

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|----------|----------------|--------------------|----------------|
| Abacavir Sulfate Soln 20 MG/ML (Base Equiv) | | | 0.50046 | |
| Abacavir Sulfate Tab 300 MG (Base Equiv) | 0.79518 | | 0.63220 | |
| Abacavir Sulfate-Lamivudine Tab 600-300 MG | 12.85968 | | 2.41182 | |
| Abacavir Sulfate-Lamivudine-Zidovudine Tab 300-150-300 MG | | | 19.81500 | |
| Abacavir-Dolutegravir-Lamivudine Tab 600-50-300 MG | | | 95.92675 | |
| Abatacept For IV Soln 250 MG | | | 1104.59388 | |
| Abiraterone Acetate Tab 250 MG | 19.25264 | | 10.24000 | |
| Acamprosate Calcium Tab Delayed Release 333 MG | 0.74145 | | 0.56967 | |
| Acarbose Tab 100 MG | 0.37892 | | 0.13000 | |
| Acarbose Tab 25 MG | 0.21615 | | 0.15360 | |
| Acarbose Tab 50 MG | 0.20728 | | 0.12500 | |
| Acebutolol HCl Cap 200 MG | | | 0.61061 | |
| Acebutolol HCl Cap 400 MG | | | 0.26613 | |
| Acetaminophen w/ Codeine Soln 120-12 MG/5ML | 0.02853 | | 0.01600 | |
| Acetaminophen w/ Codeine Tab 300-15 MG | 0.13453 | | 0.11018 | |
| Acetaminophen w/ Codeine Tab 300-30 MG | 0.12531 | | 0.09167 | |
| Acetaminophen w/ Codeine Tab 300-60 MG | 0.21797 | | 0.17150 | |
| Acetazolamide Cap ER 12HR 500 MG | 0.74727 | | 0.59156 | |
| Acetazolamide Sodium For Inj 500 MG | | | 9.11877 | |
| Acetazolamide Tab 125 MG | 0.87757 | | 0.88273 | |
| Acetazolamide Tab 250 MG | 0.98203 | | 0.69900 | |
| Acetic Acid 2% in Aluminum Acetate Otic Soln | | | 0.11450 | |
| Acetic Acid Irrigation Soln 0.25% | | | 0.00270 | |
| Acetic Acid Otic Soln 2% | | | 1.05933 | |
| Acetylcysteine Inhal Soln 10% | | | 0.36618 | |
| Acetylcysteine Inhal Soln 20% | | | 0.32033 | |
| Acitretin Cap 10 MG | 12.70589 | | 9.17876 | |
| Acitretin Cap 17.5 MG | | | 25.25000 | |
| Acitretin Cap 25 MG | 12.50349 | | 9.33333 | |
| Acyclovir Cap 200 MG | 0.10657 | | 0.05480 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Acyclovir Oint 5% | | | 1.94109 | |
| Acyclovir Susp 200 MG/5ML | 0.45799 | | 0.37206 | |
| Acyclovir Tab 400 MG | 0.07872 | | 0.05732 | |
| Acyclovir Tab 800 MG | 0.15798 | | 0.13520 | |
| Adalimumab Pen-injector Kit 40 MG/0.4ML | | | 2519.00878 | |
| Adalimumab Pen-injector Kit 80 MG/0.8ML | | | 5163.75846 | |
| Adalimumab Pen-injector Kit 80 MG/0.8ML & 40 MG/0.4ML | | | 3442.50120 | |
| Adalimumab Prefilled Syringe Kit 10 MG/0.1ML | | | 2581.87091 | |
| Adalimumab Prefilled Syringe Kit 10 MG/0.2ML | | | 2581.87091 | |
| Adalimumab Prefilled Syringe Kit 20 MG/0.2ML | | | 2581.87091 | |
| Adalimumab Prefilled Syringe Kit 20 MG/0.4ML | | | 2581.87091 | |
| Adalimumab Prefilled Syringe Kit 40 MG/0.4ML | | | 2539.63722 | |
| Adalimumab Prefilled Syringe Kit 40 MG/0.8ML | | | 2520.56115 | |
| Adalimumab Prefilled Syringe Kit 80 MG/0.8ML | | | 5163.75846 | |
| Adalimumab Prefilled Syringe Kit 80 MG/0.8ML & 40 MG/0.4ML | | | 3872.81884 | |
| Adapalene Cream 0.1% | | | 3.31978 | |
| Adapalene Gel 0.1% | | | 1.51887 | |
| Adapalene Gel 0.3% | 1.93389 | | 3.55591 | |
| Adapalene-Benzoyl Peroxide Gel 0.1-2.5% | 1.28924 | | 1.29145 | |
| Adefovir Dipivoxil Tab 10 MG | | | 22.87983 | |
| Albendazole Tab 200 MG | | 85.00000 | 80.25000 | 05/01/2020 |
| Albumin, Human Inj 25% | | | 1.39750 | |
| Albuterol Sulfate Soln Nebu 0.083% (2.5 MG/3ML) | | | 0.03173 | |
| Albuterol Sulfate Soln Nebu 0.5% (5 MG/ML) | | | 0.49967 | |
| Albuterol Sulfate Soln Nebu 0.63 MG/3ML (Base Equiv) | | | 0.11333 | |
| Albuterol Sulfate Soln Nebu 1.25 MG/3ML (Base Equiv) | | | 0.15240 | |
| Albuterol Sulfate Syrup 2 MG/5ML | | | 0.01017 | |
| Albuterol Sulfate Tab 2 MG | 2.65733 | | 0.08000 | |
| Albuterol Sulfate Tab 4 MG | 2.13984 | | 3.00247 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------|----------|----------------|--------------------|----------------|
| Albuterol Sulfate Tab ER 12HR 4 MG | | | 0.83750 | |
| Alclometasone Dipropionate Cream 0.05% | | | 0.62717 | |
| Alclometasone Dipropionate Oint 0.05% | | | 0.62411 | |
| Alcohol Swabs*** | | | 0.01500 | |
| Alendronate Sodium Tab 10 MG | 0.14619 | | 0.13200 | |
| Alendronate Sodium Tab 35 MG | 0.45860 | | 0.23750 | |
| Alendronate Sodium Tab 5 MG | | | 0.14633 | |
| Alendronate Sodium Tab 70 MG | 0.34990 | | 0.24127 | |
| Alfuzosin HCl Tab ER 24HR 10 MG | 0.13559 | | 0.11326 | |
| Aliskiren Fumarate Tab 150 MG (Base Equivalent) | | | 5.54267 | |
| Aliskiren Fumarate Tab 300 MG (Base Equivalent) | | | 7.46570 | |
| Allopurinol Tab 100 MG | 0.07322 | | 0.05290 | |
| Allopurinol Tab 300 MG | 0.12713 | | 0.08890 | |
| Almotriptan Malate Tab 12.5 MG | | | 19.23583 | |
| Alosetron HCl Tab 0.5 MG (Base Equiv) | 14.04439 | | 10.07880 | |
| Alosetron HCl Tab 1 MG (Base Equiv) | 19.52267 | | 23.48172 | |
| Alprazolam Orally Disintegrating Tab 0.5 MG | | | 1.28974 | |
| Alprazolam Tab 0.25 MG | 0.03537 | | 0.01612 | |
| Alprazolam Tab 0.5 MG | 0.04103 | | 0.01385 | |
| Alprazolam Tab 1 MG | 0.06424 | | 0.01660 | |
| Alprazolam Tab 2 MG | 0.12383 | | 0.04891 | |
| Alprazolam Tab ER 24HR 0.5 MG | 0.17552 | | 0.18083 | |
| Alprazolam Tab ER 24HR 1 MG | 0.20778 | | 0.17943 | |
| Alprazolam Tab ER 24HR 2 MG | 0.29849 | | 0.18687 | |
| Alprazolam Tab ER 24HR 3 MG | 0.40488 | | 0.25192 | |
| Amantadine HCl Cap 100 MG | 0.38575 | | 0.19742 | |
| Amantadine HCl Syrup 50 MG/5ML | 0.03758 | | 0.01886 | |
| Amantadine HCl Tab 100 MG | 0.94637 | | 0.73017 | |
| Ambrisentan Tab 10 MG | | | 307.25305 | |
| Ambrisentan Tab 5 MG | | | 307.25305 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------|---------|----------------|--------------------|----------------|
| Amiloride & Hydrochlorothiazide Tab 5-50 MG | | | 0.28000 | |
| Amiloride HCl Tab 5 MG | | | 0.14880 | |
| Aminocaproic Acid Tab 500 MG | | | 4.38000 | |
| Amiodarone HCl Tab 100 MG | 1.77201 | | 1.91834 | |
| Amiodarone HCl Tab 200 MG | 0.13966 | | 0.09890 | |
| Amiodarone HCl Tab 400 MG | 2.88733 | | 2.20300 | |
| Amitriptyline HCl Tab 10 MG | 0.07124 | | 0.05742 | |
| Amitriptyline HCl Tab 100 MG | 0.50530 | | 0.38720 | |
| Amitriptyline HCl Tab 150 MG | 1.02745 | | 0.29900 | |
| Amitriptyline HCl Tab 25 MG | 0.12542 | | 0.09537 | |
| Amitriptyline HCl Tab 50 MG | 0.25999 | | 0.15100 | |
| Amitriptyline HCl Tab 75 MG | 0.50873 | 0.25740 | 0.12500 | 05/01/2020 |
| Amlodipine Besylate Tab 10 MG (Base Equivalent) | 0.04153 | | 0.01026 | |
| Amlodipine Besylate Tab 2.5 MG (Base Equivalent) | 0.03289 | | 0.01576 | |
| Amlodipine Besylate Tab 5 MG (Base Equivalent) | 0.03007 | | 0.01285 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 10-10 MG | 3.09792 | | 1.46667 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 10-20 MG | 2.70211 | | 1.99467 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 10-40 MG | 3.46325 | | 1.94133 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-20 MG | | | 4.82300 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 5-10 MG | 2.49143 | | 2.66894 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 5-20 MG | 2.50349 | | 2.74000 | |
| Amlodipine Besylate-Atorvastatin Calcium Tab 5-40 MG | 4.37100 | | 3.09133 | |
| Amlodipine Besylate-Benazepril HCl Cap 10-20 MG | 0.19143 | | 0.12698 | |
| Amlodipine Besylate-Benazepril HCl Cap 10-40 MG | 0.33013 | | 0.13100 | |
| Amlodipine Besylate-Benazepril HCl Cap 2.5-10 MG | 0.17445 | | 0.08560 | |
| Amlodipine Besylate-Benazepril HCl Cap 5-10 MG | 0.19618 | | 0.07450 | |
| Amlodipine Besylate-Benazepril HCl Cap 5-20 MG | 0.19906 | | 0.10230 | |
| Amlodipine Besylate-Benazepril HCl Cap 5-40 MG | 0.14506 | | 0.08980 | |
| Amlodipine Besylate-Olmesartan Medoxomil Tab 10-20 MG | 0.80366 | | 0.31333 | |

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|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Amlodipine Besylate-Olmesartan Medoxomil Tab 10-40 MG | 0.80816 | | 0.49867 | |
| Amlodipine Besylate-Olmesartan Medoxomil Tab 5-20 MG | 0.70861 | | 0.44433 | |
| Amlodipine Besylate-Olmesartan Medoxomil Tab 5-40 MG | 0.81090 | | 0.72308 | |
| Amlodipine Besylate-Valsartan Tab 10-160 MG | 0.69381 | | 0.34522 | |
| Amlodipine Besylate-Valsartan Tab 10-320 MG | 3.48983 | | 0.43333 | |
| Amlodipine Besylate-Valsartan Tab 5-160 MG | 0.93676 | | 0.33484 | |
| Amlodipine Besylate-Valsartan Tab 5-320 MG | 0.91058 | | 0.37667 | |
| Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-12.5 MG | | | 1.15467 | |
| Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-25 MG | | | 0.91533 | |
| Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-320-25 MG | 4.07968 | | 0.94400 | |
| Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-12.5 MG | | | 0.82914 | |
| Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-25 MG | | | 1.04403 | |
| Amoxapine Tab 100 MG | | | 0.80600 | |
| Amoxapine Tab 50 MG | | | 0.47021 | |
| Amoxicillin & K Clavulanate Chew Tab 400-57 MG | | | 2.33412 | |
| Amoxicillin & K Clavulanate For Susp 200-28.5 MG/5ML | | | 0.04850 | |
| Amoxicillin & K Clavulanate For Susp 250-62.5 MG/5ML | | | 0.31990 | |
| Amoxicillin & K Clavulanate For Susp 400-57 MG/5ML | | | 0.05520 | |
| Amoxicillin & K Clavulanate For Susp 600-42.9 MG/5ML | | | 0.06436 | |
| Amoxicillin & K Clavulanate Tab 250-125 MG | 1.90727 | | 2.12472 | |
| Amoxicillin & K Clavulanate Tab 500-125 MG | 0.32456 | | 0.25340 | |
| Amoxicillin & K Clavulanate Tab 875-125 MG | 0.47814 | | 0.23428 | |
| Amoxicillin & K Clavulanate Tab ER 12HR 1000-62.5 MG | | | 4.70250 | |
| Amoxicillin (Trihydrate) Cap 250 MG | 0.06825 | | 0.04196 | |
| Amoxicillin (Trihydrate) Cap 500 MG | 0.07450 | | 0.06000 | |
| Amoxicillin (Trihydrate) Chew Tab 125 MG | | | 0.17329 | |
| Amoxicillin (Trihydrate) Chew Tab 250 MG | | | 0.29980 | |
| Amoxicillin (Trihydrate) Chew Tab 400 MG | | | 0.34880 | |

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| Amoxicillin (Trihydrate) For Susp 125 MG/5ML | | | 0.02037 | |
| Amoxicillin (Trihydrate) For Susp 200 MG/5ML | | | 0.01700 | |
| Amoxicillin (Trihydrate) For Susp 250 MG/5ML | | | 0.02210 | |
| Amoxicillin (Trihydrate) For Susp 400 MG/5ML | | | 0.02189 | |
| Amoxicillin (Trihydrate) Tab 500 MG | 0.15360 | | 0.15087 | |
| Amoxicillin (Trihydrate) Tab 875 MG | 0.11734 | | 0.10926 | |
| Amoxicillin Cap-Clarithro Tab-Lansopraz Cap DR Therapy Pack | | | 2.57209 | |
| Amphetamine Sulfate Tab 10 MG | 6.70851 | | 5.05674 | |
| Amphetamine-Dextroamphetamine 3-Bead Cap ER 24HR 12.5 MG | | | 8.97643 | |
| Amphetamine-Dextroamphetamine 3-Bead Cap ER 24HR 25 MG | | | 8.94741 | |
| Amphetamine-Dextroamphetamine 3-Bead Cap ER 24HR 37.5 MG | | | 8.93356 | |
| Amphetamine-Dextroamphetamine 3-Bead Cap ER 24HR 50 MG | | | 8.91497 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 10 MG | | | 1.36870 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 15 MG | | | 1.61943 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 20 MG | | | 1.59000 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 25 MG | | | 1.33106 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 30 MG | | | 1.59000 | |
| Amphetamine-Dextroamphetamine Cap ER 24HR 5 MG | | | 1.00560 | |
| Amphetamine-Dextroamphetamine Tab 10 MG | | | 0.33058 | |
| Amphetamine-Dextroamphetamine Tab 12.5 MG | 0.65084 | | 0.52640 | |
| Amphetamine-Dextroamphetamine Tab 15 MG | 0.38252 | | 0.36400 | |
| Amphetamine-Dextroamphetamine Tab 20 MG | | | 0.39464 | |
| Amphetamine-Dextroamphetamine Tab 30 MG | | | 0.36677 | |
| Amphetamine-Dextroamphetamine Tab 5 MG | 0.37515 | | 0.42952 | |
| Amphetamine-Dextroamphetamine Tab 7.5 MG | 0.66499 | | 0.51550 | |
| Ampicillin & Sulbactam Sodium For Inj 1.5 (1-0.5) GM | | | 3.41900 | |
| Ampicillin & Sulbactam Sodium For Inj 10-5 GM | | | 41.79500 | |
| Ampicillin & Sulbactam Sodium For Inj 3 (2-1) GM | | | 6.43500 | |

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| Ampicillin & Sulbactam Sodium For IV Soln 1.5 (1-0.5) GM | | | 4.75800 | |
| Ampicillin & Sulbactam Sodium For IV Soln 15 (10-5) GM | | | 33.00000 | |
| Ampicillin & Sulbactam Sodium For IV Soln 3 (2-1) GM | | | 7.86500 | |
| Ampicillin Cap 250 MG | | | 0.08700 | |
| Ampicillin Cap 500 MG | | | 0.25110 | |
| Ampicillin Sodium For Inj 1 GM | | | 5.46000 | |
| Ampicillin Sodium For Inj 2 GM | | | 4.68125 | |
| Ampicillin Sodium For Inj 500 MG | | | 2.73000 | |
| Ampicillin Sodium For IV Soln 2 GM | | | 4.68125 | |
| Anagrelide HCl Cap 0.5 MG | | | 0.13560 | |
| Anagrelide HCl Cap 1 MG | | | 0.76180 | |
| Anastrozole Tab 1 MG | 0.25982 | | 0.04100 | |
| Antihemophil Fact Rcmb(BDD-rFVIII,sim) For Inj Kit 2500 Unit | | | 1.19000 | |
| Antihemophil Fact Rcmb(BDD-rFVIII,sim) For Inj Kit 3000 Unit | | | 1.19000 | |
| Antihemophil Fact Rcmb(BDD-rFVIII,sim) For Inj Kit 4000 Unit | | | 1.19000 | |
| Antihemophilic Fact Rcmb (BDD-rFVIII,sim) For Inj 2500 Unit | | | 1.19000 | |
| Antihemophilic Fact Rcmb (BDD-rFVIII,sim) For Inj 3000 Unit | | | 1.19000 | |
| Antihemophilic Fact Rcmb (BDD-rFVIII,sim) For Inj 4000 Unit | | | 1.19000 | |
| Antihemophilic Fact Rcmb Single Chain For Inj Kit 1500 Unit | | | 1.19000 | |
| Antihemophilic Fact Rcmb Single Chain For Inj Kit 2500 Unit | | | 1.19000 | |
| Antihemophilic Factor rAHF-PFM For Inj 1000 Unit | | | 0.87000 | |
| Antihemophilic Factor rAHF-PFM For Inj 1500 Unit | | | 1.00000 | |
| Antihemophilic Factor rAHF-PFM For Inj 2000 Unit | | | 0.87000 | |
| Antihemophilic Factor rAHF-PFM For Inj 250 Unit | | | 0.87000 | |
| Antihemophilic Factor rAHF-PFM For Inj 3000 Unit | | | 0.87000 | |
| Antihemophilic Factor rAHF-PFM For Inj 500 Unit | | | 0.87000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 1000 Unit | | | 1.48000 | |

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| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 1500 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 2000 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 250 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 3000 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 4000 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 500 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 5000 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 6000 Unit | | | 1.48000 | |
| Antihemophilic Factor Rcmb (BDD-rFVIII Fc) For Inj 750 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Glycopeg-exei For Inj 1000 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Glycopeg-exei For Inj 1500 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Glycopeg-exei For Inj 2000 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Glycopeg-exei For Inj 3000 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Glycopeg-exei For Inj 500 Unit | | | 1.48000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 1000 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 1500 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 2000 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 250 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 3000 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 500 Unit | | | 1.36000 | |
| Antihemophilic Factor Recomb Pegylated For Inj 750 Unit | | | 1.36000 | |
| Antihemophilic Factor Recombinant PAF For Inj Kit 1000 Unit | | | 0.93000 | |
| Antihemophilic Factor Recombinant PAF For Inj Kit 2000 Unit | | | 0.93000 | |
| Antihemophilic Factor Recombinant PAF For Inj Kit 250 Unit | | | 0.93000 | |
| Antihemophilic Factor Recombinant PAF For Inj Kit 500 Unit | | | 0.93000 | |

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| Antihemophilic Factor/VWF (Human) For Inj 1000 Unit | | | 0.72000 | |
| Antihemophilic Factor/VWF (Human) For Inj 1500 Unit | | | 0.72000 | |
| Antihemophilic Factor/VWF (Human) For Inj 2000 Unit | | | 0.72000 | |
| Antihemophilic Factor/VWF (Human) For Inj 250 Unit | | | 0.72000 | |
| Antihemophilic Factor/VWF (Human) For Inj 500 Unit | | | 0.72000 | |
| Antiinhibitor Coagulant Complex For IV Soln 1000 Unit | | | 1.47000 | |
| Antiinhibitor Coagulant Complex For IV Soln 2500 Unit | | | 1.47000 | |
| Antiinhibitor Coagulant Complex For IV Soln 500 Unit | | | 1.47000 | |
| Antiseptic Products Misc - Pads** | | | 0.01500 | |
| Antithrombin III (Human) For Inj 500 Unit | | | 1.69000 | |
| Apraclonidine HCl Ophth Soln 0.5% (Base Equivalent) | | | 11.88400 | |
| Apremilast Tab 30 MG | | | 56.40680 | |
| Aprepitant Capsule 40 MG | | | 75.78400 | |
| Aripiprazole Oral Solution 1 MG/ML | 2.25882 | | 2.02153 | |
| Aripiprazole Tab 10 MG | 0.51246 | | 0.17992 | |
| Aripiprazole Tab 15 MG | 0.52584 | | 0.18774 | |
| Aripiprazole Tab 2 MG | 0.46493 | 0.18274 | 0.06467 | 05/01/2020 |
| Aripiprazole Tab 20 MG | 0.82555 | | 0.27600 | |
| Aripiprazole Tab 30 MG | 1.19362 | | 0.22500 | |
| Aripiprazole Tab 5 MG | 0.48183 | | 0.17245 | |
| Armodafinil Tab 150 MG | 2.51060 | | 1.09107 | |
| Armodafinil Tab 200 MG | 2.67459 | | 0.83889 | |
| Armodafinil Tab 250 MG | 3.54998 | | 1.08200 | |
| Armodafinil Tab 50 MG | 1.26612 | | 0.33919 | |
| Aspirin-Caff-Butalbital w/ Codeine Cap 200-40-50-30 MG | | | 1.65624 | |
| Aspirin-Dipyridamole Cap ER 12HR 25-200 MG | | | 2.52000 | |
| Atazanavir Sulfate Cap 150 MG (Base Equiv) | | | 6.80917 | |
| Atazanavir Sulfate Cap 200 MG (Base Equiv) | 4.24723 | | 4.48417 | |
| Atazanavir Sulfate Cap 300 MG (Base Equiv) | 12.01019 | | 7.94617 | |
| Atenolol & Chlorthalidone Tab 100-25 MG | 0.61503 | | 0.36700 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------|---------|----------------|--------------------|----------------|
| Atenolol & Chlorthalidone Tab 50-25 MG | 0.42088 | | 0.32543 | |
| Atenolol Tab 100 MG | 0.05557 | | 0.02990 | |
| Atenolol Tab 25 MG | 0.04096 | | 0.01982 | |
| Atenolol Tab 50 MG | 0.03956 | | 0.02811 | |
| Atomoxetine HCl Cap 10 MG (Base Equiv) | 2.34392 | | 1.99500 | |
| Atomoxetine HCl Cap 100 MG (Base Equiv) | 2.50470 | | 1.66900 | |
| Atomoxetine HCl Cap 18 MG (Base Equiv) | 2.25473 | | 1.30000 | |
| Atomoxetine HCl Cap 25 MG (Base Equiv) | 2.01278 | | 1.41167 | |
| Atomoxetine HCl Cap 40 MG (Base Equiv) | 2.01079 | | 1.69467 | |
| Atomoxetine HCl Cap 60 MG (Base Equiv) | 2.17499 | | 2.39200 | |
| Atomoxetine HCl Cap 80 MG (Base Equiv) | 2.65432 | | 1.66667 | |
| Atorvastatin Calcium Tab 10 MG (Base Equivalent) | 0.09807 | | 0.04039 | |
| Atorvastatin Calcium Tab 20 MG (Base Equivalent) | 0.11342 | | 0.06483 | |
| Atorvastatin Calcium Tab 40 MG (Base Equivalent) | 0.12704 | 0.09526 | 0.05800 | 05/01/2020 |
| Atorvastatin Calcium Tab 80 MG (Base Equivalent) | 0.15354 | | 0.11409 | |
| Atovaquone Susp 750 MG/5ML | 1.75242 | | 1.42857 | |
| Atovaquone-Proguanil HCl Tab 250-100 MG | 2.82374 | | 2.19550 | |
| Atovaquone-Proguanil HCl Tab 62.5-25 MG | 1.65627 | | 1.25680 | |
| Atropine Sulfate Ophth Soln 1% | | | 9.21410 | |
| Azathioprine Tab 50 MG | 0.28429 | | 0.18135 | |
| Azelaic Acid Gel 15% | 2.27577 | | 1.97380 | |
| Azelastine HCl Nasal Spray 0.1% (137 MCG/SPRAY) | 0.35325 | | 0.29567 | |
| Azelastine HCl Nasal Spray 0.15% (205.5 MCG/SPRAY) | | | 0.93000 | |
| Azelastine HCl Ophth Soln 0.05% | 1.88233 | | 1.33000 | |
| Azithromycin For Susp 100 MG/5ML | 0.65916 | | 0.54438 | |
| Azithromycin For Susp 200 MG/5ML | | | 0.35396 | |
| Azithromycin IV For Soln 500 MG | | | 6.80550 | |
| Azithromycin Tab 250 MG | 0.66496 | | 0.29109 | |
| Azithromycin Tab 500 MG | 1.47228 | | 0.60000 | |
| Azithromycin Tab 600 MG | | | 1.25500 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------|---------|----------------|--------------------|----------------|
| B-Complex w/ C & Folic Acid Cap 1 MG*** | | | 0.09660 | |
| B-Complex w/ C & Folic Acid Tab 1 MG*** | | | 0.10190 | |
| Bacitracin Intramuscular For Soln 50000 Unit | | | 6.50000 | |
| Bacitracin Zinc Oint 500 Unit/GM | | | 0.18693 | |
| Bacitracin-Polymyxin B Ophth Oint | | | 2.24572 | |
| Bacitracin-Polymyxin-Neomycin-HC Ophth Oint 1% | | | 6.88857 | |
| Baclofen Tab 10 MG | 0.08365 | | 0.05757 | |
| Baclofen Tab 20 MG | 0.18412 | | 0.11145 | |
| Bacteriostatic Sodium Chloride Inj Soln 0.9%*** | | | 0.03033 | |
| Balsalazide Disodium Cap 750 MG | 0.44460 | | 0.22496 | |
| Benazepril & Hydrochlorothiazide Tab 10-12.5 MG | 0.73456 | | 0.59920 | |
| Benazepril & Hydrochlorothiazide Tab 20-12.5 MG | 0.72153 | | 0.19990 | |
| Benazepril & Hydrochlorothiazide Tab 20-25 MG | 0.77147 | | 0.53480 | |
| Benazepril & Hydrochlorothiazide Tab 5-6.25 MG | | | 0.89470 | |
| Benazepril HCl Tab 10 MG | 0.06787 | | 0.01900 | |
| Benazepril HCl Tab 20 MG | 0.07719 | | 0.04278 | |
| Benazepril HCl Tab 40 MG | 0.11712 | | 0.09601 | |
| Benazepril HCl Tab 5 MG | 0.09534 | | 0.04180 | |
| Benzonatate Cap 100 MG | 0.10532 | | 0.09980 | |
| Benzonatate Cap 200 MG | 0.14793 | | 0.08920 | |
| Benzoyl Peroxide Gel 10% | | | 0.13362 | |
| Benzoyl Peroxide Gel 5% | | | 0.25312 | |
| Benzoyl Peroxide Liq 10% | | | 0.06582 | |
| Benzoyl Peroxide Liq 2.5% | | | 0.10652 | |
| Benzoyl Peroxide Liq 5% | | | 0.06483 | |
| Benzoyl Peroxide-Erythromycin Gel 5-3% | | | 1.75300 | |
| Benzphetamine HCl Tab 50 MG | | | 0.35330 | |
| Benztropine Mesylate Inj 1 MG/ML | | | 19.50100 | |
| Benztropine Mesylate Tab 0.5 MG | 0.08940 | | 0.05798 | |
| Benzotropine Mesylate Tab 1 MG | 0.09976 | | 0.08405 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Benzotropine Mesylate Tab 2 MG | 0.12383 | | 0.08160 | |
| Betamethasone Dipropionate Augmented Cream 0.05% | | | 0.15427 | |
| Betamethasone Dipropionate Augmented Gel 0.05% | | | 0.40432 | |
| Betamethasone Dipropionate Augmented Lotion 0.05% | | | 1.78763 | |
| Betamethasone Dipropionate Augmented Oint 0.05% | | | 1.43620 | |
| Betamethasone Dipropionate Cream 0.05% | | | 1.19387 | |
| Betamethasone Dipropionate Lotion 0.05% | 0.46069 | | 0.06980 | |
| Betamethasone Dipropionate Oint 0.05% | | | 1.83200 | |
| Betamethasone Sod Phosphate & Acetate Inj Susp 6 (3-3) MG/ML | | | 8.35933 | |
| Betamethasone Valerate Aerosol Foam 0.12% | | | 2.11408 | |
| Betamethasone Valerate Cream 0.1% (Base Equivalent) | | | 0.16667 | |
| Betamethasone Valerate Lotion 0.1% (Base Equivalent) | | | 0.26967 | |
| Betamethasone Valerate Oint 0.1% (Base Equivalent) | | | 0.56667 | |
| Betaxolol HCl Opth Soln 0.5% | | | 8.38367 | |
| Betaxolol HCl Tab 10 MG | | | 0.56150 | |
| Betaxolol HCl Tab 20 MG | | | 1.24790 | |
| Bethanechol Chloride Tab 10 MG | 0.39793 | | 0.19344 | |
| Bethanechol Chloride Tab 25 MG | 0.36455 | | 0.19520 | |
| Bethanechol Chloride Tab 5 MG | 0.26148 | | 0.11570 | |
| Bethanechol Chloride Tab 50 MG | 0.63756 | | 0.25990 | |
| Bevacizumab IV Soln 100 MG/4ML (For Infusion) | | | 198.43806 | |
| Bevacizumab IV Soln 400 MG/16ML (For Infusion) | | | 198.43806 | |
| Bicalutamide Tab 50 MG | 0.32535 | | 0.10180 | |
| Bimatoprost Opth Soln 0.03% | 36.04719 | | 34.22800 | |
| Bimatoprost Soln 0.03% | | | 32.50000 | |
| Bisoprolol & Hydrochlorothiazide Tab 10-6.25 MG | 0.45090 | | 0.05313 | |
| Bisoprolol & Hydrochlorothiazide Tab 2.5-6.25 MG | 0.45906 | | 0.03462 | |
| Bisoprolol & Hydrochlorothiazide Tab 5-6.25 MG | | | 0.04470 | |
| Bisoprolol Fumarate Tab 10 MG | | | 0.18530 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Bisoprolol Fumarate Tab 5 MG | | | 0.15655 | |
| Bleomycin Sulfate For Inj 15 Unit | | | 35.41200 | |
| Bleomycin Sulfate For Inj 30 Unit | | | 72.96900 | |
| Blood Glucose Monitoring Kit w/ Device*** | | | 7.50000 | |
| Bosentan Tab 125 MG | | | 180.62460 | |
| Bosentan Tab 62.5 MG | | | 180.62460 | |
| Brimonidine Tartrate Ophth Soln 0.15% | | | 19.22480 | |
| Brimonidine Tartrate Ophth Soln 0.2% | | | 0.56100 | |
| Bromfenac Sodium Ophth Soln 0.09% (Base Equiv) (Once-Daily) | | | 38.95000 | |
| Bromocriptine Mesylate Cap 5 MG (Base Equivalent) | | | 4.91178 | |
| Bromocriptine Mesylate Tab 2.5 MG (Base Equivalent) | 1.90136 | | 1.06633 | |
| Budesonide Delayed Release Particles Cap 3 MG | 1.80780 | 0.89630 | 0.48290 | 05/01/2020 |
| Budesonide Inhalation Susp 0.25 MG/2ML | | 0.93284 | 0.82783 | 05/01/2020 |
| Budesonide Inhalation Susp 0.5 MG/2ML | | | 0.74983 | |
| Budesonide Inhalation Susp 1 MG/2ML | | | 4.43100 | |
| Budesonide Tab ER 24HR 9 MG | | | 35.90620 | |
| Budesonide-Formoterol Fumarate Dihyd Aerosol 160- 4.5 MCG/ACT | | | 37.69433 | |
| Budesonide-Formoterol Fumarate Dihyd Aerosol 80- 4.5 MCG/ACT | | | 28.59280 | |
| Bumetanide Inj 0.25 MG/ML | | | 0.20540 | |
| Bumetanide Tab 0.5 MG | 0.46178 | | 0.15810 | |
| Bumetanide Tab 1 MG | 0.43796 | 0.41877 | 0.39990 | 05/01/2020 |
| Bumetanide Tab 2 MG | 0.73641 | | 0.72578 | |
| Bupivacaine HCl Preservative Free (PF) Inj 0.5% | | | 0.11333 | |
| Buprenorphine HCl SL Tab 2 MG (Base Equiv) | 0.52039 | | 0.43600 | |
| Buprenorphine HCl SL Tab 8 MG (Base Equiv) | 0.90157 | | 0.79867 | |
| Buprenorphine HCl-Naloxone HCl SL Film 12-3 MG (Base Equiv) | | | 10.56533 | |
| Buprenorphine HCl-Naloxone HCl SL Film 2-0.5 MG (Base Equiv) | | | 3.24553 | |
| Buprenorphine HCl-Naloxone HCl SL Film 4-1 MG (Base Equiv) | | | 5.36051 | |
| Buprenorphine HCl-Naloxone HCl SL Film 8-2 MG (Base Equiv) | | | 4.59827 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|-----------|----------------|--------------------|----------------|
| Buprenorphine HCl-Naloxone HCl SL Tab 0.7-0.18 MG (Base Eq) | | | 4.13273 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 1.4-0.36 MG (Base Eq) | | | 4.00373 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 11.4-2.9 MG (Base Eq) | | | 16.37400 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 2-0.5 MG (Base Equiv) | 1.05559 | | 1.19133 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 2.9-0.71 MG (Base Eq) | | | 7.92894 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 5.7-1.4 MG (Base Eq) | | | 8.38520 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 8-2 MG (Base Equiv) | 1.70909 | | 1.58000 | |
| Buprenorphine HCl-Naloxone HCl SL Tab 8.6-2.1 MG (Base Eq) | | | 11.96206 | |
| Buprenorphine TD Patch Weekly 10 MCG/HR | 110.82247 | | 77.29281 | |
| Buprenorphine TD Patch Weekly 5 MCG/HR | 72.03670 | | 50.27542 | |
| Buprenorphine-Naloxone Buccal Film 2.1-0.3 MG (Base Equiv) | | | 7.42873 | |
| Buprenorphine-Naloxone Buccal Film 4.2-0.7 MG (Base Equiv) | | | 7.42820 | |
| Buprenorphine-Naloxone Buccal Film 6.3-1 MG (Base Equiv) | | | 15.45792 | |
| Bupropion HCl (Smoking Deterrent) Tab ER 12HR 150 MG | | | 0.20967 | |
| Bupropion HCl Tab 100 MG | 0.18577 | | 0.11485 | |
| Bupropion HCl Tab 75 MG | 0.19132 | | 0.05590 | |
| Bupropion HCl Tab ER 12HR 100 MG | 0.21683 | | 0.07644 | |
| Bupropion HCl Tab ER 12HR 150 MG | 0.11958 | | 0.09129 | |
| Bupropion HCl Tab ER 12HR 200 MG | 0.20790 | 0.15693 | 0.09170 | 05/01/2020 |
| Bupropion HCl Tab ER 24HR 150 MG | 0.20717 | | 0.15723 | |
| Bupropion HCl Tab ER 24HR 300 MG | | | 0.23444 | |
| Bupirone HCl Tab 10 MG | 0.04966 | | 0.04397 | |
| Bupirone HCl Tab 15 MG | 0.07719 | | 0.05312 | |
| Bupirone HCl Tab 30 MG | 0.42602 | | 0.24313 | |
| Bupirone HCl Tab 5 MG | 0.03442 | | 0.02551 | |
| Bupirone HCl Tab 7.5 MG | 0.39878 | 0.33000 | 0.32500 | 05/01/2020 |
| Butalbital-Acetaminophen Tab 50-300 MG | | | 2.10690 | |
| Butalbital-Acetaminophen Tab 50-325 MG | 1.00631 | | 1.04112 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Butalbital-Acetaminophen-Caff w/ COD Cap 50-300-40-30 MG | | | 5.87217 | |
| Butalbital-Acetaminophen-Caff w/ COD Cap 50-325-40-30 MG | 0.90068 | | 0.86725 | |
| Butalbital-Acetaminophen-Caffeine Cap 50-300-40 MG | 1.65821 | | 1.52512 | |
| Butalbital-Acetaminophen-Caffeine Cap 50-325-40 MG | 4.52725 | | 0.60905 | |
| Butalbital-Acetaminophen-Caffeine Tab 50-325-40 MG | 0.24837 | | 0.22890 | |
| Butalbital-Aspirin-Caff w/ Codeine Cap 50-325-40-30 MG | 1.64509 | | 1.23660 | |
| Butalbital-Aspirin-Caffeine Cap 50-325-40 MG | | | 0.88420 | |
| Butorphanol Tartrate Inj 2 MG/ML | | | 1.75500 | |
| Butorphanol Tartrate Nasal Soln 10 MG/ML | 12.09541 | | 6.20530 | |
| Cabergoline Tab 0.5 MG | 2.46400 | | 2.12000 | |
| Caffeine Citrate Oral Soln 60 MG/3ML (10 MG/ML Base Equiv) | | | 6.66666 | |
| Calcipotriene Cream 0.005% | | | 1.36619 | |
| Calcipotriene Oint 0.005% | | | 2.48205 | |
| Calcipotriene Soln 0.005% (50 MCG/ML) | 1.19206 | | 1.25552 | |
| Calcipotriene-Betamethasone Dipropionate Oint 0.005-0.064% | | | 7.02000 | |
| Calcitonin (Salmon) Nasal Soln 200 Unit/ACT | | | 6.33784 | |
| Calcitriol Cap 0.25 MCG | 0.20189 | | 0.13009 | |
| Calcitriol Cap 0.5 MCG | 0.33422 | | 0.33182 | |
| Calcitriol Oral Soln 1 MCG/ML | 5.39951 | | 5.41210 | |
| Calcium Acetate (Phosphate Binder) Cap 667 MG (169 MG Ca) | 0.51578 | | 0.11590 | |
| Calcium Acetate (Phosphate Binder) Tab 667 MG | | | 0.30825 | |
| Calcium Gluconate Inj 10% | | | 0.17000 | |
| Candesartan Cilexetil Tab 16 MG | 1.39900 | | 1.10091 | |
| Candesartan Cilexetil Tab 32 MG | 1.82399 | | 1.06144 | |
| Candesartan Cilexetil Tab 4 MG | 1.57923 | | 0.99090 | |
| Candesartan Cilexetil Tab 8 MG | 1.72466 | | 1.28291 | |
| Candesartan Cilexetil-Hydrochlorothiazide Tab 16-12.5 MG | | | 1.36980 | |
| Candesartan Cilexetil-Hydrochlorothiazide Tab 32-12.5 MG | | | 2.02290 | |

