



Center for Medicaid and State Operations

DATE: July 29, 2009

FROM: Director
Pharmacy Division

SUBJECT: Notification of Medicaid Drug Federal Upper Limit (FUL) Changes to
Transmittal No. 37, Dated November 20, 2001

TO: Associate Regional Administrators, Division of Medicaid and State Operations

Please inform the States in your region of the following FUL changes as soon as possible. The changes are to be implemented no later than August 28, 2009.

CMS used the following compendia sources in compiling this list:
B – Blue Book, M – Medi-Span, R – Red Book

FUL Deletions

Generic Name

Desipramine Hydrochloride
25 mg, Tablet, Oral, 100
50 mg, Tablet, Oral, 100
75 mg, Tablet, Oral, 100
100 mg, Tablet, Oral, 100
150 mg, Tablet, Oral, 100

FUL Additions

Generic Name

FUL Price

Clindamycin Phosphate EQ 1% Base, Gel, Topical, 60 gm	\$ 0.7647 B
Clobetasol Propionate 0.05%, Aerosol, Foam, Topical, 100 gm	\$ 2.9796 B
Desogestrel; Ethinyl Estradiol 0.15 mg; 0.03 mg, Tablet, Oral, 28	\$ 1.0950 B
Divalproex Sodium EQ 125 mg, Valproic Acid, Capsule, Delayed Release Pellets, Oral, 100	\$ 0.8210 M

FUL Additions - continued

<u>Generic Name</u>	<u>FUL Price</u>
Hydrocortisone Butyrate 0.1%, Solution, Topical, 20 ml	\$ 0.3788 B
Hydromorphone Hydrochloride 2 mg, Tablet, Oral, 100	\$ 0.2184 B
Lamotrigine	
5 mg, Tablet, Chewable, Oral, 100	\$ 0.6609 B
25 mg, Tablet, Chewable, Oral, 100	\$ 0.6923 B
25 mg, Tablet, Oral, 100	\$ 0.3035 B
100 mg, Tablet, Oral, 100	\$ 0.3467 B
150 mg, Tablet, Oral, 60	\$ 0.3800 B
200 mg, Tablet, Oral, 60	\$ 0.4135 B
Metoprolol Succinate	
EQ 100 mg Tartrate, Tablet, Extended Release, Oral, 100	\$ 1.4238 R
EQ 200 mg Tartrate, Tablet, Extended Release, Oral, 100	\$ 2.2650 R
Metronidazole	
0.75%, Lotion, Topical, 59 ml	\$ 1.1695 R
Mycophenolate Mofetil	
250 mg, Capsule, Oral, 100	\$ 0.5291 R
500 mg, Tablet, Oral, 100	\$ 1.0580 R
Omeprazole	
40 mg, Capsule, Delayed Release Pellets, Oral, 100	\$ 1.7343 R
Rifampin	
150 mg, Capsule, Oral, 30	\$ 1.4780 R
Stavudine	
15 mg, Capsule, Oral, 60	\$ 2.2555 B
20 mg, Capsule, Oral, 60	\$ 2.3457 B
30 mg, Capsule, Oral, 60	\$ 2.4912 B
40 mg, Capsule, Oral, 60	\$ 2.6875 B

These changes will be posted to our website at <http://www.cms.hhs.gov/Reimbursement>. If you have any questions, please contact Gail Sexton at gail.sexton@cms.hhs.gov, telephone number (410) 786-4583 or Meagan Khau at meagan.khau@cms.hhs.gov, telephone number (410) 786-1357.

/s/

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cc: Regional Administrators