

**Illinois Department of Healthcare and Family Services**  
**State Maximum Allowable Cost (SMAC) List -**  
**PROPOSED**  
**Effective 10-01-2012**

Generic Name	Current FUL	Current IL SMAC	New IL SMAC Proposed
CALCIPOTRIENE TOPICAL CREAM (GRAM) 0.005 %			4.79600
CODEINE PHOS/BUTALBITAL/ASPIRIN/CAFFEINE ORAL CAPSULE (HARD, SOFT, ETC.) 30-50-325		0.70400	0.57866
PHENAZOPYRIDINE HCL ORAL TABLET 100 MG		0.24867	0.12363
PIOGLITAZONE HCL ORAL TABLET 15 MG		3.50900	2.72800
PIOGLITAZONE HCL ORAL TABLET 30 MG		5.37900	3.57450
PIOGLITAZONE HCL ORAL TABLET 45 MG		5.81900	3.83550
PROPRANOLOL HCL ORAL CAPSULE, EXTENDED RELEASE 24HR 160 MG	2.50880	1.10475	1.05056
ROPINIROLE HCL ORAL TABLET 0.25 MG	0.75150	0.31125	0.16077
VENLAFAXINE HCL ORAL TABLET 50 MG	1.23660	0.40212	0.34569