**Illinois Department of Healthcare and Family Services
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Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Candesartan Cilexetil-Hydrochlorothiazide Tab 32-25 MG | | | 1.50969 | |
| Cannabidiol Soln 100 MG/ML | | | 13.10000 | |
| Capecitabine Tab 150 MG | | | 1.58333 | |
| Capecitabine Tab 500 MG | 5.74513 | | 2.52025 | |
| Capsaicin Cream 0.1% | | | 0.15563 | |
| Captopril & Hydrochlorothiazide Tab 25-15 MG | | | 0.06265 | |
| Captopril & Hydrochlorothiazide Tab 25-25 MG | | | 0.76521 | |
| Captopril & Hydrochlorothiazide Tab 50-15 MG | | | 0.14030 | |
| Captopril & Hydrochlorothiazide Tab 50-25 MG | | | 0.15210 | |
| Captopril Tab 100 MG | 1.36120 | | 1.32038 | |
| Captopril Tab 12.5 MG | | | 0.52210 | |
| Captopril Tab 25 MG | 0.74342 | | 0.12075 | |
| Captopril Tab 50 MG | 1.46511 | | 0.77990 | |
| Carbamazepine Cap ER 12HR 100 MG | 1.49260 | | 0.62433 | |
| Carbamazepine Cap ER 12HR 200 MG | 1.57104 | | 1.24992 | |
| Carbamazepine Cap ER 12HR 300 MG | 1.55058 | | 0.75498 | |
| Carbamazepine Chew Tab 100 MG | 0.32389 | | 0.21800 | |
| Carbamazepine Susp 100 MG/5ML | 0.27662 | | 0.11213 | |
| Carbamazepine Tab 200 MG | 0.53448 | | 0.23046 | |
| Carbamazepine Tab ER 12HR 100 MG | 0.76514 | | 0.39510 | |
| Carbamazepine Tab ER 12HR 200 MG | 1.68805 | | 0.84990 | |
| Carbamazepine Tab ER 12HR 400 MG | 3.51222 | | 1.50000 | |
| Carbidopa & Levodopa Orally Disintegrating Tab 10-100 MG | | | 0.51270 | |
| Carbidopa & Levodopa Orally Disintegrating Tab 25-100 MG | | | 0.67500 | |
| Carbidopa & Levodopa Orally Disintegrating Tab 25-250 MG | | | 0.85410 | |
| Carbidopa & Levodopa Tab 10-100 MG | 0.14353 | | 0.09610 | |
| Carbidopa & Levodopa Tab 25-100 MG | 0.09935 | | 0.08025 | |
| Carbidopa & Levodopa Tab 25-250 MG | 0.18436 | | 0.11989 | |
| Carbidopa & Levodopa Tab ER 25-100 MG | 0.22250 | | 0.11510 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------|---------|----------------|--------------------|----------------|
| Carbidopa & Levodopa Tab ER 50-200 MG | 0.44656 | | 0.18000 | |
| Carbidopa Tab 25 MG | 4.78035 | | 1.99000 | |
| Carbidopa-Levodopa-Entacapone Tabs 25-100-200 MG | 1.39097 | | 2.67548 | |
| Carbidopa-Levodopa-Entacapone Tabs 37.5-150-200 MG | 1.05058 | | 3.06482 | |
| Carbidopa-Levodopa-Entacapone Tabs 50-200-200 MG | 1.16276 | | 2.80555 | |
| Carbinoxamine Maleate Soln 4 MG/5ML | | | 0.09558 | |
| Carbinoxamine Maleate Tab 4 MG | | | 0.33018 | |
| Carboplatin IV For Inj 150 MG | | | 39.00000 | |
| Carboplatin IV Soln 150 MG/15ML | | | 0.56753 | |
| Carboplatin IV Soln 450 MG/45ML | | | 0.56753 | |
| Carboplatin IV Soln 50 MG/5ML | | | 0.56753 | |
| Carboplatin IV Soln 600 MG/60ML | | | 0.56753 | |
| Carisoprodol Tab 250 MG | 1.98099 | | 1.11400 | |
| Carisoprodol Tab 350 MG | 0.07179 | | 0.04670 | |
| Carteolol HCl Ophth Soln 1% | | | 1.40920 | |
| Carvedilol Phosphate Cap ER 24HR 10 MG | 6.90300 | | 5.85267 | |
| Carvedilol Phosphate Cap ER 24HR 20 MG | 6.52988 | | 5.59000 | |
| Carvedilol Phosphate Cap ER 24HR 40 MG | 7.17223 | | 4.72533 | |
| Carvedilol Phosphate Cap ER 24HR 80 MG | 7.19185 | | 5.99833 | |
| Carvedilol Tab 12.5 MG | 0.02770 | | 0.02193 | |
| Carvedilol Tab 25 MG | 0.03570 | | 0.02887 | |
| Carvedilol Tab 3.125 MG | 0.02309 | | 0.02240 | |
| Carvedilol Tab 6.25 MG | 0.02688 | | 0.02573 | |
| Cefaclor Cap 250 MG | | | 1.08959 | |
| Cefaclor Cap 500 MG | | | 1.27079 | |
| Cefaclor For Susp 125 MG/5ML | | | 0.73655 | |
| Cefaclor For Susp 250 MG/5ML | | | 1.16666 | |
| Cefaclor For Susp 375 MG/5ML | | | 2.21067 | |
| Cefadroxil Cap 500 MG | 0.21493 | | 0.12410 | |
| Cefadroxil For Susp 250 MG/5ML | 0.61867 | | 0.20100 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------|---------|----------------|--------------------|----------------|
| Cefadroxil For Susp 500 MG/5ML | 0.80250 | | 0.24250 | |
| Cefadroxil Tab 1 GM | | | 3.15000 | |
| Cefazolin Sodium For Inj 1 GM | | | 0.92300 | |
| Cefazolin Sodium For Inj 10 GM | | | 7.04093 | |
| Cefdinir Cap 300 MG | 0.56273 | | 0.33556 | |
| Cefdinir For Susp 125 MG/5ML | | | 0.12375 | |
| Cefdinir For Susp 250 MG/5ML | | | 0.08000 | |
| Cefepime HCl For Inj 1 GM | | | 3.99900 | |
| Cefepime HCl For Inj 2 GM | | | 8.52600 | |
| Cefixime For Susp 100 MG/5ML | | | 2.87712 | |
| Cefixime For Susp 200 MG/5ML | | | 5.63013 | |
| Cefotaxime Sodium For Inj 1 GM | | | 2.86000 | |
| Cefoxitin Sodium For IV Soln 1 GM | | | 6.28160 | |
| Cefoxitin Sodium For IV Soln 2 GM | | | 11.74784 | |
| Cefpodoxime Proxetil Tab 100 MG | 3.47264 | | 1.77000 | |
| Cefpodoxime Proxetil Tab 200 MG | 4.77699 | | 4.33750 | |
| Cefprozil For Susp 125 MG/5ML | 0.16051 | | 0.14400 | |
| Cefprozil For Susp 250 MG/5ML | | | 0.21875 | |
| Cefprozil Tab 250 MG | 0.78048 | | 0.77750 | |
| Cefprozil Tab 500 MG | 1.11745 | | 1.07200 | |
| Ceftazidime For Inj 1 GM | | | 3.67263 | |
| Ceftazidime For Inj 2 GM | | | 11.54400 | |
| Ceftazidime For Inj 6 GM | | | 24.36200 | |
| Ceftazidime For IV Soln 1 GM | | | 8.51500 | |
| Ceftriaxone Sodium For Inj 1 GM | | | 1.31000 | |
| Ceftriaxone Sodium For Inj 10 GM | | | 17.23295 | |
| Ceftriaxone Sodium For Inj 2 GM | | | 2.30600 | |
| Ceftriaxone Sodium For Inj 250 MG | | | 0.63100 | |
| Ceftriaxone Sodium For Inj 500 MG | | | 0.95190 | |
| Ceftriaxone Sodium For IV Soln 2 GM | | | 10.98500 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------|---------|----------------|--------------------|----------------|
| Cefuroxime Axetil Tab 250 MG | 0.51996 | | 0.46650 | |
| Cefuroxime Axetil Tab 500 MG | 0.66355 | | 0.42400 | |
| Cefuroxime Sodium For Inj 1.5 GM | | | 5.72000 | |
| Cefuroxime Sodium For Inj 750 MG | | | 2.92500 | |
| Cefuroxime Sodium For IV Soln 1.5 GM | | | 5.72000 | |
| Celecoxib Cap 100 MG | 0.24788 | | 0.12490 | |
| Celecoxib Cap 200 MG | 0.50763 | 0.18018 | 0.15000 | 05/01/2020 |
| Celecoxib Cap 400 MG | 0.65994 | | 0.49205 | |
| Celecoxib Cap 50 MG | 0.26187 | | 0.17967 | |
| Cephalexin Cap 250 MG | 0.09795 | | 0.05200 | |
| Cephalexin Cap 500 MG | 0.12030 | | 0.09473 | |
| Cephalexin Cap 750 MG | | | 6.14950 | |
| Cephalexin For Susp 125 MG/5ML | | | 0.07000 | |
| Cephalexin For Susp 250 MG/5ML | | | 0.07000 | |
| Cetirizine HCl Oral Soln 1 MG/ML (5 MG/5ML) | | | 0.01907 | |
| Cevimeline HCl Cap 30 MG | 1.16135 | | 0.62670 | |
| Chlordiazepoxide HCl Cap 10 MG | | | 0.05930 | |
| Chlordiazepoxide HCl Cap 25 MG | | | 0.06297 | |
| Chlordiazepoxide HCl Cap 5 MG | | | 0.07574 | |
| Chlordiazepoxide HCl-Clidinium Bromide Cap 5-2.5 MG | | | 1.27283 | |
| Chlordiazepoxide-Amitriptyline Tab 10-25 MG | | | 1.65270 | |
| Chlordiazepoxide-Amitriptyline Tab 5-12.5 MG | | | 0.69002 | |
| Chlorhexidine Gluconate Soln 0.12% | 0.00656 | | 0.00591 | |
| Chloroquine Phosphate Tab 250 MG | | | 1.27760 | |
| Chloroquine Phosphate Tab 500 MG | | | 1.61582 | |
| Chlorothiazide Tab 500 MG | | | 0.15275 | |
| Chlorpromazine HCl Tab 10 MG | 1.69110 | | 1.77988 | |
| Chlorpromazine HCl Tab 100 MG | 4.61765 | | 4.84756 | |
| Chlorpromazine HCl Tab 200 MG | 8.22145 | | 7.16716 | |
| Chlorpromazine HCl Tab 25 MG | 2.68861 | | 1.85000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Chlorpromazine HCl Tab 50 MG | 3.09432 | | 2.95200 | |
| Chlorpropamide Tab 100 MG | | | 0.20075 | |
| Chlorpropamide Tab 250 MG | | | 0.34000 | |
| Chlorthalidone Tab 25 MG | | | 0.32970 | |
| Chlorthalidone Tab 50 MG | 0.56044 | | 0.35950 | |
| Chlorzoxazone Tab 500 MG | | | 0.28010 | |
| Cholestyramine Light Powder 4 GM/DOSE | | | 0.16658 | |
| Cholestyramine Light Powder Packets 4 GM | | | 0.29672 | |
| Cholestyramine Powder 4 GM/DOSE | | | 0.14794 | |
| Cholestyramine Powder Packets 4 GM | | | 1.13699 | |
| Choline Fenofibrate Cap DR 135 MG (Fenofibric Acid Equiv) | 1.01444 | | 0.84782 | |
| Choline Fenofibrate Cap DR 45 MG (Fenofibric Acid Equiv) | 0.47543 | | 0.38065 | |
| Ciclopirox Gel 0.77% | | | 0.89877 | |
| Ciclopirox Olamine Cream 0.77% (Base Equiv) | | | 0.10611 | |
| Ciclopirox Olamine Susp 0.77% (Base Equiv) | | | 0.76780 | |
| Ciclopirox Shampoo 1% | 0.39773 | | 0.24845 | |
| Ciclopirox Solution 8% | 2.05972 | | 1.78768 | |
| Cilostazol Tab 100 MG | 0.15922 | | 0.05433 | |
| Cilostazol Tab 50 MG | 0.11292 | | 0.08567 | |
| Cimetidine HCl Soln 300 MG/5ML | | | 0.07052 | |
| Cimetidine Tab 200 MG | | | 0.06613 | |
| Cimetidine Tab 300 MG | | | 0.19250 | |
| Cimetidine Tab 400 MG | | | 0.52650 | |
| Cimetidine Tab 800 MG | | | 0.83477 | |
| Cinacalcet HCl Tab 30 MG (Base Equiv) | 12.69760 | | 5.76000 | |
| Cinacalcet HCl Tab 60 MG (Base Equiv) | 26.81456 | | 53.56488 | |
| Cinacalcet HCl Tab 90 MG (Base Equiv) | 43.94676 | | 44.71000 | |
| Ciprofloxacin 200 MG/100ML in D5W | | | 0.02418 | |
| Ciprofloxacin 400 MG/200ML in D5W | | | 0.01495 | |
| Ciprofloxacin For Oral Susp 500 MG/5ML (10%) (10 GM/100ML) | | | 1.40410 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Ciprofloxacin HCl Ophth Soln 0.3% (Base Equivalent) | | | 0.56000 | |
| Ciprofloxacin HCl Tab 100 MG (Base Equiv) | | | 2.93583 | |
| Ciprofloxacin HCl Tab 250 MG (Base Equiv) | 0.10489 | | 0.09120 | |
| Ciprofloxacin HCl Tab 500 MG (Base Equiv) | 0.11863 | | 0.09853 | |
| Ciprofloxacin HCl Tab 750 MG (Base Equiv) | 0.32064 | | 0.23220 | |
| Ciprofloxacin IV Soln 400 MG/40ML (1%) | | | 0.09230 | |
| Citalopram Hydrobromide Oral Soln 10 MG/5ML | | | 0.25574 | |
| Citalopram Hydrobromide Tab 10 MG (Base Equiv) | 0.05020 | | 0.01764 | |
| Citalopram Hydrobromide Tab 20 MG (Base Equiv) | 0.04374 | | 0.02579 | |
| Citalopram Hydrobromide Tab 40 MG (Base Equiv) | 0.05324 | | 0.03745 | |
| Cladribine IV Soln 10 MG/10ML (1 MG/ML) | | | 37.05000 | |
| Clarithromycin For Susp 125 MG/5ML | | | 0.28026 | |
| Clarithromycin For Susp 250 MG/5ML | | | 1.25000 | |
| Clarithromycin Tab 250 MG | 0.60428 | | 0.54704 | |
| Clarithromycin Tab 500 MG | 0.56735 | | 0.44717 | |
| Clarithromycin Tab ER 24HR 500 MG | 4.81771 | | 1.24967 | |
| Clemastine Fumarate Tab 2.68 MG | | | 0.19150 | |
| Clindamycin HCl Cap 150 MG | 0.14608 | | 0.07280 | |
| Clindamycin HCl Cap 300 MG | 0.30337 | | 0.19863 | |
| Clindamycin Palmitate HCl For Soln 75 MG/5ML (Base Equiv) | 0.25999 | | 0.17000 | |
| Clindamycin Phosph-Benzoyl Peroxide (Refrig) Gel 1.2 (1)-5% | 0.95736 | | 1.05800 | |
| Clindamycin Phosphate Foam 1% | | | 3.56290 | |
| Clindamycin Phosphate Gel 1% | | | 0.96357 | |
| Clindamycin Phosphate Inj 300 MG/2ML | | | 0.45500 | |
| Clindamycin Phosphate Inj 600 MG/4ML | | | 0.45500 | |
| Clindamycin Phosphate Inj 9 GM/60ML | | | 0.45500 | |
| Clindamycin Phosphate Inj 900 MG/6ML | | | 0.45500 | |
| Clindamycin Phosphate IV Soln 600 MG/4ML | | | 0.45500 | |
| Clindamycin Phosphate Lotion 1% | | | 1.06400 | |
| Clindamycin Phosphate Soln 1% | | | 0.28030 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------|----------|----------------|--------------------|----------------|
| Clindamycin Phosphate Swab 1% | | | 0.30288 | |
| Clindamycin Phosphate Vaginal Cream 2% | 1.78904 | | 1.66175 | |
| Clindamycin Phosphate-Benzoyl Peroxide Gel 1-5% | | | 1.52390 | |
| Clindamycin Phosphate-Tretinoin Gel 1.2-0.025% | | | 9.25000 | |
| Clobazam Oral Film 10 MG | | | 25.94800 | |
| Clobazam Oral Film 20 MG | | | 51.89600 | |
| Clobazam Oral Film 5 MG | | | 12.97400 | |
| Clobazam Suspension 2.5 MG/ML | | | 0.81825 | |
| Clobazam Tab 10 MG | 8.40639 | | 0.49622 | |
| Clobazam Tab 20 MG | 19.60745 | | 0.99990 | |
| Clobetasol Propionate Cream 0.05% | | | 0.77415 | |
| Clobetasol Propionate Emollient Base Cream 0.05% | | | 0.66483 | |
| Clobetasol Propionate Emulsion Foam 0.05% | | | 3.10000 | |
| Clobetasol Propionate Foam 0.05% | | | 1.24600 | |
| Clobetasol Propionate Gel 0.05% | | | 1.40762 | |
| Clobetasol Propionate Lotion 0.05% | | | 1.06534 | |
| Clobetasol Propionate Oint 0.05% | | | 0.39284 | |
| Clobetasol Propionate Shampoo 0.05% | 1.15076 | | 1.24488 | |
| Clobetasol Propionate Soln 0.05% | | | 0.45980 | |
| Clobetasol Propionate Spray 0.05% | | | 1.45887 | |
| Clomiphene Citrate Tab 50 MG | | | 0.51333 | |
| Clomipramine HCl Cap 25 MG | 2.80187 | | 2.00045 | |
| Clomipramine HCl Cap 50 MG | 3.49672 | | 3.05920 | |
| Clomipramine HCl Cap 75 MG | 3.76998 | | 1.58230 | |
| Clonazepam Orally Disintegrating Tab 0.125 MG | 0.62988 | | 0.61050 | |
| Clonazepam Orally Disintegrating Tab 0.25 MG | 0.66537 | | 0.51183 | |
| Clonazepam Orally Disintegrating Tab 0.5 MG | 0.71980 | | 0.51100 | |
| Clonazepam Orally Disintegrating Tab 1 MG | 0.83983 | | 0.58810 | |
| Clonazepam Orally Disintegrating Tab 2 MG | 0.99569 | | 1.01222 | |
| Clonazepam Tab 0.5 MG | 0.04551 | | 0.02180 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|----------|----------------|--------------------|----------------|
| Clonazepam Tab 1 MG | 0.06269 | | 0.02300 | |
| Clonazepam Tab 2 MG | 0.07242 | | 0.03110 | |
| Clonidine HCl Inj (For Epidural Infusion) 500 MCG/ML | | | 9.80000 | |
| Clonidine HCl Tab 0.1 MG | 0.03468 | | 0.02202 | |
| Clonidine HCl Tab 0.2 MG | 0.04623 | | 0.03521 | |
| Clonidine HCl Tab 0.3 MG | 0.06404 | | 0.02763 | |
| Clonidine HCl Tab ER 12HR 0.1 MG | 0.83668 | | 0.88817 | |
| Clonidine HCl TD Patch Weekly 0.1 MG/24HR | | | 11.20500 | |
| Clonidine HCl TD Patch Weekly 0.2 MG/24HR | | | 20.60250 | |
| Clonidine HCl TD Patch Weekly 0.3 MG/24HR | | | 18.99000 | |
| Clonidine TD Patch Weekly 0.1 MG/24HR | 10.59217 | | 8.79250 | |
| Clonidine TD Patch Weekly 0.2 MG/24HR | | | 11.37000 | |
| Clonidine TD Patch Weekly 0.3 MG/24HR | 28.42442 | | 16.29000 | |
| Clopidogrel Bisulfate Tab 75 MG (Base Equiv) | 0.10966 | | 0.05919 | |
| Clorazepate Dipotassium Tab 15 MG | | | 2.29050 | |
| Clorazepate Dipotassium Tab 3.75 MG | | | 0.87940 | |
| Clorazepate Dipotassium Tab 7.5 MG | 1.86765 | | 1.39350 | |
| Clotrimazole Cream 1% | | | 0.29117 | |
| Clotrimazole Soln 1% | | | 1.32386 | |
| Clotrimazole Troche 10 MG | | | 0.29457 | |
| Clotrimazole w/ Betamethasone Cream 1-0.05% | | | 0.12360 | |
| Clotrimazole w/ Betamethasone Lotion 1-0.05% | | | 0.68260 | |
| Clozapine Orally Disintegrating Tab 100 MG | | | 4.76825 | |
| Clozapine Tab 100 MG | 1.95343 | | 0.25570 | |
| Clozapine Tab 200 MG | 1.59163 | | 0.93590 | |
| Clozapine Tab 25 MG | 0.64952 | | 0.18480 | |
| Clozapine Tab 50 MG | 0.81288 | | 0.32500 | |
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 1000 Unit | | | 2.20000 | |
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 2000 Unit | | | 2.20000 | |
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 250 Unit | | | 2.20000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 3000 Unit | | | 2.20000 | |
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 4000 Unit | | | 2.20000 | |
| Coagulation Factor IX (Recomb) (rFIXFc) For Inj 500 Unit | | | 2.20000 | |
| Coagulation Factor IX (Recomb) (rIX-FP) For Inj 3500 Unit | | | 3.84000 | |
| Coagulation Factor IX (Recombinant) For Inj 1000 Unit | | | 1.09000 | |
| Coagulation Factor IX (Recombinant) For Inj 1500 Unit | | | 1.09000 | |
| Coagulation Factor IX (Recombinant) For Inj 2000 Unit | | | 1.09000 | |
| Coagulation Factor IX (Recombinant) For Inj 250 Unit | | | 1.09000 | |
| Coagulation Factor IX (Recombinant) For Inj 3000 Unit | | | 1.09000 | |
| Coagulation Factor IX (Recombinant) For Inj 500 Unit | | | 1.09000 | |
| Coagulation Factor IX For Inj 1000 Unit | | | 0.68500 | |
| Coagulation Factor IX For Inj 1500 Unit | | | 0.68500 | |
| Coagulation Factor IX For Inj 500 Unit | | | 0.68500 | |
| Coagulation Factor IX Recomb Glycopegylated For Inj 1000 Unt | | | 1.30000 | |
| Coagulation Factor IX Recomb Glycopegylated For Inj 2000 Unt | | | 1.30000 | |
| Coagulation Factor IX Recomb Glycopegylated For Inj 500 Unt | | | 1.30000 | |
| Codeine Sulfate Tab 30 MG | | | 0.31600 | |
| Colchicine Tab 0.6 MG | | | 4.42840 | |
| Colchicine w/ Probenecid Tab 0.5-500 MG | | | 0.63950 | |
| Colesevelam HCl Packet For Susp 3.75 GM | | | 13.72077 | |
| Colesevelam HCl Tab 625 MG | 0.64289 | | 0.55550 | |
| Colestipol HCl Granule Packets 5 GM | | | 2.68754 | |
| Colestipol HCl Tab 1 GM | | | 0.42452 | |
| Colistimethate Sod For Inj 150 MG (Colistin Base Activity) | | | 14.31000 | |
| Colistimethate Sodium For Inj 150 MG | | | 16.66526 | |
| Cromolyn Sodium Ophth Soln 4% | | | 0.48600 | |
| Cromolyn Sodium Oral Conc 100 MG/5ML | 1.99464 | | 0.47749 | |
| Cromolyn Sodium Soln Nebu 20 MG/2ML | | | 2.17127 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------|----------|----------------|--------------------|----------------|
| Cyanocobalamin Inj 1000 MCG/ML | | | 2.76295 | |
| Cyclobenzaprine HCl Tab 10 MG | 0.02542 | | 0.01476 | |
| Cyclobenzaprine HCl Tab 5 MG | 0.03431 | | 0.02605 | |
| Cyclobenzaprine HCl Tab 7.5 MG | 1.32192 | | 1.44101 | |
| Cyclopentolate HCl Ophth Soln 1% | | | 3.23500 | |
| Cyclopentolate HCl Ophth Soln 2% | | | 5.65200 | |
| Cyclophosphamide Cap 50 MG | 11.11006 | | 7.21000 | |
| Cyclophosphamide For Inj 2 GM | | | 1138.44000 | |
| Cyclophosphamide Tab 50 MG | | | 2.63500 | |
| Cyclosporine Cap 100 MG | | | 8.96300 | |
| Cyclosporine Cap 25 MG | | | 1.77280 | |
| Cyclosporine IV Soln 50 MG/ML | | | 7.13420 | |
| Cyclosporine Modified Cap 100 MG | | | 1.70933 | |
| Cyclosporine Modified Cap 25 MG | | | 0.41700 | |
| Cyclosporine Modified Oral Soln 100 MG/ML | 11.08435 | | 1.76740 | |
| Cyproheptadine HCl Syrup 2 MG/5ML | 0.08149 | | 0.06893 | |
| Cyproheptadine HCl Tab 4 MG | 0.17886 | | 0.14405 | |
| Cysteamine Bitartrate Cap 150 MG | | | 0.82000 | |
| Cysteamine Bitartrate Cap 50 MG | | | 0.28000 | |
| Cysteine HCl Inj 50 MG/ML | | | 0.31200 | |
| Cytarabine For Inj 1 GM | | | 20.80000 | |
| Cytarabine Inj PF 100 MG/ML | | | 0.83850 | |
| Cytarabine Inj PF 20 MG/ML | | | 1.03740 | |
| Dacarbazine For Inj 200 MG | | | 8.46300 | |
| Dalfampridine Tab ER 12HR 10 MG | 2.41216 | | 0.82500 | |
| Danazol Cap 200 MG | | | 3.15200 | |
| Dantrolene Sodium Cap 100 MG | 1.12694 | | 0.82590 | |
| Dantrolene Sodium Cap 25 MG | 0.50916 | | 0.35000 | |
| Dantrolene Sodium Cap 50 MG | 1.06524 | | 0.63900 | |
| Dapsone Gel 5% | | | 5.14453 | |

