



# BC PharmaCare Newsletter

*September 15, 2010 Edition 10-010*

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## QuickLinks

Pharmacy Services Agreement – Update #3 .....	2
Low Cost Alternative/Reference Drug Program Booklet .....	2
Upcoming Discontinuation of the New Multiple-Source Generics Pricing Policy .....	2
Important Information about Pharmacy Enrolment Agreements .....	2
Upcoming Discontinuation of the Emergency Contraceptive Pills Program.....	3
Payment Schedule & Product Identification Number Changes for Publicly-Funded Vaccines .....	3
Payments .....	3
Product Identification Numbers .....	3
Special Services Fees.....	7
Benefits .....	7
Low Cost Alternative (LCA) / Reference Drug Program (RDP) Booklet — Changes.....	7
Non-Benefits .....	8
Allowable Claim Amounts for Multiple-Source Generics Pricing Policy (MSGPP) Products .....	9

The use of PharmaNet is not intended as a substitute for professional judgment.

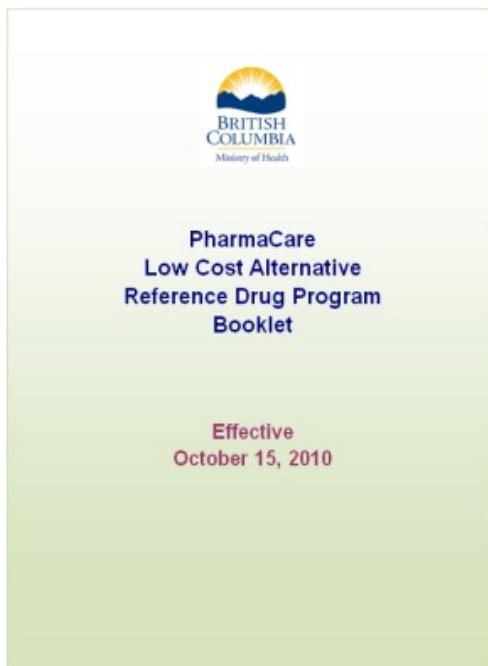
Information on PharmaNet is not exhaustive and cannot be relied upon as complete.

The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

## PHARMACY SERVICES AGREEMENT – UPDATE #3

### Low Cost Alternative/Reference Drug Program Booklet

Effective October 15, 2010



The new **Low Cost Alternative/Reference Drug Program (LCA/RDP)** booklet, which comes into effect on **October 15, 2010**, is now available on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/lca/lcabooklets.html](http://www.health.gov.bc.ca/pharmacare/lca/lcabooklets.html).

Until the new booklet comes into effect on October 15, 2010, the current booklet will also remain on the website.

The LCA/RDP Booklet is not an endorsement of the interchangeability of any products identified.

Effective October 15, 2010, PharmaCare coverage is being discontinued for a number of products because the manufacturer's price did not meet the Maximum Accepted List Price set by PharmaCare or because the manufacturer has opted to have their product removed from the PharmaCare formulary. Drugs no longer being dispensed (i.e., discontinued products) are also being removed from the PharmaCare formulary at this time. The list of drugs that will become ineligible for PharmaCare coverage is available on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/lca/NBLCA.pdf](http://www.health.gov.bc.ca/pharmacare/lca/NBLCA.pdf).

### Upcoming Discontinuation of the New Multiple-Source Generics Pricing Policy

As mentioned in PharmaCare Newsletter 10-009, the New Multiple-Source Generics Pricing Policy (MSGPP) will be discontinued on October 15, 2010, when the new LCA Booklet comes into effect. Cost reduction factors will continue to be applied to generic products subject to the MSGPP up to and including October 14, 2010.

In our last newsletter, we indicated that, from September 15, 2010 until the new prices come into effect on October 15, 2010, pharmacies should claim the pre-September 15 **list price + 7%** for drugs included in the Multiple-Source Generics Pricing Policy (MSGPP).

**Not sure of the pre-September 15<sup>th</sup> list price for a product? For your convenience, this newsletter provides a list of MSGPP products and shows the result of the list price + 7%. See the list on page 9.**



#### Important Information about Pharmacy Enrolment Agreements

Faxing your signed agreement?

PharmaCare can accept the agreement only if you send all the pages so.....

.....please be sure to **fax both sides of each page**.

## Upcoming Discontinuation of the Emergency Contraceptive Pills Program

In 2001, PharmaCare agreed to pay a \$15 counselling fee for each pharmacist-prescribed Schedule IV emergency contraceptive sold by those pharmacies who signed the Emergency Contraceptive Pill Program addendum to the *Pharmacy Participation Agreement*.

