-1MG/ML			0.25600	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/CHLORPHENIRAMINE MALEATE ORAL LIQUID (ML) 10-4MG/5ML			0.03000	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/CHLORPHENIRAMINE MALEATE ORAL TABLET 10 MG-4 MG			0.06300	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/COCOA BUTTER RECTAL SUPPOSITORY, RECTAL 0.25-88.44			0.11200	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/DEXTROMETHORPHAN HBR/ACETAMINOPHEN/GUAIFEN ORAL LIQUID (ML) 5-325MG/15			0.01400	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/DEXTROMETHORPHAN HBR/ACETAMINOPHEN/GUAIFEN ORAL TABLET 5-325-200			0.09900	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/DIPHENHYDRAMINE HCL ORAL LIQUID (ML) 2.5-6.25/5			0.02000	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/MINERAL OIL/PETROLATUM,WHITE RECTAL OINTMENT WITH APPLICATOR 0.25 %-14%			0.03700	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/PROMETHAZINE HCL ORAL SYRUP 5-6.25MG/5			0.08400	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/SHARK LIVER OIL/COCOA BUTTER RECTAL SUPPOSITORY, RECTAL 0.25-3%			0.11200	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/SHARK LIVER OIL/GLYCERIN/PETROLATUM,WHITE RECTAL CREAM (GRAM) 0.25-3-12%			0.03700	10/15/2015	10/09/2015
PHENYLEPHRINE HCL/SHARK LIVER OIL/MINERAL OIL/PETROLAT,WHT RECTAL OINTMENT (GRAM)			0.03700	10/15/2015	10/09/2015
PHENYTOIN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 100 MG/4ML			0.10600	10/15/2015	10/09/2015
PHENYTOIN ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 125 MG/5ML			0.13200	10/15/2015	10/09/2015
PHENYTOIN ORAL SYRINGE (ML) 100 MG/4ML			0.13200	10/15/2015	10/09/2015
PHENYTOIN SODIUM EXTENDED ORAL CAPSULE 100 MG			0.25300	10/15/2015	10/09/2015
PHENYTOIN SODIUM EXTENDED ORAL CAPSULE 200 MG			0.68400	10/15/2015	10/09/2015
PHENYTOIN SODIUM EXTENDED ORAL CAPSULE 300 MG			1.02500	10/15/2015	10/09/2015
PHENYTOIN SODIUM INTRAVENOUS AMPUL (ML) 50 MG/ML			0.54000	10/15/2015	10/09/2015
PHENYTOIN SODIUM INTRAVENOUS SYRINGE (ML) 50 MG/ML			0.93500	10/15/2015	10/09/2015
PHENYTOIN SODIUM INTRAVENOUS VIAL (ML) 50 MG/ML			0.05400	10/15/2015	10/09/2015
PHOSPHORIC ACID,DILUTED/DEXTROSE/FRUCTOSE ORAL SOLUTION, ORAL			0.01500	10/15/2015	10/09/2015
PILOCARPINE HCL OPHTHALMIC DROPS 1 %			2.00600	10/15/2015	10/09/2015
PILOCARPINE HCL OPHTHALMIC DROPS 4 %			0.38700	10/15/2015	10/09/2015
PILOCARPINE HCL ORAL TABLET 5 MG			1.22100	10/15/2015	10/09/2015
PILOCARPINE HCL ORAL TABLET 7.5 MG			1.56900	10/15/2015	10/09/2015
PINDOLOL ORAL TABLET 10 MG			0.94300	10/15/2015	10/09/2015
PINDOLOL ORAL TABLET 5 MG			0.69200	10/15/2015	10/09/2015
PIOGLITAZONE HCL ORAL TABLET 15 MG			0.28100	10/15/2015	10/09/2015
PIOGLITAZONE HCL ORAL TABLET 30 MG			0.42900	10/15/2015	10/09/2015
PIOGLITAZONE HCL ORAL TABLET 45 MG			0.46600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PIOGLITAZONE HCL/METFORMIN HCL ORAL TABLET 15MG-500MG			3.19700	10/15/2015	10/09/2015
PIOGLITAZONE HCL/METFORMIN HCL ORAL TABLET 15MG-850MG			3.19700	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL (EA) 2.25 G			8.53800	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL (EA) 3.375 G			12.71100	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL (EA) 4.5 G			16.11400	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL (EA) 40.5 G			220.59100	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 2.25 G			8.53800	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 3.375 G			12.71100	10/15/2015	10/09/2015
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM INTRAVENOUS VIAL WITH THREADED PORT (EA) 4.5 G			16.11400	10/15/2015	10/09/2015
PIPERONYL BUTOXIDE/PYRETHRINS TOPICAL LIQUID (ML) 4%-0.33%			0.08000	10/15/2015	10/09/2015
PIPERONYL BUTOXIDE/PYRETHRINS TOPICAL SHAMPOO 4%-0.33%			0.08000	10/15/2015	10/09/2015
PIROXICAM ORAL CAPSULE 10 MG			1.15600	10/15/2015	10/09/2015
PIROXICAM ORAL CAPSULE 20 MG			1.99800	10/15/2015	10/09/2015
PODOFILOX TOPICAL SOLUTION, NON-ORAL 0.5 %			17.50300	10/15/2015	10/09/2015
POLYETHYLENE GLYCOL 1450 MISCELLANEOUS POWDER (GRAM)			0.04600	10/15/2015	10/09/2015
POLYETHYLENE GLYCOL 3350 ORAL POWDER (GRAM) 17G/DOSE			0.01300	10/15/2015	10/09/2015
POLYETHYLENE GLYCOL 3350 ORAL POWDER IN PACKET (EA) 17G			0.75800	10/15/2015	10/09/2015
POLYMYXIN B SULFATE/TRIMETHOPRIM OPHTHALMIC DROPS 10000-1/ML			1.07300	10/15/2015	10/09/2015
POLYVINYL ALCOHOL OPHTHALMIC DROPS 1.4 %			0.12100	10/15/2015	10/09/2015
POLYVINYL ALCOHOL/POVIDONE OPHTHALMIC DROPS 0.5%-0.6%			0.12100	10/15/2015	10/09/2015
POTASSIUM BICARBONATE/CITRIC ACID ORAL TABLET, EFFERVESCENT 25 MEQ			0.21300	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN 5 % DEXTROSE IN WATER INTRAVENOUS INTRAVENOUS SOLUTION 20 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN 5 % DEXTROSE IN WATER INTRAVENOUS INTRAVENOUS SOLUTION 40 MEQ/L			0.01100	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 % AND 0.9 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 20 MEQ/L			0.01300	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 % AND 0.9 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 40 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 %-0.2 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 20 MEQ/L			0.01800	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 %-0.45 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 10 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 %-0.45 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 20 MEQ/L			0.01800	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 %-0.45 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 30 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5 %-0.45 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 40 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE IN DEXTROSE 5% AND 0.3 % SODIUM CHLORIDE INTRAVENOUS INTRAVENOUS SOLUTION 20 MEQ/L			0.01000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE INTRAVENOUS VIAL (ML) 2 MEQ/ML			0.04000	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL CAPSULE, EXTENDED RELEASE 10 MEQ			0.79700	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL CAPSULE, EXTENDED RELEASE 8 MEQ			0.63500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