**Illinois Department of Healthcare and Family Services
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Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Dapsone Tab 100 MG | 1.28676 | | 0.95666 | |
| Dapsone Tab 25 MG | 0.96656 | | 0.98000 | |
| Daptomycin For IV Soln 500 MG | | | 142.25600 | |
| Darbepoetin Alfa Soln Prefilled Syringe 200 MCG/0.4ML | | | 3854.52000 | |
| Darifenacin Hydrobromide Tab ER 24HR 15 MG (Base Equiv) | 5.96269 | | 2.54224 | |
| Darifenacin Hydrobromide Tab ER 24HR 7.5 MG (Base Equiv) | 3.83105 | | 2.41867 | |
| Darunavir Ethanolate Tab 400 MG (Base Equiv) | | | 20.88545 | |
| Darunavir Ethanolate Tab 600 MG (Base Equiv) | | | 28.04902 | |
| Darunavir Ethanolate Tab 800 MG (Base Equiv) | | | 56.09838 | |
| Dasatinib Tab 70 MG | | | 252.11865 | |
| Daunorubicin HCl Inj 5 MG/ML (Base Equiv) | | | 10.14000 | |
| Deferasirox Tab 180 MG | | | 77.88620 | |
| Deferasirox Tab 360 MG | | | 155.76942 | |
| Deferasirox Tab 90 MG | | | 38.94393 | |
| Deferasirox Tab For Oral Susp 125 MG | | | 38.94393 | |
| Deferasirox Tab For Oral Susp 250 MG | | | 77.88620 | |
| Deferasirox Tab For Oral Susp 500 MG | | | 100.52000 | |
| Deferoxamine Mesylate For Inj 2 GM | | | 39.32000 | |
| Deferoxamine Mesylate For Inj 500 MG | | | 12.16800 | |
| Demeclocycline HCl Tab 150 MG | | | 1.30000 | |
| Demeclocycline HCl Tab 300 MG | | | 5.31417 | |
| Dermatological Products Misc - Cream** | | | 1.03051 | |
| Desipramine HCl Tab 10 MG | 0.54040 | | 0.57533 | |
| Desipramine HCl Tab 100 MG | | | 1.78620 | |
| Desipramine HCl Tab 150 MG | | | 2.86792 | |
| Desipramine HCl Tab 25 MG | 0.73748 | | 0.42950 | |
| Desipramine HCl Tab 50 MG | 1.28494 | | 1.31850 | |
| Desipramine HCl Tab 75 MG | | | 1.75430 | |
| Desloratadine Tab 5 MG | | | 0.25470 | |
| Desmopressin Acetate Inj 4 MCG/ML | | | 7.67000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
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Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Desmopressin Acetate Nasal Spray Soln 0.01% | | | 14.16800 | |
| Desmopressin Acetate Nasal Spray Soln 0.01% (Refrigerated) | | | 19.21240 | |
| Desmopressin Acetate Tab 0.1 MG | 0.55374 | | 0.41720 | |
| Desmopressin Acetate Tab 0.2 MG | 0.59392 | | 0.44210 | |
| Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG(21/5) | 0.58535 | | 0.37988 | |
| Desogest-Ethin Est Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG | | | 0.58024 | |
| Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG | 0.33141 | | 0.10127 | |
| Desonide Cream 0.05% | | | 0.66500 | |
| Desonide Lotion 0.05% | | | 0.16060 | |
| Desonide Oint 0.05% | | | 0.90000 | |
| Desoximetasone Cream 0.05% | | | 2.57933 | |
| Desoximetasone Cream 0.25% | | | 0.57933 | |
| Desoximetasone Gel 0.05% | | | 4.08233 | |
| Desoximetasone Oint 0.05% | | | 4.59067 | |
| Desoximetasone Oint 0.25% | | | 0.29867 | |
| Desoximetasone Spray 0.25% | 3.22611 | | 1.22948 | |
| Desvenlafaxine Succinate Tab ER 24HR 100 MG (Base Equiv) | 1.24773 | | 0.50550 | |
| Desvenlafaxine Succinate Tab ER 24HR 25 MG (Base Equiv) | 0.93317 | | 0.76900 | |
| Desvenlafaxine Succinate Tab ER 24HR 50 MG (Base Equiv) | 1.37133 | | 0.71833 | |
| Dexamethasone Elixir 0.5 MG/5ML | 0.11787 | | 0.06692 | |
| Dexamethasone Sodium Phosphate Inj 10 MG/ML | | | 0.53367 | |
| Dexamethasone Sodium Phosphate Inj 100 MG/10ML | | | 0.53367 | |
| Dexamethasone Sodium Phosphate Inj 120 MG/30ML | | | 0.46303 | |
| Dexamethasone Sodium Phosphate Inj 20 MG/5ML | | | 0.46303 | |
| Dexamethasone Sodium Phosphate Inj 4 MG/ML | | | 0.46303 | |
| Dexamethasone Sodium Phosphate Ophth Soln 0.1% | | | 9.74500 | |
| Dexamethasone Tab 0.5 MG | | | 0.04650 | |
| Dexamethasone Tab 0.75 MG | | | 0.09400 | |
| Dexamethasone Tab 1.5 MG | | | 0.11454 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
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Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------|---------|----------------|--------------------|----------------|
| Dexamethasone Tab 4 MG | | | 0.08400 | |
| Dexamethasone Tab 6 MG | | | 0.37206 | |
| Dexamethylphenidate HCl Cap ER 24 HR 10 MG | 7.85371 | | 3.16126 | |
| Dexamethylphenidate HCl Cap ER 24 HR 15 MG | 7.12295 | | 0.40120 | |
| Dexamethylphenidate HCl Cap ER 24 HR 20 MG | 9.63716 | | 3.89193 | |
| Dexamethylphenidate HCl Cap ER 24 HR 25 MG | 9.09729 | | 2.41738 | |
| Dexamethylphenidate HCl Cap ER 24 HR 30 MG | 6.89044 | | 2.56200 | |
| Dexamethylphenidate HCl Cap ER 24 HR 35 MG | 7.80925 | | 3.79348 | |
| Dexamethylphenidate HCl Cap ER 24 HR 40 MG | 7.56171 | | 1.94380 | |
| Dexamethylphenidate HCl Cap ER 24 HR 5 MG | 6.55739 | | 3.37354 | |
| Dexamethylphenidate HCl Tab 10 MG | 0.69467 | | 0.39990 | |
| Dexamethylphenidate HCl Tab 2.5 MG | 0.43959 | | 0.20541 | |
| Dexamethylphenidate HCl Tab 5 MG | 0.41876 | | 0.27054 | |
| Dextroamphetamine Sulfate Cap ER 24HR 10 MG | 3.40969 | | 0.46820 | |
| Dextroamphetamine Sulfate Cap ER 24HR 15 MG | 6.19151 | | 1.00806 | |
| Dextroamphetamine Sulfate Cap ER 24HR 5 MG | 2.45719 | | 1.19229 | |
| Dextroamphetamine Sulfate Oral Solution 5 MG/5ML | | | 1.42901 | |
| Dextroamphetamine Sulfate Tab 10 MG | 0.50054 | | 0.40200 | |
| Dextroamphetamine Sulfate Tab 5 MG | 0.44739 | | 0.31093 | |
| Dextromethorphan-Guaifenesin Liquid 10-100 MG/5ML | | | 0.00775 | |
| Dextrose 5% in Lactated Ringers | | | 0.00300 | |
| Dextrose 5% w/ Sodium Chloride 0.2% | | | 0.00228 | |
| Dextrose 5% w/ Sodium Chloride 0.225% | | | 0.00228 | |
| Dextrose 5% w/ Sodium Chloride 0.45% | | | 0.00185 | |
| Dextrose 5% w/ Sodium Chloride 0.9% | | | 0.00228 | |
| Dextrose Inj 10% | | | 0.00268 | |
| Dextrose Inj 5% | | | 0.00449 | |
| Dextrose Inj 50% | | | 0.13312 | |
| Dextrose Inj 70% | | | 0.00741 | |
| Diazepam Conc 5 MG/ML | | | 0.88533 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|---------|----------------|--------------------|----------------|
| Diazepam IM Solution Auto-inj 10 MG/2ML | | | 1.47550 | |
| Diazepam Inj 5 MG/ML | | | 1.47550 | |
| Diazepam Rectal Gel Delivery System 2.5 MG | | | 224.50000 | |
| Diazepam Tab 10 MG | 0.04271 | | 0.02456 | |
| Diazepam Tab 2 MG | | | 0.01740 | |
| Diazepam Tab 5 MG | 0.03140 | | 0.02148 | |
| Diclofenac Potassium Tab 50 MG | | | 0.25630 | |
| Diclofenac Sodium (Actinic Keratoses) Gel 3% | 0.57158 | | 0.60676 | |
| Diclofenac Sodium Gel 1% | 0.19282 | | 0.17595 | |
| Diclofenac Sodium Ophth Soln 0.1% | | | 0.88800 | |
| Diclofenac Sodium Soln 1.5% | 0.24058 | | 0.11873 | |
| Diclofenac Sodium Tab Delayed Release 25 MG | | | 0.85301 | |
| Diclofenac Sodium Tab Delayed Release 50 MG | 0.12781 | | 0.07968 | |
| Diclofenac Sodium Tab Delayed Release 75 MG | 0.10992 | | 0.08230 | |
| Diclofenac Sodium Tab ER 24HR 100 MG | | | 0.19545 | |
| Diclofenac w/ Misoprostol Tab Delayed Release 50-0.2 MG | 1.65462 | | 1.79467 | |
| Diclofenac w/ Misoprostol Tab Delayed Release 75-0.2 MG | 1.86610 | | 1.62478 | |
| Dicloxacillin Sodium Cap 250 MG | | | 0.27170 | |
| Dicloxacillin Sodium Cap 500 MG | | | 0.49800 | |
| Dicyclomine HCl Cap 10 MG | 0.14251 | 0.13288 | 0.11241 | 05/01/2020 |
| Dicyclomine HCl Oral Soln 10 MG/5ML | | | 0.20802 | |
| Dicyclomine HCl Tab 20 MG | 0.19169 | | 0.09870 | |
| Didanosine Delayed Release Capsule 200 MG | | | 3.64700 | |
| Didanosine Delayed Release Capsule 250 MG | | | 4.63500 | |
| Didanosine Delayed Release Capsule 400 MG | | | 7.21500 | |
| Diethylpropion HCl Tab 25 MG | | | 0.14407 | |
| Diflorasone Diacetate Cream 0.05% | | | 11.18150 | |
| Diflorasone Diacetate Oint 0.05% | | | 4.78816 | |
| Diflunisal Tab 500 MG | | | 1.03390 | |
| Digoxin Oral Soln 0.05 MG/ML | | | 1.84000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|---------|----------------|--------------------|----------------|
| Digoxin Tab 125 MCG (0.125 MG) | 0.34730 | | 0.21936 | |
| Digoxin Tab 250 MCG (0.25 MG) | 0.36907 | | 0.17780 | |
| Diltiazem HCl Cap ER 12HR 120 MG | | | 3.34272 | |
| Diltiazem HCl Cap ER 12HR 60 MG | | | 2.06132 | |
| Diltiazem HCl Cap ER 12HR 90 MG | | | 0.56930 | |
| Diltiazem HCl Cap ER 24HR 120 MG | | | 0.35690 | |
| Diltiazem HCl Cap ER 24HR 180 MG | | | 0.45530 | |
| Diltiazem HCl Cap ER 24HR 240 MG | | | 0.40190 | |
| Diltiazem HCl Coated Beads Cap ER 24HR 120 MG | | | 0.18078 | |
| Diltiazem HCl Coated Beads Cap ER 24HR 180 MG | | 0.16256 | 0.12444 | 05/01/2020 |
| Diltiazem HCl Coated Beads Cap ER 24HR 240 MG | | | 0.23078 | |
| Diltiazem HCl Coated Beads Cap ER 24HR 300 MG | 0.50516 | | 0.28339 | |
| Diltiazem HCl Coated Beads Cap ER 24HR 360 MG | 4.28867 | | 3.22813 | |
| Diltiazem HCl Coated Beads Tab ER 24HR 180 MG | | | 1.73733 | |
| Diltiazem HCl Coated Beads Tab ER 24HR 240 MG | | | 1.94733 | |
| Diltiazem HCl Coated Beads Tab ER 24HR 300 MG | | | 3.31911 | |
| Diltiazem HCl Coated Beads Tab ER 24HR 360 MG | | | 2.40333 | |
| Diltiazem HCl Coated Beads Tab ER 24HR 420 MG | | | 3.52000 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 120 MG | | | 0.23822 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 180 MG | 0.47531 | | 0.26622 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 240 MG | | | 0.38018 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 300 MG | | | 0.60457 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 360 MG | | | 0.35344 | |
| Diltiazem HCl Extended Release Beads Cap ER 24HR 420 MG | | | 1.16828 | |
| Diltiazem HCl Tab 120 MG | 0.32868 | | 0.26220 | |
| Diltiazem HCl Tab 30 MG | 0.19688 | | 0.06520 | |
| Diltiazem HCl Tab 60 MG | 0.24689 | | 0.13197 | |
| Diltiazem HCl Tab 90 MG | | | 0.23158 | |
| Diphenhydramine HCl Cap 50 MG | | | 0.02188 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Diphenhydramine HCl Elixir 12.5 MG/5ML | | | 0.01108 | |
| Diphenhydramine HCl Inj 50 MG/ML | | | 0.52510 | |
| Diphenoxylate w/ Atropine Tab 2.5-0.025 MG | 0.28967 | | 0.21900 | |
| Dipyridamole Tab 25 MG | | | 0.29450 | |
| Dipyridamole Tab 50 MG | | | 0.20175 | |
| Dipyridamole Tab 75 MG | | | 0.28409 | |
| Disopyramide Phosphate Cap 100 MG | 1.43135 | | 0.32562 | |
| Disopyramide Phosphate Cap 150 MG | 1.51442 | | 0.32562 | |
| Disopyramide Phosphate Cap ER 12HR 150 MG | | | 1.04950 | |
| Disulfiram Tab 250 MG | | | 1.23333 | |
| Disulfiram Tab 500 MG | | | 3.03000 | |
| Divalproex Sodium Cap Delayed Release Sprinkle 125 MG | 0.40139 | | 0.28500 | |
| Divalproex Sodium Tab Delayed Release 125 MG | 0.12389 | | 0.04701 | |
| Divalproex Sodium Tab Delayed Release 250 MG | 0.21661 | | 0.06925 | |
| Divalproex Sodium Tab Delayed Release 500 MG | 0.32165 | | 0.07662 | |
| Divalproex Sodium Tab ER 24 HR 250 MG | 0.34753 | | 0.09345 | |
| Divalproex Sodium Tab ER 24 HR 500 MG | 0.58411 | | 0.32410 | |
| Docusate Sodium Cap 100 MG | | | 0.04688 | |
| Dofetilide Cap 125 MCG (0.125 MG) | 3.21499 | | 2.84800 | |
| Dofetilide Cap 250 MCG (0.25 MG) | 1.97426 | | 1.57150 | |
| Dofetilide Cap 500 MCG (0.5 MG) | 2.23022 | | 2.20000 | |
| Donepezil Hydrochloride Orally Disintegrating Tab 10 MG | | | 0.23100 | |
| Donepezil Hydrochloride Orally Disintegrating Tab 5 MG | | | 0.18000 | |
| Donepezil Hydrochloride Tab 10 MG | 0.10094 | | 0.03508 | |
| Donepezil Hydrochloride Tab 23 MG | 0.96409 | | 0.24733 | |
| Donepezil Hydrochloride Tab 5 MG | 0.07526 | | 0.05115 | |
| Dornase Alfa Inhal Soln 1 MG/ML | | | 44.43000 | |
| Dorzolamide HCl Ophth Soln 2% | 2.70583 | | 0.82800 | |
| Dorzolamide HCl-Timolol Maleate Ophth Sol 22.3-6.8 MG/ML PF | | | 1.93964 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Dorzolamide HCl-Timolol Maleate Opth Soln 22.3-6.8 MG/ML | 2.47957 | | 0.78900 | |
| Doxazosin Mesylate Tab 1 MG | 0.17661 | | 0.05640 | |
| Doxazosin Mesylate Tab 2 MG | 0.17299 | | 0.05640 | |
| Doxazosin Mesylate Tab 4 MG | 0.18799 | | 0.08960 | |
| Doxazosin Mesylate Tab 8 MG | 0.20423 | | 0.10930 | |
| Doxepin HCl Cap 10 MG | 0.30471 | | 0.22778 | |
| Doxepin HCl Cap 100 MG | 0.96520 | | 0.71260 | |
| Doxepin HCl Cap 150 MG | | | 0.64000 | |
| Doxepin HCl Cap 25 MG | 0.35544 | | 0.36877 | |
| Doxepin HCl Cap 50 MG | 0.53097 | | 0.35900 | |
| Doxepin HCl Cap 75 MG | 0.87722 | | 0.81840 | |
| Doxepin HCl Conc 10 MG/ML | | | 0.04509 | |
| Doxercalciferol Cap 0.5 MCG | | | 5.75840 | |
| Doxercalciferol Cap 1 MCG | | | 9.18400 | |
| Doxercalciferol Cap 2.5 MCG | | | 10.71500 | |
| Doxorubicin HCl For Inj 50 MG | | | 39.00000 | |
| Doxorubicin HCl Inj 2 MG/ML | | | 0.64529 | |
| Doxycycline Hyclate Cap 100 MG | 0.19498 | | 0.12876 | |
| Doxycycline Hyclate Cap 50 MG | 0.34295 | | 0.16100 | |
| Doxycycline Hyclate Tab 100 MG | 0.15285 | 0.12565 | 0.09980 | 05/01/2020 |
| Doxycycline Hyclate Tab 150 MG | | | 10.05523 | |
| Doxycycline Hyclate Tab 20 MG | 0.30271 | | 0.20950 | |
| Doxycycline Hyclate Tab 75 MG | | | 14.21567 | |
| Doxycycline Hyclate Tab Delayed Release 100 MG | | | 5.37004 | |
| Doxycycline Hyclate Tab Delayed Release 150 MG | | | 5.65250 | |
| Doxycycline Monohydrate Cap 100 MG | | | 0.19430 | |
| Doxycycline Monohydrate Cap 50 MG | | | 0.14000 | |
| Doxycycline Monohydrate For Susp 25 MG/5ML | | | 0.27133 | |
| Doxycycline Monohydrate Tab 100 MG | 0.49749 | | 0.22315 | |
| Doxycycline Monohydrate Tab 50 MG | 0.42252 | | 0.32590 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Dronabinol Cap 10 MG | 4.65633 | | 5.74309 | |
| Dronabinol Cap 2.5 MG | 1.36064 | | 1.49667 | |
| Dronabinol Cap 5 MG | 2.54620 | | 2.50000 | |
| Droperidol Inj 2.5 MG/ML | | | 0.75400 | |
| Drospirenone-Ethinyl Estrad-Levomefolate Tab 3-0.02-0.451 MG | | | 2.97274 | |
| Drospirenone-Ethinyl Estradiol Tab 3-0.02 MG | 1.07523 | | 0.63095 | |
| Drospirenone-Ethinyl Estradiol Tab 3-0.03 MG | 0.42140 | | 0.31849 | |
| Duloxetine HCl Enteric Coated Pellets Cap 20 MG (Base Eq) | 0.17013 | | 0.16839 | |
| Duloxetine HCl Enteric Coated Pellets Cap 30 MG (Base Eq) | 0.17482 | | 0.10633 | |
| Duloxetine HCl Enteric Coated Pellets Cap 40 MG (Base Eq) | | | 2.62425 | |
| Duloxetine HCl Enteric Coated Pellets Cap 60 MG (Base Eq) | 0.21620 | | 0.11663 | |
| Dutasteride Cap 0.5 MG | 0.32448 | | 0.13530 | |
| Dutasteride-Tamsulosin HCl Cap 0.5-0.4 MG | 2.58756 | | 2.18000 | |
| Econazole Nitrate Cream 1% | | | 0.31333 | |
| Efavirenz Tab 600 MG | 11.89167 | | 12.12014 | |
| Eletriptan Hydrobromide Tab 20 MG (Base Equivalent) | 8.08262 | | 5.95025 | |
| Eletriptan Hydrobromide Tab 40 MG (Base Equivalent) | 6.57313 | | 3.67667 | |
| Elvitegrav-Cobic-Emtricitab-Tenofovir AF Tab 150-150-200-10 MG | | | 100.11790 | |
| Emicizumab-kxwh Subcutaneous Soln 105 MG/0.7ML (150 MG/ML) | | | 11160.20000 | |
| Emicizumab-kxwh Subcutaneous Soln 150 MG/ML | | | 11160.20000 | |
| Emicizumab-kxwh Subcutaneous Soln 30 MG/ML | | | 2232.05000 | |
| Emicizumab-kxwh Subcutaneous Soln 60 MG/0.4ML (150 MG/ML) | | | 11160.20000 | |
| Emtricitabine Caps 200 MG | | | 17.81246 | |
| Emtricitabine-Rilpivirine-Tenofovir DF Tab 200-25-300 MG | | | 93.36272 | |
| Emtricitabine-Tenofovir Disoproxil Fumarate Tab 200-300 MG | | | 58.36228 | |
| Enalapril Maleate & Hydrochlorothiazide Tab 10-25 MG | | | 0.07566 | |
| Enalapril Maleate & Hydrochlorothiazide Tab 5-12.5 MG | | | 0.07613 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|----------|----------------|--------------------|----------------|
| Enalapril Maleate Tab 10 MG | 0.21593 | | 0.07090 | |
| Enalapril Maleate Tab 2.5 MG | 0.17163 | | 0.10962 | |
| Enalapril Maleate Tab 20 MG | 0.29045 | | 0.07320 | |
| Enalapril Maleate Tab 5 MG | 0.20292 | | 0.07035 | |
| Enalaprilat IV Inj 1.25 MG/ML | | | 1.87850 | |
| Enoxaparin Sodium Inj 100 MG/ML | | | 7.75700 | |
| Enoxaparin Sodium Inj 120 MG/0.8ML | | | 14.01000 | |
| Enoxaparin Sodium Inj 150 MG/ML | | | 11.45550 | |
| Enoxaparin Sodium Inj 30 MG/0.3ML | | | 9.31000 | |
| Enoxaparin Sodium Inj 300 MG/3ML | 27.85774 | | 21.52000 | |
| Enoxaparin Sodium Inj 40 MG/0.4ML | | | 9.89679 | |
| Enoxaparin Sodium Inj 60 MG/0.6ML | | | 8.08667 | |
| Enoxaparin Sodium Inj 80 MG/0.8ML | | | 7.60938 | |
| Entacapone Tab 200 MG | 0.68028 | | 0.33480 | |
| Entecavir Tab 0.5 MG | 3.75661 | | 0.69967 | |
| Entecavir Tab 1 MG | 3.98628 | | 1.61346 | |
| Epinastine HCl Ophth Soln 0.05% | 5.67189 | | 5.43300 | |
| Epinephrine HCl Inj 1 MG/ML | | | 1.99933 | |
| Epinephrine HCl Soln Prefilled Syringe 0.1 MG/ML | | | 0.34000 | |
| Epinephrine Solution Auto-injector 0.15 MG/0.3ML (1:2000) | | | 142.91000 | |
| Epinephrine Solution Auto-injector 0.3 MG/0.3ML (1:1000) | | | 139.99000 | |
| Epirubicin HCl For IV Inj 50 MG | | | 75.33500 | |
| Epirubicin HCl IV Soln 200 MG/100ML (2 MG/ML) | | | 2.14682 | |
| Epirubicin HCl IV Soln 50 MG/25ML (2 MG/ML) | | | 2.53188 | |
| Eplerenone Tab 25 MG | 0.82138 | | 0.36544 | |
| Eplerenone Tab 50 MG | 1.00530 | | 1.37389 | |
| Epoprostenol Sodium For Inj 1.5 MG | | | 36.32200 | |
| Ergocalciferol Cap 1.25 MG (50000 Unit) | 0.19149 | | 0.09770 | |
| Ergotamine w/ Caffeine Suppos 2-100 MG | | | 5.57917 | |
| Ergotamine w/ Caffeine Tab 1-100 MG | | | 0.87490 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Erlotinib HCl Tab 100 MG (Base Equivalent) | | | 248.07106 | |
| Erlotinib HCl Tab 150 MG (Base Equivalent) | | | 12.93400 | |
| Ertapenem Sodium For Inj 1 GM (Base Equivalent) | | | 80.55000 | |
| Erythromycin Ethylsuccinate For Susp 200 MG/5ML | 4.10660 | | 2.59450 | |
| Erythromycin Ethylsuccinate Tab 400 MG | | | 9.14690 | |
| Erythromycin Gel 2% | | | 1.70867 | |
| Erythromycin Ophth Oint 5 MG/GM | 4.52283 | | 1.63247 | |
| Erythromycin Pads 2% | | | 0.90540 | |
| Erythromycin Soln 2% | 0.50494 | | 0.32978 | |
| Erythromycin Tab 250 MG | 10.55813 | | 6.78000 | |
| Erythromycin Tab 500 MG | | | 14.03767 | |
| Erythromycin Tab Delayed Release 250 MG | | | 6.31170 | |
| Erythromycin w/ Delayed Release Particles Cap 250 MG | | | 4.37424 | |
| Erythromycin-Sulfisoxazole For Susp 200-600 MG/5ML | | | 0.25716 | |
| Escitalopram Oxalate Soln 5 MG/5ML (Base Equiv) | 0.34141 | | 0.31615 | |
| Escitalopram Oxalate Tab 10 MG (Base Equiv) | 0.10014 | | 0.04514 | |
| Escitalopram Oxalate Tab 20 MG (Base Equiv) | 0.17000 | | 0.03570 | |
| Escitalopram Oxalate Tab 5 MG (Base Equiv) | 0.12849 | | 0.03320 | |
| Esomeprazole Magnesium Cap Delayed Release 20 MG (Base Eq) | | | 0.19700 | |
| Esomeprazole Magnesium Cap Delayed Release 40 MG (Base Eq) | 1.83352 | 0.22614 | 0.15306 | 05/01/2020 |
| Estazolam Tab 1 MG | | | 0.51402 | |
| Estazolam Tab 2 MG | | | 0.31754 | |
| Estradiol & Norethindrone Acetate Tab 0.5-0.1 MG | 2.49034 | | 2.05607 | |
| Estradiol & Norethindrone Acetate Tab 1-0.5 MG | 2.17201 | | 2.21741 | |
| Estradiol Tab 0.5 MG | 0.09882 | | 0.06180 | |
| Estradiol Tab 1 MG | 0.11292 | | 0.10150 | |
| Estradiol Tab 2 MG | 0.14346 | | 0.10090 | |
| Estradiol TD Patch Twice Weekly 0.025 MG/24HR | 8.69353 | | 7.54528 | |
| Estradiol TD Patch Twice Weekly 0.0375 MG/24HR | 8.53506 | | 6.68000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|----------|----------------|--------------------|----------------|
| Estradiol TD Patch Twice Weekly 0.05 MG/24HR | 9.40833 | | 6.69750 | |
| Estradiol TD Patch Twice Weekly 0.075 MG/24HR | | | 7.52125 | |
| Estradiol TD Patch Twice Weekly 0.1 MG/24HR | 8.69943 | | 5.94125 | |
| Estradiol TD Patch Weekly 0.025 MG/24HR | | | 10.76000 | |
| Estradiol TD Patch Weekly 0.0375 MG/24HR (37.5 MCG/24HR) | | | 11.07000 | |
| Estradiol TD Patch Weekly 0.05 MG/24HR | | | 11.23750 | |
| Estradiol TD Patch Weekly 0.06 MG/24HR | 14.45871 | | 12.63300 | |
| Estradiol TD Patch Weekly 0.075 MG/24HR | 17.24519 | | 12.59000 | |
| Estradiol TD Patch Weekly 0.1 MG/24HR | | | 12.84435 | |
| Estradiol Vaginal Cream 0.1 MG/GM | 2.70476 | | 2.01930 | |
| Estradiol Vaginal Tab 10 MCG | | | 9.09875 | |
| Estropipate Tab 0.75 MG | | | 0.14670 | |
| Estropipate Tab 1.5 MG | | | 0.45257 | |
| Estropipate Tab 3 MG | | | 1.24110 | |
| Eszopiclone Tab 1 MG | 0.34791 | | 0.25131 | |
| Eszopiclone Tab 2 MG | 0.25444 | | 0.14584 | |
| Eszopiclone Tab 3 MG | 0.49364 | | 0.19837 | |
| Eteplirsen IV Soln 100 MG/2ML (50 MG/ML) | | | 796.80000 | |
| Eteplirsen IV Soln 500 MG/10ML (50 MG/ML) | | | 796.80000 | |
| Ethacrynic Acid Tab 25 MG | | | 5.82264 | |
| Ethambutol HCl Tab 400 MG | 0.56615 | | 0.65771 | |
| Ethosuximide Cap 250 MG | 0.75054 | | 0.45000 | |
| Ethosuximide Soln 250 MG/5ML | 0.21952 | | 0.20060 | |
| Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG | 0.39219 | | 0.42041 | |
| Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-50 MCG | | | 0.58781 | |
| Etodolac Cap 200 MG | | | 0.67124 | |
| Etodolac Cap 300 MG | 0.77347 | | 0.68140 | |
| Etodolac Tab 400 MG | 0.45587 | | 0.34640 | |
| Etodolac Tab 500 MG | 0.58566 | | 0.26330 | |
| Etodolac Tab ER 24HR 400 MG | 1.62139 | | 0.75000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Etodolac Tab ER 24HR 500 MG | | | 0.16333 | |
| Etodolac Tab ER 24HR 600 MG | | | 1.50241 | |
| Etonogestrel-Ethinyl Estradiol VA Ring 0.120-0.015 MG/24HR | | | 111.25333 | 05/01/2020 |
| Etoposide Inj 1 GM/50ML (20 MG/ML) | | | 1.93000 | |
| Etoposide Inj 100 MG/5ML (20 MG/ML) | | | 1.93000 | |
| Etoposide Inj 500 MG/25ML (20 MG/ML) | | | 1.93000 | |
| Everolimus Tab 2.5 MG | | | 534.14840 | |
| Everolimus Tab 5 MG | | | 517.35228 | |
| Everolimus Tab 7.5 MG | | | 558.71011 | |
| Exemestane Tab 25 MG | 2.24097 | | 1.29833 | |
| Ezetimibe Tab 10 MG | 0.27743 | | 0.05500 | |
| Ezetimibe-Simvastatin Tab 10-10 MG | 3.43564 | | 1.63098 | |
| Ezetimibe-Simvastatin Tab 10-20 MG | 1.68169 | | 0.48000 | |
| Ezetimibe-Simvastatin Tab 10-40 MG | 1.86372 | | 0.77689 | |
| Ezetimibe-Simvastatin Tab 10-80 MG | 1.43028 | | 2.08891 | |
| Factor IX Complex For Inj 1000 Unit | | | 0.58220 | |
| Factor IX Complex For Inj 1500 Unit | | | 0.58220 | |
| Factor IX Complex For Inj 500 Unit | | | 0.58220 | |
| Famciclovir Tab 125 MG | 0.57122 | | 0.25255 | |
| Famciclovir Tab 250 MG | 0.67497 | | 0.39178 | |
| Famciclovir Tab 500 MG | 1.02462 | | 0.49467 | |
| Famotidine For Susp 40 MG/5ML | | | 2.79980 | |
| Famotidine Inj 20 MG/2ML | | | 0.38350 | |
| Famotidine Inj 200 MG/20ML | | | 0.29900 | |
| Famotidine Inj 40 MG/4ML | | | 0.29900 | |
| Famotidine Inj 500 MG/50ML | | | 0.29900 | |
| Famotidine Tab 20 MG | | | 0.03196 | |
| Famotidine Tab 40 MG | 0.09515 | | 0.05563 | |
| Fat Emulsion Plant Based IV Emulsion 20% | | | 0.03500 | |
| Fe Fumarate w/ B12-Vit C-FA-IFC Cap 110-0.015-75-0.5-240 MG | | | 0.22100 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|----------|----------------|--------------------|----------------|
| Febuxostat Tab 40 MG | 3.99149 | | 4.80000 | |
| Febuxostat Tab 80 MG | 3.67998 | 5.38333 | 2.53000 | 05/01/2020 |
| Felbamate Susp 600 MG/5ML | | | 1.68937 | |
| Felbamate Tab 400 MG | 2.93439 | | 0.86430 | |
| Felbamate Tab 600 MG | 4.00338 | | 1.41430 | |
| Felodipine Tab ER 24HR 10 MG | 0.24202 | | 0.09000 | |
| Felodipine Tab ER 24HR 2.5 MG | 0.23152 | | 0.13429 | |
| Felodipine Tab ER 24HR 5 MG | 0.19345 | | 0.07260 | |
| Fenofibrate Micronized Cap 130 MG | | | 1.96369 | |
| Fenofibrate Micronized Cap 134 MG | 0.44720 | 0.19433 | 0.14630 | 05/01/2020 |
| Fenofibrate Micronized Cap 200 MG | 0.57473 | | 0.66302 | |
| Fenofibrate Micronized Cap 43 MG | | | 0.68921 | |
| Fenofibrate Micronized Cap 67 MG | 0.35642 | | 0.11000 | |
| Fenofibrate Tab 120 MG | | | 16.73827 | |
| Fenofibrate Tab 145 MG | 0.20279 | | 0.16870 | |
| Fenofibrate Tab 160 MG | 0.30202 | 0.20732 | 0.19589 | 05/01/2020 |
| Fenofibrate Tab 48 MG | 0.19009 | | 0.10550 | |
| Fenofibrate Tab 54 MG | 0.22760 | | 0.16656 | |
| Fentanyl Citrate IV Soln Prefilled Syringe 100 MCG/2ML | | | 0.16050 | |
| Fentanyl Citrate Lozenge on a Handle 200 MCG | | | 7.47933 | |
| Fentanyl Citrate Lozenge on a Handle 800 MCG | | | 16.23657 | |
| Fentanyl Citrate PF Soln Cartridge 100 MCG/2ML | | | 0.16050 | |
| Fentanyl Citrate Preservative Free (PF) Inj 100 MCG/2ML | | | 0.16050 | |
| Fentanyl Citrate Preservative Free (PF) Inj 1000 MCG/20ML | | | 0.16050 | |
| Fentanyl Citrate Preservative Free (PF) Inj 250 MCG/5ML | | | 0.16050 | |
| Fentanyl Citrate Preservative Free (PF) Inj 2500 MCG/50ML | | | 0.16050 | |
| Fentanyl Citrate Preservative Free (PF) Inj 500 MCG/10ML | | | 0.16050 | |
| Fentanyl TD Patch 72HR 100 MCG/HR | 16.38994 | | 6.41480 | |
| Fentanyl TD Patch 72HR 12 MCG/HR | 7.45630 | | 6.75667 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Fentanyl TD Patch 72HR 25 MCG/HR | 3.03923 | | 2.07800 | |
| Fentanyl TD Patch 72HR 37.5 MCG/HR | | | 42.03000 | |
| Fentanyl TD Patch 72HR 50 MCG/HR | 5.09839 | | 3.05057 | |
| Fentanyl TD Patch 72HR 62.5 MCG/HR | | | 70.94000 | |
| Fentanyl TD Patch 72HR 75 MCG/HR | 9.83088 | | 4.63650 | |
| Ferrous Sulfate Dried Tab 200 MG (65 MG Elemental Fe) | | | 0.03200 | |
| Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe) | | | 0.03200 | |
| Ferrous Sulfate Tab EC 325 MG (65 MG Fe Equivalent) | | | 0.12770 | |
| Fexofenadine HCl Tab 180 MG | 0.29526 | | 0.54805 | |
| Fexofenadine HCl Tab 60 MG | | | 0.40750 | |
| Filgrastim Inj 300 MCG/ML | | | 313.57068 | |
| Filgrastim Soln Prefilled Syringe 300 MCG/0.5ML | | | 664.74036 | |
| Filgrastim Soln Prefilled Syringe 480 MCG/0.8ML (600 MCG/ML) | | | 636.01204 | |
| Finasteride Tab 1 MG | 0.16263 | | 0.12194 | |
| Finasteride Tab 5 MG | 0.09322 | | 0.05049 | |
| Flavoxate HCl Tab 100 MG | | | 0.48641 | |
| Flecainide Acetate Tab 100 MG | 0.30404 | | 0.18457 | |
| Flecainide Acetate Tab 150 MG | 0.65612 | | 0.19130 | |
| Flecainide Acetate Tab 50 MG | 0.23392 | | 0.13700 | |
| Fluconazole For Susp 10 MG/ML | | | 0.22571 | |
| Fluconazole For Susp 40 MG/ML | 0.69137 | | 0.47400 | |
| Fluconazole in Dextrose Inj 400 MG/200ML | | | 0.15600 | |
| Fluconazole in NaCl 0.9% Inj 200 MG/100ML | | 0.19500 | 0.03849 | 05/01/2020 |
| Fluconazole in NaCl 0.9% Inj 400 MG/200ML | | | 0.04758 | |
| Fluconazole Tab 100 MG | 0.43138 | | 0.46613 | |
| Fluconazole Tab 150 MG | 1.19885 | | 0.72107 | |
| Fluconazole Tab 200 MG | 0.81891 | | 0.51633 | |
| Fluconazole Tab 50 MG | 0.58011 | | 0.66800 | |
| Fludarabine Phosphate For Inj 50 MG | | | 94.50000 | |
| Fludarabine Phosphate Inj 25 MG/ML | | | 54.37500 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------|---------|----------------|--------------------|----------------|
| Fludrocortisone Acetate Tab 0.1 MG | 0.54515 | | 0.30660 | |
| Fluocinolone Acetonide (Otic) Oil 0.01% | 2.48541 | | 2.62950 | |
| Fluocinolone Acetonide Cream 0.01% | | | 1.44233 | |
| Fluocinolone Acetonide Cream 0.025% | | | 1.29967 | |
| Fluocinolone Acetonide Oil 0.01% (Body Oil) | 0.51410 | | 0.37286 | |
| Fluocinolone Acetonide Oil 0.01% (Scalp Oil) | 0.45763 | | 0.32964 | |
| Fluocinolone Acetonide Oint 0.025% | | | 1.37158 | |
| Fluocinolone Acetonide Soln 0.01% | 0.83889 | | 0.89144 | |
| Fluocinonide Cream 0.05% | | | 0.53592 | |
| Fluocinonide Cream 0.1% | | | 0.81117 | |
| Fluocinonide Emulsified Base Cream 0.05% | | | 0.95713 | |
| Fluocinonide Gel 0.05% | | | 1.04867 | |
| Fluocinonide Oint 0.05% | | | 0.59367 | |
| Fluocinonide Soln 0.05% | | | 0.74317 | |
| Fluorometholone Ophth Susp 0.1% | | | 12.50254 | |
| Fluorouracil Cream 5% | 1.99220 | | 1.83908 | |
| Fluorouracil IV Soln 1 GM/20ML (50 MG/ML) | | | 0.28000 | |
| Fluorouracil IV Soln 500 MG/10ML (50 MG/ML) | | | 0.35500 | |
| Fluoxetine HCl (PMDD) Cap 10 MG | | | 0.03692 | |
| Fluoxetine HCl (PMDD) Cap 20 MG | | | 0.03142 | |
| Fluoxetine HCl (PMDD) Tab 10 MG | 0.37144 | | 0.54087 | |
| Fluoxetine HCl (PMDD) Tab 20 MG | 0.46968 | | 0.55872 | |
| Fluoxetine HCl Cap 10 MG | 0.17480 | | 0.02584 | |
| Fluoxetine HCl Cap 20 MG | 0.32773 | | 0.02099 | |
| Fluoxetine HCl Cap 40 MG | 0.25816 | | 0.06814 | |
| Fluoxetine HCl Cap Delayed Release 90 MG | | | 25.64000 | |
| Fluoxetine HCl Solution 20 MG/5ML | 0.49922 | | 0.41658 | |
| Fluoxetine HCl Tab 10 MG | 0.37144 | | 0.16925 | |
| Fluoxetine HCl Tab 20 MG | 0.46968 | | 0.55872 | |
| Fluoxetine HCl Tab 60 MG | 3.40800 | | 3.47433 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Fluphenazine Decanoate Inj 25 MG/ML | | | 13.83000 | |
| Fluphenazine HCl Oral Conc 5 MG/ML | | | 1.00155 | |
| Fluphenazine HCl Tab 1 MG | | | 1.98230 | |
| Fluphenazine HCl Tab 10 MG | | | 7.76420 | |
| Fluphenazine HCl Tab 2.5 MG | | | 3.75800 | |
| Fluphenazine HCl Tab 5 MG | | | 6.89950 | |
| Flurandrenolide Lotion 0.05% | | | 1.46608 | |
| Flurazepam HCl Cap 15 MG | | | 0.06130 | |
| Flurazepam HCl Cap 30 MG | | | 0.07810 | |
| Flurbiprofen Sodium Opth Soln 0.03% | | | 1.86816 | |
| Flurbiprofen Tab 100 MG | | | 0.29920 | |
| Flurbiprofen Tab 50 MG | | | 0.19500 | |
| Flutamide Cap 125 MG | | | 0.43997 | |
| Fluticasone Propionate Cream 0.05% | | | 0.30350 | |
| Fluticasone Propionate HFA Inhal Aer 110 MCG/ACT (125/Valve) | | | 20.06388 | |
| Fluticasone Propionate HFA Inhal Aer 220 MCG/ACT (250/Valve) | | | 31.18223 | |
| Fluticasone Propionate HFA Inhal Aero 44 MCG/ACT (50/Valve) | | | 16.94974 | |
| Fluticasone Propionate Nasal Susp 50 MCG/ACT | 0.33411 | | 0.24261 | |
| Fluticasone Propionate Oint 0.005% | | | 0.34483 | |
| Fluticasone-Salmeterol Aer Powder BA 100-50 MCG/DOSE | | | 2.06733 | |
| Fluticasone-Salmeterol Aer Powder BA 250-50 MCG/DOSE | | | 2.19011 | |
| Fluticasone-Salmeterol Aer Powder BA 500-50 MCG/DOSE | | | 3.18700 | |
| Fluvastatin Sodium Cap 20 MG (Base Equivalent) | | | 2.73167 | |
| Fluvastatin Sodium Cap 40 MG (Base Equivalent) | | | 3.23686 | |
| Fluvastatin Sodium Tab ER 24 HR 80 MG (Base Equivalent) | | | 4.52167 | |
| Fluvoxamine Maleate Cap ER 24HR 100 MG | | | 4.08433 | |
| Fluvoxamine Maleate Cap ER 24HR 150 MG | | | 6.91425 | |
| Fluvoxamine Maleate Tab 100 MG | | | 0.16238 | |
| Fluvoxamine Maleate Tab 25 MG | | | 0.15390 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------|----------|----------------|--------------------|----------------|
| Fluvoxamine Maleate Tab 50 MG | | | 0.23950 | |
| Folic Acid Tab 1 MG | 0.02465 | | 0.02000 | |
| Folic Acid-Pyridoxine-Cyanocobalamin Tab 2.5-25-2 MG | | | 0.26489 | |
| Folic Acid-Vitamin B6-Vitamin B12 Tab 2.5-25-1 MG | | | 0.47039 | |
| Fondaparinux Sodium Subcutaneous Inj 10 MG/0.8ML | | | 72.62500 | |
| Fondaparinux Sodium Subcutaneous Inj 2.5 MG/0.5ML | | | 25.48000 | |
| Fondaparinux Sodium Subcutaneous Inj 5 MG/0.4ML | | | 145.25000 | |
| Fondaparinux Sodium Subcutaneous Inj 7.5 MG/0.6ML | | | 64.06952 | |
| Fosamprenavir Calcium Tab 700 MG (Base Equiv) | | | 15.85083 | |
| Fosinopril Sodium & Hydrochlorothiazide Tab 10-12.5 MG | | | 0.95700 | |
| Fosinopril Sodium & Hydrochlorothiazide Tab 20-12.5 MG | | | 0.88800 | |
| Fosinopril Sodium Tab 10 MG | 0.20538 | | 0.10244 | |
| Fosinopril Sodium Tab 20 MG | 0.21412 | | 0.09833 | |
| Fosinopril Sodium Tab 40 MG | 0.28524 | | 0.14937 | |
| Fosphenytoin Sodium Inj 100 MG/2ML (Phenytoin Equiv) | | | 0.88400 | |
| Frovatriptan Succinate Tab 2.5 MG (Base Equivalent) | 26.20000 | | 25.76889 | |
| Furosemide Inj 10 MG/ML | | | 0.36590 | |
| Furosemide Oral Soln 10 MG/ML | | | 0.08325 | |
| Furosemide Tab 20 MG | 0.02388 | | 0.02578 | |
| Furosemide Tab 40 MG | 0.02852 | | 0.01631 | |
| Furosemide Tab 80 MG | 0.06408 | | 0.03412 | |
| Gabapentin Cap 100 MG | 0.03516 | | 0.02447 | |
| Gabapentin Cap 300 MG | 0.06920 | | 0.05000 | |
| Gabapentin Cap 400 MG | 0.08874 | 0.06120 | 0.04698 | 05/01/2020 |
| Gabapentin Oral Soln 250 MG/5ML | | | 0.08942 | |
| Gabapentin Tab 600 MG | 0.13801 | 0.08660 | 0.06198 | 05/01/2020 |
| Gabapentin Tab 800 MG | 0.19832 | | 0.09330 | |
| Galantamine Hydrobromide Cap ER 24HR 16 MG | 1.49504 | | 1.18400 | |
| Galantamine Hydrobromide Cap ER 24HR 24 MG | 1.88843 | | 1.31500 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------|----------|----------------|--------------------|----------------|
| Galantamine Hydrobromide Cap ER 24HR 8 MG | 1.64024 | | 1.40000 | |
| Galantamine Hydrobromide Tab 12 MG | 0.50063 | | 0.49000 | |
| Galantamine Hydrobromide Tab 4 MG | 0.74965 | | 0.56661 | |
| Galantamine Hydrobromide Tab 8 MG | 0.68110 | | 0.46428 | |
| Galsulfase Soln For IV Infusion 1 MG/ML | | | 382.23400 | |
| Gatifloxacin Ophth Soln 0.5% | 17.04941 | | 19.39950 | |
| Gemfibrozil Tab 600 MG | 0.12760 | | 0.06474 | |
| Gentamicin Sulfate Cream 0.1% | | | 1.84000 | |
| Gentamicin Sulfate Inj 40 MG/ML | | | 0.42084 | |
| Gentamicin Sulfate Oint 0.1% | | | 1.99667 | |
| Gentamicin Sulfate Ophth Oint 0.3% | | | 2.95143 | |
| Gentamicin Sulfate Ophth Soln 0.3% | 0.90214 | | 0.68286 | |
| Glatiramer Acetate Soln Prefilled Syringe 20 MG/ML | | | 61.09900 | |
| Glatiramer Acetate Soln Prefilled Syringe 40 MG/ML | | | 162.50000 | |
| Glimepiride Tab 1 MG | 0.05045 | | 0.02340 | |
| Glimepiride Tab 2 MG | 0.06599 | | 0.03695 | |
| Glimepiride Tab 4 MG | 0.07706 | | 0.04760 | |
| Glipizide Tab 10 MG | 0.04417 | | 0.03160 | |
| Glipizide Tab 5 MG | 0.03221 | | 0.02070 | |
| Glipizide Tab ER 24HR 10 MG | 0.22046 | | 0.14525 | |
| Glipizide Tab ER 24HR 2.5 MG | 0.15622 | | 0.10696 | |
| Glipizide Tab ER 24HR 5 MG | 0.12452 | | 0.07990 | |
| Glipizide-Metformin HCl Tab 2.5-250 MG | | | 0.31596 | |
| Glipizide-Metformin HCl Tab 2.5-500 MG | 0.24121 | | 0.27505 | |
| Glipizide-Metformin HCl Tab 5-500 MG | 0.20075 | | 0.21777 | |
| Glucose Blood Test Strip | | | 1.20877 | |
| Glyburide Micronized Tab 1.5 MG | | | 0.02580 | |
| Glyburide Micronized Tab 3 MG | | | 0.03081 | |
| Glyburide Micronized Tab 6 MG | 0.40975 | | 0.05788 | |
| Glyburide Tab 1.25 MG | | | 0.06810 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------|---------|----------------|--------------------|----------------|
| Glyburide Tab 2.5 MG | | | 0.03220 | |
| Glyburide Tab 5 MG | 0.09028 | | 0.03451 | |
| Glyburide-Metformin Tab 1.25-250 MG | | | 0.03860 | |
| Glyburide-Metformin Tab 2.5-500 MG | 0.05533 | | 0.04746 | |
| Glyburide-Metformin Tab 5-500 MG | 0.05269 | | 0.03338 | |
| Glycerol Phenylbutyrate Liquid 1.1 GM/ML | | | 191.45632 | |
| Glycine Diluent for Injection | | | 0.21840 | |
| Glycopyrrolate Inj 0.2 MG/ML | | | 11.45400 | |
| Glycopyrrolate Inj 0.4 MG/2ML (0.2 MG/ML) | | | 11.45400 | |