The Addendum was created to support an initiative of the College of Pharmacists of British Columbia (CPBC) and the University of British Columbia (UBC) to obtain information and evaluate the effectiveness of the Emergency Contraceptive Pill Program (the Program); and encourage access to emergency contraception by supporting the dispensing of these drugs by pharmacists without a physician's prescription.

The evaluation by UBC in partnership with the CPBC was completed some time ago. In addition, levonorgestrel (Plan B®), the most widely used ECP, no longer requires a prescription.

As a result, PharmaCare will discontinue payments for Emergency Contraception counselling on October 15. The last payment under this program will be issued in mid-November.

## PAYMENT SCHEDULE & PRODUCT IDENTIFICATION NUMBER CHANGES FOR PUBLICLY-FUNDED VACCINES

In October 2009, B.C. pharmacists began administering vaccines. Administration of vaccines by pharmacists is part of Immunize BC, the strategic framework for immunization in BC. The framework supports an immunization delivery system in which health service providers from different disciplines deliver programs in a variety of settings. Under the framework, the Province pays authorized pharmacists \$10 for each **publicly-funded** vaccination they provide.



### Payments

Payment for vaccine administration will now be made monthly for the Product Identification Numbers (PINs) provided on pages 4 through 6.

### Payment Schedule:

Payment for	Will be issued on
September	November 1
October	December 6
November	January 3
December	January 31

### Product Identification Numbers

PharmaCare has created individual Product Identification Numbers (PINs) to identify claims for publicly-funded vaccines administered by pharmacists. These PINs will enable automated pharmacy payments for vaccine administration. They will also allow the Ministry to quantify the contribution that pharmacists make on provincial vaccination rates.

The following list is also available on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/pdf/PINs-PFV.pdf](http://www.health.gov.bc.ca/pharmacare/pdf/PINs-PFV.pdf).

## When to use a PIN or a Drug Identification Number (DIN)

- Use a PIN when administering publicly-funded vaccine.
- Use the DIN when administering vaccine to patients not eligible for vaccine from the public supply and charge the patient directly.

### IMPORTANT NOTES:

- PINs published in PharmaCare Newsletter [09-015](#) for H1N1 pandemic vaccine have been discontinued and replaced with specific brand product PINs below.
- Inclusion of a product in the list below does not guarantee a supply of the product is available.

Product	Immunogen	Product Type	Manufacturer	DIN — For claims for patients not eligible for publicly-funded vaccine	PIN — For claims for publicly-funded vaccine administered by a pharmacist
ACT-HIB	Haemophilus B Conjugate Vaccine	Subunit (conjugate)	Sanofi Pasteur	1959034	66124757
ADACEL	Tetanus, Diphtheria, Acellular Pertussis	Subunit (proteins) [adjuvant]	Sanofi Pasteur	2240255	66124758
AVAXIM	Hepatitis A	Inactivated (killed virus) [adjuvant]	Sanofi Pasteur	2237792	66124760
AVAXIM -- pediatric	Hepatitis A	Inactivated (killed virus) [adjuvant]	Sanofi Pasteur	2243741	66124831
ENERGIX B 1ML	Hepatitis B	Subunit (recombinant protein) [adjuvant]	GlaxoSmithKline	1919431	66124764
FLUVIRAL S/F	Influenza	Inactivated (killed virus)	GlaxoSmithKline	2015986	66124765
GAMASTAN S/D	Hepatitis A	Immune Globulin	Talecris Biotherapeutics, Inc. [distributed by Bayer]	2230579	66124766
GARDASIL	Human Papillomavirus [Quadrivalent (Types 6, 11,16,18)]	Subunit (recombinant protein) adjuvant] [adjuvant]	Merck Frosst	2283190	66124767
HAVRIX 1440	Hepatitis A	Inactivated (killed virus) [adjuvant]	GlaxoSmithKline	2187078	66124768
HAVRIX 720 JUNIOR	Hepatitis A	Inactivated (killed virus) [adjuvant]	GlaxoSmithKline	2231056	66124769