POTASSIUM CHLORIDE ORAL LIQUID (ML) 20MEQ/15ML			0.08800	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL PACKET (EA) 20 MEQ			0.78400	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL TABLET, EXT RELEASE, PARTICLES/CRYSTALS 10 MEQ			0.39500	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL TABLET, EXT RELEASE, PARTICLES/CRYSTALS 20 MEQ			0.41300	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL TABLET, EXTENDED RELEASE 10 MEQ			0.39500	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL TABLET, EXTENDED RELEASE 20 MEQ			0.41300	10/15/2015	10/09/2015
POTASSIUM CHLORIDE ORAL TABLET, EXTENDED RELEASE 8 MEQ			0.39900	10/15/2015	10/09/2015
POTASSIUM CITRATE ORAL TABLET, EXTENDED RELEASE 10 MEQ			0.73100	10/15/2015	10/09/2015
POTASSIUM CITRATE ORAL TABLET, EXTENDED RELEASE 5 MEQ			0.97700	10/15/2015	10/09/2015
POTASSIUM CITRATE/CITRIC ACID ORAL PACKET (EA) 3300-1002			0.62900	10/15/2015	10/09/2015
POTASSIUM PHOS,M-BASIC-D-BASIC INTRAVENOUS VIAL (ML) 3MMOL/ML			0.03700	10/15/2015	10/09/2015
POVIDONE-IODINE TOPICAL OINTMENT (GRAM) 10 %			0.03200	10/15/2015	10/09/2015
POVIDONE-IODINE TOPICAL SOLUTION, NON-ORAL 10 %			0.00700	10/15/2015	10/09/2015
POVIDONE-IODINE TOPICAL SOLUTION, NON-ORAL 7.5 %			0.00500	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 0.125 MG			0.16600	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 0.25 MG			0.16600	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 0.5 MG			0.16600	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 0.75 MG			0.17400	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 1 MG			0.16600	10/15/2015	10/09/2015
PRAMIPEXOLE DI-HCL ORAL TABLET 1.5 MG			0.16600	10/15/2015	10/09/2015
PRAVASTATIN SODIUM ORAL TABLET 10 MG			0.48200	10/15/2015	10/09/2015
PRAVASTATIN SODIUM ORAL TABLET 20 MG			0.49000	10/15/2015	10/09/2015
PRAVASTATIN SODIUM ORAL TABLET 40 MG			0.71700	10/15/2015	10/09/2015
PRAVASTATIN SODIUM ORAL TABLET 80 MG			0.57500	10/15/2015	10/09/2015
PRAZOSIN HCL ORAL CAPSULE 1 MG			0.11600	10/15/2015	10/09/2015
PRAZOSIN HCL ORAL CAPSULE 2 MG			0.22500	10/15/2015	10/09/2015
PRAZOSIN HCL ORAL CAPSULE 5 MG			0.37100	10/15/2015	10/09/2015
PREDNICARBATE TOPICAL CREAM (GRAM) 0.1 %			0.77100	10/15/2015	10/09/2015
PREDNICARBATE TOPICAL OINTMENT (GRAM) 0.1 %			0.73400	10/15/2015	10/09/2015
PREDNISOLONE ACETATE OPHTHALMIC SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 1 %			8.71200	10/15/2015	10/09/2015
PREDNISOLONE ORAL SOLUTION, ORAL 15 MG/5 ML			0.09800	10/15/2015	10/09/2015
PREDNISOLONE SOD PHOSPHATE OPHTHALMIC DROPS 1 %			1.33500	10/15/2015	10/09/2015
PREDNISOLONE SOD PHOSPHATE ORAL SOLUTION, ORAL 15 MG/5 ML			0.13600	10/15/2015	10/09/2015
PREDNISOLONE SOD PHOSPHATE ORAL SOLUTION, ORAL 5 MG/5 ML			0.14200	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 1 MG			0.12200	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 10 MG			0.15700	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 2.5 MG			0.03700	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 20 MG			0.19400	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 5 MG			0.16000	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET 50 MG			0.16400	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PREDNISONE ORAL TABLET, DOSE PACK 10 MG			0.15700	10/15/2015	10/09/2015
PREDNISONE ORAL TABLET, DOSE PACK 5 MG			0.16000	10/15/2015	10/09/2015
PRENATAL VITAMINS WITH CALCIUM/FERROUS FUMARATE/FA/SELENIUM ORAL TABLET 27 MG-1 MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITAMINS WITH CALCIUM/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 27MG-0.8MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITAMINS WITH CALCIUM/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 28MG-0.8MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITS WITH CALCIUM #72/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 27 MG-1 MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITS WITH CALCIUM #72/IRON,CARBONYL/FOLIC ACID ORAL TABLET 29 MG-1 MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITS WITH CALCIUM #74/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 27 MG-1 MG			0.06900	10/15/2015	10/09/2015
PRENATAL VITS WITH CALCIUM #96/FERROUS FUMARATE/FOLIC ACID ORAL TABLET 27MG-0.8MG			0.06900	10/15/2015	10/09/2015
PRIMIDONE ORAL TABLET 250 MG			0.32700	10/15/2015	10/09/2015
PRIMIDONE ORAL TABLET 50 MG			0.40700	10/15/2015	10/09/2015
PROBENECID ORAL TABLET 500 MG			0.48900	10/15/2015	10/09/2015
PROCAINAMIDE HCL INJECTION VIAL (ML) 100 MG/ML			1.20600	10/15/2015	10/09/2015
PROCAINAMIDE HCL INJECTION VIAL (ML) 500 MG/ML			1.29700	10/15/2015	10/09/2015
PROCHLORPERAZINE EDISYLATE INJECTION VIAL (ML) 10 MG/2 ML			3.97000	10/15/2015	10/09/2015
PROCHLORPERAZINE EDISYLATE INJECTION VIAL (ML) 5 MG/ML			3.97000	10/15/2015	10/09/2015
PROCHLORPERAZINE MALEATE ORAL TABLET 10 MG			0.17400	10/15/2015	10/09/2015
PROCHLORPERAZINE MALEATE ORAL TABLET 5 MG			0.16100	10/15/2015	10/09/2015
PROCHLORPERAZINE RECTAL SUPPOSITORY, RECTAL 25 MG			1.67500	10/15/2015	10/09/2015
PROGESTERONE INTRAMUSCULAR VIAL (ML) 50 MG/ML			3.67200	10/15/2015	10/09/2015