| Glycopyrrolate Inj 1 MG/5ML (0.2 MG/ML) | | | 5.40643 | |
| Glycopyrrolate Inj 4 MG/20ML (0.2 MG/ML) | | | 11.45400 | |
| Glycopyrrolate Tab 1 MG | 0.18673 | | 0.06670 | |
| Glycopyrrolate Tab 2 MG | 0.43345 | | 0.25220 | |
| Goserelin Acetate Implant 10.8 MG | | | 1898.12700 | |
| Goserelin Acetate Implant 3.6 MG | | | 632.70900 | |
| Granisetron HCl Inj 1 MG/ML | | | 18.52500 | |
| Granisetron HCl Tab 1 MG | | | 1.88283 | |
| Griseofulvin Microsize Susp 125 MG/5ML | | | 0.13333 | |
| Griseofulvin Microsize Tab 500 MG | | | 5.76313 | |
| Griseofulvin Ultramicrosize Tab 125 MG | | | 2.57431 | |
| Griseofulvin Ultramicrosize Tab 250 MG | | | 3.04733 | |
| Guaifenesin Liquid 100 MG/5ML | | | 0.00657 | |
| Guaifenesin Tab 200 MG | | | 0.03900 | |
| Guaifenesin-Codeine Soln 100-10 MG/5ML | | | 0.01088 | |
| Guanfacine HCl Tab 1 MG | | | 0.42198 | |
| Guanfacine HCl Tab 2 MG | | | 0.52185 | |
| Guanfacine HCl Tab ER 24HR 1 MG (Base Equiv) | 0.30887 | | 0.29290 | |
| Guanfacine HCl Tab ER 24HR 2 MG (Base Equiv) | 0.39496 | | 0.24000 | |
| Guanfacine HCl Tab ER 24HR 3 MG (Base Equiv) | 0.42691 | | 0.39568 | |
| Guanfacine HCl Tab ER 24HR 4 MG (Base Equiv) | 0.54131 | | 0.36047 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|---------|----------------|--------------------|----------------|
| Halobetasol Propionate Cream 0.05% | | | 0.92200 | |
| Halobetasol Propionate Oint 0.05% | | | 1.65860 | |
| Haloperidol Decanoate IM Soln 100 MG/ML | | | 29.40000 | |
| Haloperidol Decanoate IM Soln 50 MG/ML | | | 19.71200 | |
| Haloperidol Lactate Inj 5 MG/ML | | | 0.63747 | |
| Haloperidol Lactate Oral Conc 2 MG/ML | | | 0.03924 | |
| Haloperidol Tab 0.5 MG | | | 0.19360 | |
| Haloperidol Tab 1 MG | | | 0.31640 | |
| Haloperidol Tab 10 MG | 0.69497 | | 0.60375 | |
| Haloperidol Tab 2 MG | | | 0.50560 | |
| Haloperidol Tab 20 MG | 1.58971 | | 0.96000 | |
| Haloperidol Tab 5 MG | 0.53975 | | 0.44668 | |
| Heparin Sodium (Porcine) Inj 1000 Unit/ML | | | 0.17836 | |
| Heparin Sodium (Porcine) Inj 10000 Unit/ML | | | 1.99248 | |
| Heparin Sodium (Porcine) Inj 20000 Unit/ML | | | 6.94193 | |
| Heparin Sodium (Porcine) Inj 5000 Unit/ML | | | 0.84168 | |
| Heparin Sodium (Porcine) Lock Flush IV Soln 10 Unit/ML | | | 0.20000 | |
| Heparin Sodium (Porcine) Lock Flush IV Soln 100 Unit/ML | | | 0.44907 | |
| Histrelin Acetate Implant Kit 50 MG | | | 4211.40672 | |
| Hydralazine HCl Tab 10 MG | 0.03775 | | 0.03805 | |
| Hydralazine HCl Tab 100 MG | 0.09873 | | 0.07458 | |
| Hydralazine HCl Tab 25 MG | 0.04133 | | 0.03020 | |
| Hydralazine HCl Tab 50 MG | 0.05366 | | 0.03105 | |
| Hydrochlorothiazide Cap 12.5 MG | 0.03518 | | 0.02738 | |
| Hydrochlorothiazide Tab 12.5 MG | 0.06846 | | 0.05210 | |
| Hydrochlorothiazide Tab 25 MG | 0.00924 | | 0.01164 | |
| Hydrochlorothiazide Tab 50 MG | 0.02186 | | 0.01804 | |
| Hydrocod Polst-Chlorphen Polst ER Susp 10-8 MG/5ML | | | 0.37829 | |
| Hydrocodone w/ Homatropine Syrup 5-1.5 MG/5ML | 0.06602 | | 0.06417 | |
| Hydrocodone w/ Homatropine Tab 5-1.5 MG | | | 0.67035 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Hydrocodone-Acetaminophen Soln 7.5-325 MG/15ML | | | 0.07820 | |
| Hydrocodone-Acetaminophen Soln 7.5-500 MG/15ML | | | 0.03010 | |
| Hydrocodone-Acetaminophen Tab 10-300 MG | 1.86404 | | 0.48977 | |
| Hydrocodone-Acetaminophen Tab 10-325 MG | 0.13999 | | 0.10755 | |
| Hydrocodone-Acetaminophen Tab 5-300 MG | 0.93935 | | 0.32163 | |
| Hydrocodone-Acetaminophen Tab 5-325 MG | 0.10583 | | 0.07820 | |
| Hydrocodone-Acetaminophen Tab 7.5-300 MG | 0.66036 | | 0.47991 | |
| Hydrocodone-Acetaminophen Tab 7.5-325 MG | 0.13604 | | 0.07087 | |
| Hydrocodone-Ibuprofen Tab 10-200 MG | | | 2.25479 | |
| Hydrocodone-Ibuprofen Tab 7.5-200 MG | 0.27580 | | 0.21120 | |
| Hydrocortisone Acetate Suppos 25 MG | | | 2.03875 | |
| Hydrocortisone Acetate w/ Pramoxine Perianal Cream 1-1% | | | 3.08300 | |
| Hydrocortisone Acetate w/ Pramoxine Perianal Cream 2.5-1% | | | 4.53433 | |
| Hydrocortisone Butyrate Cream 0.1% | | | 2.56852 | |
| Hydrocortisone Butyrate Oint 0.1% | | | 0.54640 | |
| Hydrocortisone Butyrate Soln 0.1% | | | 1.11000 | |
| Hydrocortisone Cream 1% | | | 0.12139 | |
| Hydrocortisone Cream 2.5% | | | 0.08969 | |
| Hydrocortisone Enema 100 MG/60ML | | | 0.08828 | |
| Hydrocortisone Lotion 1% | | | 0.06599 | |
| Hydrocortisone Lotion 2.5% | | | 0.11831 | |
| Hydrocortisone Oint 1% | | | 0.04667 | |
| Hydrocortisone Oint 2.5% | | | 0.10029 | |
| Hydrocortisone Perianal Cream 1% | | | 0.66448 | |
| Hydrocortisone Perianal Cream 2.5% | 0.48734 | | 0.35167 | |
| Hydrocortisone Sodium Succinate For Inj 100 MG | | | 2.52200 | |
| Hydrocortisone Tab 10 MG | 0.22648 | | 0.18980 | |
| Hydrocortisone Tab 20 MG | 0.43238 | | 0.13960 | |
| Hydrocortisone Tab 5 MG | 0.15605 | | 0.15309 | |
| Hydrocortisone Valerate Cream 0.2% | | | 1.43182 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Hydrocortisone Valerate Oint 0.2% | | | 3.09854 | |
| Hydrocortisone w/ Acetic Acid Otic Soln 1-2% | | | 5.51733 | |
| Hydromorphone HCl Inj 2 MG/ML | | | 0.65000 | |
| Hydromorphone HCl Liqd 1 MG/ML | 0.33062 | | 0.23245 | |
| Hydromorphone HCl Preservative Free (PF) Inj 10 MG/ML | | | 1.67263 | |
| Hydromorphone HCl Preservative Free (PF) Inj 2 MG/ML | | | 0.65000 | |
| Hydromorphone HCl Tab 2 MG | 0.09354 | | 0.07053 | |
| Hydromorphone HCl Tab 4 MG | 0.11235 | | 0.07665 | |
| Hydromorphone HCl Tab 8 MG | 0.28497 | | 0.20310 | |
| Hydromorphone HCl Tab ER 24HR Deter 12 MG | | | 6.00000 | |
| Hydromorphone HCl Tab ER 24HR Deter 16 MG | | | 7.07756 | |
| Hydromorphone HCl Tab ER 24HR Deter 8 MG | | | 6.99860 | |
| Hydroquinone Cream 4% | | | 0.36681 | |
| Hydroquinone Microspheres Cream 4% | | | 2.49000 | |
| Hydroxocobalamin Inj 1000 MCG/ML | | | 0.83333 | |
| Hydroxychloroquine Sulfate Tab 200 MG | 0.40294 | | 0.25771 | |
| Hydroxyprogesterone Caproate (Bulk) Powder | | | 160.00000 | |
| Hydroxyprogesterone Caproate Soln Auto-Injector 275 MG/1.1ML | | | 727.08000 | |
| Hydroxyurea Cap 500 MG | 0.32854 | | 0.18352 | |
| Hydroxyzine HCl IM Soln 50 MG/ML | | | 4.38000 | |
| Hydroxyzine HCl Syrup 10 MG/5ML | | | 0.03692 | |
| Hydroxyzine HCl Tab 10 MG | 0.05232 | | 0.03772 | |
| Hydroxyzine HCl Tab 25 MG | 0.08026 | | 0.05470 | |
| Hydroxyzine HCl Tab 50 MG | 0.10945 | | 0.08253 | |
| Hydroxyzine Pamoate Cap 100 MG | | | 0.46230 | |
| Hydroxyzine Pamoate Cap 25 MG | 0.07622 | | 0.06135 | |
| Hydroxyzine Pamoate Cap 50 MG | 0.09880 | | 0.06333 | |
| Hyoscyamine Sulfate Elixir 0.125 MG/5ML | | | 0.08078 | |
| Hyoscyamine Sulfate SL Tab 0.125 MG | | | 0.11475 | |
| Hyoscyamine Sulfate Soln 0.125 MG/ML | | | 1.68913 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|-----------|----------------|--------------------|----------------|
| Hyoscyamine Sulfate Tab 0.125 MG | | | 0.11025 | |
| Hyoscyamine Sulfate Tab Disint 0.125 MG | | | 0.17739 | |
| Hyoscyamine Sulfate Tab ER 12HR 0.375 MG | | | 0.24290 | |
| Ibandronate Sodium Tab 150 MG (Base Equivalent) | 5.51849 | | 4.34278 | |
| Ibritumomab Tiuxetan for Yttrium-90 (Y-90) Kit 3.2 MG/2ML | | | 43608.24900 | |
| Ibrutinib Cap 70 MG | | | 404.37280 | |
| Ibrutinib Tab 140 MG | | | 404.37280 | |
| Ibrutinib Tab 280 MG | | | 404.37280 | |
| Ibrutinib Tab 420 MG | | | 404.37280 | |
| Ibrutinib Tab 560 MG | | | 404.37280 | |
| Ibuprofen Susp 100 MG/5ML | | | 0.03119 | |
| Ibuprofen Tab 400 MG | 0.05470 | | 0.03286 | |
| Ibuprofen Tab 600 MG | 0.07274 | | 0.03420 | |
| Ibuprofen Tab 800 MG | 0.08675 | 0.08444 | 0.04700 | 05/01/2020 |
| Ifosfamide For Inj 1 GM | | | 36.74000 | |
| Iloprost Inhalation Solution 10 MCG/ML | | | 134.16120 | |
| Imatinib Mesylate Tab 100 MG (Base Equivalent) | 35.45250 | | 3.78000 | |
| Imatinib Mesylate Tab 400 MG (Base Equivalent) | 126.44553 | | 10.81318 | |
| Imipramine HCl Tab 10 MG | 0.07637 | | 0.06140 | |
| Imipramine HCl Tab 25 MG | 0.09643 | | 0.06780 | |
| Imipramine HCl Tab 50 MG | 0.15570 | | 0.14120 | |
| Imipramine Pamoate Cap 75 MG | | | 5.26053 | |
| Imiquimod Cream 5% | | | 1.08750 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 1 GM/10ML | | | 8.89895 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 10 GM/100ML | | | 8.89895 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 2.5 GM/25ML | | | 8.89895 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 20 GM/200ML | | | 8.89895 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 30 GM/300ML | | | 8.89895 | |
| Immune Globulin (Human) IV or Subcutaneous Soln 5 GM/50ML | | | 8.89895 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Immune Globulin (Human) IV Soln 0.5 GM/10ML | | | 6.91373 | |
| Immune Globulin (Human) IV Soln 10 GM/100ML | | | 8.31000 | |
| Immune Globulin (Human) IV Soln 10 GM/200ML | | | 7.59101 | |
| Immune Globulin (Human) IV Soln 2.5 GM/50ML | | | 6.91373 | |
| 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/100ML | | | 7.59101 | |
| Immune Globulin (Human) IV Soln 5 GM/50ML | | | 8.31000 | |
| Immune Globulin (Human) Subcutaneous Inj 1 GM/5ML | | | 19.22200 | |
| Immune Globulin (Human) Subcutaneous Inj 10 GM/50ML | | | 18.82000 | |
| Immune Globulin (Human) Subcutaneous Inj 2 GM/10ML | | | 19.00000 | |
| Immune Globulin (Human) Subcutaneous Inj 4 GM/20ML | | | 19.22200 | |
| Immune Globulin (Human) Subcutaneous Inj 8 GM/40ML | | | 19.66000 | |
| Indapamide Tab 1.25 MG | 0.17979 | | 0.17220 | |
| Indapamide Tab 2.5 MG | 0.18611 | | 0.14820 | |
| Indomethacin Cap 25 MG | 0.12252 | | 0.02910 | |
| Indomethacin Cap 50 MG | 0.13146 | | 0.07690 | |
| Indomethacin Cap ER 75 MG | 0.46359 | | 0.27750 | |
| Interferon Beta-1a For IM Inj Kit 30MCG (33MCG(6.6 MU)/Vial) | | | 1724.51175 | |
| Interferon Beta-1a Soln Auto-Inj 22 MCG/0.5ML (12MU/ML) | | | 1262.86824 | |
| Interferon Beta-1a Soln Auto-inj 44 MCG/0.5ML (24MU/ML) | | | 1262.86824 | |
| Interferon Beta-1a Soln Pref Syr 22 MCG/0.5ML (12MU/ML) | | | 1262.86824 | |
| Interferon Beta-1a Soln Pref Syr 44 MCG/0.5ML (24MU/ML) | | | 1262.86824 | |
| Ipratropium Bromide Inhal Soln 0.02% | | | 0.05067 | |
| Ipratropium Bromide Nasal Soln 0.03% (21 MCG/SPRAY) | | | 0.23084 | |
| Ipratropium Bromide Nasal Soln 0.06% (42 MCG/SPRAY) | | | 0.54166 | |
| Ipratropium-Albuterol Nebu Soln 0.5-2.5(3) MG/3ML | | | 0.05357 | |
| Irbesartan Tab 150 MG | 1.26627 | | 0.11244 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------|---------|----------------|--------------------|----------------|
| Irbesartan Tab 300 MG | 0.80559 | | 0.17767 | |
| Irbesartan Tab 75 MG | 0.63056 | | 0.08700 | |
| Irbesartan-Hydrochlorothiazide Tab 150-12.5 MG | 0.56698 | | 0.15667 | |
| Irbesartan-Hydrochlorothiazide Tab 300-12.5 MG | 0.69839 | | 0.17176 | |
| Irinotecan HCl Inj 100 MG/5ML (20 MG/ML) | | | 2.63400 | |
| Irinotecan HCl Inj 40 MG/2ML (20 MG/ML) | | | 3.38500 | |
| Iron Polysacch Complex-Vit B12-FA Cap 150-0.025-1 MG | | | 0.10283 | |
| Isoniazid Syrup 50 MG/5ML | | | 0.61734 | |
| Isoniazid Tab 100 MG | | | 0.09150 | |
| Isoniazid Tab 300 MG | | | 0.09990 | |
| Isopropyl Alcohol Wipes 70% | | | 0.01500 | |
| Isosorbide Dinitrate Tab 10 MG | 0.45399 | | 0.35323 | |
| Isosorbide Dinitrate Tab 20 MG | 0.42948 | | 0.32465 | |
| Isosorbide Dinitrate Tab 30 MG | | | 0.26098 | |
| Isosorbide Dinitrate Tab 5 MG | 0.42393 | | 0.09160 | |
| Isosorbide Dinitrate Tab CR 40 MG | | | 0.62660 | |
| Isosorbide Mononitrate Tab 10 MG | | | 0.16123 | |
| Isosorbide Mononitrate Tab 20 MG | | | 0.09070 | |
| Isosorbide Mononitrate Tab ER 24HR 120 MG | 0.39857 | | 0.24000 | |
| Isosorbide Mononitrate Tab ER 24HR 30 MG | 0.11049 | | 0.06873 | |
| Isosorbide Mononitrate Tab ER 24HR 60 MG | 0.13593 | | 0.06790 | |
| Isotretinoin Cap 10 MG | 3.34720 | | 3.25672 | |
| Isotretinoin Cap 20 MG | 3.47464 | | 1.92767 | |
| Isotretinoin Cap 30 MG | | | 4.66244 | |
| Isotretinoin Cap 40 MG | 4.05498 | 2.90000 | 2.16733 | 05/01/2020 |
| Isradipine Cap 2.5 MG | | | 0.96050 | |
| Isradipine Cap 5 MG | | | 1.27072 | |
| Itraconazole Cap 100 MG | 1.39915 | | 1.09133 | |
| Itraconazole Oral Soln 10 MG/ML | | | 1.15633 | |
| Ivacaftor Packet 25 MG | | | 425.86318 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------|---------|----------------|--------------------|----------------|
| Ivacaftor Packet 50 MG | | | 425.00974 | |
| Ivacaftor Packet 75 MG | | | 425.00974 | |
| Ivermectin Cream 1% | | | 10.09978 | |
| Ivermectin Tab 3 MG | | | 3.46600 | |
| KCl 0.15% in D5/0.33% NaCl | | | 0.00217 | |
| KCl 10 MEQ/L (0.075%) in Dextrose 5% & NaCl 0.45% Inj | | | 0.00303 | |
| KCl 20 MEQ/L (0.15%) in Dextrose 5% & NaCl 0.45% Inj | | | 0.00263 | |
| KCl 20 MEQ/L (0.15%) in Dextrose 5% & NaCl 0.9% Inj | | | 0.00342 | |
| KCl 20 MEQ/L (0.15%) in NaCl 0.45% Inj | | | 0.00380 | |
| KCl 20 MEQ/L (0.15%) in NaCl 0.9% Inj | | | 0.00325 | |
| KCl 30 MEQ/L (0.224%) in Dextrose 5% & NaCl 0.45% Inj | | | 0.00232 | |
| KCl 40 MEQ/L (0.3%) in Dextrose 5% & NaCl 0.45% Inj | | | 0.00217 | |
| KCl 40 MEQ/L (0.3%) in NaCl 0.9% Inj | | | 0.00325 | |
| Ketoconazole Cream 2% | | | 0.46671 | |
| Ketoconazole Foam 2% | | | 6.99900 | |
| Ketoconazole Shampoo 2% | | | 0.05695 | |
| Ketoconazole Tab 200 MG | | | 0.93167 | |
| Ketoprofen Cap 50 MG | | | 0.41000 | |
| Ketoprofen Cap 75 MG | | | 0.40251 | |
| Ketoprofen Cap ER 24HR 200 MG | | | 2.06200 | |
| Ketorolac Tromethamine IM Inj 60 MG/2ML (30 MG/ML) | | | 0.79300 | |
| Ketorolac Tromethamine Inj 15 MG/ML | | | 0.97500 | |
| Ketorolac Tromethamine Inj 30 MG/ML | | | 0.79300 | |
| Ketorolac Tromethamine Inj 300 MG/10ML (30 MG/ML) | | | 1.38080 | |
| Ketorolac Tromethamine Inj 60 MG/2ML (30 MG/ML) | | | 0.79300 | |
| Ketorolac Tromethamine Ophth Soln 0.4% | | | 8.25600 | |
| Ketorolac Tromethamine Ophth Soln 0.5% | | | 0.98140 | |
| Ketorolac Tromethamine Tab 10 MG | | | 0.76205 | |
| Ketotifen Fumarate Ophth Soln 0.025% (Base Equiv) | | | 12.82400 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------|----------|----------------|--------------------|----------------|
| Labetalol HCl Tab 100 MG | 0.14562 | | 0.10450 | |
| Labetalol HCl Tab 200 MG | 0.20119 | | 0.15790 | |
| Labetalol HCl Tab 300 MG | 0.29981 | | 0.18370 | |
| Lactated Ringer's Solution | | | 0.00388 | |
| Lactic Acid (Ammonium Lactate) Cream 12% | | | 0.03121 | |
| Lactic Acid (Ammonium Lactate) Lotion 10% | | | 0.06869 | |
| Lactic Acid (Ammonium Lactate) Lotion 12% | | | 0.06578 | |
| Lactic Acid w/ Vitamin E Cream 10%-3500 Unit/30GM | | | 0.12324 | |
| Lactulose (Encephalopathy) Solution 10 GM/15ML | 0.01813 | | 0.01140 | |
| Lactulose Solution 10 GM/15ML | | | 0.01128 | |
| Lamivudine Oral Soln 10 MG/ML | | | 0.24042 | |
| Lamivudine Tab 100 MG (HBV) | 2.82205 | | 3.02950 | |
| Lamivudine Tab 150 MG | 1.28759 | | 0.57867 | |
| Lamivudine Tab 300 MG | 2.17733 | | 1.18467 | |
| Lamivudine-Zidovudine Tab 150-300 MG | | | 0.33467 | |
| Lamotrigine Orally Disintegrating Tab 100 MG | 9.87721 | | 5.96024 | |
| Lamotrigine Orally Disintegrating Tab 200 MG | 11.86921 | | 6.31279 | |
| Lamotrigine Orally Disintegrating Tab 25 MG | 6.84893 | | 4.41567 | |
| Lamotrigine Orally Disintegrating Tab 50 MG | 5.96475 | | 4.21967 | |
| Lamotrigine Tab 100 MG | 0.59001 | | 0.04400 | |
| Lamotrigine Tab 150 MG | 0.49336 | | 0.05550 | |
| Lamotrigine Tab 200 MG | 0.73662 | 0.07676 | 0.05524 | 05/01/2020 |
| Lamotrigine Tab 25 MG | 0.29335 | | 0.02760 | |
| Lamotrigine Tab 35 x 25 MG Starter Kit | | | 0.08574 | |
| Lamotrigine Tab Chewable Dispersible 25 MG | 1.79949 | | 0.08860 | |
| Lamotrigine Tab Chewable Dispersible 5 MG | 0.31586 | | 0.11000 | |
| Lamotrigine Tab ER 24HR 100 MG | 8.23289 | 1.92633 | 1.91000 | 05/01/2020 |
| Lamotrigine Tab ER 24HR 200 MG | 8.24736 | | 2.01533 | |
| Lamotrigine Tab ER 24HR 25 MG | 2.64276 | | 1.55055 | |
| Lamotrigine Tab ER 24HR 250 MG | 10.14197 | | 7.24667 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Lamotrigine Tab ER 24HR 300 MG | 12.14704 | | 4.83900 | |
| Lamotrigine Tab ER 24HR 50 MG | 5.55410 | | 1.60320 | |
| Lancets Misc.*** | | | 0.07800 | |
| Lancets*** | | | 0.07800 | |
| Lansoprazole Cap Delayed Release 15 MG | | | 0.13167 | |
| Lansoprazole Cap Delayed Release 30 MG | 0.34436 | | 0.12500 | |
| Lansoprazole Tab Delayed Release Orally Disintegrating 15 MG | | | 8.66150 | |
| Lansoprazole Tab Delayed Release Orally Disintegrating 30 MG | | | 8.70000 | 05/01/2020 |
| Lanthanum Carbonate Chew Tab 1000 MG (Elemental) | | | 7.95693 | |
| Lanthanum Carbonate Chew Tab 500 MG (Elemental) | | | 11.55667 | |
| Latanoprost Ophth Soln 0.005% | | 1.96667 | 1.62800 | 05/01/2020 |
| Ledipasvir-Sofosbuvir Tab 90-400 MG | | | 1120.50000 | |
| Leflunomide Tab 10 MG | 1.42439 | | 0.99500 | |
| Leflunomide Tab 20 MG | 1.23610 | | 1.03800 | |
| Letrozole Tab 2.5 MG | 0.33764 | 0.10433 | 0.08978 | 05/01/2020 |
| Leucovorin Calcium For Inj 200 MG | | | 7.80000 | |
| Leucovorin Calcium Inj 10 MG/ML | | | 0.26000 | |
| Leucovorin Calcium Tab 25 MG | | | 5.32387 | |
| Leucovorin Calcium Tab 5 MG | | | 0.60030 | |
| Leuprolide Acetate Inj Kit 5 MG/ML | | | 263.20000 | |
| Levalbuterol HCl Soln Nebu 0.31 MG/3ML (Base Equiv) | | | 0.44401 | |
| Levalbuterol HCl Soln Nebu 0.63 MG/3ML (Base Equiv) | | | 0.25156 | |
| Levalbuterol HCl Soln Nebu 1.25 MG/3ML (Base Equiv) | | | 0.29673 | |
| Levalbuterol HCl Soln Nebu Conc 1.25 MG/0.5ML (Base Equiv) | | | 4.77860 | |
| Levetiracetam Oral Soln 100 MG/ML | 0.03827 | | 0.03458 | |
| Levetiracetam Tab 1000 MG | 0.30633 | | 0.19272 | |
| Levetiracetam Tab 250 MG | 0.08652 | | 0.05475 | |
| Levetiracetam Tab 500 MG | 0.12880 | | 0.08050 | |
| Levetiracetam Tab 750 MG | 0.18330 | | 0.14614 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Levetiracetam Tab ER 24HR 500 MG | | | 0.18722 | |
| Levetiracetam Tab ER 24HR 750 MG | | | 0.27750 | |
| Levobunolol HCl Ophth Soln 0.5% | | | 0.59600 | |
| Levocarnitine Oral Soln 1 GM/10ML (10%) | 0.30664 | | 0.19661 | |
| Levocarnitine Tab 330 MG | | | 0.47111 | |
| Levocetirizine Dihydrochloride Soln 2.5 MG/5ML (0.5 MG/ML) | | | 0.32655 | |
| Levocetirizine Dihydrochloride Tab 5 MG | | | 0.07215 | |
| Levofloxacin in D5W IV Soln 750 MG/150ML | | | 0.02000 | |
| Levofloxacin Ophth Soln 0.5% | | | 8.48120 | |
| Levofloxacin Oral Soln 25 MG/ML | | | 0.89120 | |
| Levofloxacin Tab 250 MG | 0.19904 | | 0.12500 | |
| Levofloxacin Tab 500 MG | 0.20291 | | 0.12400 | |
| Levofloxacin Tab 750 MG | 0.44847 | | 0.22400 | |
| Levonor-Eth Est Tab 0.15-0.02/0.025/0.03 MG &Eth Est 0.01 MG | | | 3.68308 | |
| Levonorg-Eth Est Tab 0.1-0.02MG(84) & Eth Est Tab 0.01MG(7) | 0.39033 | | 0.41963 | |
| Levonorg-Eth Est Tab 0.15-0.03MG(84) & Eth Est Tab 0.01MG(7) | 0.61091 | | 0.31610 | |
| Levonorgestrel & Ethinyl Estradiol (91-Day) Tab 0.15-0.03 MG | 0.28336 | | 0.30951 | |
| Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG | | | 0.22327 | |
| Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG | 0.31212 | | 0.11607 | |
| Levonorgestrel Tab 1.5 MG | | | 35.07625 | |
| Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG | 0.42411 | | 0.36145 | |
| Levonorgestrel-Ethinyl Estradiol (Continuous) Tab 90-20 MCG | | | 1.17500 | |
| Levothyroxine Sodium For IV Inj 200 MCG | | | 198.55200 | |
| Levothyroxine Sodium For IV Inj 500 MCG | | | 26.00000 | |
| Levothyroxine Sodium Tab 100 MCG | | | 0.29912 | |
| Levothyroxine Sodium Tab 112 MCG | | | 0.30598 | |
| Levothyroxine Sodium Tab 125 MCG | | | 0.39235 | |
| Levothyroxine Sodium Tab 137 MCG | | | 0.34894 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|---------|----------------|--------------------|----------------|
| Levothyroxine Sodium Tab 150 MCG | | | 0.36144 | |
| Levothyroxine Sodium Tab 175 MCG | | | 0.40461 | |
| Levothyroxine Sodium Tab 200 MCG | | | 0.50214 | |
| Levothyroxine Sodium Tab 25 MCG | | | 0.22128 | |
| Levothyroxine Sodium Tab 300 MCG | | | 0.39278 | |
| Levothyroxine Sodium Tab 50 MCG | | | 0.20082 | |
| Levothyroxine Sodium Tab 75 MCG | | | 0.29993 | |
| Levothyroxine Sodium Tab 88 MCG | | | 0.27168 | |
| Lidocaine HCl Cream 3% | | | 0.51777 | |
| Lidocaine HCl Gel 2% | | | 0.32194 | |
| Lidocaine HCl Local Inj 1% | | | 0.05748 | |
| Lidocaine HCl Local Inj 2% | | | 0.06146 | |
| Lidocaine HCl Local Preservative Free (PF) Inj 1% | | | 0.58140 | |
| Lidocaine HCl Local Preservative Free (PF) Inj 2% | | | 0.42500 | |
| Lidocaine HCl Soln 4% | 0.93035 | | 0.26000 | |
| Lidocaine HCl Urethral/Mucosal Gel 2% | | | 0.69829 | |
| Lidocaine HCl Urethral/Mucosal Gel Prefilled Syringe 2% | | | 0.54591 | |
| Lidocaine HCl Viscous Soln 2% | | | 0.05680 | |
| Lidocaine Oint 5% | | 0.27000 | 0.25900 | 05/01/2020 |
| Lidocaine Patch 5% | 2.74812 | | 2.08467 | |
| Lidocaine-Hydrocortisone Acetate Perianal Cream 3-0.5% | | | 0.65107 | |
| Lidocaine-Prilocaine Cream 2.5-2.5% | | | 0.26800 | |
| Lidocaine-Prilocaine Cream Kit 2.5-2.5% | | | 0.23130 | |
| Linezolid For Susp 100 MG/5ML | | | 4.75000 | |
| Linezolid Tab 600 MG | 2.30196 | | 1.00000 | |
| Liothyronine Sodium Tab 25 MCG | 0.71229 | | 0.42480 | |
| Liothyronine Sodium Tab 5 MCG | 0.57494 | | 0.32280 | |
| Liothyronine Sodium Tab 50 MCG | 0.93006 | | 0.64390 | |
| Lisdexamfetamine Dimesylate Chew Tab 10 MG | | | 9.72970 | |
| Lisdexamfetamine Dimesylate Chew Tab 20 MG | | | 9.74889 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Lisdexamfetamine Dimesylate Chew Tab 30 MG | | | 9.65958 | |
| Lisdexamfetamine Dimesylate Chew Tab 40 MG | | | 9.80249 | |
| Lisdexamfetamine Dimesylate Chew Tab 50 MG | | | 10.10774 | |
| Lisdexamfetamine Dimesylate Chew Tab 60 MG | | | 10.10774 | |
| Lisinopril & Hydrochlorothiazide Tab 10-12.5 MG | 0.06238 | | 0.02300 | |
| Lisinopril & Hydrochlorothiazide Tab 20-12.5 MG | 0.05992 | | 0.03200 | |
| Lisinopril & Hydrochlorothiazide Tab 20-25 MG | 0.09888 | | 0.03001 | |
| Lisinopril Tab 10 MG | 0.03051 | | 0.01190 | |
| Lisinopril Tab 2.5 MG | 0.01695 | | 0.01029 | |
| Lisinopril Tab 20 MG | 0.02898 | | 0.01700 | |
| Lisinopril Tab 30 MG | 0.06213 | | 0.04442 | |
| Lisinopril Tab 40 MG | 0.05477 | | 0.04257 | |
| Lisinopril Tab 5 MG | 0.02079 | | 0.00918 | |
| Lithium Carbonate Cap 150 MG | 0.07672 | | 0.05420 | |
| Lithium Carbonate Cap 300 MG | 0.05382 | | 0.03598 | |
| Lithium Carbonate Cap 600 MG | 0.14065 | | 0.09110 | |
| Lithium Carbonate Tab 300 MG | | | 0.13159 | |
| Lithium Carbonate Tab ER 300 MG | 0.18700 | | 0.11590 | |
| Lithium Carbonate Tab ER 450 MG | 0.22233 | | 0.09783 | |
| Lithium Oral Solution 8 mEq/5ML | | | 0.30000 | |
| Lomustine Cap 40 MG | | | 362.43444 | |
| Loperamide HCl Cap 2 MG | | | 0.21868 | |
| Lorazepam Conc 2 MG/ML | 0.58695 | | 0.26900 | |
| Lorazepam Inj 2 MG/ML | | | 0.46840 | |
| Lorazepam Inj 4 MG/ML | | | 1.19860 | |
| Lorazepam Tab 0.5 MG | 0.07925 | | 0.02631 | |
| Lorazepam Tab 1 MG | 0.05070 | | 0.03110 | |
| Lorazepam Tab 2 MG | 0.20106 | | 0.04021 | |
| Losartan Potassium & Hydrochlorothiazide Tab 100-12.5 MG | 0.17083 | | 0.07169 | |
| Losartan Potassium & Hydrochlorothiazide Tab 100-25 MG | 0.37298 | | 0.07633 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Losartan Potassium & Hydrochlorothiazide Tab 50-12.5 MG | 0.37399 | | 0.06191 | |
| Losartan Potassium Tab 100 MG | 0.18223 | | 0.04900 | |
| Losartan Potassium Tab 25 MG | 0.07919 | | 0.03240 | |
| Losartan Potassium Tab 50 MG | 0.12568 | | 0.03286 | |
| Lovastatin Tab 10 MG | 0.10379 | | 0.05152 | |
| Lovastatin Tab 20 MG | 0.07505 | | 0.03900 | |
| Lovastatin Tab 40 MG | 0.07482 | | 0.06281 | |
| Loxapine Succinate Cap 10 MG | | | 0.33900 | |
| Loxapine Succinate Cap 25 MG | | | 0.26310 | |
| Loxapine Succinate Cap 5 MG | | | 0.28570 | |
| Loxapine Succinate Cap 50 MG | | | 0.62000 | |
| Lumacaftor-Ivacaftor Granules Packet 100-125 MG | | | 372.81056 | |
| Lumacaftor-Ivacaftor Granules Packet 150-188 MG | | | 372.81056 | |
| Lumacaftor-Ivacaftor Tab 100-125 MG | | | 186.03172 | |
| Lumacaftor-Ivacaftor Tab 200-125 MG | | | 186.03172 | |
| Lurasidone HCl Tab 20 MG | | | 39.12633 | |
| Lurasidone HCl Tab 40 MG | | | 39.17411 | |
| Lurasidone HCl Tab 60 MG | | | 39.16154 | |
| Magnesium Hydroxide Susp 400 MG/5ML | | | 0.00651 | |
| Magnesium Sulfate Inj 50% | | | 0.16190 | |
| Malathion Lotion 0.5% | | | 3.60958 | |
| Meclizine HCl Chew Tab 25 MG | | | 0.17912 | |
| Meclizine HCl Tab 12.5 MG | | | 0.04940 | |
| Meclizine HCl Tab 25 MG | | | 0.04200 | |
| Meclofenamate Sodium Cap 100 MG | | | 1.78455 | |
| Meclofenamate Sodium Cap 50 MG | | | 0.56134 | |
| Medroxyprogesterone Acetate IM Susp 150 MG/ML | | | 35.24600 | |
| Medroxyprogesterone Acetate IM Susp Prefilled Syr 150 MG/ML | | | 45.89400 | |
| Medroxyprogesterone Acetate Tab 10 MG | | | 0.12420 | |
| Medroxyprogesterone Acetate Tab 2.5 MG | | | 0.05330 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|---------|----------------|--------------------|----------------|
| Medroxyprogesterone Acetate Tab 5 MG | | | 0.08900 | |
| Mefenamic Acid Cap 250 MG | | | 3.59983 | |
| Mefloquine HCl Tab 250 MG | | | 3.32640 | |
| Megestrol Acetate Susp 40 MG/ML | | | 0.06512 | |
| Megestrol Acetate Susp 625 MG/5ML | 2.19953 | | 2.09993 | |
| Megestrol Acetate Tab 20 MG | 0.15592 | | 0.10850 | |
| Megestrol Acetate Tab 40 MG | 0.20085 | | 0.10500 | |
| Meloxicam Tab 15 MG | 0.02508 | | 0.01567 | |
| Meloxicam Tab 7.5 MG | 0.01888 | | 0.01708 | |
| Memantine HCl Cap ER 24HR 14 MG | 3.05349 | | 1.59156 | |
| Memantine HCl Cap ER 24HR 21 MG | 5.76996 | | 3.05923 | |
| Memantine HCl Cap ER 24HR 28 MG | 2.72369 | | 1.93938 | |
| Memantine HCl Cap ER 24HR 7 MG | 2.90760 | | 1.63966 | |
| Memantine HCl Oral Solution 2 MG/ML | | | 1.30975 | |
| Memantine HCl Tab 10 MG | 0.12895 | | 0.06912 | |
| Memantine HCl Tab 28 x 5 MG & 21 x 10 MG Titration Pack | | | 0.27204 | |
| Memantine HCl Tab 5 MG | 0.12325 | | 0.09917 | |
| Meperidine HCl Inj 50 MG/ML | | | 2.00280 | |
| Meperidine HCl Tab 100 MG | | | 0.38541 | |
| Meperidine HCl Tab 50 MG | | | 0.20013 | |
| Meprobamate Tab 400 MG | | | 2.78736 | |
| Mercaptopurine Tab 50 MG | | | 0.88334 | |
| Meropenem IV For Soln 1 GM | | | 5.71300 | |
| Mesalamine Cap DR 400 MG | 3.46998 | | 1.81439 | |
| Mesalamine Cap ER 24HR 0.375 GM | | | 2.63158 | |
| Mesalamine Enema 4 GM | 0.16904 | | 0.16262 | |
| Mesalamine Rectal Enema 4 GM & Cleanser Wipe Kit** | | | 119.25000 | |
| Mesalamine Suppos 1000 MG | | | 9.50000 | |
| Mesalamine Tab Delayed Release 1.2 GM | 3.91749 | | 2.22400 | |
| Mesalamine Tab Delayed Release 800 MG | | | 4.25000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Mesna Inj 100 MG/ML | | | 2.60000 | |
| Metaproterenol Sulfate Syrup 10 MG/5ML | | | 0.02460 | |
| Metaxalone Tab 800 MG | 0.86894 | | 0.50980 | |
| Metformin HCl Tab 1000 MG | 0.02678 | | 0.02399 | |
| Metformin HCl Tab 500 MG | 0.01747 | | 0.01438 | |
| Metformin HCl Tab 850 MG | 0.02939 | | 0.02127 | |
| Metformin HCl Tab ER 24HR 500 MG | 0.03556 | | 0.02605 | |
| Metformin HCl Tab ER 24HR 750 MG | 0.07155 | 0.06915 | 0.04510 | 05/01/2020 |
| Metformin HCl Tab ER 24HR Modified Release 1000 MG | 69.05901 | | 15.01875 | |
| Metformin HCl Tab ER 24HR Modified Release 500 MG | 25.96658 | | 5.19144 | |
| Metformin HCl Tab ER 24HR Osmotic 1000 MG | | | 2.82733 | |
| Metformin HCl Tab ER 24HR Osmotic 500 MG | | | 2.17045 | |
| Methadone HCl Conc 10 MG/ML | | | 0.05102 | |
| Methadone HCl Tab 10 MG | 0.09723 | | 0.09170 | |
| Methadone HCl Tab 5 MG | 0.14486 | | 0.10660 | |
| Methadone HCl Tab For Oral Susp 40 MG | | | 0.30600 | |
| Methamphetamine HCl Tab 5 MG | | | 5.86582 | |
| Methazolamide Tab 25 MG | | | 2.63280 | |
| Methazolamide Tab 50 MG | | | 2.41000 | |
| Methenamine Hippurate Tab 1 GM | 0.84908 | | 0.59990 | |
| Methenamine Mandelate Tab 1 GM | | | 1.19500 | |
| Methenamine-Hyosc-Meth Blue-Sod Phos-Phen Sal Cap 118 MG*** | | | 2.58650 | |
| Methimazole Tab 10 MG | 0.13233 | | 0.08775 | |
| Methimazole Tab 5 MG | 0.09931 | | 0.04940 | |
| Methocarbamol Tab 500 MG | 0.09356 | | 0.05878 | |
| Methocarbamol Tab 750 MG | 0.11361 | | 0.05730 | |
| Methotrexate Sodium Inj 50 MG/2ML (25 MG/ML) | | | 2.95100 | |
| Methotrexate Sodium Inj PF 100 MG/4ML (25 MG/ML) | | | 1.08193 | |
| Methotrexate Sodium Inj PF 1000 MG/40ML (25 MG/ML) | | | 1.08193 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------|----------|----------------|--------------------|----------------|
| Methotrexate Sodium Inj PF 200 MG/8ML (25 MG/ML) | | | 1.08193 | |
| Methotrexate Sodium Inj PF 25 MG/ML | | | 1.08193 | |
| Methotrexate Sodium Inj PF 250 MG/10ML (25 MG/ML) | | | 1.08193 | |
| Methotrexate Sodium Inj PF 50 MG/2ML (25 MG/ML) | | | 1.08193 | |
| Methotrexate Sodium Tab 2.5 MG (Base Equiv) | 0.57734 | | 0.37800 | |
| Methscopolamine Bromide Tab 2.5 MG | | | 0.31450 | |
| Methscopolamine Bromide Tab 5 MG | | | 0.86350 | |
| Methyclothiazide Tab 5 MG | | | 0.49920 | |
| Methyldopa & Hydrochlorothiazide Tab 250-15 MG | | | 0.81390 | |
| Methyldopa & Hydrochlorothiazide Tab 250-25 MG | | | 0.21307 | |
| Methyldopa Tab 250 MG | | | 0.06990 | |
| Methyldopa Tab 500 MG | | | 0.16654 | |
| Methylergonovine Maleate Tab 0.2 MG | 29.46400 | | 41.71083 | |
| Methylnaltrexone Bromide Inj 12 MG/0.6ML (20 MG/ML) | | | 191.79640 | |
| Methylnaltrexone Bromide Inj Kit 12 MG/0.6ML | | | 59.31180 | |
| Methylphenidate HCl Cap ER 10 MG (CD) | 2.45854 | | 2.31590 | |
| Methylphenidate HCl Cap ER 20 MG (CD) | 2.50033 | | 2.32689 | |
| Methylphenidate HCl Cap ER 24HR 10 MG (LA) | 3.93771 | | 6.53714 | |
| Methylphenidate HCl Cap ER 24HR 20 MG (LA) | 2.65110 | | 3.31913 | |
| Methylphenidate HCl Cap ER 24HR 30 MG (LA) | | | 3.29452 | |
| Methylphenidate HCl Cap ER 24HR 40 MG (LA) | | | 3.39144 | |
| Methylphenidate HCl Cap ER 30 MG (CD) | 2.77687 | | 2.38170 | |
| Methylphenidate HCl Cap ER 40 MG (CD) | 3.25414 | | 2.26920 | |
| Methylphenidate HCl Cap ER 50 MG (CD) | 3.97642 | | 2.20883 | |
| Methylphenidate HCl Cap ER 60 MG (CD) | 3.51724 | | 2.21480 | |
| Methylphenidate HCl Chew Tab 2.5 MG | | | 2.42347 | |
| Methylphenidate HCl Chew Tab 5 MG | | | 3.17000 | |
| Methylphenidate HCl Soln 10 MG/5ML | 0.20695 | | 0.14676 | |
| Methylphenidate HCl Soln 5 MG/5ML | 0.12783 | | 0.13551 | |
| Methylphenidate HCl Tab 10 MG | 0.20953 | | 0.18010 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Methylphenidate HCl Tab 20 MG | 0.33841 | | 0.25258 | |
| Methylphenidate HCl Tab 5 MG | 0.13064 | | 0.15000 | |
| Methylphenidate HCl Tab ER 10 MG | | | 1.92940 | |
| Methylphenidate HCl Tab ER 20 MG | 1.73827 | | 1.52158 | |
| Methylphenidate HCl Tab ER 24HR 18 MG | 8.17715 | | 7.09784 | |
| Methylphenidate HCl Tab ER 24HR 27 MG | 8.38911 | | 6.46201 | |
| Methylphenidate HCl Tab ER 24HR 36 MG | 9.80510 | | 8.23080 | |
| Methylphenidate HCl Tab ER 24HR 54 MG | 8.66595 | | 7.55780 | |
| Methylphenidate HCl Tab ER Osmotic Release (OSM) 18 MG | 8.17715 | | 5.28990 | |
| Methylphenidate HCl Tab ER Osmotic Release (OSM) 27 MG | 8.38911 | | 4.60000 | |
| Methylphenidate HCl Tab ER Osmotic Release (OSM) 36 MG | 9.80510 | | 5.51706 | |
| Methylphenidate HCl Tab ER Osmotic Release (OSM) 54 MG | 8.66595 | | 6.32000 | |
| Methylprednisolone Acetate Inj Susp 40 MG/ML | | | 4.68000 | |
| Methylprednisolone Acetate Inj Susp 80 MG/ML | | | 14.67000 | |
| Methylprednisolone Sod Succ For Inj 125 MG (Base Equiv) | | | 5.20000 | |
| Methylprednisolone Sod Succ For Inj 40 MG (Base Equiv) | | | 5.72610 | |
| Methylprednisolone Tab 16 MG | 1.88308 | | 1.75672 | |
| Methylprednisolone Tab 32 MG | | | 2.98680 | |
| Methylprednisolone Tab 4 MG | 0.22773 | | 0.25778 | |
| Methylprednisolone Tab 8 MG | 1.22817 | | 1.09045 | |
| Methylprednisolone Tab Therapy Pack 4 MG (21) | 0.24120 | | 0.21667 | |
| Metoclopramide HCl Soln 5 MG/5ML (10 MG/10ML) (Base Equiv) | | | 0.03709 | |
| Metoclopramide HCl Tab 10 MG (Base Equivalent) | 0.04141 | | 0.02857 | |
| Metoclopramide HCl Tab 5 MG (Base Equivalent) | 0.03766 | | 0.02200 | |
| Metolazone Tab 10 MG | | | 1.31845 | |
| Metolazone Tab 2.5 MG | | | 0.81000 | |
| Metolazone Tab 5 MG | 1.18045 | | 1.11320 | |
| Metoprolol & Hydrochlorothiazide Tab 100-25 MG | | | 1.53740 | |
| Metoprolol & Hydrochlorothiazide Tab 50-25 MG | | | 0.67570 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Metoprolol Succinate Tab ER 24HR 100 MG (Tartrate Equiv) | 0.20500 | | 0.19454 | |
| Metoprolol Succinate Tab ER 24HR 200 MG (Tartrate Equiv) | 0.40541 | | 0.32170 | |
| Metoprolol Succinate Tab ER 24HR 25 MG (Tartrate Equiv) | 0.13390 | | 0.09193 | |
| Metoprolol Succinate Tab ER 24HR 50 MG (Tartrate Equiv) | 0.13792 | | 0.11591 | |
| Metoprolol Tartrate Tab 100 MG | 0.03105 | | 0.02870 | |
| Metoprolol Tartrate Tab 25 MG | 0.02189 | | 0.02177 | |
| Metoprolol Tartrate Tab 50 MG | 0.02137 | | 0.01363 | |
| Metoprolol Tartrate Tab 75 MG | | | 0.16500 | |
| Metronidazole Cream 0.75% | 1.09346 | | 0.70934 | |
| Metronidazole Gel 0.75% | 1.15911 | | 0.81823 | |
| Metronidazole Gel 1% | 1.55562 | | 1.56383 | |
| Metronidazole in NaCl 0.74% IV Soln 500 MG/100ML | | | 0.01486 | |
| Metronidazole in NaCl 0.79% IV Soln 500 MG/100ML | | | 0.01486 | |
| Metronidazole Lotion 0.75% | | | 2.03153 | |
| Metronidazole Tab 250 MG | 0.22300 | | 0.07480 | |
| Metronidazole Tab 500 MG | 0.17833 | | 0.11483 | |
| Metronidazole Vaginal Gel 0.75% | 1.10655 | | 0.46056 | |
| Mexiletine HCl Cap 150 MG | | | 0.49466 | |
| Mexiletine HCl Cap 200 MG | | | 0.70200 | |
| Mexiletine HCl Cap 250 MG | | | 0.82212 | |
| Miconazole Nitrate Vaginal Suppos 200 MG | | | 13.71500 | |
| Midazolam HCl Inj 10 MG/10ML (Base Equivalent) | | | 0.25160 | |
| Midazolam HCl Inj 10 MG/2ML (Base Equivalent) | | | 0.43550 | |
| Midazolam HCl Inj 2 MG/2ML (Base Equivalent) | | | 0.25160 | |
| Midazolam HCl Inj 25 MG/5ML (Base Equivalent) | | | 0.43550 | |
| Midazolam HCl Inj 5 MG/5ML (Base Equivalent) | | | 0.25160 | |
| Midazolam HCl Inj 5 MG/ML (Base Equivalent) | | | 0.43550 | |
| Midazolam HCl Inj 50 MG/10ML (Base Equivalent) | | | 0.43550 | |
| Midazolam HCl Syrup 2 MG/ML (Base Equivalent) | | | 0.52224 | |