Product	Immunogen	Product Type	Manufacturer	DIN — For claims for patients not eligible for publicly-funded vaccine	PIN — For claims for publicly-funded vaccine administered by a pharmacist
<b>HYPERHEP B™ S/D</b>	Hepatitis B	Immune Globulin	Talecris Biotherapeutics, Inc. [distributed by Bayer]	2230738	66124761
<b>HYPERRAB</b>	Rabies	Immune Globulin		2230700	66124770
<b>HYPERTET S/D</b>	Tetanus	Immune Globulin	Talecris Biotherapeutics, Inc. [distributed by Bayer]	2230697	66124762
<b>IMOGRAB RABIES PASTEURIZED (N/C)</b>	Rabies	Immune Globulin		2237328	66124772
<b>IMOVAX POLIO</b>	Polio	Inactivated (killed virus)	Sanofi Pasteur	1959042	66124773
<b>IMOVAX RABIES</b>	Rabies	Inactivated (killed virus)	Sanofi Pasteur	1908286	66124774
<b>INFANRIX HEXA</b>	Tetanus, Diphtheria, Acellular Pertussis, Hepatitis B, Polio, Haemophilus Influenzae Type B	Subunit plus inactivated vaccine (proteins, killed viruses and conjugates) [adjuvant]	GlaxoSmithKline Inc.	2253852	66124776
<b>INFLUVAC</b>	Influenza	Inactivated (killed virus)	Solvay Pharma Inc	2269562	66124777
<b>MENACTRA</b>	Meningococcus A,C,Y,W-135	Subunit (conjugate)	Sanofi Pasteur	2279924	66124778
<b>MENOMUNE</b>	Meningococcus A,C,Y,W-135	Subunit (polysaccharide)	Sanofi Pasteur	1959018	66124780
<b>MENINGITEC</b>	Meningococcal C	Subunit (conjugate) [adjuvant]	Wyeth	02248649	66124832
<b>MMR II</b>	Measles, Mumps, Rubella	Live attenuated (live virus)	Merck Frosst	466085	66124781
<b>NEISVAC</b>	Meningococcus			2245057	66124782
<b>PEDIACEL</b>	Diphtheria, Tetanus, Acellular Pertussis, Polio, Haemophilus Influenzae Type B	Subunit plus inactivated vaccine (proteins, killed viruses and conjugates) [adjuvant]	Sanofi Pasteur	2243167	66124783
<b>PNEUMO 23</b>	Pneumococcus	Subunit (polysaccharide)	Sanofi Pasteur	2231259	66124784
<b>PNEUMOVAX 23 VACCINE</b>	Pneumococcus	Subunit (polysaccharide)	Merck Frosst	431648	66124785

Product	Immunogen	Product Type	Manufacturer	DIN — For claims for patients not eligible for publicly-funded vaccine	PIN — For claims for publicly-funded vaccine administered by a pharmacist
<b>PREVNAR 13 (SYRINGE)</b>	Pneumococcus	Subunit (conjugate) [Adjuvant]	Wyeth	2335204	66124833
<b>PRIORIX</b>	Measles, Mumps, Rubella	Live attenuated (live virus)	GlaxoSmithKline	02239208	66124834
<b>QUADRACEL</b>	Diphtheria-Tetanus- Acellular Pertussis – Polio Adsorbed (DtaP-IPV)	Subunit plus inactivated vaccine (proteins and killed virus) [adjuvant]	Sanofi Pasteur	02230946	66124787
<b>RABAVERT</b>	Rabies	Inactivated (killed virus)	Novartis	2267667	66124788
<b>RECOMBIVAX HB 1ML</b>	Hepatitis B	Subunit (recombinant protein) [adjuvant]	Merck Frosst	749486	66124789
<b>RECOMBIVAX HB ADULT DIALYSIS T-FREE</b>	Hepatitis B	Subunit (recombinant protein) [adjuvant]	Merck Frosst	2245977	66124790
<b>RECOMBIVAX HB PEDIATRIC (T-FREE) 0.5MG</b>	Hepatitis B	Subunit (recombinant protein) [adjuvant]	Merck Frosst	2243676	66124791
<b>TD POLIO ADSORBED (ELEMENT)</b>	Tetanus, Diphtheria, Polio	Subunit and inactivated (proteins and killed virus) [adjuvant]	Sanofi Pasteur	615358	66124792
<b>TETANUS/DIPHTHERIA TOXOID AD (SOUND)</b>	Tetanus	Subunit (proteins) [adjuvant]	Sanofi Pasteur	514462	66124793
<b>VAQTA ADULT</b>	Hepatitis A	Inactivated (killed virus) [adjuvant]	Merck Frosst	2229702	66124794
<b>VARILRIX</b>	Varicella	live attenuated (virus)	GlaxoSmithKline	2241047	66124796
<b>VARIVAX III</b>	Varicella	live attenuated (virus)	Merck Frosst Canada;	66124797	66124797
<b>VariZIG</b>	Varicella Zoster	Immune Globulin	Cangene Corporation	02243342	66124835
<b>VAXIGRIP (SPLIT)</b>	Influenza	Inactivated (killed virus)	Sanofi Pasteur	2223929	66124798

## SPECIAL SERVICES FEES

The number of Special Services fees that PharmaCare paid each month over the past year:

Aug 2010.... 2,170	Apr 2010 .....2,108	Dec 2009 .... 3,103
Jul 2010..... 1,999	Mar 2010 ....2,109	Nov 2009.... 2,584
Jun 2010..... 2,233	Feb 2010 .....1,832	Oct 2009..... 2,758
May 2010 ... 2,097	Jan 2010.....1,731	Sep 2009 .... 2,643

## BENEFITS

### Low Cost Alternative (LCA) / Reference Drug Program (RDP) Booklet — Changes

#### New LCA Categories

The following drugs (including both existing and new PharmaCare benefits) will be included as new LCA Categories on PharmaNet, **from September 15, 2010 through October 14, 2010**. The LCA/RDP Booklet that comes into effect October 15, 2010 — available at [www.health.gov.bc.ca/pharmacare/lca/lcabooklets.html](http://www.health.gov.bc.ca/pharmacare/lca/lcabooklets.html) — gives the benefit status of these drugs effective October 15, 2010.

NEW CATEGORY (CHEMICAL NAME)	DIN	BRAND NAME	LCA STATUS	PRICE
ATORVASTATIN TAB 10MG	02295261	APO-ATORVASTATIN	F	
	02348624	ATORVASTATIN	F	
	02348705	ATORVASTATIN	F	
	02310899	CO ATORVASTATIN	F	
	02230711	LIPITOR®	P	0.8635
	02302675	NOVO-ATORVASTATIN	F	
	02313448	PMS-ATORVASTATIN	F	
	02313707	RAN-ATORVASTATIN	F	
	02350297	RATIO-ATORVASTATIN	F	
	02324946	SANDOZ ATORVASTATIN	F	
ATORVASTATIN TAB 20MG	02295288	APO-ATORVASTATIN	F	
	02348632	ATORVASTATIN	F	
	02348713	ATORVASTATIN	F	
	02310902	CO ATORVASTATIN	F	
	02230713	LIPITOR®	P	1.0794
	02302683	NOVO-ATORVASTATIN	F	
	02313456	PMS-ATORVASTATIN	F	
	02313715	RAN-ATORVASTATIN	F	
	02350319	RATIO-ATORVASTATIN	F	
	02324954	SANDOZ ATORVASTATIN	F	

NEW CATEGORY (CHEMICAL NAME)	DIN	BRAND NAME	LCA STATUS	PRICE
ATORVASTATIN TAB 40MG	02295296	APO-ATORVASTATIN	F	
	02348640	ATORVASTATIN	F	
	02348721	ATORVASTATIN	F	
	02310910	CO ATORVASTATIN	F	
	02230714	LIPITOR®	P	1.1604
	02302691	NOVO-ATORVASTATIN	F	
	02313464	PMS-ATORVASTATIN	F	
	02313723	RAN-ATORVASTATIN	F	
	02350327	RATIO-ATORVASTATIN	F	
	02324962	SANDOZ ATORVASTATIN	F	
ATORVASTATIN TAB 80MG	02295318	APO-ATORVASTATIN	F	
	02348659	ATORVASTATIN	F	
	02348748	ATORVASTATIN	F	
	02310929	CO ATORVASTATIN	F	
	02243097	LIPITOR®	P	1.1604
	02302713	NOVO-ATORVASTATIN	F	
	02313472	PMS-ATORVASTATIN	F	
	02313758	RAN-ATORVASTATIN	F	
	02350335	RATIO-ATORVASTATIN	F	
	02324970	SANDOZ ATORVASTATIN	F	
NIFEDIPINE TAB 30MG	02155907	ADALAT XL®	P*	
	02349167	MYLAN-NIFEDIPINE EXTENDED RELEASE	P*	

F – Fully covered under LCA Program

P – Partially covered under LCA Program

P\* – Drug is a full benefit if an RDP Special Authority is in place when the prescription is filled.

## Non-Benefits

The following products have been reviewed and will not be added as benefits under PharmaCare.

DIN	DRUG NAME
02338459	LETROZOLE 2.5 mg tablet
02347997	LETROZOLE 2.5 mg tablet
02322315	MED-LETROZOLE 2.5 mg tablet
02344815	SANDOZ LETROZOLE 2.5 mg tablet

## Non-Benefits, continued

### Generic Products No Longer Covered by PharmaCare

Effective **October 15, 2010**, PharmaCare coverage is being discontinued for a number of products because the manufacturer's submitted price did not meet the Maximum Accepted List Price set by PharmaCare or the manufacturer opted to have their product removed from the PharmaCare formulary. Drugs no longer being dispensed (i.e., discontinued products) are also being removed from the PharmaCare formulary at this time.

