

Provider Notice 13-09

Dear Provider,

The Health Care Authority (the Agency) will implement the following changes to the Prescription Drug Program:

- New additions to the Maximum Allowable Cost (MAC) list.
- MAC adjustments.

AZELASTINE HCL	0.05%	OPHTH SOLN	\$10.23120	
BUDESONIDE	3MG	CAP SR 24HR	\$11.71580	
MAC Additions				
			MAC	
Generic Name	Strength	Form	Effective 03/01/13	
Generic Name ABACAVIR SULFATE	Strength 300MG	Form TABLET	Effective	

MAC Adjustments				
Generic Name	Strength	Form	MAC Effective 03/01/13	
CITALOPRAM HYDROBROMIDE	10MG/5ML	SOLUTION	\$0.12520	
DISULFURAM	250MG	TABLET	\$2.79240	
DORZOLAMIDE-TIMOLOL MALEATE	22.3-6.8MG/ML	OPHTH SOLN	\$2.47590	
FENOFIBRATE	160MG	TABLET	\$1.41730	
LATANOPROST	0.005%	OPHTH SOLN	\$4.60510	
MYCOPHENOLATE MOFETIL	500MG	TABLET	\$0.43820	
OMEPRAZOLE	10MG	CAPSULE DR	\$0.33990	
OMEPRAZOLE	20MG	CAPSULE DR	\$0.09772	
OMEPRAZOLE	40MG	CAPSULE DR	\$0.23240	
RISPERIDONE	0.25MG	TABLET	\$0.18149	
RISPERIDONE	0.5MG	TABLET	\$0.16704	
RISPERIDONE	1MG	TABLET	\$0.19000	
RISPERIDONE	2MG	TABLET	\$0.21164	
RISPERIDONE	3MG	TABLET	\$0.19766	
RISPERIDONE	4MG	TABLET	\$0.23866	
VENLAFAXINE HCL	37.5MG	TAB SR 24HR	\$2.39910	
VENLAFAXINE HCL	75MG	TAB SR 24HR	\$2.13090	
VENLAFAXINE HCL	150MG	TAB SR 24HR	\$2.05990	
ZIPRASIDONE HCL	20MG	CAPSULE	\$2.85530	
ZIPRASIDONE HCL	40MG	CAPSULE	\$2.85530	
ZIPRASIDONE HCL	60MG	CAPSULE	\$3.37100	
ZIPRASIDONE HCL	80MG	CAPSULE	\$3.37100	

Thank you.

BC/AL
Provider Publications Team
Medicaid Program
Health Care Authority

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