**Illinois Department of Healthcare and Family Services
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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------|---------|----------------|--------------------|----------------|
| Midodrine HCl Tab 10 MG | 0.80586 | | 0.55753 | |
| Midodrine HCl Tab 2.5 MG | 0.40707 | | 0.16000 | |
| Midodrine HCl Tab 5 MG | 0.44989 | | 0.31267 | |
| Mifepristone Tab 200 MG | | | 68.33000 | |
| Miglustat Cap 100 MG | | | 267.90200 | |
| Milrinone Lactate in Dextrose 5% IV Soln 40 MG/200ML | | | 0.13125 | |
| Milrinone Lactate IV Soln 10 MG/10ML (Base Equivalent) | | | 0.63505 | |
| Milrinone Lactate IV Soln 20 MG/20ML (Base Equivalent) | | | 0.63505 | |
| Milrinone Lactate IV Soln 50 MG/50ML (Base Equivalent) | | | 0.63505 | |
| Minocycline HCl Cap 100 MG | 0.41981 | | 0.36893 | |
| Minocycline HCl Cap 50 MG | 0.20258 | | 0.20200 | |
| Minocycline HCl Cap 75 MG | 0.32524 | | 0.26765 | |
| Minocycline HCl Tab 100 MG | 1.88853 | | 1.80620 | |
| Minocycline HCl Tab 50 MG | 1.05253 | | 0.96342 | |
| Minocycline HCl Tab ER 24HR 65 MG | | | 5.99833 | |
| Minocycline HCl Tab ER 24HR 80 MG | 4.88507 | | 4.88507 | |
| Minoxidil Tab 10 MG | 0.25279 | | 0.12250 | |
| Minoxidil Tab 2.5 MG | | | 0.10050 | |
| Mirtazapine Orally Disintegrating Tab 15 MG | 0.64847 | | 0.47533 | |
| Mirtazapine Orally Disintegrating Tab 30 MG | 0.71961 | | 0.53400 | |
| Mirtazapine Orally Disintegrating Tab 45 MG | 0.84232 | | 0.76367 | |
| Mirtazapine Tab 15 MG | 0.08439 | | 0.06769 | |
| Mirtazapine Tab 30 MG | 0.11674 | | 0.08500 | |
| Mirtazapine Tab 45 MG | 0.17587 | | 0.11133 | |
| Mirtazapine Tab 7.5 MG | | 0.68833 | 0.66000 | 05/01/2020 |
| Misoprostol Tab 100 MCG | | | 0.39396 | |
| Misoprostol Tab 200 MCG | | | 0.67449 | |
| Mitomycin For IV Soln 20 MG | | | 94.90000 | |
| Mitomycin For IV Soln 5 MG | | | 26.00000 | |