The list of drugs that will no longer be eligible for PharmaCare effective October 15, 2010 is available on the PharmaCare website at [www.health.gov.bc.ca/pharmacare/lca/NBLCA.pdf](http://www.health.gov.bc.ca/pharmacare/lca/NBLCA.pdf).

## **ALLOWABLE CLAIM AMOUNTS FOR MULTIPLE-SOURCE GENERICS PRICING POLICY (MSGPP) PRODUCTS**

**Valid September 15, 2010, through October 14, 2010**

DIN	LCA CATEGORY	PRODUCT NAME	MAX PRICE
2297477	AMLODIPINE TAB 2.5MG	CO AMLODIPINE 2.5 MG	0.3561
2326760	AMLODIPINE TAB 2.5MG	PHL-AMLODIPINE 2.5 MG TAB	0.3561
2295148	AMLODIPINE TAB 2.5MG	PMS-AMLODIPINE 2.5 MG TAB	0.3561
2330474	AMLODIPINE TAB 2.5MG	SANDOZ AMLODIPINE 2.5 MG TAB	0.3561
2331934	AMLODIPINE TAB 5MG	AMLODIPINE TABLETS 5 MG TAB	0.7122
2273373	AMLODIPINE TAB 5MG	APO-AMLODIPINE 5 MG TAB	0.7122
2297485	AMLODIPINE TAB 5MG	CO AMLODIPINE 5 MG TAB	0.7122
2280132	AMLODIPINE TAB 5MG	GD-AMLODIPINE 5 MG TAB	0.7122
2272113	AMLODIPINE TAB 5MG	MYLAN-AMLODIPINE 5 MG TAB	0.7122
2331071	AMLODIPINE TAB 5MG	JAMP-AMLODIPINE 5 MG TAB	0.7122
2250497	AMLODIPINE TAB 5MG	NOVO-AMLODIPINE 5 MG TAB	0.7122
2326779	AMLODIPINE TAB 5MG	PHL-AMLODIPINE 5 MG TAB	0.7122
2284065	AMLODIPINE TAB 5MG	PMS-AMLODIPINE 5 MG TAB	0.7122
2321858	AMLODIPINE TAB 5MG	RAN-AMLODIPINE 5 MG TAB	0.7122
2259605	AMLODIPINE TAB 5MG	RATIO-AMLODIPINE 5 MG TAB	0.7122
2284383	AMLODIPINE TAB 5MG	SANDOZ AMLODIPINE 5 MG TAB	0.7122
2331942	AMLODIPINE TAB 10MG	AMLODIPINE TABLETS 10 MG TAB	1.0572
2273381	AMLODIPINE TAB 10MG	APO-AMLODIPINE 10 MG TAB	1.0572
2297493	AMLODIPINE TAB 10MG	CO AMLODIPINE 10 MG TAB	1.0572
2280140	AMLODIPINE TAB 10MG	GD-AMLODIPINE 10 MG TAB	1.0572
2272121	AMLODIPINE TAB 10MG	MYLAN-AMLODIPINE 10 MG TAB	1.0572
2331098	AMLODIPINE TAB 10MG	JAMP-AMLODIPINE 10 MG TAB	1.0572
2250500	AMLODIPINE TAB 10MG	NOVO-AMLODIPINE 10 MG TAB	1.0572

