

Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List -
PROPOSED
Effective 07-01-2018

Generic Name	Current FUL	Current IL SMAC	Proposed IL SMAC
Abacavir Sulfate-Lamivudine Tab 600-300 MG	6.86117	5.09004	3.49833
Acetazolamide Cap ER 12HR 500 MG	1.04755		0.59156
Amantadine HCl Tab 100 MG	1.31568		1.27048
Amitriptyline HCl Tab 75 MG	0.62824	0.52470	0.35820
Atomoxetine HCl Cap 25 MG (Base Equiv)	3.30076	3.34705	3.02167
Atovaquone-Proguanil HCl Tab 250-100 MG	6.04838		3.09766
Chlorpromazine HCl Tab 10 MG			2.01331
Cromolyn Sodium Soln Nebu 20 MG/2ML			2.17127
Dexmethylphenidate HCl Cap ER 24 HR 40 MG	9.52105		4.69154
Diphenhydramine HCl Elixir 12.5 MG/5ML			0.01108
Drospirenone-Ethinyl Estradiol Tab 3-0.02 MG	1.46017	1.01337	0.64071
Efavirenz Tab 600 MG		31.87033	29.51267
Erythromycin Ophth Oint 5 MG/GM	3.80483	3.02114	1.86286
Fenofibrate Tab 160 MG	0.37436	0.33783	0.29044
Haloperidol Decanoate IM Soln 100 MG/ML			46.67893
Heparin Sodium (Porcine) Inj 5000 Unit/ML			1.14022
Immune Globulin (Human) IV or Subcutaneous Soln 1 GM/10ML		12.62032	8.89895
Immune Globulin (Human) IV or Subcutaneous Soln 10 GM/100ML		12.62032	8.89895
Immune Globulin (Human) IV or Subcutaneous Soln 2.5 GM/25ML		12.62052	8.89895
Immune Globulin (Human) IV or Subcutaneous Soln 20 GM/200ML		12.62032	8.89895
Immune Globulin (Human) IV or Subcutaneous Soln 30 GM/300ML		10.46298	8.89895
Immune Globulin (Human) IV or Subcutaneous Soln 40 GM/400ML		10.91863	8.04000
Immune Globulin (Human) IV or Subcutaneous Soln 5 GM/50ML		12.62032	8.89895
Immune Globulin (Human) IV Soln 10 GM/100ML			8.31000
Immune Globulin (Human) IV Soln 20 GM/200ML			8.31000
Immune Globulin (Human) IV Soln 40 GM/400ML			8.31000
Immune Globulin (Human) IV Soln 5 GM/50ML			8.31000
Immune Globulin (Human) Subcutaneous Inj 1 GM/5ML		34.13491	19.22200
Immune Globulin (Human) Subcutaneous Inj 10 GM/50ML			18.82000
Immune Globulin (Human) Subcutaneous Inj 2 GM/10ML		34.13491	19.00000
Immune Globulin (Human) Subcutaneous Inj 4 GM/20ML		34.13491	19.22200
Immune Globulin (Human) Subcutaneous Inj 8 GM/40ML			19.66000
Lamotrigine Tab ER 24HR 25 MG	2.53012		1.55055

Generic Name	Current FUL	Current IL SMAC	Proposed IL SMAC
Levalbuterol HCl Soln Nebu 1.25 MG/3ML (Base Equiv)			0.36551
Levonorg-Eth Est Tab 0.1-0.02MG(84) & Eth Est Tab 0.01MG(7)	1.42849		1.08159
Levonorgestrel-Ethinyl Estradiol (Continuous) Tab 90-20 MCG			1.21764
Magnesium Sulfate Inj 50%			0.16190
Methylphenidate HCl Cap ER 24HR 20 MG (LA)			3.58677
Methylphenidate HCl Cap ER 24HR 30 MG (LA)			3.29452
Methylphenidate HCl Cap ER 40 MG (CD)	4.05488		2.26920
Methylphenidate HCl Cap ER 50 MG (CD)	4.98920		2.20883
Methylphenidate HCl Cap ER 60 MG (CD)	5.58939		2.21480
Methylphenidate HCl Chew Tab 5 MG			3.26022
Methylphenidate HCl Soln 5 MG/5ML	0.40063		0.55068
Minocycline HCl Tab 50 MG	0.75488		1.07802
Pediatric Multiple Vitamins w/ Fluoride Chew Tab 0.25 MG		2.89044	0.06770
Rifabutin Cap 150 MG			13.58000
Terbutaline Sulfate Tab 5 MG			1.60116
Testosterone TD Gel 50 MG/5GM (1%)	1.13718		1.51508
Tranexamic Acid Tab 650 MG	2.17790		1.84463