**Illinois Department of Healthcare and Family Services
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Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Mitoxantrone HCl Inj Conc 20 MG/10ML (2 MG/ML) | | | 23.65870 | |
| Mitoxantrone HCl Inj Conc 25 MG/12.5ML (2 MG/ML) | | | 23.65870 | |
| Mitoxantrone HCl Inj Conc 30 MG/15ML (2 MG/ML) | | | 23.65870 | |
| Modafinil Tab 100 MG | 0.77593 | | 0.57574 | |
| Modafinil Tab 200 MG | 2.09961 | | 0.35717 | |
| Moexipril HCl Tab 15 MG | | | 0.31400 | |
| Moexipril HCl Tab 7.5 MG | | | 0.25878 | |
| Moexipril-Hydrochlorothiazide Tab 15-12.5 MG | | | 0.59644 | |
| Moexipril-Hydrochlorothiazide Tab 15-25 MG | | | 0.53738 | |
| Mometasone Furoate Cream 0.1% | | | 0.27933 | |
| Mometasone Furoate Nasal Susp 50 MCG/ACT | | | 2.31000 | |
| Mometasone Furoate Oint 0.1% | | | 0.18244 | |
| Mometasone Furoate Solution 0.1% (Lotion) | | | 0.21162 | |
| Montelukast Sodium Chew Tab 4 MG (Base Equiv) | 0.11323 | | 0.10275 | |
| Montelukast Sodium Chew Tab 5 MG (Base Equiv) | 0.10502 | | 0.08200 | |
| Montelukast Sodium Oral Granules Packet 4 MG (Base Equiv) | | | 1.78811 | |
| Montelukast Sodium Tab 10 MG (Base Equiv) | 0.09058 | | 0.06012 | |
| Morphine Sulfate Cap ER 24HR 10 MG | 2.55006 | | 2.59779 | |
| Morphine Sulfate Cap ER 24HR 100 MG | | | 12.65118 | |
| Morphine Sulfate Cap ER 24HR 20 MG | 2.63013 | | 2.02442 | |
| Morphine Sulfate Cap ER 24HR 30 MG | | | 1.18850 | |
| Morphine Sulfate Cap ER 24HR 50 MG | | | 4.53359 | |
| Morphine Sulfate Cap ER 24HR 60 MG | | | 4.77806 | |
| Morphine Sulfate Inj 10 MG/ML | | | 0.52000 | |
| Morphine Sulfate Oral Soln 10 MG/5ML | 0.04890 | | 0.04020 | |
| Morphine Sulfate Oral Soln 100 MG/5ML (20 MG/ML) | | | 0.24545 | |
| Morphine Sulfate Tab 15 MG | | | 0.09000 | |
| Morphine Sulfate Tab 30 MG | | | 0.68000 | |
| Morphine Sulfate Tab ER 100 MG | 1.24929 | | 0.70590 | |
| Morphine Sulfate Tab ER 15 MG | 0.21202 | | 0.15750 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Morphine Sulfate Tab ER 200 MG | 2.76785 | | 1.86820 | |
| Morphine Sulfate Tab ER 30 MG | 0.37998 | 0.29421 | 0.23720 | 05/01/2020 |
| Morphine Sulfate Tab ER 60 MG | 0.73060 | | 0.54275 | |
| Moxifloxacin HCl Ophth Soln 0.5% (Base Equiv) | 9.99293 | | 6.63333 | |
| Moxifloxacin HCl Tab 400 MG (Base Equiv) | 1.40435 | | 1.33333 | |
| Multiple Vitamin Tab** | | | 0.02313 | |
| Multiple Vitamins w/ Iron Tab** | | | 0.02788 | |
| Multiple Vitamins w/ Minerals Tab** | | | 2.18465 | |
| Mupirocin Calcium Cream 2% | | | 10.99000 | |
| Mupirocin Oint 2% | | | 0.17156 | |
| Mycophenolate Mofetil Cap 250 MG | | | 0.12520 | |
| Mycophenolate Mofetil For Oral Susp 200 MG/ML | 5.97458 | | 4.56844 | |
| Mycophenolate Mofetil Tab 500 MG | 0.91099 | | 0.15350 | |
| Mycophenolate Sodium Tab DR 180 MG (Mycophenolic Acid Equiv) | 1.26029 | | 1.17009 | |
| Mycophenolate Sodium Tab DR 360 MG (Mycophenolic Acid Equiv) | 2.75843 | | 2.50883 | |
| Nabumetone Tab 500 MG | 0.21556 | | 0.15359 | |
| Nabumetone Tab 750 MG | 0.23815 | | 0.18017 | |
| Nadolol Tab 20 MG | 0.53156 | | 0.29000 | |
| Nadolol Tab 40 MG | 0.62435 | | 0.59740 | |
| Nadolol Tab 80 MG | 1.04387 | | 0.97360 | |
| Naftifine HCl Cream 2% | | | 4.27667 | |
| Nalbuphine HCl Inj 20 MG/ML | | | 2.36600 | |
| Naloxone HCl Inj 0.4 MG/ML | | | 11.10000 | |
| Naloxone HCl Inj 4 MG/10ML | | | 13.56000 | |
| Naltrexone For IM Extended Release Susp 380 MG | | | 1287.62000 | |
| Naltrexone HCl Tab 50 MG | 0.82890 | | 0.57500 | |
| Naproxen Sodium Tab 275 MG | 0.62968 | | 0.08963 | |
| Naproxen Sodium Tab 550 MG | 0.49653 | | 0.35384 | |
| Naproxen Sodium Tab ER 24HR 375 MG (Base Equiv) | | | 9.75680 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Naproxen Sodium Tab ER 24HR 500 MG (Base Equiv) | | | 6.96787 | |
| Naproxen Susp 125 MG/5ML | | | 0.78000 | |
| Naproxen Tab 250 MG | 0.05188 | | 0.03202 | |
| Naproxen Tab 375 MG | 0.07673 | | 0.04691 | |
| Naproxen Tab 500 MG | 0.07119 | | 0.04409 | |
| Naproxen Tab EC 375 MG | 1.40256 | | 0.11710 | |
| Naproxen Tab EC 500 MG | | | 0.13590 | |
| Naratriptan HCl Tab 1 MG (Base Equiv) | 2.82459 | | 2.42489 | |
| Naratriptan HCl Tab 2.5 MG (Base Equiv) | 2.50283 | | 1.10278 | |
| Natalizumab for IV Inj Conc 300 MG/15ML | | | 439.57929 | |
| Nateglinide Tab 120 MG | 0.42400 | | 0.14756 | |
| Nateglinide Tab 60 MG | 0.29898 | | 0.28945 | |
| Nefazodone HCl Tab 100 MG | | | 0.46100 | |
| Nefazodone HCl Tab 150 MG | | | 0.47540 | |
| Nefazodone HCl Tab 200 MG | | | 0.46900 | |
| Nefazodone HCl Tab 250 MG | | | 0.49716 | |
| Nefazodone HCl Tab 50 MG | | | 0.24500 | |
| Neomycin Sulfate Tab 500 MG | 0.88401 | | 0.50000 | |
| Neomycin-Bacitrac Zn-Polymyx 5(3.5)MG-400Unt-10000Unt Op Oin | | | 3.90000 | |
| Neomycin-Polymy-Gramicid Op Sol 1.75-10000-0.025MG-UNT-MG/ML | | | 3.30000 | |
| Neomycin-Polymyxin B GU Irrigation Soln | | | 13.36010 | |
| Neomycin-Polymyxin-Dexamethasone Ophth Oint 0.1% | 4.43396 | | 1.53143 | |
| Neomycin-Polymyxin-Dexamethasone Ophth Susp 0.1% | | | 2.52100 | |
| Neomycin-Polymyxin-HC Ophth Susp | | | 14.80800 | |
| Neomycin-Polymyxin-HC Otic Soln 1% | | | 4.52000 | |
| Neomycin-Polymyxin-HC Otic Susp 3.5 MG/ML-10000 Unit/ML-1% | | | 4.99000 | |
| Nevirapine Tab 200 MG | 0.42238 | | 0.10617 | |
| Nevirapine Tab ER 24HR 400 MG | | | 0.44233 | |
| Niacin Tab ER 1000 MG (Antihyperlipidemic) | 1.27153 | | 0.62311 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------|---------|----------------|--------------------|----------------|
| Niacin Tab ER 500 MG (Antihyperlipidemic) | 0.83122 | | 0.08178 | |
| Niacin Tab ER 750 MG (Antihyperlipidemic) | 0.86546 | | 0.93243 | |
| Nicardipine HCl Cap 20 MG | | | 0.12545 | |
| Nicardipine HCl Cap 30 MG | | | 1.60211 | |
| Nifedipine Cap 10 MG | | | 0.26340 | |
| Nifedipine Cap 20 MG | 1.17968 | | 1.45000 | |
| Nifedipine Tab ER 24HR 30 MG | | | 0.11185 | |
| Nifedipine Tab ER 24HR 60 MG | | | 0.22052 | |
| Nifedipine Tab ER 24HR 90 MG | | | 0.19620 | |
| Nifedipine Tab ER 24HR Osmotic Release 30 MG | 0.29990 | | 0.10000 | |
| Nifedipine Tab ER 24HR Osmotic Release 60 MG | 0.43336 | | 0.20292 | |
| Nifedipine Tab ER 24HR Osmotic Release 90 MG | 1.14516 | | 0.15262 | |
| Nilutamide Tab 150 MG | | | 133.33333 | |
| Nisoldipine Tab ER 24HR 17 MG | | | 4.79755 | |
| Nisoldipine Tab ER 24HR 25.5 MG | | | 6.55000 | |
| Nisoldipine Tab ER 24HR 34 MG | | | 5.80000 | |
| Nisoldipine Tab ER 24HR 8.5 MG | | | 3.75000 | |
| Nitrofurantoin Macrocrystalline Cap 100 MG | 0.83523 | | 0.70332 | |
| Nitrofurantoin Macrocrystalline Cap 25 MG | 3.81895 | | 3.49140 | |
| Nitrofurantoin Macrocrystalline Cap 50 MG | 0.51720 | | 0.29340 | |
| Nitrofurantoin Monohydrate Macrocrystalline Cap 100 MG | 0.80001 | | 0.53861 | |
| Nitrofurantoin Susp 25 MG/5ML | | | 9.40983 | |
| Nitroglycerin SL Tab 0.3 MG | | | 0.23364 | |
| Nitroglycerin SL Tab 0.4 MG | | | 0.20950 | |
| Nitroglycerin SL Tab 0.6 MG | | | 0.27649 | |
| Nitroglycerin TD Patch 24HR 0.1 MG/HR | | | 0.53117 | |
| Nitroglycerin TD Patch 24HR 0.2 MG/HR | | | 0.35275 | |
| Nitroglycerin TD Patch 24HR 0.4 MG/HR | | | 0.39678 | |
| Nitroglycerin TD Patch 24HR 0.6 MG/HR | | | 0.49433 | |
| Nitroglycerin TL Soln 0.4 MG/SPRAY (400 MCG/SPRAY) | | | 16.00000 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Nizatidine Cap 150 MG | | | 0.20325 | |
| Nizatidine Cap 300 MG | | | 0.36667 | |
| Nizatidine Oral Soln 15 MG/ML | | | 1.00510 | |
| Norethindrone & Ethinyl Estradiol Tab 0.4 MG-35 MCG | 0.36390 | | 0.24429 | |
| Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG | | | 0.47533 | |
| Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG | 0.42990 | | 0.33595 | |
| Norethindrone & Ethinyl Estradiol-Fe Chew Tab 0.4 MG-35 MCG | | | 1.73000 | |
| Norethindrone & Ethinyl Estradiol-Fe Chew Tab 0.8 MG-25 MCG | 2.40634 | | 2.01000 | |
| Norethindrone & Mestranol Tab 1 MG-50MCG | | | 0.92340 | |
| Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG | | | 0.96988 | |
| Norethindrone Ace & Ethinyl Estradiol Tab 1 MG-20 MCG | 0.41161 | | 0.20508 | |
| Norethindrone Ace & Ethinyl Estradiol Tab 1.5 MG-30 MCG | 0.68160 | | 0.57873 | |
| Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG | 0.31029 | | 0.24895 | |
| Norethindrone Ace & Ethinyl Estradiol-FE Tab 1.5 MG-30 MCG | | | 0.16679 | |
| Norethindrone Ace-Eth Estradiol-FE Chew Tab 1 MG-20 MCG (24) | 3.45535 | | 1.78571 | |
| Norethindrone Ace-Ethinyl Estradiol-FE Tab 1 MG-20 MCG (24) | | | 0.69405 | |
| Norethindrone Acetate Tab 5 MG | 0.85362 | | 0.91840 | |
| Norethindrone Acetate-Ethinyl Estradiol Tab 0.5 MG-2.5 MCG | 1.29843 | | 1.91320 | |
| Norethindrone Acetate-Ethinyl Estradiol Tab 1 MG-5 MCG | 1.30169 | | 1.01938 | |
| Norethindrone Tab 0.35 MG | | | 0.08214 | |
| Norethindrone-Eth Estradiol Tab 0.5-35/0.75-35/1-35 MG-MCG | 0.48932 | | 0.15179 | |
| Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG | | | 0.51609 | |
| Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG | 0.25642 | | 0.18299 | |
| Norgestimate-Eth Estrad Tab 0.18-25/0.215-25/0.25-25 MG-MCG | 0.29126 | | 0.17845 | |
| Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG | | | 0.09250 | |
| Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG | 0.45422 | | 0.26161 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------|---------|----------------|--------------------|----------------|
| Nortriptyline HCl Cap 10 MG | 0.11611 | | 0.06356 | |
| Nortriptyline HCl Cap 25 MG | 0.13321 | | 0.06686 | |
| Nortriptyline HCl Cap 50 MG | 0.15498 | | 0.07767 | |
| Nortriptyline HCl Cap 75 MG | 0.28597 | | 0.12989 | |
| Nortriptyline HCl Soln 10 MG/5ML | | | 0.25084 | |
| Nusinersen Intrathecal Soln 12 MG/5ML (2.4 MG/ML) | | | 24950.00000 | |
| Nystatin Cream 100000 Unit/GM | | | 0.16033 | |
| Nystatin Oint 100000 Unit/GM | | | 0.29817 | |
| Nystatin Susp 100000 Unit/ML | | | 0.07424 | |
| Nystatin Tab 500000 Unit | 0.43923 | | 0.34870 | |
| Nystatin Topical Powder | | | 0.68313 | |
| Nystatin Topical Powder 100000 Unit/GM | | | 0.26384 | |
| Nystatin-Triamcinolone Cream 100000-0.1 Unit/GM-% | | | 0.38408 | |
| Nystatin-Triamcinolone Oint 100000-0.1 Unit/GM-% | | | 0.18333 | |
| Octreotide Acetate For IM Inj Kit 20 MG | | | 4247.68104 | |
| Octreotide Acetate For IM Inj Kit 30 MG | | | 6360.59544 | |
| Octreotide Acetate Inj 100 MCG/ML (0.1 MG/ML) | | | 2.69662 | |
| Octreotide Acetate Inj 1000 MCG/ML (1 MG/ML) | | | 44.25000 | |
| Octreotide Acetate Inj 200 MCG/ML (0.2 MG/ML) | | | 9.10000 | |
| Octreotide Acetate Inj 50 MCG/ML (0.05 MG/ML) | | | 2.68182 | |
| Octreotide Acetate Inj 500 MCG/ML (0.5 MG/ML) | | | 14.90000 | |
| Ofloxacin Ophth Soln 0.3% | | | 1.83240 | |
| Ofloxacin Otic Soln 0.3% | | | 2.39150 | |
| Olanzapine For IM Inj 10 MG | | | 26.97600 | |
| Olanzapine Orally Disintegrating Tab 10 MG | 1.08206 | | 0.35333 | |
| Olanzapine Orally Disintegrating Tab 15 MG | 2.46498 | | 0.57400 | |
| Olanzapine Orally Disintegrating Tab 20 MG | 2.95846 | | 0.41667 | |
| Olanzapine Orally Disintegrating Tab 5 MG | 0.82815 | | 0.18167 | |
| Olanzapine Tab 10 MG | 0.32699 | 0.13334 | 0.10867 | 05/01/2020 |
| Olanzapine Tab 15 MG | 0.61106 | 0.17051 | 0.11167 | 05/01/2020 |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Olanzapine Tab 2.5 MG | 0.14149 | | 0.07267 | |
| Olanzapine Tab 20 MG | 0.69887 | | 0.10000 | |
| Olanzapine Tab 5 MG | 0.21401 | 0.08524 | 0.06533 | 05/01/2020 |
| Olanzapine Tab 7.5 MG | 0.19934 | | 0.08533 | |
| Olanzapine-Fluoxetine HCl Cap 12-25 MG | | | 6.71087 | |
| Olanzapine-Fluoxetine HCl Cap 12-50 MG | | | 10.03205 | |
| Olanzapine-Fluoxetine HCl Cap 3-25 MG | | | 4.74767 | |
| Olanzapine-Fluoxetine HCl Cap 6-25 MG | 6.52117 | | 5.30145 | |
| Olanzapine-Fluoxetine HCl Cap 6-50 MG | | | 7.83104 | |
| Olmesartan Medoxomil Tab 20 MG | 0.20182 | | 0.02211 | |
| Olmesartan Medoxomil Tab 40 MG | 0.24301 | | 0.16989 | |
| Olmesartan Medoxomil Tab 5 MG | 0.15440 | | 0.04767 | |
| Olmesartan Medoxomil-Hydrochlorothiazide Tab 20-12.5 MG | 0.59161 | | 0.13000 | |
| Olmesartan Medoxomil-Hydrochlorothiazide Tab 40-12.5 MG | 0.78048 | | 0.19648 | |
| Olmesartan Medoxomil-Hydrochlorothiazide Tab 40-25 MG | 0.44037 | | 0.17600 | |
| Olmesartan-Amlodipine-Hydrochlorothiazide Tab 20-5-12.5 MG | 2.03198 | | 1.37855 | |
| Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-10-12.5 MG | | | 1.82389 | |
| Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-10-25 MG | 2.14740 | 1.61800 | 0.99833 | 05/01/2020 |
| Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-5-12.5 MG | 1.83411 | | 1.89000 | |
| Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-5-25 MG | 1.63412 | | 1.71000 | |
| Olopatadine HCl Nasal Soln 0.6% | | | 2.15795 | |
| Olopatadine HCl Ophth Soln 0.1% (Base Equivalent) | | | 2.10667 | |
| Olopatadine HCl Ophth Soln 0.2% (Base Equivalent) | 8.93046 | | 3.98000 | |
| Omega-3-acid Ethyl Esters Cap 1 GM | 0.33712 | | 0.21378 | |
| Omeprazole Cap Delayed Release 10 MG | 0.19751 | | 0.02056 | |
| Omeprazole Cap Delayed Release 20 MG | 0.05619 | | 0.03423 | |
| Omeprazole Cap Delayed Release 40 MG | 0.07077 | | 0.04480 | |
| Omeprazole-Sodium Bicarbonate Cap 20-1100 MG | 1.63133 | | 2.08363 | |
| Omeprazole-Sodium Bicarbonate Cap 40-1100 MG | 8.41892 | | 1.28050 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Omeprazole-Sodium Bicarbonate Powd Pack for Susp 40-1680 MG | | | 20.17800 | |
| OnabotulinumtoxinA (Cosmetic) For Inj 50 Unit | | | 329.67600 | |
| Ondansetron HCl Inj 4 MG/2ML (2 MG/ML) | | | 0.14720 | |
| Ondansetron HCl Inj 40 MG/20ML (2 MG/ML) | | | 0.10075 | |
| Ondansetron HCl Oral Soln 4 MG/5ML | 0.33643 | 0.26567 | 0.21000 | 05/01/2020 |
| Ondansetron HCl Tab 4 MG | 0.08540 | | 0.07664 | |
| Ondansetron HCl Tab 8 MG | 0.11888 | | 0.12277 | |
| Ondansetron Orally Disintegrating Tab 4 MG | 0.27491 | | 0.17857 | |
| Ondansetron Orally Disintegrating Tab 8 MG | 0.30358 | | 0.22773 | |
| Opium Tincture 1% (10 MG/ML) (Morphine Equiv) | | | 2.38890 | |
| Oral Vehicles - Syrup*** | | | 0.04063 | |
| Oral Vehicles*** | | | 0.04063 | |
| Orphenadrine Citrate Tab ER 12HR 100 MG | | | 0.14850 | |
| Orphenadrine w/ Aspirin & Caffeine Tab 50-770-60 MG | | | 2.04000 | |
| Oseltamivir Phosphate Cap 30 MG (Base Equiv) | 3.69505 | | 3.64600 | |
| Oseltamivir Phosphate Cap 45 MG (Base Equiv) | 4.05111 | | 4.12900 | |
| Oseltamivir Phosphate Cap 75 MG (Base Equiv) | 2.61583 | | 2.70000 | |
| Oseltamivir Phosphate For Susp 6 MG/ML (Base Equiv) | 0.65681 | | 0.76000 | |
| Oxacillin Sodium For Inj 2 GM (Base Equivalent) | | | 10.16600 | |
| Oxandrolone Tab 2.5 MG | | | 3.19985 | |
| Oxaprozin Tab 600 MG | 0.71632 | | 0.76500 | |
| Oxazepam Cap 10 MG | | | 0.50649 | |
| Oxazepam Cap 15 MG | | | 0.77050 | |
| Oxazepam Cap 30 MG | | | 1.06925 | |
| Oxcarbazepine Susp 300 MG/5ML (60 MG/ML) | 0.87859 | | 0.27481 | |
| Oxcarbazepine Tab 150 MG | 0.17731 | | 0.07290 | |
| Oxcarbazepine Tab 300 MG | 0.41167 | | 0.16530 | |
| Oxcarbazepine Tab 600 MG | 0.90760 | | 0.29154 | |
| Oxiconazole Nitrate Cream 1% | | | 6.03042 | |
| Oxybutynin Chloride Syrup 5 MG/5ML | | | 0.01858 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------|---------|----------------|--------------------|----------------|
| Oxybutynin Chloride Tab 5 MG | 0.12405 | | 0.06620 | |
| Oxybutynin Chloride Tab ER 24HR 10 MG | 0.32505 | | 0.19402 | |
| Oxybutynin Chloride Tab ER 24HR 15 MG | 0.32238 | | 0.31443 | |
| Oxybutynin Chloride Tab ER 24HR 5 MG | 0.30084 | | 0.18040 | |
| Oxycodone HCl Cap 5 MG | 0.94460 | | 0.53200 | |
| Oxycodone HCl Conc 100 MG/5ML (20 MG/ML) | 2.80667 | | 2.61221 | |
| Oxycodone HCl Soln 5 MG/5ML | | | 0.09998 | |
| Oxycodone HCl Tab 10 MG | 0.17209 | | 0.12574 | |
| Oxycodone HCl Tab 15 MG | 0.14129 | | 0.11260 | |
| Oxycodone HCl Tab 20 MG | 0.21692 | | 0.19400 | |
| Oxycodone HCl Tab 30 MG | 0.25328 | | 0.19490 | |
| Oxycodone HCl Tab 5 MG | 0.10187 | | 0.06683 | |
| Oxycodone HCl Tab ER 12HR Deter 10 MG | | | 2.10788 | |
| Oxycodone HCl Tab ER 12HR Deter 20 MG | | | 4.51060 | |
| Oxycodone HCl Tab ER 12HR Deter 40 MG | | | 6.14895 | |
| Oxycodone HCl Tab ER 12HR Deter 80 MG | | | 12.00223 | |
| Oxycodone w/ Acetaminophen Tab 10-325 MG | 0.37294 | | 0.24612 | |
| Oxycodone w/ Acetaminophen Tab 2.5-325 MG | 1.85840 | | 1.47814 | |
| Oxycodone w/ Acetaminophen Tab 5-325 MG | 0.14801 | | 0.08296 | |
| Oxycodone w/ Acetaminophen Tab 7.5-325 MG | 0.24377 | | 0.16020 | |
| Oxycodone-Aspirin Tab 4.8355-325 MG | | | 0.59858 | |
| Oxymorphone HCl Tab 10 MG | 0.68740 | | 1.08716 | |
| Oxymorphone HCl Tab 5 MG | 0.82676 | | 0.77624 | |
| Oxymorphone HCl Tab ER 12HR 10 MG | | | 2.59517 | |
| Paclitaxel IV Conc 100 MG/16.7ML (6 MG/ML) | | | 1.17465 | |
| Paclitaxel IV Conc 150 MG/25ML (6 MG/ML) | | | 1.17465 | |
| Paclitaxel IV Conc 30 MG/5ML (6 MG/ML) | | | 1.17465 | |
| Paclitaxel IV Conc 300 MG/50ML (6 MG/ML) | | | 1.17465 | |
| Palbociclib Cap 100 MG | | 564.59714 | 592.82714 | 03/16/2020 |
| Palbociclib Cap 125 MG | | 564.59714 | 592.82714 | 02/19/2020 |