## ALLOWABLE CLAIM AMOUNTS FOR MSGPP PRODUCTS, CONTINUED

DIN	LCA CATEGORY	PRODUCT NAME	MAX PRICE
2326787	AMLODIPINE TAB 10MG	PHL-AMLODIPINE 10 MG TAB	1.0572
2284073	AMLODIPINE TAB 10MG	PMS-AMLODIPINE 10 MG TAB	1.0572
2321866	AMLODIPINE TAB 10MG	RAN-AMLODIPINE 10 MG TAB	1.0572
2259613	AMLODIPINE TAB 10MG	RATIO-AMLODIPINE 10 MG TAB	1.0572
2284391	AMLODIPINE TAB 10MG	SANDOZ AMLODIPINE 10 MG TAB	1.0572
2295261	ATORVASTATIN TAB 10MG	APO-ATORVASTATIN 10 MG TAB	0.8902
2348624	ATORVASTATIN TAB 10MG	ATORVASTATIN 10 MG TAB	0.8902
2348705	ATORVASTATIN TAB 10MG	ATORVASTATIN 10 MG TAB	0.8902
2310899	ATORVASTATIN TAB 10MG	CO ATORVASTATIN 10 MG TAB	0.8902
2302675	ATORVASTATIN TAB 10MG	NOVO-ATORVASTATIN 10 MG TAB	0.8902
2313448	ATORVASTATIN TAB 10MG	PMS-ATORVASTATIN 10 MG TAB	0.8902
2313707	ATORVASTATIN TAB 10MG	RAN-ATORVASTATIN 10 MG TAB	0.8902
2350297	ATORVASTATIN TAB 10MG	RATIO-ATORVASTATIN 10 MG TAB	0.8902
2324946	ATORVASTATIN TAB 10MG	SANDOZ ATORVASTATIN 10 MG TAB	0.8902
2295288	ATORVASTATIN TAB 20MG	APO-ATORVASTATIN 20 MG TAB	1.1128
2348632	ATORVASTATIN TAB 20MG	ATORVASTATIN	1.1128
2348713	ATORVASTATIN TAB 20MG	ATORVASTATIN 20MG TAB	1.1128
2310902	ATORVASTATIN TAB 20MG	CO ATORVASTATIN 20 MG	1.1128
2302683	ATORVASTATIN TAB 20MG	NOVO-ATORVASTATIN TAB 20MG	1.1128
2313456	ATORVASTATIN TAB 20MG	PMS-ATORVASTATIN 20 MG TAB	1.1128
2313715	ATORVASTATIN TAB 20MG	RAN-ATORVASTATIN 20 MG TAB	1.1128
2350319	ATORVASTATIN TAB 20MG	RATIO-ATORVASTATIN 20 MG TAB	1.1128
2324954	ATORVASTATIN TAB 20MG	SANDOZ ATORVASTATIN 20 MG TAB	1.1128
2295296	ATORVASTATIN TAB 40MG	APO-ATORVASTATIN 40 MG TAB	1.1963
2348640	ATORVASTATIN TAB 40MG	ATORVASTATIN 40 MG TAB	1.1963
2348721	ATORVASTATIN TAB 40MG	ATORVASTATIN 40 MG TAB	1.1963
2310910	ATORVASTATIN TAB 40MG	CO ATORVASTATIN 40 MG TAB	1.1963
2302691	ATORVASTATIN TAB 40MG	NOVO-ATORVASTATIN TAB 40 MG TAB	1.1963
2313464	ATORVASTATIN TAB 40MG	PMS-ATORVASTATIN 40 MG TAB	1.1963
2313723	ATORVASTATIN TAB 40MG	RAN-ATORVASTATIN 40 MG TAB	1.1963
2350327	ATORVASTATIN TAB 40MG	RATIO-ATORVASTATIN 40 MG TAB	1.1963
2324962	ATORVASTATIN TAB 40MG	SANDOZ ATORVASTATIN 40 MG TAB	1.1963

## ALLOWABLE CLAIM AMOUNTS FOR MSGPP PRODUCTS, CONTINUED

DIN	LCA CATEGORY	PRODUCT NAME	MAX PRICE
2295318	ATORVASTATIN TAB 80MG	APO-ATORVASTATIN 80 MG TAB	1.1963
2348659	ATORVASTATIN TAB 80MG	ATORVASTATIN 80 MG TAB	1.1963
2348748	ATORVASTATIN TAB 80MG	ATORVASTATIN 80 MG TAB	1.1963
2310929	ATORVASTATIN TAB 80MG	CO ATORVASTATIN 80 MG TAB	1.1963
2302713	ATORVASTATIN TAB 80MG	NOVO-ATORVASTATIN 80 MG TAB	1.1963
2313472	ATORVASTATIN TAB 80MG	PMS-ATORVASTATIN 80 MG TAB	1.1963
2313758	ATORVASTATIN TAB 80MG	RAN-ATORVASTATIN 80 MG TAB	1.1963
2350335	ATORVASTATIN TAB 80MG	RATIO-ATORVASTATIN 80 MG TAB	1.1963
2324970	ATORVASTATIN TAB 80MG	SANDOZ ATORVASTATIN 80 MG TAB	1.1963
2348500	FINASTERIDE TAB 5MG	NOVO-FINASTERIDE 5 MG TAB	0.9915
2310112	FINASTERIDE TAB 5MG	PMS-FINASTERIDE 5 MG TAB	0.9915
2306905	FINASTERIDE TAB 5MG	RATIO-FINASTERIDE 5 MG TAB	0.9912
2322579	FINASTERIDE TAB 5MG	SANDOZ FINASTERIDE 5 MG TAB	0.9912
2293811	LANSOPRAZOLE CAP 15MG	APO-LANSOPRAZOLE 15 MG CAP	1.6050
2280515	LANSOPRAZOLE CAP 15MG	NOVO-LANSOPRAZOLE 15 MG CAP	1.6050
2293838	LANSOPRAZOLE CAP 30MG	APO-LANSOPRAZOLE 30 MG CAP	1.6050
2280523	LANSOPRAZOLE CAP 30MG	NOVO-LANSOPRAZOLE 30 MG CAP	1.6050
2327562	OLANZAPINE ODT 5MG	CO OLANZAPINE ODT 5 MG TAB	1.9121
2321343	OLANZAPINE ODT 5MG	NOVO-OLANZAPINE OD 5 MG TAB	1.9121
2303191	OLANZAPINE ODT 5MG	PMS-OLANZAPINE ODT 5 MG TAB	1.9124
2327775	OLANZAPINE ODT 5MG	SANDOZ OLANZAPINE ODT 5 MG TAB	1.9121
2327570	OLANZAPINE ODT 10MG	CO OLANZAPINE ODT 10 MG TAB	3.8213
2321351	OLANZAPINE ODT 10MG	NOVO-OLANZAPINE OD 10 MG TAB	3.8213
2303205	OLANZAPINE ODT 10MG	PMS-OLANZAPINE ODT 10 MG TAB	3.8217
2327783	OLANZAPINE ODT 10MG	SANDOZ OLANZAPINE ODT 10 MG TAB	3.8213
2327589	OLANZAPINE ODT 15MG	CO OLANZAPINE ODT 15 MG TAB	5.7302
2321378	OLANZAPINE ODT 15MG	NOVO-OLANZAPINE OD 15 MG TAB	5.7302
2303213	OLANZAPINE ODT 15MG	PMS-OLANZAPINE ODT 15 MG TAB	5.7306
2327791	OLANZAPINE ODT 15MG	SANDOZ OLANZAPINE ODT 15 MG TAB	5.7302

