

**Illinois Department of Healthcare and Family Services**  
**State Maximum Allowable Cost (SMAC) List -**  
**PROPOSED**  
**Effective 02-01-2013**

Generic Name	Current FUL	Current IL SMAC	New IL SMAC Proposed
BISOPROLOL FUMARATE/HYDROCHLOROTHIAZIDE ORAL TABLET 5-6.25MG	1.02600	0.23000	0.15508
BUTORPHANOL TARTRATE NASAL AEROSOL, SPRAY (ML) 10 MG/ML		7.31640	6.98000
DONEPEZIL HCL ORAL TABLET,DISINTEGRATING 10 MG		1.30000	0.85136
FAMCICLOVIR ORAL TABLET 250 MG		1.22666	1.05333
FENOFIBRATE NANOCRYSTALLIZED ORAL TABLET 145MG			4.31000
FENOFIBRATE NANOCRYSTALLIZED ORAL TABLET 48 MG			1.49000
GABAPENTIN ORAL TABLET 800 MG	1.17560	0.62950	0.58259
ONDANSETRON HCL ORAL SOLUTION, ORAL 4 MG/5 ML		1.76520	1.33287
RIZATRIPTAN BENZOATE ORAL TABLET 10 MG			3.12000
RIZATRIPTAN BENZOATE ORAL TABLET 5 MG			3.12000
SILDENAFIL CITRATE ORAL TABLET 20 MG		18.65400	0.85000
TACROLIMUS ORAL CAPSULE (HARD, SOFT, ETC.) 5 MG		15.50000	7.98694
TIAGABINE HCL ORAL TABLET 2 MG			5.72000
TIAGABINE HCL ORAL TABLET 4 MG			5.72000
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 160-25MG			2.69000
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 320-12.5MG			3.76000
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 320MG-25MG			4.26000
VALSARTAN/HYDROCHLOROTHIAZIDE ORAL TABLET 80-12.5MG			2.49000