**Illinois Department of Healthcare and Family Services
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Generic and Multi-Source Brand Drugs**

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Palbociclib Cap 75 MG | | | 562.33875 | |
| Paliperidone Tab ER 24HR 1.5 MG | 16.41604 | | 9.18267 | |
| Paliperidone Tab ER 24HR 3 MG | 14.84601 | | 5.76667 | |
| Paliperidone Tab ER 24HR 6 MG | 16.47982 | | 6.55133 | |
| Paliperidone Tab ER 24HR 9 MG | 29.11315 | | 12.00000 | |
| Palonosetron HCl IV Soln 0.25 MG/5ML (Base Equivalent) | | | 8.71120 | |
| Pamidronate Disodium For Inj 90 MG | | | 56.37000 | |
| Pamidronate Disodium IV Soln 3 MG/ML | | | 1.95000 | |
| Pamidronate Disodium IV Soln 6 MG/ML | | | 3.50090 | |
| Pamidronate Disodium IV Soln 9 MG/ML | | | 4.39660 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 10000-32000-42000 Unit | | | 3.22258 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 10500-35500-61500 Unit | | | 2.99699 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 12000-38000-60000 Unit | | | 2.99529 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 15000-47000-63000 Unit | | | 4.61355 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 16000-57500-60500 Unit | | | 4.65068 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 16800-56800-98400 Unit | | | 4.81236 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 21000-54700-83900 Unit | | | 5.99399 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 24000-76000-120000 Unit | | | 5.90510 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 24000-86250-90750 Unit | | | 6.97602 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 25000-79000-105000 Unit | | | 7.85400 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 2600-6200-10850 Unit | | | 0.74151 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 3000-10000-14000 Unit | | | 1.77275 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 3000-9500-15000 Unit | | | 1.26377 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 36000-114000-180000 Unit | | | 9.53010 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 4000-14375-15125 Unit | | | 1.55688 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 40000-126000-168000 Unit | | | 12.48915 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Pancrelipase (Lip-Prot-Amyl) DR Cap 4200-14200-24600 Unit | | | 1.19860 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 5000-17000-24000 Unit | | | 1.61331 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 6000-19000-30000 Unit | | | 1.49220 | |
| Pancrelipase (Lip-Prot-Amyl) DR Cap 8000-28750-30250 Unit | | | 2.32534 | |
| Pancrelipase (Lip-Prot-Amyl) Tab 10440-39150-39150 Unit | | | 2.93292 | |
| Pancrelipase (Lip-Prot-Amyl) Tab 20880-78300-78300 Unit | | | 5.78630 | |
| Pantoprazole Sodium EC Tab 20 MG (Base Equiv) | 0.09960 | | 0.04411 | |
| Pantoprazole Sodium EC Tab 40 MG (Base Equiv) | 0.11281 | | 0.05844 | |
| Paricalcitol Cap 1 MCG | 1.53725 | | 0.94067 | |
| Paricalcitol Cap 2 MCG | | | 8.16667 | |
| Paroxetine HCl Tab 10 MG | 0.07162 | | 0.04078 | |
| Paroxetine HCl Tab 20 MG | 0.08681 | | 0.05422 | |
| Paroxetine HCl Tab 30 MG | 0.11169 | | 0.08967 | |
| Paroxetine HCl Tab 40 MG | 0.13156 | | 0.09200 | |
| Paroxetine HCl Tab ER 24HR 12.5 MG | 1.71439 | | 1.31183 | |
| Paroxetine HCl Tab ER 24HR 25 MG | 1.55126 | | 1.27800 | |
| Paroxetine HCl Tab ER 24HR 37.5 MG | 2.42628 | | 0.83200 | |
| Paroxetine Mesylate Cap 7.5 MG (Base Equiv) | 4.73911 | | 4.52294 | |
| Pediatric Multiple Vitamins w/ FI-Fe Drops 0.25-10 MG/ML** | | | 0.11440 | |
| Pediatric Multiple Vitamins w/ Fluoride Chew Tab 0.25 MG*** | | | 0.06770 | |
| Pediatric Multiple Vitamins w/ Fluoride Chew Tab 0.5 MG*** | | | 0.06583 | |
| Pediatric Multiple Vitamins w/ Fluoride Chew Tab 1 MG*** | | | 0.08267 | |
| Pediatric Multiple Vitamins w/ Fluoride Soln 0.25 MG/ML*** | | | 0.10270 | |
| Pediatric Multiple Vitamins w/ Fluoride Soln 0.5 MG/ML*** | | | 0.11440 | |
| Pediatric Vitamins ACD Fluoride & Fe Drops 0.25-10 MG/ML*** | | | 0.12480 | |
| Pediatric Vitamins ACD w/ Fluoride Soln 0.25 MG/ML*** | | | 0.10270 | |
| Pediatric Vitamins ACD w/ Fluoride Soln 0.5 MG/ML*** | | | 0.10270 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|---------|----------------|--------------------|----------------|
| PEG 3350-KCI-Na Bicarb-NaCl-Na Sulfate For Soln 236 GM | 0.00427 | | 0.00295 | |
| PEG 3350-KCI-Na Bicarb-NaCl-Na Sulfate For Soln 240 GM | | | 0.00226 | |
| PEG 3350-KCI-Sod Bicarb-NaCl For Soln 420 GM | 0.00419 | | 0.00380 | |
| Peginterferon alfa-2a Inj 180 MCG/ML | | | 1017.40404 | |
| Peginterferon alfa-2b For Inj Kit 150 MCG/0.5ML | | | 867.21720 | |
| Peginterferon Beta-1a Soln Pen-injector 125 MCG/0.5ML | | | 6898.04700 | |
| Peginterferon Beta-1a Soln Prefilled Syringe 125 MCG/0.5ML | | | 6898.04700 | |
| Penicillin G Potassium For Inj 5000000 Unit | | | 5.09100 | |
| Penicillin V Potassium For Soln 125 MG/5ML | | | 0.02880 | |
| Penicillin V Potassium For Soln 250 MG/5ML | | | 0.05925 | |
| Penicillin V Potassium Tab 250 MG | 0.09599 | | 0.05000 | |
| Penicillin V Potassium Tab 500 MG | 0.11573 | | 0.05740 | |
| Pentazocine w/ Naloxone Tab 50-0.5 MG | | | 1.05396 | |
| Pentoxifylline Tab ER 400 MG | 0.20064 | | 0.12795 | |
| Perindopril Erbumine Tab 2 MG | | | 0.72800 | |
| Perindopril Erbumine Tab 4 MG | | | 0.44901 | |
| Perindopril Erbumine Tab 8 MG | | | 0.44392 | |
| Permethrin Cream 5% | 0.51811 | | 0.29678 | |
| Permethrin Creme Rinse 1% | | | 0.14150 | |
| Perphenazine Tab 16 MG | 0.75015 | | 0.76030 | |
| Perphenazine Tab 2 MG | 0.36541 | | 0.33598 | |
| Perphenazine Tab 4 MG | 0.43267 | | 0.42579 | |
| Perphenazine Tab 8 MG | 0.50276 | | 0.47070 | |
| Perphenazine-Amitriptyline Tab 2-10 MG | | | 0.06450 | |
| Perphenazine-Amitriptyline Tab 2-25 MG | | | 1.27540 | |
| Perphenazine-Amitriptyline Tab 4-10 MG | | | 0.21320 | |
| Perphenazine-Amitriptyline Tab 4-25 MG | | | 0.71400 | |
| Perphenazine-Amitriptyline Tab 4-50 MG | | | 1.11240 | |
| Phenazopyridine HCl Tab 100 MG | | | 0.52670 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------|----------|----------------|--------------------|----------------|
| Phenazopyridine HCl Tab 200 MG | | | 0.29990 | |
| Phendimetrazine Tartrate Tab 35 MG | 0.15121 | | 0.12531 | |
| Phenelzine Sulfate Tab 15 MG | | | 0.54005 | |
| Phenobarbital Elixir 20 MG/5ML | | | 0.11827 | |
| Phenobarbital Tab 100 MG | | | 0.08363 | |
| Phenobarbital Tab 15 MG | | | 0.11663 | |
| Phenobarbital Tab 16.2 MG | | | 0.32878 | |
| Phenobarbital Tab 30 MG | | | 0.17635 | |
| Phenobarbital Tab 32.4 MG | | | 0.37996 | |
| Phenobarbital Tab 60 MG | | | 0.22000 | |
| Phenobarbital Tab 64.8 MG | | | 0.48560 | |
| Phenobarbital Tab 97.2 MG | | | 0.80000 | |
| Phentermine HCl Cap 15 MG | 0.13077 | | 0.16000 | |
| Phentermine HCl Cap 30 MG | 0.17000 | | 0.15680 | |
| Phentermine HCl Cap 37.5 MG | | | 0.12359 | |
| Phentermine HCl Tab 37.5 MG | 0.17766 | | 0.05568 | |
| Phenylephrine HCl Ophth Soln 2.5% | | | 2.08607 | |
| Phenytoin Chew Tab 50 MG | 0.61947 | | 0.19360 | |
| Phenytoin Sodium Extended Cap 100 MG | 0.55514 | | 0.16530 | |
| Phenytoin Sodium Extended Cap 200 MG | | | 1.02087 | |
| Phenytoin Sodium Extended Cap 300 MG | | | 1.48270 | |
| Phenytoin Sodium Inj 50 MG/ML | | | 0.42900 | |
| Phenytoin Susp 125 MG/5ML | 0.10435 | | 0.06283 | |
| Phytonadione Tab 5 MG | 52.90537 | | 52.90540 | |
| Pilocarpine HCl Ophth Soln 1% | 5.20373 | | 3.84333 | |
| Pilocarpine HCl Ophth Soln 2% | 5.14628 | | 4.28333 | |
| Pilocarpine HCl Ophth Soln 4% | 5.70963 | | 4.14400 | |
| Pilocarpine HCl Tab 5 MG | 0.71899 | | 0.28990 | |
| Pilocarpine HCl Tab 7.5 MG | | | 1.04620 | |
| Pimecrolimus Cream 1% | | | 7.37077 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Pindolol Tab 10 MG | 1.93188 | | 0.79990 | |
| Pindolol Tab 5 MG | 1.69961 | | 0.47956 | |
| Pioglitazone HCl Tab 15 MG (Base Equiv) | 0.18820 | | 0.05857 | |
| Pioglitazone HCl Tab 30 MG (Base Equiv) | 0.25171 | | 0.07133 | |
| Pioglitazone HCl Tab 45 MG (Base Equiv) | 0.25982 | | 0.03389 | |
| Pioglitazone HCl-Glimepiride Tab 30-4 MG | | | 10.22653 | |
| Pioglitazone HCl-Metformin HCl Tab 15-500 MG | 0.73613 | | 0.84389 | |
| Pioglitazone HCl-Metformin HCl Tab 15-850 MG | 0.60688 | | 0.61100 | |
| Piperacillin Sod-Tazobactam Na For Inj 3.375 GM (3-0.375 GM) | | | 14.06600 | |
| Piperacillin Sod-Tazobactam Sod For Inj 2.25 GM (2-0.25 GM) | | | 9.43800 | |
| Piperacillin Sod-Tazobactam Sod For Inj 4.5 GM (4-0.5 GM) | | | 5.04200 | |
| Piroxicam Cap 10 MG | 0.35177 | | 0.08918 | |
| Piroxicam Cap 20 MG | 0.68118 | | 0.23350 | |
| Podofilox Soln 0.5% | | | 10.30953 | |
| Podophyllum Resin Soln 25% | | | 6.44453 | |
| Polyethylene Glycol 3350 Oral Packet 17 GM | | | 1.35100 | |
| Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP | | | 0.02051 | |
| Polyethylene Glycol 3350 Powder | | | 0.03096 | |
| Polymyxin B-Trimethoprim Ophth Soln 10000 Unit/ML-0.1% | 0.55969 | | 0.38700 | |
| Posaconazole Tab Delayed Release 100 MG | | | 27.37300 | |
| Pot Phos Monobasic w/Sod Phos Di & Monobas Tab 155-852-130MG | | | 0.17733 | |
| Potassium Acetate Inj 2 mEq/ML | | | 0.17000 | |
| Potassium Bicarbonate Effer Tab 25 mEq | | | 0.18200 | |
| Potassium Chloride 20 MEQ/L (0.15%) in Dextrose 5% Inj | | | 0.00303 | |
| Potassium Chloride Cap ER 10 mEq | 0.18327 | | 0.15135 | |
| Potassium Chloride Cap ER 8 mEq | | | 0.15000 | |
| Potassium Chloride Inj 2 mEq/ML | | | 0.04150 | |
| Potassium Chloride Microencapsulated Crys ER Tab 10 mEq | 0.33089 | | 0.19245 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|----------|----------------|--------------------|----------------|
| Potassium Chloride Microencapsulated Crys ER Tab 20 mEq | | | 0.18912 | |
| Potassium Chloride Oral Soln 10% (20 MEQ/15ML) | 0.30243 | | 0.17428 | |
| Potassium Chloride Oral Soln 20% (40 MEQ/15ML) | 0.69251 | | 0.38055 | |
| Potassium Chloride Powder Packet 20 mEq | | | 4.03333 | |
| Potassium Chloride Powder Packet 25 mEq | | | 0.23387 | |
| Potassium Chloride Tab ER 10 mEq | 0.28315 | | 0.16146 | |
| Potassium Chloride Tab ER 20 mEq (1500 MG) | | | 0.35060 | |
| Potassium Chloride Tab ER 8 mEq (600 MG) | | | 0.16207 | |
| Potassium Citrate & Citric Acid Soln 1100-334 MG/5ML | | | 0.08112 | |
| Potassium Citrate Tab ER 10 MEQ (1080 MG) | 0.58349 | | 0.52180 | |
| Potassium Citrate Tab ER 15 MEQ (1620 MG) | 1.13078 | | 0.40120 | |
| Potassium Citrate Tab ER 5 MEQ (540 MG) | 0.67589 | | 0.52180 | |
| Pramipexole Dihydrochloride Tab 0.125 MG | 0.05511 | | 0.03978 | |
| Pramipexole Dihydrochloride Tab 0.25 MG | 0.04677 | | 0.03480 | |
| Pramipexole Dihydrochloride Tab 0.5 MG | 0.05566 | | 0.02844 | |
| Pramipexole Dihydrochloride Tab 0.75 MG | | | 0.07222 | |
| Pramipexole Dihydrochloride Tab 1 MG | 0.05724 | | 0.05161 | |
| Pramipexole Dihydrochloride Tab 1.5 MG | 0.06687 | | 0.05300 | |
| Pramipexole Dihydrochloride Tab ER 24HR 0.375 MG | | | 9.43194 | |
| Pramipexole Dihydrochloride Tab ER 24HR 1.5 MG | 10.62195 | | 10.33089 | |
| Prasugrel HCl Tab 10 MG (Base Equiv) | 0.56567 | | 0.23434 | |
| Prasugrel HCl Tab 5 MG (Base Equiv) | 0.92948 | | 0.46458 | |
| Pravastatin Sodium Tab 10 MG | 0.10508 | | 0.04363 | |
| Pravastatin Sodium Tab 20 MG | 0.08891 | | 0.06046 | |
| Pravastatin Sodium Tab 40 MG | 0.11981 | | 0.06651 | |
| Pravastatin Sodium Tab 80 MG | 0.16513 | | 0.11322 | |
| Prazosin HCl Cap 1 MG | 0.32059 | | 0.29557 | |
| Prazosin HCl Cap 2 MG | 0.47139 | | 0.27003 | |
| Prazosin HCl Cap 5 MG | 0.66924 | 0.37754 | 0.36400 | 05/01/2020 |
| Prednisolone Acetate Ophth Susp 1% | | | 5.79248 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Prednisolone Sod Phosph Oral Soln 6.7 MG/5ML (5 MG/5ML Base) | | | 0.57465 | |
| Prednisolone Sod Phosphate Oral Soln 15 MG/5ML (Base Equiv) | | | 0.07034 | |
| Prednisolone Syrup 15 MG/5ML (USP Solution Equivalent) | | | 0.03850 | |
| Prednisolone Syrup 5 MG/5ML | | | 0.11750 | |
| Prednisone Tab 1 MG | 0.12108 | | 0.08790 | |
| Prednisone Tab 10 MG | 0.09869 | | 0.09060 | |
| Prednisone Tab 2.5 MG | 0.10086 | | 0.08990 | |
| Prednisone Tab 20 MG | 0.13039 | | 0.08980 | |
| Prednisone Tab 5 MG | 0.08584 | | 0.05260 | |
| Prednisone Tab 50 MG | 0.28614 | | 0.23360 | |
| Prednisone Tab Therapy Pack 10 MG (21) | | | 0.26542 | |
| Prednisone Tab Therapy Pack 10 MG (48) | | | 0.26542 | |
| Prednisone Tab Therapy Pack 5 MG (21) | | | 0.12024 | |
| Prednisone Tab Therapy Pack 5 MG (48) | | | 0.12024 | |
| Pregabalin Cap 100 MG | | | 0.16100 | |
| Pregabalin Cap 150 MG | | | 0.17447 | |
| Pregabalin Cap 200 MG | | | 0.19745 | |
| Pregabalin Cap 225 MG | | | 0.22595 | |
| Pregabalin Cap 25 MG | | | 0.11111 | |
| Pregabalin Cap 300 MG | | | 0.17767 | |
| Pregabalin Cap 50 MG | | | 0.11222 | |
| Pregabalin Cap 75 MG | | | 0.15582 | |
| Pregabalin Soln 20 MG/ML | | | 0.14000 | |
| Prenatal Vit w/ DSS-Fe Fumarate-FA Tab 29-1 MG*** | | | 0.36000 | |
| Prenatal Vit w/ DSS-Iron Carbonyl-FA Tab 90-1 MG*** | | | 0.21653 | |
| Prenatal Vit w/ Fe Bisglycinate Chelate-FA Tab 29-1 MG*** | | | 0.29975 | |
| Prenatal Vit w/ Fe Fumarate-FA Tab 27-1 MG*** | | | 0.14526 | |
| Prenatal Vit w/ Fe Fumarate-FA Tab 28-1 MG*** | | | 0.18187 | |
| Prenatal Vit w/ Fe Fumarate-FA Tab 29-1 MG*** | | | 0.15587 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------------------|---------|----------------|--------------------|----------------|
| Prenatal Vit w/ Iron Carbonyl-FA Tab 29-1 MG*** | | | 0.16000 | |
| Prenatal Vit w/ Sel-Fe Fumarate-FA Tab 27-1 MG*** | | | 0.08435 | |
| Prenatal w/o A Vit w/ Fe Fum-FA Tab Chew 29-1 MG*** | | | 0.32000 | |
| Primidone Tab 250 MG | 2.37012 | | 0.13285 | |
| Primidone Tab 50 MG | 0.19450 | | 0.08207 | |
| Probenecid Tab 500 MG | | | 0.37921 | |
| Procarbazine HCl Cap 50 MG | | | 98.50440 | |
| Prochlorperazine Maleate Tab 10 MG (Base Equivalent) | | | 0.20370 | |
| Prochlorperazine Maleate Tab 5 MG (Base Equivalent) | | | 0.05210 | |
| Prochlorperazine Suppos 25 MG | | | 4.87250 | |
| Progesterone IM in Oil 50 MG/ML | | | 1.52800 | |
| Progesterone Micronized Cap 100 MG | 0.42867 | | 0.46020 | |
| Progesterone Micronized Cap 200 MG | 0.69767 | | 0.65200 | |
| Progesterone Vaginal Gel 8% | | | 26.45376 | |
| Promethazine & Phenylephrine Syrup 6.25-5 MG/5ML | | | 0.01818 | |
| Promethazine HCl Inj 25 MG/ML | | | 0.90630 | |
| Promethazine HCl Inj 50 MG/ML | | | 1.77568 | |
| Promethazine HCl Suppos 12.5 MG | 6.22403 | | 5.73417 | |
| Promethazine HCl Suppos 25 MG | 5.39049 | | 3.57167 | |
| Promethazine HCl Syrup 6.25 MG/5ML | | | 0.01551 | |
| Promethazine HCl Tab 12.5 MG | 0.06000 | | 0.04160 | |
| Promethazine HCl Tab 25 MG | 0.04897 | | 0.04713 | |
| Promethazine HCl Tab 50 MG | 0.12303 | | 0.14205 | |
| Promethazine w/ Codeine Syrup 6.25-10 MG/5ML | 0.10493 | | 0.01268 | |
| Promethazine-DM Syrup 6.25-15 MG/5ML | | | 0.00863 | |
| Promethazine-Phenylephrine-Codeine Syrup 6.25-5-10 MG/5ML | | | 0.07010 | |
| Propafenone HCl Cap ER 12HR 225 MG | 2.83252 | | 2.55580 | |
| Propafenone HCl Cap ER 12HR 325 MG | 4.58921 | | 3.64504 | |
| Propafenone HCl Cap ER 12HR 425 MG | 3.68686 | | 5.68307 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------|---------|----------------|--------------------|----------------|
| Propafenone HCl Tab 150 MG | 0.16060 | | 0.10840 | |
| Propafenone HCl Tab 225 MG | 0.23393 | | 0.19070 | |
| Propafenone HCl Tab 300 MG | | | 0.62703 | |
| Proparacaine HCl Opth Soln 0.5% | 2.72088 | | 0.19507 | |
| Propranolol HCl Cap ER 24HR 120 MG | 0.64592 | | 0.48525 | |
| Propranolol HCl Cap ER 24HR 160 MG | 1.14292 | | 0.35770 | |
| Propranolol HCl Cap ER 24HR 60 MG | 0.52700 | | 0.24880 | |
| Propranolol HCl Cap ER 24HR 80 MG | 0.61464 | | 0.27910 | |
| Propranolol HCl Oral Soln 20 MG/5ML | | | 0.09670 | |
| Propranolol HCl Tab 10 MG | 0.09270 | | 0.07170 | |
| Propranolol HCl Tab 20 MG | 0.13140 | | 0.08990 | |
| Propranolol HCl Tab 40 MG | 0.16307 | | 0.14630 | |
| Propranolol HCl Tab 60 MG | 0.52183 | | 0.47256 | |
| Propranolol HCl Tab 80 MG | 0.26458 | | 0.17910 | |
| Propylthiouracil Tab 50 MG | | | 0.17870 | |
| Protriptyline HCl Tab 10 MG | | | 1.43650 | |
| Pseudoephed-Bromphen-DM Syrup 30-2-10 MG/5ML | | | 0.05776 | |
| Pyrazinamide Tab 500 MG | | | 1.92400 | |
| Pyridostigmine Bromide Tab 60 MG | 0.49292 | | 0.24830 | |
| Pyridostigmine Bromide Tab ER 180 MG | 8.75449 | | 7.33730 | |
| Pyridoxine HCl Powder | | | 0.24781 | |
| Quetiapine Fumarate Tab 100 MG | 0.12693 | | 0.07000 | |
| Quetiapine Fumarate Tab 200 MG | 0.22396 | | 0.07230 | |
| Quetiapine Fumarate Tab 25 MG | 0.05235 | | 0.03388 | |
| Quetiapine Fumarate Tab 300 MG | 0.26392 | | 0.12583 | |
| Quetiapine Fumarate Tab 400 MG | 0.44955 | | 0.11879 | |
| Quetiapine Fumarate Tab 50 MG | 0.06940 | | 0.04559 | |
| Quetiapine Fumarate Tab ER 24HR 150 MG | 1.11355 | | 0.10817 | |
| Quetiapine Fumarate Tab ER 24HR 200 MG | 1.39269 | | 0.25400 | |
| Quetiapine Fumarate Tab ER 24HR 300 MG | 1.37600 | | 0.46206 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------|---------|----------------|--------------------|----------------|
| Quetiapine Fumarate Tab ER 24HR 400 MG | 1.72669 | | 0.56737 | |
| Quetiapine Fumarate Tab ER 24HR 50 MG | 0.54717 | | 0.13350 | |
| Quinapril HCl Tab 10 MG | 0.40197 | | 0.09013 | |
| Quinapril HCl Tab 20 MG | 0.36494 | | 0.07900 | |
| Quinapril HCl Tab 40 MG | 0.35839 | | 0.07200 | |
| Quinapril HCl Tab 5 MG | 0.09674 | | 0.08701 | |
| Quinapril-Hydrochlorothiazide Tab 10-12.5 MG | 0.47570 | | 0.44502 | |
| Quinapril-Hydrochlorothiazide Tab 20-12.5 MG | 0.39896 | | 0.36578 | |
| Quinapril-Hydrochlorothiazide Tab 20-25 MG | 0.42603 | | 0.35755 | |
| Quinidine Gluconate Tab ER 324 MG | | | 6.82330 | |
| Quinine Sulfate Cap 324 MG | 1.58033 | | 1.69000 | |
| Rabeprazole Sodium EC Tab 20 MG | 0.74575 | | 0.19089 | |
| Raloxifene HCl Tab 60 MG | 0.81939 | | 0.32000 | |
| Ramelteon Tab 8 MG | 3.51977 | | 3.03167 | |
| Ramipril Cap 1.25 MG | 0.12080 | | 0.08994 | |
| Ramipril Cap 10 MG | 0.29365 | | 0.04168 | |
| Ramipril Cap 2.5 MG | 0.10456 | | 0.04723 | |
| Ramipril Cap 5 MG | 0.11561 | | 0.05187 | |
| Ranitidine HCl Cap 150 MG | | | 0.25625 | |
| Ranitidine HCl Cap 300 MG | | | 0.65926 | |
| Ranitidine HCl Syrup 15 MG/ML (75 MG/5ML) | 0.11578 | | 0.01956 | |
| Ranitidine HCl Tab 150 MG | | | 0.03460 | |
| Ranitidine HCl Tab 300 MG | | | 0.09489 | |
| Ranolazine Tab ER 12HR 1000 MG | | | 0.72164 | |
| Ranolazine Tab ER 12HR 500 MG | | | 0.34100 | |
| Rasagiline Mesylate Tab 0.5 MG (Base Equiv) | 5.63100 | | 2.65200 | |
| Rasagiline Mesylate Tab 1 MG (Base Equiv) | 4.74281 | | 4.40000 | |
| Repaglinide Tab 0.5 MG | 0.19028 | | 0.08777 | |
| Repaglinide Tab 1 MG | 0.17860 | | 0.13355 | |
| Repaglinide Tab 2 MG | 0.15802 | | 0.10198 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------|----------|----------------|--------------------|----------------|
| Reserpine Tab 0.1 MG | | | 0.06000 | |
| Ribavirin Cap 200 MG | | | 0.93250 | |
| Ribavirin Tab 200 MG | | | 0.57350 | |
| Rifabutin Cap 150 MG | | | 11.95918 | |
| Rifampin Cap 150 MG | 1.05415 | | 0.79485 | |
| Rifampin Cap 300 MG | 0.79499 | | 0.50500 | |
| Riluzole Tab 50 MG | | | 51.07770 | |
| Risedronate Sodium Tab 150 MG | 40.08653 | | 29.14556 | |
| Risedronate Sodium Tab 35 MG | 7.41670 | | 4.77875 | |
| Risedronate Sodium Tab 5 MG | | | 2.33300 | 05/01/2020 |
| Risedronate Sodium Tab Delayed Release 35 MG | 32.91019 | | 28.83938 | |
| Risperidone Orally Disintegrating Tab 0.25 MG | | | 1.18967 | |
| Risperidone Orally Disintegrating Tab 0.5 MG | | | 0.63219 | |
| Risperidone Orally Disintegrating Tab 1 MG | | | 0.53571 | |
| Risperidone Orally Disintegrating Tab 2 MG | | | 1.40689 | |
| Risperidone Orally Disintegrating Tab 3 MG | | | 1.15500 | |
| Risperidone Orally Disintegrating Tab 4 MG | | | 2.31447 | |
| Risperidone Soln 1 MG/ML | 0.68787 | | 0.21474 | |
| Risperidone Tab 0.25 MG | 0.05063 | | 0.02047 | |
| Risperidone Tab 0.5 MG | 0.07792 | | 0.02083 | |
| Risperidone Tab 1 MG | 0.10199 | | 0.05496 | |
| Risperidone Tab 2 MG | 0.11531 | | 0.05638 | |
| Risperidone Tab 3 MG | 0.20439 | | 0.04333 | |
| Risperidone Tab 4 MG | 0.25036 | | 0.07709 | |
| Ritonavir Tab 100 MG | 2.55639 | | 1.33333 | |
| Rivastigmine Tartrate Cap 1.5 MG (Base Equivalent) | 0.36907 | | 0.15325 | |
| Rivastigmine Tartrate Cap 3 MG (Base Equivalent) | 0.41227 | | 0.11583 | |
| Rivastigmine Tartrate Cap 4.5 MG (Base Equivalent) | 0.51371 | | 0.11583 | |
| Rivastigmine Tartrate Cap 6 MG (Base Equivalent) | 0.50972 | | 0.27576 | |
| Rivastigmine TD Patch 24HR 13.3 MG/24HR | 6.87040 | | 2.78575 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|--------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Rivastigmine TD Patch 24HR 4.6 MG/24HR | | | 1.79500 | |
| Rivastigmine TD Patch 24HR 9.5 MG/24HR | | | 2.99456 | |
| Rizatriptan Benzoate Oral Disintegrating Tab 10 MG (Base Eq) | 2.88291 | | 0.59194 | |
| Rizatriptan Benzoate Oral Disintegrating Tab 5 MG (Base Eq) | 1.21607 | | 0.55500 | |
| Rizatriptan Benzoate Tab 10 MG (Base Equivalent) | 1.45047 | | 0.37778 | |
| Rizatriptan Benzoate Tab 5 MG (Base Equivalent) | 0.92750 | 0.57750 | 0.43333 | 05/01/2020 |
| Ropinirole Hydrochloride Tab 0.25 MG | 0.07103 | | 0.05270 | |
| Ropinirole Hydrochloride Tab 0.5 MG | 0.05960 | | 0.04000 | |
| Ropinirole Hydrochloride Tab 1 MG | 0.05850 | | 0.04490 | |
| Ropinirole Hydrochloride Tab 2 MG | 0.06516 | | 0.06414 | |
| Ropinirole Hydrochloride Tab 3 MG | 0.08396 | | 0.08592 | |
| Ropinirole Hydrochloride Tab 4 MG | 0.11792 | | 0.06920 | |
| Ropinirole Hydrochloride Tab 5 MG | 0.13513 | | 0.08350 | |
| Ropinirole Hydrochloride Tab ER 24HR 12 MG (Base Equivalent) | 3.63844 | | 3.63095 | |
| Ropinirole Hydrochloride Tab ER 24HR 2 MG (Base Equivalent) | 0.90729 | | 0.74883 | |
| Ropinirole Hydrochloride Tab ER 24HR 4 MG (Base Equivalent) | 1.30039 | | 1.00020 | |
| Ropinirole Hydrochloride Tab ER 24HR 6 MG (Base Equivalent) | 2.29772 | | 1.61926 | |
| Ropinirole Hydrochloride Tab ER 24HR 8 MG (Base Equivalent) | 2.19867 | | 1.88900 | |
| Rosuvastatin Calcium Tab 10 MG | 0.17353 | | 0.06385 | |
| Rosuvastatin Calcium Tab 20 MG | 0.18569 | | 0.09461 | |
| Rosuvastatin Calcium Tab 40 MG | 0.20458 | | 0.10520 | |
| Rosuvastatin Calcium Tab 5 MG | 0.16887 | 0.06722 | 0.05389 | 05/01/2020 |
| Rufinamide Susp 40 MG/ML | | | 3.31920 | |
| Rufinamide Tab 200 MG | | | 11.49902 | |
| Rufinamide Tab 400 MG | | | 23.06029 | |
| Salicylic Acid Cream 6% | | | 0.06125 | |
| Salicylic Acid Film Forming Liquid 27.5% | | | 25.41500 | |
| Salicylic Acid Lotion 6% | | | 0.08792 | |
| Salicylic Acid Shampoo 6% | | | 0.14124 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Sirolimus Oral Soln 1 MG/ML | | | 17.50000 | 05/01/2020 |
| Sirolimus Tab 0.5 MG | 7.40212 | | 5.50700 | |
| Sirolimus Tab 1 MG | 10.08691 | | 7.23546 | |
| Sirolimus Tab 2 MG | | | 13.50950 | |
| Sodium Bicarbonate IV Soln 8.4% | | | 0.15760 | |
| Sodium Chloride Flush IV Soln 0.9% | | | 0.03231 | |
| Sodium Chloride Inj 0.9% | | | 0.03231 | |
| Sodium Chloride Irrigation Soln 0.9% | | | 0.00693 | |
| Sodium Chloride IV Soln 0.45% | | | 0.00182 | |
| Sodium Chloride IV Soln 0.9% | | | 0.00877 | |
| Sodium Chloride IV Soln 4 mEq/ML (23.4%) | | | 0.01648 | |
| Sodium Chloride Soln Nebu 0.9% | | | 0.09591 | |
| Sodium Citrate & Citric Acid Soln 500-334 MG/5ML | | | 0.02296 | |
| Sodium Fluoride Chew Tab 0.25 MG F (from 0.55 MG NaF) | | | 0.04095 | |
| Sodium Fluoride Chew Tab 0.5 MG F (from 1.1 MG NaF) | | | 0.04146 | |
| Sodium Fluoride Chew Tab 1 MG F (from 2.2 MG NaF) | | | 0.04125 | |
| Sodium Fluoride Cream 1.1% | | | 0.07571 | |
| Sodium Fluoride Gel 1.1% (0.5% F) | | | 0.06196 | |
| Sodium Fluoride Rinse 0.2% | | | 0.01756 | |
| Sodium Fluoride Soln 0.25 MG/DROP F (from 0.55 MG/DROP NaF) | | | 0.18330 | |
| Sodium Fluoride Soln 0.5 MG/ML F (from 1.1 MG/ML NaF) | | | 0.10320 | |
| Sodium Phenylbutyrate Oral Powder 3 GM/Teaspoonful | | | 18.03447 | |
| Sodium Polystyrene Sulfonate Oral Susp 15 GM/60ML | | | 0.11862 | |
| Sodium Polystyrene Sulfonate Powder** | | | 0.10772 | |
| Solifenacin Succinate Tab 10 MG | 0.85397 | | 0.33000 | |
| Solifenacin Succinate Tab 5 MG | 0.62010 | | 0.21444 | |
| Somatropin (Non-Refrigerated) For Inj 5 MG | | | 617.90844 | |
| Somatropin (Non-Refrigerated) For Inj 8.8 MG | | | 988.65948 | |
| Somatropin (Non-Refrigerated) For Subcutaneous Inj 8.8 MG | | | 1274.78894 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------|---------|----------------|--------------------|----------------|
| Somatropin For Inj 0.2 MG | | | 27.67030 | |
| Somatropin For Inj 0.4 MG | | | 55.34772 | |
| Somatropin For Inj 0.6 MG | | | 83.01802 | |
| Somatropin For Inj 10 MG | | | 577.68000 | |
| Somatropin For Inj 12 MG (13.8 MG Overfill) | | | 1523.35212 | |
| Somatropin For Inj 12 MG (36 Unit) | | | 1525.07520 | |
| Somatropin For Inj 24 MG | | | 3050.15040 | |
| Somatropin For Inj 5 MG | | | 635.44800 | |
| Somatropin For Inj 5.8 MG | | | 313.78482 | |
| Somatropin For Inj 6 MG (18 Unit) | | | 762.53760 | |
| Somatropin For Subcutaneous Inj 5 MG | | | 620.94000 | |
| Somatropin Inj 10 MG/1.5ML | | | 828.20720 | |
| Somatropin Inj 5 MG/1.5ML | | | 414.10360 | |
| Sorafenib Tosylate Tab 200 MG (Base Equivalent) | | | 159.61896 | |
| Sorbitol Oral Solution 70% | | | 0.00899 | |
| Sorbitol Rectal Solution 70% | | | 0.00899 | |
| Sorbitol Solution (Bulk) | | | 0.00899 | |
| Sotalol HCl (AFIB/AFL) Tab 120 MG | | | 0.13750 | |
| Sotalol HCl (AFIB/AFL) Tab 160 MG | | | 0.18700 | |
| Sotalol HCl (AFIB/AFL) Tab 80 MG | | | 0.08482 | |
| Sotalol HCl Tab 120 MG | | | 0.07900 | |
| Sotalol HCl Tab 160 MG | | | 0.18700 | |
| Sotalol HCl Tab 240 MG | | | 0.33276 | |
| Sotalol HCl Tab 80 MG | | | 0.05260 | |
| Spirolactone & Hydrochlorothiazide Tab 25-25 MG | 0.82721 | | 0.72300 | |
| Spirolactone Tab 100 MG | 0.24786 | | 0.22870 | |
| Spirolactone Tab 25 MG | 0.07753 | | 0.05213 | |
| Spirolactone Tab 50 MG | 0.14986 | | 0.14212 | |
| Stavudine Cap 15 MG | | | 1.95477 | |
| Stavudine Cap 20 MG | | | 1.21300 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Stavudine Cap 30 MG | | | 0.86000 | |
| Stavudine Cap 40 MG | | | 0.91833 | |
| Sucralfate Susp 1 GM/10ML | 0.68330 | | 0.37887 | |
| Sucralfate Tab 1 GM | | | 0.20082 | |
| Sulfacetamide Sodium Lotion 10% (Acne) | 0.83228 | | 0.48687 | |
| Sulfacetamide Sodium Ophth Oint 10% | | | 15.68000 | |
| Sulfacetamide Sodium Ophth Soln 10% | | | 2.16100 | |
| Sulfacetamide Sodium w/ Sulfur Cleanser 9.8-4.8% | | | 0.82435 | |
| Sulfacetamide Sodium w/ Sulfur Cleansing Pad 10-4% | | | 4.23217 | |
| Sulfacetamide Sodium w/ Sulfur Cream 10-2% | | | 10.11965 | |
| Sulfacetamide Sodium w/ Sulfur Cream 10-5% | | | 3.12786 | |
| Sulfacetamide Sodium w/ Sulfur Emulsion 10-5% | | | 0.05344 | |
| Sulfacetamide Sodium w/ Sulfur Lotion 10-5% | | | 2.01032 | |
| Sulfacetamide Sodium w/ Sulfur Susp 8-4% | | | 0.11345 | |
| Sulfacetamide Sodium w/ Sulfur Wash 9-4% | | | 0.15000 | |
| Sulfacetamide Sodium w/ Sulfur Wash 9-4.5% | | | 0.07379 | |
| Sulfacetamide Sodium-Prednisolone Ophth Soln 10-0.23(0.25)% | | | 2.23200 | |
| Sulfamethoxazole-Trimethoprim IV Soln 400-80 MG/5ML | | | 0.92890 | |
| Sulfamethoxazole-Trimethoprim Susp 200-40 MG/5ML | | | 0.13732 | |
| Sulfamethoxazole-Trimethoprim Tab 400-80 MG | 0.08209 | | 0.06590 | |
| Sulfamethoxazole-Trimethoprim Tab 800-160 MG | 0.07642 | | 0.04090 | |
| Sulfasalazine Tab 500 MG | 0.19504 | | 0.13500 | |
| Sulfasalazine Tab Delayed Release 500 MG | | | 0.19492 | |
| Sulindac Tab 150 MG | 0.16095 | | 0.12100 | |
| Sulindac Tab 200 MG | 0.20903 | | 0.13438 | |
| Sumatriptan Nasal Spray 20 MG/ACT | | | 39.40000 | |
| Sumatriptan Nasal Spray 5 MG/ACT | | | 39.40000 | |
| Sumatriptan Succinate Inj 6 MG/0.5ML | | | 26.27050 | |
| Sumatriptan Succinate Solution Auto-injector 4 MG/0.5ML | | | 140.32600 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|---------------------------------------------------------|----------|----------------|--------------------|----------------|
| Sumatriptan Succinate Solution Auto-injector 6 MG/0.5ML | | | 87.71344 | |
| Sumatriptan Succinate Solution Cartridge 4 MG/0.5ML | | | 147.72286 | |
| Sumatriptan Succinate Solution Cartridge 6 MG/0.5ML | | | 110.77440 | |
| Sumatriptan Succinate Tab 100 MG | 0.92644 | | 0.46907 | |
| Sumatriptan Succinate Tab 25 MG | 0.75145 | | 0.37556 | |
| Sumatriptan Succinate Tab 50 MG | 0.55760 | | 0.36556 | |
| Sumatriptan-Naproxen Sodium Tab 85-500 MG | 41.26477 | | 33.60556 | |
| Sunitinib Malate Cap 12.5 MG (Base Equivalent) | | | 182.57249 | |
| Sunitinib Malate Cap 25 MG (Base Equivalent) | | | 365.14569 | |
| Sunitinib Malate Cap 50 MG (Base Equivalent) | | | 635.66712 | |
| Tacrolimus Cap 0.5 MG | | | 0.08055 | |
| Tacrolimus Cap 1 MG | | | 0.13478 | |
| Tacrolimus Cap 5 MG | | | 0.39610 | |
| Tacrolimus Oint 0.03% | | | 3.86633 | |
| Tacrolimus Oint 0.1% | | | 2.64950 | |
| Tadalafil Tab 10 MG | 0.71814 | | 0.54643 | |
| Tadalafil Tab 2.5 MG | 0.30855 | | 0.22733 | |
| Tadalafil Tab 20 MG | 1.34619 | | 0.42967 | |
| Tadalafil Tab 20 MG (PAH) | 24.86560 | | 0.46283 | |
| Tadalafil Tab 5 MG | 0.36065 | | 0.25000 | |
| Tamoxifen Citrate Tab 10 MG (Base Equivalent) | 0.21409 | | 0.15000 | |
| Tamoxifen Citrate Tab 20 MG (Base Equivalent) | 0.46521 | 0.29980 | 0.24500 | 05/01/2020 |
| Tamsulosin HCl Cap 0.4 MG | | | 0.06065 | |
| Tazarotene Cream 0.1% | | | 4.29567 | |
| Telmisartan Tab 20 MG | 0.82460 | | 0.22067 | |
| Telmisartan Tab 40 MG | 0.53495 | | 0.12822 | |
| Telmisartan Tab 80 MG | 0.71447 | | 0.21717 | |
| Telmisartan-Hydrochlorothiazide Tab 40-12.5 MG | 1.19032 | | 0.73467 | |
| Telmisartan-Hydrochlorothiazide Tab 80-12.5 MG | 1.53152 | | 1.17000 | |
| Telmisartan-Hydrochlorothiazide Tab 80-25 MG | 1.29097 | | 0.56667 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------|---------|----------------|--------------------|----------------|
| Temazepam Cap 15 MG | 0.13125 | | 0.04590 | |
| Temazepam Cap 22.5 MG | 3.62189 | | 3.77648 | |
| Temazepam Cap 30 MG | 0.16851 | | 0.07112 | |
| Temazepam Cap 7.5 MG | 2.02745 | | 0.16000 | |
| Temozolomide Cap 100 MG | | | 22.14286 | |
| Temozolomide Cap 140 MG | | | 32.50000 | |
| Temozolomide Cap 180 MG | | | 63.31786 | |
| Temozolomide Cap 20 MG | | | 4.07143 | |
| Temozolomide Cap 250 MG | | | 71.00000 | |
| Temozolomide Cap 5 MG | | | 1.35714 | |
| Temsirolimus Soln For IV Infusion 25 MG/ML | | | 1433.21000 | |
| Tenofovir Disoproxil Fumarate Tab 300 MG | 8.31780 | | 0.33333 | |
| Terazosin HCl Cap 1 MG (Base Equivalent) | | | 0.04550 | |
| Terazosin HCl Cap 10 MG (Base Equivalent) | 0.21333 | | 0.04670 | |
| Terazosin HCl Cap 2 MG (Base Equivalent) | | | 0.04550 | |
| Terazosin HCl Cap 5 MG (Base Equivalent) | | | 0.05040 | |
| Terbinafine HCl Tab 250 MG | 0.15412 | | 0.08000 | |
| Terbutaline Sulfate Tab 2.5 MG | | | 0.85620 | |
| Terbutaline Sulfate Tab 5 MG | | | 1.60116 | |
| Terconazole Vaginal Cream 0.4% | | | 0.63220 | |
| Terconazole Vaginal Cream 0.8% | | | 1.59370 | |
| Terconazole Vaginal Suppos 80 MG | | | 20.15007 | |
| Tesamorelin Acetate For Inj 1 MG (Base Equiv) | | | 87.98000 | |
| Testosterone Cypionate IM Inj in Oil 100 MG/ML | | | 4.63220 | |
| Testosterone Cypionate IM Inj in Oil 200 MG/ML | | | 10.51200 | |
| Testosterone Enanthate IM Inj in Oil 200 MG/ML | | | 11.16600 | |
| Testosterone TD Gel 10MG/ACT (2%) | 5.87057 | | 5.56080 | |
| Testosterone TD Gel 12.5 MG/ACT (1%) | | | 0.98319 | |
| Testosterone TD Gel 20.25 MG/1.25GM (1.62%) | 8.58501 | | 9.95203 | |
| Testosterone TD Gel 20.25 MG/ACT (1.62%) | | 4.16667 | 0.86000 | 05/01/2020 |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Testosterone TD Gel 25 MG/2.5GM (1%) | | | 2.32624 | |
| Testosterone TD Gel 40.5 MG/2.5GM (1.62%) | 3.24062 | | 4.72445 | |
| Testosterone TD Gel 50 MG/5GM (1%) | 1.11101 | | 1.22197 | |
| Testosterone TD Soln 30 MG/ACT | 2.13242 | | 2.03210 | |
| Tetrabenazine Tab 12.5 MG | | | 13.06000 | |
| Tetrabenazine Tab 25 MG | | | 26.52000 | |
| Tetracycline HCl Cap 250 MG | 1.24444 | | 2.48190 | |
| Tetracycline HCl Cap 500 MG | 2.39354 | | 2.19010 | |
| Tezacaftor-Ivacaftor 100-150 MG & Ivacaftor 150 MG Tab TBPK | | | 398.40000 | |
| Thalidomide Cap 50 MG | | | 170.21817 | |
| Theophylline Tab ER 12HR 300 MG | | | 1.40000 | |
| Theophylline Tab ER 24HR 400 MG | | | 0.52770 | |
| Theophylline Tab ER 24HR 600 MG | | | 1.11250 | |
| Theophylline Tab SR 12HR 100 MG | | | 0.12790 | |
| Theophylline Tab SR 12HR 200 MG | | | 0.34260 | |
| Thioguanine Tab 40 MG | | | 25.17609 | |
| Thioridazine HCl Tab 10 MG | | | 0.33367 | |
| Thioridazine HCl Tab 100 MG | | | 0.61240 | |
| Thioridazine HCl Tab 25 MG | | | 0.62230 | |
| Thioridazine HCl Tab 50 MG | | | 0.56010 | |
| Thiothixene Cap 1 MG | | | 0.74934 | |
| Thiothixene Cap 10 MG | | | 1.46520 | |
| Thiothixene Cap 2 MG | | | 0.89633 | |
| Thiothixene Cap 5 MG | | | 1.52400 | |
| Thyroid Tab 120 MG (2 Grain) | | | 0.93670 | |
| Thyroid Tab 15 MG (1/4 Grain) | | | 0.40170 | |
| Thyroid Tab 30 MG (1/2 Grain) | | | 0.41000 | |
| Thyroid Tab 60 MG (1 Grain) | | | 0.52000 | |
| Thyroid Tab 90 MG (1 1/2 Grain) | | | 0.82100 | |
| Tiagabine HCl Tab 2 MG | 4.09107 | | 4.79365 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Tiagabine HCl Tab 4 MG | 4.44050 | | 3.86484 | |
| Ticlopidine HCl Tab 250 MG | | | 0.16510 | |
| Timolol Maleate Ophth Gel Forming Soln 0.25% | | | 20.20189 | |
| Timolol Maleate Ophth Gel Forming Soln 0.5% | | | 20.87000 | |
| Timolol Maleate Ophth Soln 0.25% | | | 0.42234 | |
| Timolol Maleate Ophth Soln 0.5% | | | 0.96680 | |
| Timolol Maleate Ophth Soln 0.5% (Once-Daily) | | | 40.02360 | |
| Timolol Maleate Tab 10 MG | | | 0.38870 | |
| Timolol Maleate Tab 20 MG | | | 0.71955 | |
| Timolol Maleate Tab 5 MG | | | 0.28691 | |
| Tinidazole Tab 500 MG | | | 2.19850 | |
| Tizanidine HCl Cap 2 MG (Base Equivalent) | 0.30864 | | 0.29733 | |
| Tizanidine HCl Cap 4 MG (Base Equivalent) | 0.34381 | | 0.40807 | |
| Tizanidine HCl Cap 6 MG (Base Equivalent) | 1.00537 | | 1.16054 | |
| Tizanidine HCl Tab 2 MG (Base Equivalent) | 0.07180 | | 0.02233 | |
| Tizanidine HCl Tab 4 MG (Base Equivalent) | 0.06985 | | 0.07082 | |
| Tobramycin Nebu Soln 300 MG/5ML | | | 6.58884 | |
| Tobramycin Ophth Soln 0.3% | 1.54681 | | 1.11000 | |
| Tobramycin Sulfate For Inj 1.2 GM | | | 77.70000 | |
| Tobramycin Sulfate Inj 1.2 GM/30ML (40 MG/ML) (Base Equiv) | | | 0.75929 | |
| Tobramycin Sulfate Inj 2 GM/50ML (40 MG/ML) (Base Equiv) | | | 0.75929 | |
| Tobramycin Sulfate Inj 40 MG/ML | | | 0.94410 | |
| Tobramycin Sulfate Inj 80 MG/2ML (40 MG/ML) (Base Equiv) | | | 0.67440 | |
| Tobramycin-Dexamethasone Ophth Susp 0.3-0.1% | | | 13.54590 | |
| Tolbutamide Tab 500 MG | | | 0.20592 | |
| Tolmetin Sodium Tab 600 MG | | | 1.52152 | |
| Tolterodine Tartrate Cap ER 24HR 2 MG | 1.59932 | | 1.23116 | |
| Tolterodine Tartrate Cap ER 24HR 4 MG | 1.43357 | | 1.12667 | |
| Tolterodine Tartrate Tab 1 MG | 0.76590 | | 0.43100 | |
| Tolterodine Tartrate Tab 2 MG | 0.75760 | | 0.58075 | |