## ALLOWABLE CLAIM AMOUNTS FOR MSGPP PRODUCTS, CONTINUED

DIN	LCA CATEGORY	PRODUCT NAME	MAX PRICE
2327597	OLANZAPINE ODT 20MG	CO OLANZAPINE ODT 20 MG TAB	8.1295
2321386	OLANZAPINE ODT 20MG	NOVO-OLANZAPINE ODT 20 MG TAB	8.1295
2327805	OLANZAPINE ODT 20MG	SANDOZ OLANZAPINE ODT 20 MG TAB	8.1295
2311704	QUETIAPINE FUMARATE TAB 25 MG	RATIO-QUETIAPINE 25 MG TAB	0.3700
2316080	QUETIAPINE FUMARATE TAB 25 MG	CO QUETIAPINE 25 MG TAB	0.3700
2313995	QUETIAPINE FUMARATE TAB 25 MG	SANDOZ QUETIAPINE 25 MG TAB	0.3674
2296551	QUETIAPINE FUMARATE TAB 25 MG	PMS-QUETIAPINE 25 MG TAB	0.3673
2307804	QUETIAPINE FUMARATE TAB 25 MG	MYLAN-QUETIAPINE 25 MG TAB	0.3673
2284235	QUETIAPINE FUMARATE TAB 25 MG	NOVO-QUETIAPINE 25 MG TAB	0.3673
2313901	QUETIAPINE FUMARATE TAB 25 MG	APO-QUETIAPINE 25 MG TAB	0.3673
2330415	QUETIAPINE FUMARATE TAB 25 MG	JAMP-QUETIAPINE 25 MG TAB	0.3673
2311712	QUETIAPINE FUMARATE TAB 100 MG	RATIO-QUETIAPINE 100 MG TAB	0.9872
2316099	QUETIAPINE FUMARATE TAB 100 MG	CO QUETIAPINE 100 MG TAB	0.9872
2314002	QUETIAPINE FUMARATE TAB 100 MG	SANDOZ QUETIAPINE 100 MG TAB	0.9801
2296578	QUETIAPINE FUMARATE TAB 100 MG	PMS-QUETIAPINE 100 MG TAB	0.9801
2307812	QUETIAPINE FUMARATE TAB 100 MG	MYLAN-QUETIAPINE 100 MG TAB	0.9801
2284243	QUETIAPINE FUMARATE TAB 100 MG	NOVO-QUETIAPINE 100 MG TAB	0.9801
2313928	QUETIAPINE FUMARATE TAB 100 MG	APO-QUETIAPINE 100 MG TAB	0.9801
2330423	QUETIAPINE FUMARATE TAB 100 MG	JAMP-QUETIAPINE 100 MG TAB	0.9801
2311747	QUETIAPINE FUMARATE TAB 200 MG	RATIO-QUETIAPINE 200 MG TAB	1.9824
2316110	QUETIAPINE FUMARATE TAB 200 MG	CO QUETIAPINE 200 MG TAB	1.9823
2314010	QUETIAPINE FUMARATE TAB 200 MG	SANDOZ QUETIAPINE 200 MG TAB	1.9684
2296594	QUETIAPINE FUMARATE TAB 200 MG	PMS-QUETIAPINE 200 MG TAB	1.9684
2307839	QUETIAPINE FUMARATE TAB 200 MG	MYLAN-QUETIAPINE 200 MG TAB	1.9684
2284278	QUETIAPINE FUMARATE TAB 200 MG	NOVO-QUETIAPINE 200 MG TAB	1.9684
2313936	QUETIAPINE FUMARATE TAB 200 MG	APO-QUETIAPINE 200 MG TAB	1.9684
2330458	QUETIAPINE FUMARATE TAB 200 MG	JAMP-QUETIAPINE 200 MG TAB	1.9684
2311755	QUETIAPINE FUMARATE TAB 300 MG	RATIO-QUETIAPINE 300 MG TAB	2.8931
2316129	QUETIAPINE FUMARATE TAB 300 MG	CO QUETIAPINE 300 MG TAB	2.8930
2314029	QUETIAPINE FUMARATE TAB 300 MG	SANDOZ QUETIAPINE 300 MG TAB	2.8723
2296608	QUETIAPINE FUMARATE TAB 300 MG	PMS-QUETIAPINE 300 MG TAB	2.8723
2307847	QUETIAPINE FUMARATE TAB 300 MG	MYLAN-QUETIAPINE 300 MG TAB	2.8723
2284286	QUETIAPINE FUMARATE TAB 300 MG	NOVO-QUETIAPINE 300 MG TAB	2.8723
2313944	QUETIAPINE FUMARATE TAB 300 MG	APO-QUETIAPINE 300 MG TAB	2.8723
2330466	QUETIAPINE FUMARATE TAB 300 MG	JAMP-QUETIAPINE 300 MG TAB	2.8723