PROMETHAZINE HCL INJECTION AMPUL (ML) 25 MG/ML			1.05900	10/15/2015	10/09/2015
PROMETHAZINE HCL INJECTION AMPUL (ML) 50 MG/ML			2.66000	10/15/2015	10/09/2015
PROMETHAZINE HCL INJECTION VIAL (ML) 25 MG/ML			0.92000	10/15/2015	10/09/2015
PROMETHAZINE HCL INJECTION VIAL (ML) 50 MG/ML			2.66000	10/15/2015	10/09/2015
PROMETHAZINE HCL ORAL SYRUP 6.25MG/5ML			0.02100	10/15/2015	10/09/2015
PROMETHAZINE HCL ORAL TABLET 12.5 MG			0.38800	10/15/2015	10/09/2015
PROMETHAZINE HCL ORAL TABLET 25 MG			0.38800	10/15/2015	10/09/2015
PROMETHAZINE HCL ORAL TABLET 50 MG			0.51500	10/15/2015	10/09/2015
PROMETHAZINE HCL RECTAL SUPPOSITORY, RECTAL 12.5 MG			8.37000	10/15/2015	10/09/2015
PROMETHAZINE HCL/CODEINE ORAL SYRUP 6.25-10/5			0.03800	10/15/2015	10/09/2015
PROMETHAZINE HCL/DEXTROMETHORPHAN HBR ORAL SYRUP 6.25-15/5			0.02100	10/15/2015	10/09/2015
PROPAFENONE HCL ORAL TABLET 150 MG			0.32200	10/15/2015	10/09/2015
PROPAFENONE HCL ORAL TABLET 225 MG			0.59900	10/15/2015	10/09/2015
PROPAFENONE HCL ORAL TABLET 300 MG			1.34000	10/15/2015	10/09/2015
PROPANTHELINE BROMIDE ORAL TABLET 15 MG			0.30500	10/15/2015	10/09/2015
PROPARACAINE HCL OPHTHALMIC DROPS 0.5 %			0.49900	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL CAPSULE, EXTENDED RELEASE 24HR 120 MG			2.34200	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL CAPSULE, EXTENDED RELEASE 24HR 160 MG			2.50800	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
PROPRANOLOL HCL ORAL CAPSULE, EXTENDED RELEASE 24HR 60 MG			1.66300	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL CAPSULE, EXTENDED RELEASE 24HR 80 MG			1.84800	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL TABLET 10 MG	0.04000	10/15/2015	0.17713	10/28/2015	10/26/2015
PROPRANOLOL HCL ORAL TABLET 20 MG			0.04100	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL TABLET 40 MG			0.25500	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL TABLET 60 MG			0.81300	10/15/2015	10/09/2015
PROPRANOLOL HCL ORAL TABLET 80 MG	0.09500	10/15/2015	0.58408	10/28/2015	10/26/2015
PROPRANOLOL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 80 MG-25MG			0.07500	10/15/2015	10/09/2015
PROPYLENE GLYCOL/POLYETHYLENE GLYCOL 400 OPHTHALMIC DROPS 0.3 %-0.4%			0.22300	10/15/2015	10/09/2015
PROTRIPTYLINE HCL ORAL TABLET 10 MG			1.97900	10/15/2015	10/09/2015
PROTRIPTYLINE HCL ORAL TABLET 5 MG			1.35800	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL ORAL LIQUID (ML) 30 MG/5 ML			0.01300	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL ORAL TABLET 30 MG			0.02100	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL ORAL TABLET 60 MG			0.02300	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL ORAL TABLET, EXTENDED RELEASE 120 MG			0.03400	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/BROMPHENIRAMINE MALEATE ORAL DROPS 7.5-1MG/ML			1.42500	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/BROMPHENIRAMINE MALEATE ORAL LIQUID (ML) 15-1MG/5ML			0.00900	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/BROMPHENIRAMINE MALEATE ORAL LIQUID (ML) 20-4MG/5ML			0.07100	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/CHLORPHENIRAMINE MALEATE ORAL DROPS 9-0.8MG/ML			1.06900	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/CHLORPHENIRAMINE MALEATE ORAL LIQUID (ML) 30-2MG/5ML			0.03500	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/CHLORPHENIRAMINE MALEATE ORAL TABLET 60 MG-4 MG			0.05400	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/CODEINE PHOSPHATE/GUAIFENESIN ORAL SYRUP 30-10-100			0.05200	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/CODEINE/CHLORPHENIRAMINE ORAL LIQUID (ML) 30-10-2/5			0.01400	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/TRIPROLIDINE HCL ORAL SYRUP 30-1.25/5			0.00700	10/15/2015	10/09/2015
PSEUDOEPHEDRINE HCL/TRIPROLIDINE HCL ORAL TABLET 60MG-2.5MG			0.02600	10/15/2015	10/09/2015
PSYLLIUM HUSK (WITH SUGAR) ORAL POWDER (GRAM) 3.4 G/12 G			0.00800	10/15/2015	10/09/2015
PSYLLIUM HUSK (WITH SUGAR) ORAL POWDER (GRAM) 3.4 G/7 G			0.00800	10/15/2015	10/09/2015
PSYLLIUM HUSK (WITH SUGAR) ORAL POWDER (GRAM) 3.4G/11G			0.01200	10/15/2015	10/09/2015
PSYLLIUM HUSK ORAL CAPSULE 0.52G			0.04400	10/15/2015	10/09/2015
PSYLLIUM HUSK/ASPARTAME ORAL POWDER (GRAM) 3.4G/5.8G			0.01800	10/15/2015	10/09/2015
PSYLLIUM SEED (WITH DEXTROSE) ORAL POWDER (GRAM)			0.00800	10/15/2015	10/09/2015
PSYLLIUM SEED (WITH SUGAR) ORAL POWDER (GRAM)			0.01400	10/15/2015	10/09/2015
PSYLLIUM SEED ORAL POWDER (GRAM)			0.01300	10/15/2015	10/09/2015
PSYLLIUM SEED/ASPARTAME ORAL POWDER (GRAM)			0.00800	10/15/2015	10/09/2015
PYRAZINAMIDE ORAL TABLET 500 MG			0.99500	10/15/2015	10/09/2015
PYRIDOSTIGMINE BROMIDE ORAL TABLET 60 MG			0.49000	10/15/2015	10/09/2015
PYRILAMINE MALEATE/PHENYLEPHRINE HCL/DEXTROMETHORPHAN HBR ORAL LIQUID (ML) 8.33-5-10			0.03300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
QUETIAPINE FUMARATE ORAL TABLET 100 MG			0.39600	10/15/2015	10/09/2015
QUETIAPINE FUMARATE ORAL TABLET 200 MG			0.76400	10/15/2015	10/09/2015
QUETIAPINE FUMARATE ORAL TABLET 25 MG			0.24200	10/15/2015	10/09/2015
QUETIAPINE FUMARATE ORAL TABLET 300 MG			0.95600	10/15/2015	10/09/2015
QUETIAPINE FUMARATE ORAL TABLET 400 MG			1.13100	10/15/2015	10/09/2015
QUETIAPINE FUMARATE ORAL TABLET 50 MG			0.38500	10/15/2015	10/09/2015
QUINAPRIL HCL ORAL TABLET 10 MG			0.16600	10/15/2015	10/09/2015
QUINAPRIL HCL ORAL TABLET 20 MG			0.16600	10/15/2015	10/09/2015
QUINAPRIL HCL ORAL TABLET 40 MG			0.16600	10/15/2015	10/09/2015
QUINAPRIL HCL ORAL TABLET 5 MG			0.16600	10/15/2015	10/09/2015
QUINAPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5MG			0.91700	10/15/2015	10/09/2015
QUINAPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-12.5 MG			0.91700	10/15/2015	10/09/2015
QUINAPRIL HCL/HYDROCHLOROTHIAZIDE ORAL TABLET 20-25MG			0.91700	10/15/2015	10/09/2015
QUINIDINE GLUCONATE ORAL TABLET, EXTENDED RELEASE 324 MG			0.67500	10/15/2015	10/09/2015
QUINIDINE SULFATE ORAL TABLET 200 MG			0.17000	10/15/2015	10/09/2015
QUINIDINE SULFATE ORAL TABLET 300 MG			0.33300	10/15/2015	10/09/2015
QUINIDINE SULFATE ORAL TABLET, EXTENDED RELEASE 300 MG			0.53500	10/15/2015	10/09/2015
RAMIPRIL ORAL CAPSULE 1.25 MG			0.33800	10/15/2015	10/09/2015
RAMIPRIL ORAL CAPSULE 10 MG			0.32900	10/15/2015	10/09/2015
RAMIPRIL ORAL CAPSULE 2.5 MG			0.27200	10/15/2015	10/09/2015
RAMIPRIL ORAL CAPSULE 5 MG			0.28800	10/15/2015	10/09/2015
RANITIDINE HCL ORAL CAPSULE 150 MG			0.45000	10/15/2015	10/09/2015
RANITIDINE HCL ORAL CAPSULE 300 MG			0.78000	10/15/2015	10/09/2015
RANITIDINE HCL ORAL SYRUP 15 MG/ML			0.05100	10/15/2015	10/09/2015
RANITIDINE HCL ORAL TABLET 150 MG			0.04300	10/15/2015	10/09/2015
RANITIDINE HCL ORAL TABLET 300 MG			0.15600	10/15/2015	10/09/2015
RESERPINE ORAL TABLET 0.1 MG			0.63200	10/15/2015	10/09/2015
RESERPINE ORAL TABLET 0.25 MG			0.34100	10/15/2015	10/09/2015
RIBAVIRIN ORAL CAPSULE 200 MG			2.05200	10/15/2015	10/09/2015
RIBAVIRIN ORAL TABLET 200 MG			2.44000	10/15/2015	10/09/2015
RIFAMPIN ORAL CAPSULE 150 MG			1.14700	10/15/2015	10/09/2015
RIFAMPIN ORAL CAPSULE 300 MG			1.44600	10/15/2015	10/09/2015
RIMANTADINE HCL ORAL TABLET 100 MG			1.20000	10/15/2015	10/09/2015
RINGERS SOLUTION,LACTATED INTRAVENOUS INTRAVENOUS SOLUTION			0.00300	10/15/2015	10/09/2015
RINGERS SOLUTION,LACTATED IRRIGATION SOLUTION, IRRIGATION			0.00300	10/15/2015	10/09/2015
RISPERIDONE ORAL SOLUTION, ORAL 1 MG/ML			1.00100	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET 0.25 MG			0.19700	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET 0.5 MG			0.19600	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET 1 MG			0.35600	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET 2 MG			0.26800	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET 3 MG			0.34700	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
RISPERIDONE ORAL TABLET 4 MG			0.36400	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 0.25 MG			3.83500	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 0.5 MG			1.74900	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 1 MG			2.03500	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 2 MG			2.93900	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 3 MG			6.27000	10/15/2015	10/09/2015
RISPERIDONE ORAL TABLET,DISINTEGRATING 4 MG			8.36000	10/15/2015	10/09/2015
RIVASTIGMINE TARTRATE ORAL CAPSULE 1.5 MG			2.08300	10/15/2015	10/09/2015
RIVASTIGMINE TARTRATE ORAL CAPSULE 3 MG			2.12800	10/15/2015	10/09/2015
RIVASTIGMINE TARTRATE ORAL CAPSULE 4.5 MG			2.08300	10/15/2015	10/09/2015
RIVASTIGMINE TARTRATE ORAL CAPSULE 6 MG			2.08300	10/15/2015	10/09/2015
RIZATRIPTAN BENZOATE ORAL TABLET 10 MG			7.21000	10/15/2015	10/09/2015
RIZATRIPTAN BENZOATE ORAL TABLET 5 MG			7.21000	10/15/2015	10/09/2015
RIZATRIPTAN BENZOATE ORAL TABLET,DISINTEGRATING 10 MG			4.98300	10/15/2015	10/09/2015
RIZATRIPTAN BENZOATE ORAL TABLET,DISINTEGRATING 5 MG			4.66300	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 0.25 MG			0.53800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 0.5 MG			0.53800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 1 MG			0.53800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 2 MG			0.53800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 3 MG			0.55800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 4 MG			0.55800	10/15/2015	10/09/2015
ROPINIROLE HCL ORAL TABLET 5 MG			0.55800	10/15/2015	10/09/2015
SALICYLIC ACID TOPICAL SHAMPOO 6 %			0.18700	10/15/2015	10/09/2015
SALICYLIC ACID/CERAMIDES 1,3,6-11 TOPICAL KIT, CLEANSER & CREAM ER 6 %			141.84900	10/15/2015	10/09/2015
SALSALATE ORAL TABLET 750 MG			0.10300	10/15/2015	10/09/2015
SELEGILINE HCL ORAL CAPSULE 5 MG			1.67200	10/15/2015	10/09/2015
SELEGILINE HCL ORAL TABLET 5 MG			0.14000	10/15/2015	10/09/2015
SELENIUM SULFIDE TOPICAL SUSPENSION, TOPICAL (ML) 2.5 %			0.07500	10/15/2015	10/09/2015
SENNOSIDES ORAL SYRUP 8.8MG/5ML			0.05900	10/15/2015	10/09/2015
SENNOSIDES ORAL TABLET 8.6 MG			0.01800	10/15/2015	10/09/2015
SENNOSIDES/DOCUSATE SODIUM ORAL TABLET 8.6MG-50MG			0.03300	10/15/2015	10/09/2015
SERTRALINE HCL ORAL CONCENTRATE, ORAL 20 MG/ML			0.79700	10/15/2015	10/09/2015
SERTRALINE HCL ORAL TABLET 100 MG			0.09100	10/15/2015	10/09/2015
SERTRALINE HCL ORAL TABLET 25 MG			0.09200	10/15/2015	10/09/2015
SERTRALINE HCL ORAL TABLET 50 MG			0.09800	10/15/2015	10/09/2015
SILDENAFIL CITRATE ORAL TABLET 20 MG			0.08740	10/15/2015	10/09/2015
SILVER SULFADIAZINE TOPICAL CREAM (GRAM) 1 %			0.21000	10/15/2015	10/09/2015
SIMETHICONE ORAL SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 40MG/0.6ML			0.12900	10/15/2015	10/09/2015
SIMETHICONE ORAL TABLET, CHEWABLE 80 MG			0.03100	10/15/2015	10/09/2015
SIMVASTATIN ORAL TABLET 10 MG			0.11900	10/15/2015	10/09/2015
SIMVASTATIN ORAL TABLET 20 MG			0.13900	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
SIMVASTATIN ORAL TABLET 40 MG			0.15900	10/15/2015	10/09/2015
SIMVASTATIN ORAL TABLET 5 MG			0.09900	10/15/2015	10/09/2015
SIMVASTATIN ORAL TABLET 80 MG			0.17900	10/15/2015	10/09/2015
SKIN RESPIRATORY FACTOR/SHARK LIVER OIL RECTAL OINTMENT (GRAM)			0.03700	10/15/2015	10/09/2015
SKIN RESPIRATORY FACTOR/SHARK LIVER OIL RECTAL OINTMENT WITH APPLICATOR			0.03700	10/15/2015	10/09/2015
SODIUM BICARBONATE ORAL TABLET 325 MG			0.00800	10/15/2015	10/09/2015