**Illinois Department of Healthcare and Family Services
State Maximum Allowable Cost (SMAC) List
Generic and Multi-Source Brand Drugs**

Data as of 5/4/2020

Claims will be reimbursed at the lower of NADAC, WAC Based, State MAC, Federal Upper Limit (FUL), or Usual and Customary Charge

| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Topiramate Sprinkle Cap 15 MG | | | 0.26700 | |
| Topiramate Sprinkle Cap 25 MG | | | 0.44250 | |
| Topiramate Tab 100 MG | 0.39276 | | 0.04248 | |
| Topiramate Tab 200 MG | 1.21628 | | 0.08979 | |
| Topiramate Tab 25 MG | 0.08507 | | 0.02732 | |
| Topiramate Tab 50 MG | 0.14497 | | 0.03750 | |
| Torsemide Tab 10 MG | 0.11963 | | 0.04670 | |
| Torsemide Tab 100 MG | 0.29230 | | 0.12655 | |
| Torsemide Tab 20 MG | 0.08929 | | 0.06643 | |
| Torsemide Tab 5 MG | 0.10266 | | 0.05660 | |
| Trace Min (Cr-Cu-Mn-Se-Zn) Inj 10-1000-500-60-5000 MCG/ML | | | 0.58500 | |
| Trace Min (Cr-Cu-Mn-Zn) Inj 0.01-1-0.5-5 MG/ML | | | 1.29350 | |
| Tramadol HCl Tab 50 MG | 0.03545 | | 0.01633 | |
| Tramadol HCl Tab ER 24HR 100 MG | | | 1.38629 | |
| Tramadol HCl Tab ER 24HR 200 MG | | | 1.30933 | |
| Tramadol HCl Tab ER 24HR 300 MG | | | 2.41749 | |
| Tramadol HCl Tab ER 24HR Biphasic Release 100 MG | | | 1.47156 | |
| Tramadol HCl Tab ER 24HR Biphasic Release 200 MG | | | 1.88894 | |
| Tramadol HCl Tab ER 24HR Biphasic Release 300 MG | | | 3.19340 | |
| Tramadol-Acetaminophen Tab 37.5-325 MG | 0.11910 | | 0.08010 | |
| Trametinib Dimethyl Sulfoxide Tab 0.5 MG (Base Equivalent) | | | 110.43416 | |
| Trandolapril Tab 1 MG | | | 0.21365 | |
| Trandolapril Tab 2 MG | | | 0.13259 | |
| Trandolapril Tab 4 MG | | | 0.19963 | |
| Trandolapril-Verapamil HCl Tab ER 4-240 MG | | | 3.63558 | |
| Tranexamic Acid Tab 650 MG | 2.38325 | | 1.07000 | |
| Tranylcypromine Sulfate Tab 10 MG | | | 1.15600 | |
| Travoprost Ophth Soln 0.004% (Benzalkonium Free) (BAK Free) | | | 41.25600 | |
| Trazodone HCl Tab 100 MG | 0.07564 | | 0.06510 | |

**Illinois Department of Healthcare and Family Services
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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|----------|----------------|--------------------|----------------|
| Trazodone HCl Tab 150 MG | 0.15574 | | 0.08990 | |
| Trazodone HCl Tab 300 MG | 2.15073 | | 2.19790 | |
| Trazodone HCl Tab 50 MG | 0.04611 | | 0.04478 | |
| Tretinoin Cream 0.025% | | | 1.86419 | |
| Tretinoin Cream 0.05% | | | 2.90333 | |
| Tretinoin Cream 0.1% | | | 3.50800 | |
| Tretinoin Gel 0.01% | | | 3.28378 | |
| Tretinoin Gel 0.025% | | | 2.89600 | |
| Tretinoin Gel 0.05% | 5.83822 | | 3.99000 | |
| Tretinoin Microsphere Gel 0.04% | 10.81658 | | 7.93267 | |
| Tretinoin Microsphere Gel 0.1% | 9.43722 | | 8.32493 | |
| Triamcinolone Acet Cr 0.1% & Dimeth Cr 5% & Silicone Tape* | | | 5158.51300 | |
| Triamcinolone Acetonide Aerosol Soln 0.147 MG/GM | | | 2.64159 | |
| Triamcinolone Acetonide Cream 0.025% | | | 0.12482 | |
| Triamcinolone Acetonide Cream 0.1% | | 0.08014 | 0.06275 | 05/01/2020 |
| Triamcinolone Acetonide Cream 0.5% | 0.33899 | | 0.31333 | |
| Triamcinolone Acetonide Dental Paste 0.1% | 6.08634 | | 5.19600 | |
| Triamcinolone Acetonide Inj Susp 40 MG/ML | | | 6.74900 | |
| Triamcinolone Acetonide Lotion 0.025% | | | 0.42587 | |
| Triamcinolone Acetonide Lotion 0.1% | | | 0.36778 | |
| Triamcinolone Acetonide Oint 0.025% | | | 0.07946 | |
| Triamcinolone Acetonide Oint 0.1% | | | 0.08175 | |
| Triamcinolone Acetonide Oint 0.5% | 0.44161 | | 0.33200 | |
| Triamterene & Hydrochlorothiazide Cap 37.5-25 MG | 0.13054 | | 0.07900 | |
| Triamterene & Hydrochlorothiazide Cap 50-25 MG | | | 1.51850 | |
| Triamterene & Hydrochlorothiazide Tab 37.5-25 MG | 0.11124 | | 0.12050 | |
| Triamterene & Hydrochlorothiazide Tab 75-50 MG | 0.13148 | | 0.05500 | |
| Triazolam Tab 0.125 MG | | | 0.19590 | |
| Triazolam Tab 0.25 MG | | | 0.17110 | |
| Trifluoperazine HCl Tab 1 MG (Base Equivalent) | | | 0.54492 | |

**Illinois Department of Healthcare and Family Services
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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|----------------------------------------------------|---------|----------------|--------------------|----------------|
| Trifluoperazine HCl Tab 10 MG (Base Equivalent) | | | 1.34032 | |
| Trifluoperazine HCl Tab 2 MG (Base Equivalent) | | | 0.69000 | |
| Trifluoperazine HCl Tab 5 MG (Base Equivalent) | | | 0.95030 | |
| Trifluridine Ophth Soln 1% | | | 15.62000 | |
| Trihexyphenidyl HCl Elixir 0.4 MG/ML | | | 0.03584 | |
| Trihexyphenidyl HCl Tab 2 MG | 0.05902 | | 0.04600 | |
| Trihexyphenidyl HCl Tab 5 MG | 0.12561 | | 0.06878 | |
| Trimethobenzamide HCl Cap 300 MG | | | 1.17796 | |
| Trimethoprim Tab 100 MG | | | 0.16520 | |
| Triptorelin Pamoate For IM Susp 11.25 MG | | | 2429.95780 | |
| Triptorelin Pamoate For IM Susp 22.5 MG | | | 4859.92390 | |
| Triptorelin Pamoate For IM Susp 3.75 MG | | | 809.98870 | |
| Tropicamide Ophth Soln 0.5% | | | 0.56767 | |
| Tropicamide Ophth Soln 1% | 1.15656 | | 0.34733 | |
| Trospium Chloride Cap ER 24HR 60 MG | 3.79091 | | 4.45511 | |
| Trospium Chloride Tab 20 MG | 0.47358 | | 0.45609 | |
| Urea Cream 40% | | | 0.50000 | |
| Urea Cream 50% | | | 0.15778 | |
| Urea Gel 40% | | | 3.42333 | |
| Urea Lotion 40% | | | 0.06704 | |
| Ursodiol Cap 300 MG | 0.79069 | | 0.79510 | |
| Ursodiol Tab 250 MG | 1.01436 | | 0.56460 | |
| Ursodiol Tab 500 MG | 1.22173 | | 0.86985 | |
| Valacyclovir HCl Tab 1 GM | 0.61206 | | 0.43547 | |
| Valacyclovir HCl Tab 500 MG | 0.34723 | | 0.22278 | |
| Valganciclovir HCl Tab 450 MG (Base Equivalent) | 5.18725 | | 4.48050 | |
| Valproate Sodium Inj 100 MG/ML | | | 3.46000 | |
| Valproate Sodium Oral Soln 250 MG/5ML (Base Equiv) | 0.02595 | | 0.01825 | |
| Valproate Sodium Syrup 250 MG/5ML | | | 0.03040 | |
| Valproic Acid Cap 250 MG | 0.21306 | | 0.14560 | |

**Illinois Department of Healthcare and Family Services
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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-------------------------------------------------------|----------|----------------|--------------------|----------------|
| Valsartan Tab 160 MG | 2.41948 | | 0.09700 | |
| Valsartan Tab 320 MG | 1.95684 | | 0.12938 | |
| Valsartan Tab 40 MG | 0.94428 | | 0.05556 | |
| Valsartan Tab 80 MG | 1.67811 | | 0.18891 | |
| Valsartan-Hydrochlorothiazide Tab 160-12.5 MG | 0.42959 | | 0.11778 | |
| Valsartan-Hydrochlorothiazide Tab 160-25 MG | 0.43260 | | 0.14689 | |
| Valsartan-Hydrochlorothiazide Tab 320-12.5 MG | 0.53554 | | 0.20556 | |
| Valsartan-Hydrochlorothiazide Tab 320-25 MG | 0.63570 | | 0.20818 | |
| Valsartan-Hydrochlorothiazide Tab 80-12.5 MG | 0.66076 | | 0.12778 | |
| Vancomycin HCl Cap 125 MG (Base Equivalent) | 2.93207 | | 2.10033 | |
| Vancomycin HCl Cap 250 MG (Base Equivalent) | 4.27121 | | 5.37664 | |
| Vancomycin HCl For Inj 10 GM | | | 40.99000 | |
| Vancomycin HCl For Inj 1000 MG | | | 5.57150 | |
| Vancomycin HCl For Inj 500 MG | | | 2.91853 | |
| Vancomycin HCl For Inj 5000 MG | | | 17.92667 | |
| Vancomycin HCl For IV Soln 1 GM (Base Equivalent) | | | 4.73660 | |
| Vancomycin HCl For IV Soln 500 MG (Base Equivalent) | | | 3.43300 | |
| Vancomycin HCl For IV Soln 750 MG (Base Equivalent) | | | 7.13200 | |
| Vardenafil HCl Tab 10 MG | 23.05313 | | 23.05313 | |
| Vardenafil HCl Tab 20 MG | 27.00109 | | 18.61573 | |
| Venlafaxine HCl Cap ER 24HR 150 MG (Base Equivalent) | 0.29333 | | 0.14709 | |
| Venlafaxine HCl Cap ER 24HR 37.5 MG (Base Equivalent) | 0.22042 | | 0.10578 | |
| Venlafaxine HCl Cap ER 24HR 75 MG (Base Equivalent) | 0.31202 | | 0.10578 | |
| Venlafaxine HCl Tab 100 MG (Base Equivalent) | 0.20884 | | 0.12380 | |
| Venlafaxine HCl Tab 25 MG (Base Equivalent) | 0.22005 | | 0.11520 | |
| Venlafaxine HCl Tab 37.5 MG (Base Equivalent) | 0.17863 | | 0.13256 | |
| Venlafaxine HCl Tab 50 MG (Base Equivalent) | 0.24937 | | 0.14160 | |
| Venlafaxine HCl Tab 75 MG (Base Equivalent) | 0.14991 | | 0.12000 | |
| Venlafaxine HCl Tab ER 24HR 150 MG (Base Equivalent) | 4.31417 | | 2.20528 | |

**Illinois Department of Healthcare and Family Services
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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|------------------------------------------------------------|---------|----------------|--------------------|----------------|
| Venlafaxine HCl Tab ER 24HR 225 MG (Base Equivalent) | 8.92528 | | 7.57167 | |
| Venlafaxine HCl Tab ER 24HR 37.5 MG (Base Equivalent) | | | 4.76589 | |
| Venlafaxine HCl Tab ER 24HR 75 MG (Base Equivalent) | 4.30571 | | 2.29000 | |
| Verapamil HCl Cap ER 24HR 100 MG | | | 3.68996 | |
| Verapamil HCl Cap ER 24HR 120 MG | | | 0.98275 | |
| Verapamil HCl Cap ER 24HR 180 MG | | | 1.03620 | |
| Verapamil HCl Cap ER 24HR 200 MG | | | 1.04240 | |
| Verapamil HCl Cap ER 24HR 240 MG | | | 0.94000 | |
| Verapamil HCl Cap ER 24HR 360 MG | | | 3.86000 | |
| Verapamil HCl Tab 120 MG | 0.06595 | | 0.05824 | |
| Verapamil HCl Tab 40 MG | | | 0.12680 | |
| Verapamil HCl Tab 80 MG | 0.04690 | | 0.04170 | |
| Verapamil HCl Tab ER 120 MG | | | 0.11030 | |
| Verapamil HCl Tab ER 180 MG | 0.23855 | | 0.10355 | |
| Verapamil HCl Tab ER 240 MG | 0.26434 | | 0.07657 | |
| Vigabatrin Powd Pack 500 MG | | | 145.81778 | |
| Vigabatrin Tab 500 MG | | | 145.82477 | |
| Vincristine Sulfate IV Soln 1 MG/ML | | | 7.11750 | |
| Vinorelbine Tartrate Inj 10 MG/ML (Base Equiv) | | | 15.11900 | |
| Vinorelbine Tartrate Inj 50 MG/5ML (10 MG/ML) (Base Equiv) | | | 17.12360 | |
| Voriconazole Tab 200 MG | 6.77254 | | 3.81133 | |
| Voriconazole Tab 50 MG | | | 4.93000 | |
| Warfarin Sodium Tab 1 MG | 0.19218 | | 0.02470 | |
| Warfarin Sodium Tab 10 MG | 0.34017 | | 0.08770 | |
| Warfarin Sodium Tab 2 MG | 0.20719 | | 0.06659 | |
| Warfarin Sodium Tab 2.5 MG | 0.18391 | | 0.06438 | |
| Warfarin Sodium Tab 3 MG | 0.20471 | | 0.06967 | |
| Warfarin Sodium Tab 4 MG | 0.17256 | | 0.08110 | |
| Warfarin Sodium Tab 5 MG | 0.17298 | | 0.06310 | |

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| Generic Name | ACA FUL | OLD SMAC Price | Current SMAC Price | SMAC Effective |
|-----------------------------------------------|----------|----------------|--------------------|----------------|
| Warfarin Sodium Tab 6 MG | 0.26928 | | 0.09867 | |
| Warfarin Sodium Tab 7.5 MG | 0.24584 | | 0.09088 | |
| Water For Injection | | | 0.03734 | |
| Water For Irrigation, Sterile Irrigation Soln | | | 0.00601 | |
| Water For IV Injection | | | 0.00217 | |
| Wound Dressings - Cream*** | | | 0.52347 | |
| Zafirlukast Tab 10 MG | | | 1.16850 | |
| Zafirlukast Tab 20 MG | | 1.07300 | 0.82500 | 05/01/2020 |
| Zaleplon Cap 10 MG | 0.17099 | | 0.13820 | |
| Zaleplon Cap 5 MG | 0.17588 | | 0.17120 | |
| Zidovudine Cap 100 MG | | | 1.58570 | |
| Zidovudine Syrup 10 MG/ML | | | 0.10500 | |
| Zidovudine Tab 300 MG | | | 0.14500 | |
| Zileuton Tab ER 12HR 600 MG | | | 19.25956 | |
| Zinc Sulfate Cap 220 MG (50 MG Elemental Zn) | | | 0.03887 | |
| Ziprasidone HCl Cap 20 MG | 1.22410 | | 0.22400 | |
| Ziprasidone HCl Cap 40 MG | 0.48634 | 0.29280 | 0.26000 | 05/01/2020 |
| Ziprasidone HCl Cap 60 MG | 1.11491 | | 0.32417 | |
| Ziprasidone HCl Cap 80 MG | 1.31974 | | 0.28483 | |
| Zolmitriptan Orally Disintegrating Tab 2.5 MG | 5.90268 | | 2.49370 | |
| Zolmitriptan Orally Disintegrating Tab 5 MG | 13.42326 | | 2.41933 | |
| Zolmitriptan Tab 2.5 MG | 4.54037 | | 1.15000 | |
| Zolmitriptan Tab 5 MG | 6.55266 | | 2.40500 | |
| Zolpidem Tartrate Tab 10 MG | 0.18767 | | 0.02037 | |
| Zolpidem Tartrate Tab 5 MG | 0.13429 | | 0.01975 | |
| Zolpidem Tartrate Tab ER 12.5 MG | 1.34543 | | 0.06591 | |
| Zolpidem Tartrate Tab ER 6.25 MG | 0.68168 | | 0.30106 | |
| Zonisamide Cap 100 MG | 0.15111 | | 0.09670 | |
| Zonisamide Cap 25 MG | 0.10178 | | 0.10286 | |
| Zonisamide Cap 50 MG | 0.15771 | | 0.15154 | |

