



## P R O V I D E R   B U L L E T I N

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**To: All Pharmacy Providers and Prescribing Practitioners**

**Subject: Update to State Maximum Allowable Cost Fee Schedule for Legend Drugs**

*Note: The information in this bulletin is not directed to those providers rendering services in the risk-based managed care (RBMC) delivery system.*

## Overview

The purpose of this bulletin is to advise Indiana Health Coverage Programs (IHCP) providers that effective October 1, 2004, the state maximum allowable cost (SMAC) rate for Rifampin 300 m.g. capsule will be increased to \$1.4389. Effective December 1, 2004, the fee schedule for legend drugs will be adjusted as indicated in Table 1. Providers may access the current SMAC fee schedule, as well as any updated rates, in downloadable format on the Internet at <http://www.mslcindy.com/pharmacy/>.

Please direct questions about the SMAC program, including product availability, SMAC rates, or other related matters, to the Myers and Stauffer LC Pharmacy Unit at (317) 846-9521 in the Indianapolis local area or 1-800-877-6927, Monday through Friday, from 8 a.m. to 5 p.m. Inquiries can also be made through e-mail to [pharmacy@mslc.com](mailto:pharmacy@mslc.com).

Table 1 – SMAC Rate Updates

SMAC Group	Drug Name	SMAC Rate
359	ACETYLCYSTEINE 20% VIAL	0.5791
357	AMOX TR-K CLV 200-28.5/5 SU	0.2522
344	AMOX TR-K CLV 400-57/5 SUSP	0.4661
343	AMOXICILLIN 400MG/5ML SUSP	0.0740
157	ATENOLOL 25MG TABLET	0.0569
273	BENAZEPRIL HCL 10MG TABLET	0.1177
256	BENAZEPRIL HCL 20MG TABLET	0.1170
253	BENAZEPRIL HCL 40MG TABLET	0.1152
422	BENAZEPRIL-HCTZ 10/12.5 TAB	0.1631
427	BENAZEPRIL-HCTZ 20/12.5 TAB	0.1684
312	BENZTROPINE MES 0.5MG TAB	0.0826

(Continued)

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SMAC Group	Drug Name	SMAC Rate
56	BUDEPRION SR 150MG TABLET	1.2919
246	BUMETANIDE 0.5MG TABLET	0.1017
59	BUPROPION SR 100MG TABLET	1.0038
77	BUSPIRONE HCL 30MG TABLET	0.8586
385	BUTORPHANOL 10MG/ML SPRAY	8.4538
231	CARBIDOPA/LEVO 50/200 TB SA	1.3800
112	CARTEOLOL HCL 1% EYE DROPS	1.7469
331	CEFUROXIME AXETIL 250MG TAB	0.8432
330	CEFUROXIME AXETIL 500MG TAB	1.5624
101	CIMETIDINE 400MG TAB	0.1052
2	CLARAVIS 40MG CAPSULE	6.5140
332	CLINDAMYCIN HCL 300MG CAPS	1.2506
100	CLORAZEPATE DIPOTASSIUM 3.75MG TAB	0.1545
8	CLOTRIMAZOLE/BETAMETH CREAM	0.3868
140	CROMOLYN NEBULIZER SOLUTION	0.0627
248	CRYSELLE-28 TABLET	0.9092
445	CYPROHEPTADINE 4MG TABLET	0.2342
6	DIGOXIN 125MCG TABLET	0.1182
284	DIGOXIN 250MCG TABLET	0.1202
44	ENALAPRIL 20MG TAB	0.0973
360	ETODOLAC 400MG TABLET SA	0.8323
97	FAMOTIDINE 10MG/ML VIAL	0.2731
3	FLUOCINONIDE 0.05% GEL	0.3167
230	FLUOXETINE 10MG CAPSULE	0.0520
212	FLUOXETINE 20MG CAPSULE	0.0607
243	FLUOXETINE 20MG/5ML SOLN	0.1121
217	FLUOXETINE 40MG CAPSULE	1.6182
235	FLUOXETINE HCL 10MG TABLET	0.0796
163	FLUVOXAMINE MAL 100MG TAB	0.7887
272	FLUVOXAMINE MALEATE 25MG TB	1.8484
180	FLUVOXAMINE MALEATE 50MG TB	0.7030
38	FUROSEMIDE 20MG	0.0444
17	FUROSEMIDE 40MG	0.0372
82	FUROSEMIDE 80MG TAB	0.0759
475	GENTAMICIN 3MG/ML EYE DROPS	0.3161
287	HEPARIN LOCK 100U/ML VIAL	0.0322