SODIUM BICARBONATE ORAL TABLET 650 MG			0.01500	10/15/2015	10/09/2015
SODIUM CHLORIDE 0.45 % INTRAVENOUS INTRAVENOUS SOLUTION 0.45 %			0.00300	10/15/2015	10/09/2015
SODIUM CHLORIDE 0.45 % INTRAVENOUS PIGGYBACK WITH THREADED PORT (ML)			0.00600	10/15/2015	10/09/2015
SODIUM CHLORIDE FOR INHALATION INHALATION VIAL, NEBULIZER (ML) 0.9 %			0.05600	10/15/2015	10/09/2015
SODIUM CHLORIDE FOR INHALATION INHALATION VIAL, NEBULIZER (ML) 10 %			0.05300	10/15/2015	10/09/2015
SODIUM CHLORIDE FOR INHALATION INHALATION VIAL, NEBULIZER (ML) 3 %			0.05300	10/15/2015	10/09/2015
SODIUM CHLORIDE INTRAVENOUS VIAL (ML) 4 MEQ/ML			0.03000	10/15/2015	10/09/2015
SODIUM CHLORIDE IRRIGATING SOLUTION IRRIGATION SOLUTION, IRRIGATION 0.9 %			0.00200	10/15/2015	10/09/2015
SODIUM CHLORIDE NASAL AEROSOL, SPRAY (ML) 0.65 %			0.04300	10/15/2015	10/09/2015
SODIUM CHLORIDE OPHTHALMIC DROPS 5 %			0.57300	10/15/2015	10/09/2015
SODIUM CHLORIDE OPHTHALMIC OINTMENT (GRAM) 5 %			2.11100	10/15/2015	10/09/2015
SODIUM CHLORIDE/SODIUM BICARBONATE/POTASSIUM CHLORIDE/PEG ORAL SOLUTION, RECONSTITUTED, ORAL 420G			0.00500	10/15/2015	10/09/2015
SODIUM FLUORIDE DENTAL CREAM (GRAM) 1.1 %			0.12000	10/15/2015	10/09/2015
SODIUM FLUORIDE ORAL DROPS 0.5 MG/ML			0.13900	10/15/2015	10/09/2015
SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.25(0.55)			0.05900	10/15/2015	10/09/2015
SODIUM FLUORIDE ORAL TABLET, CHEWABLE 0.5(1.1)MG			0.05900	10/15/2015	10/09/2015
SODIUM FLUORIDE ORAL TABLET, CHEWABLE 1MG(2.2MG)			0.01000	10/15/2015	10/09/2015
SODIUM PHOSPHATE,MONOBASIC/SODIUM PHOSPHATE,DIBASIC ORAL LIQUID (ML) 7.2-2.7/15			0.03400	10/15/2015	10/09/2015
SODIUM PHOSPHATE,MONOBASIC/SODIUM PHOSPHATE,DIBASIC RECTAL ENEMA (ML) 19G-7G/118			0.00500	10/15/2015	10/09/2015
SODIUM POLYSTYRENE SULFONATE ORAL POWDER (GRAM)			0.23700	10/15/2015	10/09/2015
SODIUM POLYSTYRENE SULFONATE ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 15 G/60 ML			0.08000	10/15/2015	10/09/2015
SODIUM/POTASSIUM/POTASSIUM CITRATE/SODIUM CITRATE/CIT AC ORAL SOLUTION, ORAL 500-550/5			0.01700	10/15/2015	10/09/2015
SORBITOL SOLUTION IRRIGATION SOLUTION, IRRIGATION 3 %			0.00500	10/15/2015	10/09/2015
SORBITOL SOLUTION IRRIGATION SOLUTION, IRRIGATION 3.3%			0.00500	10/15/2015	10/09/2015
SORBITOL SOLUTION MISCELLANEOUS SOLUTION, NON-ORAL 70 %			0.00700	10/15/2015	10/09/2015
SOTALOL HCL ORAL TABLET 120 MG			0.28000	10/15/2015	10/09/2015
SOTALOL HCL ORAL TABLET 160 MG			0.36000	10/15/2015	10/09/2015
SOTALOL HCL ORAL TABLET 240 MG			0.56000	10/15/2015	10/09/2015
SOTALOL HCL ORAL TABLET 80 MG			0.18000	10/15/2015	10/09/2015
SPIRONOLACTONE ORAL TABLET 100 MG			0.64500	10/15/2015	10/09/2015
SPIRONOLACTONE ORAL TABLET 25 MG			0.19800	10/15/2015	10/09/2015
SPIRONOLACTONE ORAL TABLET 50 MG			0.37100	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
SPIRONOLACTONE/HYDROCHLOROTHIAZIDE ORAL TABLET 25 MG-25MG			0.80600	10/15/2015	10/09/2015
STAVUDINE ORAL CAPSULE 15 MG			1.60800	10/15/2015	10/09/2015
STAVUDINE ORAL CAPSULE 20 MG			1.67300	10/15/2015	10/09/2015
STAVUDINE ORAL CAPSULE 30 MG			1.77700	10/15/2015	10/09/2015
STAVUDINE ORAL CAPSULE 40 MG			1.91700	10/15/2015	10/09/2015
SUCRALFATE ORAL TABLET 1 G			0.24400	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM OPHTHALMIC DROPS 10 %			3.24600	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM TOPICAL CLEANSER (ML) 10 %			0.28400	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM TOPICAL SUSPENSION, TOPICAL (ML) 10 %			0.71300	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC DROPS 10 %-0.23%			1.60000	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL CLEANSER (GRAM) 10 %-1 %			0.35200	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL CLEANSER (GRAM) 10-5%(W/W)			0.30100	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL CLEANSER (ML) 9 %-4 %			0.17100	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL CREAM (GRAM) 10-5%(W/W)			1.94500	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL FOAM (GRAM) 10 %-4 %			1.82500	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL LOTION (GRAM) 10-5%(W/V)			1.59200	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL PADS, MEDICATED (EA) 10 %-4 %			2.82900	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL PADS, MEDICATED (EA) 10 %-5 %			2.61600	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL SUSPENSION, TOPICAL (GRAM) 10-5%(W/W)			1.69400	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR TOPICAL SUSPENSION, TOPICAL (ML) 8 %-4 %			0.23700	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR/UREA TOPICAL CLEANSER (ML) 10%-4%-10%			0.22500	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR/UREA TOPICAL CLEANSER (ML) 10%-5%-10%			0.60100	10/15/2015	10/09/2015
SULFACETAMIDE SODIUM/SULFUR/WITCH HAZEL TOPICAL CREAM (GRAM) 10-5%(W/W)			0.85000	10/15/2015	10/09/2015
SULFADIAZINE ORAL TABLET 500 MG			1.08200	10/15/2015	10/09/2015
SULFAMETHOXAZOLE/TRIMETHOPRIM INTRAVENOUS VIAL (ML) 80-16MG/ML			0.93000	10/15/2015	10/09/2015
SULFAMETHOXAZOLE/TRIMETHOPRIM ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 200-40MG/5			0.29200	10/15/2015	10/09/2015
SULFAMETHOXAZOLE/TRIMETHOPRIM ORAL SUSPENSION, ORAL (FINAL DOSE FORM) 800-160/20			0.06000	10/15/2015	10/09/2015
SULFAMETHOXAZOLE/TRIMETHOPRIM ORAL TABLET 400MG-80MG			0.13200	10/15/2015	10/09/2015
SULFAMETHOXAZOLE/TRIMETHOPRIM ORAL TABLET 800-160 MG			0.28900	10/15/2015	10/09/2015
SULFASALAZINE ORAL TABLET 500 MG			0.14900	10/15/2015	10/09/2015
SULFASALAZINE ORAL TABLET, DELAYED RELEASE (ENTERIC COATED) 500 MG			0.29500	10/15/2015	10/09/2015
SULINDAC ORAL TABLET 150 MG			0.16700	10/15/2015	10/09/2015