**ALLOWABLE CLAIM AMOUNTS FOR MSGPP PRODUCTS, CONTINUED**

DIN	LCA CATEGORY	PRODUCT NAME	MAX PRICE
2279215	RALOXIFENE HYDROCHLORIDE 60 MG	APO-RALOXIFENE 60 MG TAB	1.4715
2312298	RALOXIFENE HYDROCHLORIDE 60 MG	NOVO-RALOXIFENE 60 MG TAB	1.4716
2337746	ROPINIROLE HCL TAB 0.25 MG	APO-ROPINIROLE 0.25 MG TAB	0.1518
2316846	ROPINIROLE HCL TAB 0.25 MG	CO ROPINIROLE 0.25 MG TAB	0.1518
2326590	ROPINIROLE HCL TAB 0.25 MG	PMS-ROPINIROLE 0.25 MG TAB	0.1518
2314037	ROPINIROLE HCL TAB 0.25 MG	RAN-ROPINIROLE 0.25 MG TAB	0.1518
2332361	ROPINIROLE HCL TAB 0.25 MG	ROPINIROLE TABLETS 0.25 MG TAB	0.1518
2337762	ROPINIROLE HCL TAB 1 MG	APO-ROPINIROLE 1 MG TAB	0.6073
2316854	ROPINIROLE HCL TAB 1 MG	CO ROPINIROLE 1 MG TAB	0.6073
2326612	ROPINIROLE HCL TAB 1 MG	PMS-ROPINIROLE 1 MG TAB	0.6073
2314053	ROPINIROLE HCL TAB 1 MG	RAN-ROPINIROLE 1 MG TAB	0.6073
2332426	ROPINIROLE HCL TAB 1 MG	ROPINIROLE TABLETS 1 MG TAB	0.6073
2337770	ROPINIROLE HCL TAB 2 MG	APO-ROPINIROLE 2 MG TAB	0.6681
2316862	ROPINIROLE HCL TAB 2 MG	CO ROPINIROLE 2 MG TAB	0.6681
2326620	ROPINIROLE HCL TAB 2 MG	PMS-ROPINIROLE 2 MG TAB	0.6681
2314061	ROPINIROLE HCL TAB 2 MG	RAN-ROPINIROLE 2 MG TAB	0.6681
2332434	ROPINIROLE HCL TAB 2 MG	ROPINIROLE TABLETS 2 MG TAB	0.6681
2337800	ROPINIROLE HCL TAB 5 MG	APO-ROPINIROLE 5 MG TAB	1.8395
2316870	ROPINIROLE HCL TAB 5 MG	CO ROPINIROLE 5 MG TAB	1.8395
2326639	ROPINIROLE HCL TAB 5 MG	PMS-ROPINIROLE 5 MG TAB	1.8395
2314088	ROPINIROLE HCL TAB 5 MG	RAN-ROPINIROLE 5 MG TAB	1.8395
2332442	ROPINIROLE HCL TAB 5 MG	ROPINIROLE TABLETS 5 MG TAB	1.8395