(Continued)

Table 1 – SMAC Rate Updates

SMAC Group	Drug Name	SMAC Rate
289	HEPARIN LOCK 10U/ML VIAL	0.0470
208	HYDROCODONE/APAP 10/500 TAB	0.3763
35	HYDROCODONE/APAP 10/650	0.1877
408	HYDROCODONE/APAP 10/660 TAB	0.2502
398	HYDROCODONE/APAP 5/325 TAB	0.3019
393	HYDROCODONE-APAP 7.5-325 TB	0.3251
419	HYDROCODONE-APAP SOLUTION	0.0322
337	HYDROCORTISONE 2.5% CREAM	0.1069
483	INDOMETHACIN 25MG CAPSULE	0.0600
440	INDOMETHACIN 50MG CAPSULE	0.1031
404	ISOSORBIDE DN 10MG TABLET	0.0283
418	ISOSORBIDE DN 20MG TABLET	0.1151
632	ISOSORBIDE DN 5MG TABLET	0.0491
375	LIDOCAINE HCL 1% VIAL	0.0129
36	LIDOCAINE HCL 2% JELLY	0.4007
74	LITHIUM 300MG ER TABLET	0.3157
436	LOTRIMIN AF 1% CREAM	0.1356
313	MEGESTROL ACET 40MG/ML SUSP	0.4402
442	METHADOSE 40MG TABLET DISPR	0.3053
70	MIRTAZAPINE 15MG TABLET	0.2743
65	MIRTAZAPINE 30MG TABLET	0.3797
64	MIRTAZAPINE 45MG TABLET	0.4667
420	MORPHINE SULF 100MG TAB SA	2.7466
229	NABUMETONE 500MG TABLET	0.5829
423	NEOMYCIN/POLY/GRAM EYE DROP	1.8659
279	NIFEDIPINE ER 30MG TABLET	0.8657
277	NIFEDIPINE ER 60MG TAB SA	1.4374
543	NYSTATIN 500000U ORAL TAB	0.5238
96	OMEPRAZOLE 20MG CAPSULE DR	2.5448
295	PERGOLIDE MESYL 1MG TAB	2.9015
111	PHENADOZ 12.5MG SUPPOSITORY	0.8434
254	POTASSIUM CL 10MEQ TAB SA	0.1945
169	PREDNISOLONE 15MG/5ML SYRUP	0.0344
450	PREDNISOLONE 6.7MG/5ML SOLN	0.0526
183	PROCHLORPERAZINE 10MG TAB	0.1283
464	PROCHLORPERAZINE 5MG TABLET	0.0789

(Continued)

Table 1 – SMAC Rate Updates

SMAC Group	Drug Name	SMAC Rate
103	PROMETHEGAN 25MG SUPP	0.9022
388	PROPOXYPHENE HCL 65MG CAP	0.2519
293	PYRIDOSTIGMINE BR 60MG TAB	0.4136
430	RIFAMPIN 300MG CAPSULE	\$1.4390
446	SELEGILINE HCL 5MG CAPSULE	0.3764
88	SODIUM CHLORIDE 0.009 SOL	0.0058
123	SODIUM CHLORIDE 0.9% SYRNGE	0.2630
309	TAMOXIFEN 10MG TABLET	0.2224
304	TAMOXIFEN 20MG TABLET	0.4354
119	TIMOLOL 0.25% EYE DROPS	0.3173
215	TIZANIDINE HYDROCHLORIDE	0.8464
226	TORSEMIDE 10MG TABLET	0.5033
127	TORSEMIDE 20MG TABLET	0.6154
487	TRIAMCINOLONE 0.1% OINTMENT	0.0346
4	TRIAMCINOLONE 0.5% CREAM	0.0985

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