SULINDAC ORAL TABLET 200 MG			0.30000	10/15/2015	10/09/2015
SUMATRIPTAN NASAL SPRAY, NON-AEROSOL (EA) 20 MG			38.33810	10/15/2015	10/09/2015
SUMATRIPTAN NASAL SPRAY, NON-AEROSOL (EA) 5 MG			38.33810	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE ORAL TABLET 100 MG			2.01400	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE ORAL TABLET 25 MG			2.06600	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE ORAL TABLET 50 MG			1.96600	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE SUBCUTANEOUS CARTRIDGE (ML) 4 MG/0.5ML			156.28600	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
SUMATRIPTAN SUCCINATE SUBCUTANEOUS CARTRIDGE (ML) 6 MG/0.5ML			145.42450	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE SUBCUTANEOUS PEN INJECTOR (ML) 4 MG/0.5ML			165.00000	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE SUBCUTANEOUS PEN INJECTOR (ML) 6 MG/0.5ML			160.88400	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE SUBCUTANEOUS SYRINGE (ML) 6 MG/0.5ML			97.99000	10/15/2015	10/09/2015
SUMATRIPTAN SUCCINATE SUBCUTANEOUS VIAL (ML) 6 MG/0.5ML			51.80000	10/15/2015	10/09/2015
TACROLIMUS ORAL CAPSULE 0.5 MG			1.90800	10/15/2015	10/09/2015
TACROLIMUS ORAL CAPSULE 1 MG			3.81700	10/15/2015	10/09/2015
TACROLIMUS ORAL CAPSULE 5 MG			18.32300	10/15/2015	10/09/2015
TAMOXIFEN CITRATE ORAL TABLET 10 MG			0.23500	10/15/2015	10/09/2015
TAMOXIFEN CITRATE ORAL TABLET 20 MG			0.47100	10/15/2015	10/09/2015
TAMSULOSIN HCL ORAL CAPSULE, EXT RELEASE 24 HR 0.4 MG			0.71900	10/15/2015	10/09/2015
TEMAZEPAM ORAL CAPSULE 15 MG			0.08700	10/15/2015	10/09/2015
TEMAZEPAM ORAL CAPSULE 22.5 MG			6.47400	10/15/2015	10/09/2015
TEMAZEPAM ORAL CAPSULE 30 MG			0.11100	10/15/2015	10/09/2015
TEMAZEPAM ORAL CAPSULE 7.5 MG			7.44500	10/15/2015	10/09/2015
TERAZOSIN HCL ORAL CAPSULE 1 MG			0.14200	10/15/2015	10/09/2015
TERAZOSIN HCL ORAL CAPSULE 10 MG			0.14200	10/15/2015	10/09/2015
TERAZOSIN HCL ORAL CAPSULE 2 MG			0.14200	10/15/2015	10/09/2015
TERAZOSIN HCL ORAL CAPSULE 5 MG			0.14200	10/15/2015	10/09/2015
TERBINAFINE HCL ORAL TABLET 250 MG			0.22500	10/15/2015	10/09/2015
TERBUTALINE SULFATE ORAL TABLET 2.5 MG			0.28600	10/15/2015	10/09/2015
TERBUTALINE SULFATE ORAL TABLET 5 MG			0.43300	10/15/2015	10/09/2015
TERCONAZOLE VAGINAL CREAM WITH APPLICATOR 0.4 %			0.74800	10/15/2015	10/09/2015
TERCONAZOLE VAGINAL CREAM WITH APPLICATOR 0.8 %			1.08000	10/15/2015	10/09/2015
TETRACAINE HCL OPHTHALMIC DROPS 0.5 %			0.12000	10/15/2015	10/09/2015
TETRACAINE HCL/PF OPHTHALMIC DROPS 0.5 %			0.12000	10/15/2015	10/09/2015
TETRACYCLINE HCL ORAL CAPSULE 500 MG			0.08100	10/15/2015	10/09/2015
TETRAHYDROZOLINE HCL/ZINC SULFATE OPHTHALMIC DROPS 0.05-0.25%			0.06300	10/15/2015	10/09/2015
THEOPHYLLINE ANHYDROUS ORAL TABLET, EXTENDED RELEASE 12 HR 100 MG			0.07100	10/15/2015	10/09/2015
THEOPHYLLINE ANHYDROUS ORAL TABLET, EXTENDED RELEASE 12 HR 200 MG			0.17900	10/15/2015	10/09/2015
THEOPHYLLINE ANHYDROUS ORAL TABLET, EXTENDED RELEASE 12 HR 300 MG	0.20000	10/15/2015	0.36555	10/28/2015	10/26/2015
THEOPHYLLINE ANHYDROUS ORAL TABLET, EXTENDED RELEASE 12 HR 450 MG			0.41000	10/15/2015	10/09/2015
THIAMINE HCL INJECTION VIAL (ML) 100 MG/ML			1.97000	10/15/2015	10/09/2015
THIORIDAZINE HCL ORAL TABLET 10 MG			0.13600	10/15/2015	10/09/2015
THIORIDAZINE HCL ORAL TABLET 100 MG			0.35200	10/15/2015	10/09/2015
THIORIDAZINE HCL ORAL TABLET 25 MG			0.28500	10/15/2015	10/09/2015
THIORIDAZINE HCL ORAL TABLET 50 MG			0.35200	10/15/2015	10/09/2015
THIOTHIXENE ORAL CAPSULE 1 MG			0.11100	10/15/2015	10/09/2015
THIOTHIXENE ORAL CAPSULE 10 MG			0.33300	10/15/2015	10/09/2015
THIOTHIXENE ORAL CAPSULE 2 MG			0.63600	10/15/2015	10/09/2015
THIOTHIXENE ORAL CAPSULE 5 MG			0.24300	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
THYROID,PORK ORAL TABLET 30 MG			0.11100	10/15/2015	10/09/2015
THYROID,PORK ORAL TABLET 60 MG			0.12300	10/15/2015	10/09/2015
THYROID,PORK ORAL TABLET 90 MG			0.19500	10/15/2015	10/09/2015
TICLOPIDINE HCL ORAL TABLET 250 MG			0.27300	10/15/2015	10/09/2015
TIMOLOL MALEATE OPHTHALMIC DROPS 0.25 %			0.66600	10/15/2015	10/09/2015
TIMOLOL MALEATE OPHTHALMIC DROPS 0.5 %			1.00000	10/15/2015	10/09/2015
TIMOLOL MALEATE OPHTHALMIC GEL-FORMING SOLUTION 0.25 %			6.59100	10/15/2015	10/09/2015
TIMOLOL MALEATE ORAL TABLET 10 MG			0.17000	10/15/2015	10/09/2015
TIMOLOL MALEATE ORAL TABLET 20 MG			0.33400	10/15/2015	10/09/2015
TIMOLOL MALEATE ORAL TABLET 5 MG			0.15400	10/15/2015	10/09/2015
TIOCONAZOLE VAGINAL OINTMENT WITH PREFILLED APPLICATOR 6.5 %			2.47700	10/15/2015	10/09/2015
TIZANIDINE HCL ORAL TABLET 2 MG			0.39000	10/15/2015	10/09/2015
TIZANIDINE HCL ORAL TABLET 4 MG			0.23400	10/15/2015	10/09/2015
TOBRAMYCIN OPHTHALMIC DROPS 0.3 %			2.33600	10/15/2015	10/09/2015
TOBRAMYCIN SULFATE INJECTION VIAL (ML) 10 MG/ML			1.59300	10/15/2015	10/09/2015
TOBRAMYCIN SULFATE INJECTION VIAL (ML) 40 MG/ML			0.77400	10/15/2015	10/09/2015
TOBRAMYCIN/DEXAMETHASONE OPHTHALMIC SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML) 0.3 %-0.1%			12.24000	10/15/2015	10/09/2015
TOLAZAMIDE ORAL TABLET 250 MG			0.15600	10/15/2015	10/09/2015
TOLAZAMIDE ORAL TABLET 500 MG			0.22200	10/15/2015	10/09/2015
TOLBUTAMIDE ORAL TABLET 500 MG			0.19200	10/15/2015	10/09/2015
TOLMETIN SODIUM ORAL CAPSULE 400 MG			0.68800	10/15/2015	10/09/2015
TOLMETIN SODIUM ORAL TABLET 200 MG			0.28400	10/15/2015	10/09/2015
TOLMETIN SODIUM ORAL TABLET 600 MG			0.88800	10/15/2015	10/09/2015
TOLNAFTATE TOPICAL AEROSOL, POWDER (GRAM) 1 %			0.02400	10/15/2015	10/09/2015
TOLNAFTATE TOPICAL CREAM (GRAM) 1 %			0.09600	10/15/2015	10/09/2015
TOLNAFTATE TOPICAL POWDER (GRAM) 1 %			0.04700	10/15/2015	10/09/2015
TOLNAFTATE TOPICAL SOLUTION, NON-ORAL 1 %			0.14800	10/15/2015	10/09/2015
TOPIRAMATE ORAL CAPSULE, SPRINKLE 15 MG			1.84300	10/15/2015	10/09/2015
TOPIRAMATE ORAL CAPSULE, SPRINKLE 25 MG			2.50000	10/15/2015	10/09/2015
TOPIRAMATE ORAL TABLET 100 MG			0.28600	10/15/2015	10/09/2015
TOPIRAMATE ORAL TABLET 200 MG			0.47100	10/15/2015	10/09/2015
TOPIRAMATE ORAL TABLET 25 MG			0.13400	10/15/2015	10/09/2015
TOPIRAMATE ORAL TABLET 50 MG			0.22000	10/15/2015	10/09/2015
TOPOTECAN HCL INTRAVENOUS VIAL (EA) 4 MG			577.80000	10/15/2015	10/09/2015
TOPOTECAN HCL INTRAVENOUS VIAL (ML) 4 MG/4 ML			231.90300	10/15/2015	10/09/2015
TORSEMIDE ORAL TABLET 10 MG			0.15100	10/15/2015	10/09/2015
TORSEMIDE ORAL TABLET 100 MG			1.14100	10/15/2015	10/09/2015
TORSEMIDE ORAL TABLET 20 MG			0.20900	10/15/2015	10/09/2015
TORSEMIDE ORAL TABLET 5 MG			0.15100	10/15/2015	10/09/2015
TRAMADOL HCL ORAL TABLET 50 MG			0.05800	10/15/2015	10/09/2015
TRAMADOL HCL ORAL TABLET, EXTENDED RELEASE 24 HR 100 MG			2.69500	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
TRAMADOL HCL ORAL TABLET, EXTENDED RELEASE 24 HR 200 MG			5.15100	10/15/2015	10/09/2015
TRAMADOL HCL/ACETAMINOPHEN ORAL TABLET 37.5-325MG			0.81900	10/15/2015	10/09/2015
TRANDOLAPRIL ORAL TABLET 1 MG			0.44400	10/15/2015	10/09/2015
TRANDOLAPRIL ORAL TABLET 2 MG			0.44400	10/15/2015	10/09/2015
TRANDOLAPRIL ORAL TABLET 4 MG			0.44400	10/15/2015	10/09/2015
TRANYLCYPROMINE SULFATE ORAL TABLET 10 MG			1.06800	10/15/2015	10/09/2015
TRAZODONE HCL ORAL TABLET 100 MG			0.09600	10/15/2015	10/09/2015
TRAZODONE HCL ORAL TABLET 150 MG			0.15000	10/15/2015	10/09/2015
TRAZODONE HCL ORAL TABLET 50 MG			0.05000	10/15/2015	10/09/2015
TRETINOIN TOPICAL CREAM (GRAM) 0.025 %			3.84200	10/15/2015	10/09/2015
TRETINOIN TOPICAL CREAM (GRAM) 0.05 %			4.38100	10/15/2015	10/09/2015
TRETINOIN TOPICAL CREAM (GRAM) 0.1 %			1.61600	10/15/2015	10/09/2015
TRETINOIN TOPICAL GEL (GRAM) 0.01 %			1.54400	10/15/2015	10/09/2015
TRETINOIN TOPICAL GEL (GRAM) 0.025 %			1.54300	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE DENTAL PASTE (GRAM) 0.1 %			11.06500	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE INJECTION VIAL (ML) 10 MG/ML			1.93200	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE INJECTION VIAL (ML) 40 MG/ML			7.47900	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE NASAL AEROSOL, SPRAY (GRAM) 55 MCG			4.94500	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL CREAM (GRAM) 0.025 %			0.10200	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL CREAM (GRAM) 0.1 %			0.05700	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL CREAM (GRAM) 0.5 %			0.52600	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL LOTION (ML) 0.025 %			0.50000	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL LOTION (ML) 0.1 %			0.51500	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL OINTMENT (GRAM) 0.025 %			0.35300	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL OINTMENT (GRAM) 0.1 %			0.09900	10/15/2015	10/09/2015
TRIAMCINOLONE ACETONIDE TOPICAL OINTMENT (GRAM) 0.5 %			0.54500	10/15/2015	10/09/2015
TRIAMTERENE/HYDROCHLOROTHIAZIDE ORAL CAPSULE 37.5-25 MG			0.24500	10/15/2015	10/09/2015
TRIAMTERENE/HYDROCHLOROTHIAZIDE ORAL TABLET 37.5-25 MG			0.16800	10/15/2015	10/09/2015
TRIAMTERENE/HYDROCHLOROTHIAZIDE ORAL TABLET 75 MG-50MG			0.04600	10/15/2015	10/09/2015
TRIAZOLAM ORAL TABLET 0.125 MG			0.29100	10/15/2015	10/09/2015
TRIAZOLAM ORAL TABLET 0.25 MG			0.43200	10/15/2015	10/09/2015
TRIFLUOPERAZINE HCL ORAL TABLET 1 MG			0.22300	10/15/2015	10/09/2015
TRIFLUOPERAZINE HCL ORAL TABLET 10 MG			0.71100	10/15/2015	10/09/2015
TRIFLUOPERAZINE HCL ORAL TABLET 2 MG			0.40900	10/15/2015	10/09/2015
TRIFLUOPERAZINE HCL ORAL TABLET 5 MG			0.45900	10/15/2015	10/09/2015
TRIHEXYPHENIDYL HCL ORAL ELIXIR 2 MG/5 ML			0.04000	10/15/2015	10/09/2015
TRIHEXYPHENIDYL HCL ORAL TABLET 2 MG			0.11200	10/15/2015	10/09/2015
TRIHEXYPHENIDYL HCL ORAL TABLET 5 MG			0.11200	10/15/2015	10/09/2015
TRIMETHOBENZAMIDE HCL ORAL CAPSULE 300 MG			1.30900	10/15/2015	10/09/2015
TRIMETHOPRIM ORAL TABLET 100 MG			0.33300	10/15/2015	10/09/2015
TROPICAMIDE OPHTHALMIC DROPS 0.5 %			0.27900	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
TROPICAMIDE OPHTHALMIC DROPS 1 %			1.17900	10/15/2015	10/09/2015
TROSPIUM CHLORIDE ORAL TABLET 20 MG			2.42900	10/15/2015	10/09/2015
UBIDECARENONE ORAL CAPSULE 100 MG			0.38700	10/15/2015	10/09/2015
UREA TOPICAL CREAM (GRAM) 10 %			0.09400	10/15/2015	10/09/2015
UREA TOPICAL CREAM (GRAM) 40 %			0.30900	10/15/2015	10/09/2015
UREA TOPICAL LOTION (ML) 10 %			0.02900	10/15/2015	10/09/2015
UREA TOPICAL LOTION (ML) 40 %			0.11100	10/15/2015	10/09/2015
UREA/LACTIC ACID/ZINC UNDECYLENATE TOPICAL EMULSION (GRAM) 50 %			0.43500	10/15/2015	10/09/2015
URSODIOL ORAL CAPSULE 300 MG			0.34200	10/15/2015	10/09/2015
URSODIOL ORAL TABLET 250 MG			2.29300	10/15/2015	10/09/2015
URSODIOL ORAL TABLET 500 MG			4.06800	10/15/2015	10/09/2015
VALACYCLOVIR HCL ORAL TABLET 1000 MG			3.78000	10/15/2015	10/09/2015
VALACYCLOVIR HCL ORAL TABLET 500 MG			2.16000	10/15/2015	10/09/2015
VALPROIC ACID (AS SODIUM SALT) (VALPROATE SODIUM) ORAL SOLUTION, ORAL 250 MG/5ML			0.06100	10/15/2015	10/09/2015
VALPROIC ACID (AS SODIUM SALT) (VALPROATE SODIUM) ORAL SOLUTION, ORAL 500MG/10ML			0.06100	10/15/2015	10/09/2015
VALPROIC ACID (AS SODIUM SALT) (VALPROATE SODIUM) ORAL SYRINGE (ML) 250 MG/5ML			0.06100	10/15/2015	10/09/2015
VALPROIC ACID ORAL CAPSULE 250 MG			0.31700	10/15/2015	10/09/2015
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 160-12.5MG			1.22400	10/15/2015	10/09/2015
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 160-25MG			1.39900	10/15/2015	10/09/2015
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 320-12.5MG			1.66100	10/15/2015	10/09/2015
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 320MG-25MG			1.88300	10/15/2015	10/09/2015
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 80-12.5MG			1.12600	10/15/2015	10/09/2015
VANCOMYCIN HCL INTRAVENOUS VIAL (EA) 1 G			5.28600	10/15/2015	10/09/2015
VANCOMYCIN HCL INTRAVENOUS VIAL (EA) 5 G			29.99200	10/15/2015	10/09/2015
VANCOMYCIN HCL INTRAVENOUS VIAL (EA) 500 MG			3.43300	10/15/2015	10/09/2015
VANCOMYCIN HCL INTRAVENOUS VIAL WITH THREADED PORT (EA) 1 G			7.78200	10/15/2015	10/09/2015
VANCOMYCIN HCL INTRAVENOUS VIAL WITH THREADED PORT (EA) 500 MG			7.70000	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL CAPSULE, EXT RELEASE 24 HR 150 MG			0.59300	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL CAPSULE, EXT RELEASE 24 HR 37.5 MG			0.41900	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL CAPSULE, EXT RELEASE 24 HR 75 MG			0.50500	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET 100 MG			1.11400	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET 25 MG			0.93500	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET 37.5 MG			0.96300	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET 50 MG			0.99200	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET 75 MG			1.05200	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 150 MG			3.56000	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 37.5 MG			2.91800	10/15/2015	10/09/2015
VENLAFAXINE HCL ORAL TABLET, EXTENDED RELEASE 24 HR 75 MG			3.26700	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 120 MG			0.54300	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 180 MG			0.59200	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
VERAPAMIL HCL ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 240 MG			0.65400	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE, EXTENDED RELEASE PELLETS 24 HR 360 MG			1.39900	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE,24HR EXTENDED RELEASE PELLET CT 100 MG			1.34100	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE,24HR EXTENDED RELEASE PELLET CT 200 MG			1.72700	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL CAPSULE,24HR EXTENDED RELEASE PELLET CT 300 MG			2.51300	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET 120 MG			0.08200	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET 40 MG			0.12500	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET 80 MG			0.04100	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET, EXTENDED RELEASE 120 MG			0.49900	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET, EXTENDED RELEASE 180 MG			0.31100	10/15/2015	10/09/2015
VERAPAMIL HCL ORAL TABLET, EXTENDED RELEASE 240 MG			0.31100	10/15/2015	10/09/2015
VINBLASTINE SULFATE INTRAVENOUS VIAL (EA) 10 MG			11.16000	10/15/2015	10/09/2015
VIT B COMPLEX/VIT C/FOLIC ACID/FERROUS FUMARATE/VIT E ACET ORAL TABLET 500-400-18			0.05300	10/15/2015	10/09/2015
VITAMIN B COMPLEX & VITAMIN C NO.20/FOLIC ACID ORAL CAPSULE 1 MG			0.37500	10/15/2015	10/09/2015
VORICONAZOLE ORAL TABLET 200 MG			37.21800	10/15/2015	10/09/2015
VORICONAZOLE ORAL TABLET 50 MG			9.30400	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 1 MG			0.14800	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 10 MG			0.22900	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 2 MG			0.16400	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 2.5 MG			0.15900	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 3 MG			0.15300	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 4 MG			0.15300	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 5 MG			0.16800	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 6 MG			0.18500	10/15/2015	10/09/2015
WARFARIN SODIUM ORAL TABLET 7.5 MG			0.18900	10/15/2015	10/09/2015
WATER FOR INJ.,BACTERIOSTATIC INJECTION VIAL (ML)			0.04600	10/15/2015	10/09/2015
WATER FOR INJECTION,STERILE INJECTION VIAL (ML)			0.03500	10/15/2015	10/09/2015
WATER FOR INJECTION,STERILE INTRAVENOUS INTRAVENOUS SOLUTION			0.00300	10/15/2015	10/09/2015
WATER FOR IRRIGATION,STERILE IRRIGATION SOLUTION, IRRIGATION			0.00100	10/15/2015	10/09/2015
ZAFIRLUKAST ORAL TABLET 10 MG			1.53100	10/15/2015	10/09/2015
ZAFIRLUKAST ORAL TABLET 20 MG			1.53100	10/15/2015	10/09/2015
ZALEPLON ORAL CAPSULE 10 MG			0.47100	10/15/2015	10/09/2015
ZALEPLON ORAL CAPSULE 5 MG			0.46500	10/15/2015	10/09/2015
ZIDOVUDINE ORAL CAPSULE 100 MG			1.62000	10/15/2015	10/09/2015
ZIDOVUDINE ORAL SYRUP 10 MG/ML			0.14700	10/15/2015	10/09/2015
ZIDOVUDINE ORAL TABLET 300 MG			0.75800	10/15/2015	10/09/2015
ZIPRASIDONE HCL ORAL CAPSULE 20 MG			1.73800	10/15/2015	10/09/2015
ZIPRASIDONE HCL ORAL CAPSULE 40 MG			1.59600	10/15/2015	10/09/2015
ZIPRASIDONE HCL ORAL CAPSULE 60 MG			1.97600	10/15/2015	10/09/2015
ZIPRASIDONE HCL ORAL CAPSULE 80 MG			1.71000	10/15/2015	10/09/2015
ZOLPIDEM TARTRATE ORAL TABLET 10 MG			0.07000	10/15/2015	10/09/2015

Ohio Department of Medicaid
Maximum Allowable Cost (MAC) List

Effective 10/26/2015

Note: MAC listing does not guarantee coverage

DRUG	PREV. MAC PRICE	PREV. EFFECTIVE DATE	CURRENT MAC PRICE	CURRENT EFFECTIVE DATE	DATE UPDATED
ZOLPIDEM TARTRATE ORAL TABLET 5 MG			0.07000	10/15/2015	10/09/2015
ZOLPIDEM TARTRATE ORAL TABLET, EXTENDED RELEASE MULTIPHASE 12.5 MG			5.09500	10/15/2015	10/09/2015
ZOLPIDEM TARTRATE ORAL TABLET, EXTENDED RELEASE MULTIPHASE 6.25 MG			5.09500	10/15/2015	10/09/2015
ZONISAMIDE ORAL CAPSULE 100 MG			0.30500	10/15/2015	10/09/2015
ZONISAMIDE ORAL CAPSULE 25 MG			0.19300	10/15/2015	10/09/2015
ZONISAMIDE ORAL CAPSULE 50 MG			0.21100	10/15/2015	10/09/2015