

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Abacavir Sulfate Tab 300 MG (Base Equiv)	G			1.77000	12/1/2017	
Abacavir Sulfate-Lamivudine Tab 600-300 MG	G			6.09000	9/1/2017	
Abacavir Sulfate-Lamivudine-Zidovudine Tab 300-150-300 MG	B			26.06185	12/19/2012	
Abacavir Sulfate-Lamivudine-Zidovudine Tab 300-150-300 MG	G			19.67500	4/1/2017	
Abatacept Subcutaneous Soln Prefilled Syringe 125 MG/ML	B			1028.62647	1/1/2018	
Acamprosate Calcium Tab Delayed Release 333 MG	B			1.26806	1/7/2014	
Acamprosate Calcium Tab Delayed Release 333 MG	G			0.56900	12/1/2017	
Acarbose Tab 100 MG	G			0.18990	3/1/2018	
Acarbose Tab 25 MG	G			0.13994	9/1/2017	
Acarbose Tab 50 MG	G			0.15667	5/25/2016	
Acebutolol HCl Cap 200 MG	G			0.18512	1/1/2012	
Acebutolol HCl Cap 400 MG	G			0.26985	11/1/2010	
Acetaminophen Cap 500 MG	G			0.01031	7/1/2013	
Acetaminophen Chew Tab 80 MG	G			0.04450	9/1/2010	
Acetaminophen Liquid 160 MG/5ML	G			0.01036	7/1/2013	
Acetaminophen Soln 100 MG/ML	G			0.04507	7/1/2013	
Acetaminophen Soln 160 MG/5ML	G			0.01036	7/1/2013	
Acetaminophen Suppos 120 MG	G			0.18917	4/1/2017	
Acetaminophen Suppos 325 MG	G			0.36400	8/12/2009	
Acetaminophen Suppos 650 MG	G			0.26585	9/1/2010	
Acetaminophen Susp 160 MG/5ML	G			0.01036	9/18/2013	
Acetaminophen Susp 80 MG/0.8ML	G			0.04507	7/1/2013	
Acetaminophen Tab 325 MG	G			0.00686	9/1/2010	
Acetaminophen Tab 500 MG	G			0.01031	7/1/2013	
Acetaminophen Tab ER 650 MG	G			0.10973	8/1/2013	
Acetaminophen w/ Codeine Soln 120-12 MG/5ML	G			0.01793	10/1/2017	
Acetaminophen w/ Codeine Tab 300-15 MG	G			0.12230	4/1/2017	
Acetaminophen w/ Codeine Tab 300-30 MG	G			0.08450	4/1/2018	
Acetaminophen w/ Codeine Tab 300-60 MG	G			0.14952	1/1/2009	
Acetaminophen w/ Hydrocodone Tab 500-2.5 MG	G			0.11182	4/1/2009	
Acetaminophen w/ Hydrocodone Tab 500-5 MG	G			0.03216	8/4/2010	
Acetaminophen w/ Hydrocodone Tab 500-7.5 MG	G			0.14040	9/10/2012	
Acetaminophen w/ Hydrocodone Tab 650-10 MG	G			0.06682	12/1/2010	
Acetaminophen w/ Hydrocodone Tab 650-7.5 MG	G			0.05450	4/1/2012	
Acetaminophen w/ Hydrocodone Tab 660-10 MG	G			0.15500	12/1/2011	
Acetaminophen w/ Hydrocodone Tab 750-7.5 MG	G			0.04430	12/1/2010	
Acetaminophen-Caffeine-Butalbital Tab 500-40-50 MG	G			0.09165	1/1/2012	
Acetazolamide Cap ER 12HR 500 MG	G			0.94140	10/1/2017	
Acetazolamide Tab 125 MG	G			1.37675	10/1/2017	
Acetazolamide Tab 250 MG	G		1.43270	1.13615	6/1/2018	
Acetic Acid Irrigation Soln 0.25%	G			0.01525	8/1/2016	
Acetic Acid Otic Soln 2%	G			1.02067	4/1/2017	
Acetylcysteine Inhal Soln 10%	G			0.23443	1/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Acetylcysteine Inhal Soln 20%	G			0.26700	4/1/2017	
Acitretin Cap 10 MG	G			6.66667	12/1/2017	
Acitretin Cap 17.5 MG	G			25.25000	3/1/2014	
Acitretin Cap 25 MG	G			26.70000	3/1/2014	
Acyclovir Cap 200 MG	G			0.07601	1/1/2009	
Acyclovir Oint 5%	G		18.26500	6.94949	6/1/2018	
Acyclovir Susp 200 MG/5ML	G			0.44685	7/1/2016	
Acyclovir Tab 400 MG	G			0.05732	12/1/2017	
Acyclovir Tab 800 MG	G			0.13520	1/1/2018	
Adalimumab Inj Kit 40 MG/0.8ML (50 MG/ML)	B			1450.99494	11/14/2014	
Adalimumab Pen-injector Kit 40 MG/0.8ML	B			2426.27094	1/1/2018	
Adalimumab Prefilled Syringe Kit 10 MG/0.2ML	B			2426.27094	1/1/2018	
Adalimumab Prefilled Syringe Kit 20 MG/0.4ML	B			2426.27094	1/1/2018	
Adalimumab Prefilled Syringe Kit 40 MG/0.8ML	B			2426.27090	1/30/2018	
Adapalene Cream 0.1%	G		4.71978	3.54160	6/1/2018	
Adapalene Gel 0.1%	G		2.36600	1.83070	6/1/2018	
Adefovir Dipivoxil Tab 10 MG	B			46.97833	1/1/2018	
Ado-Trastuzumab Emtansine For IV Soln 100 MG	B			2845.96210	1/1/2017	
Ado-Trastuzumab Emtansine For IV Soln 160 MG	B			4553.54600	1/1/2017	
Afatinib Dimaleate Tab 20 MG (Base Equivalent)	B			270.73837	9/1/2017	
Afatinib Dimaleate Tab 30 MG (Base Equivalent)	B			270.73837	9/1/2017	
Afatinib Dimaleate Tab 40 MG (Base Equivalent)	B			270.73837	9/1/2017	
Aflibercept Intravitreal Inj 2 MG/0.05ML (40 MG/ML)	B			30710.00000	5/25/2016	
Agalsidase beta For IV Soln 35 MG	B			5753.15496	12/4/2017	
Agalsidase beta For IV Soln 5 MG	B			821.87928	12/4/2017	
Albiglutide For Soln Pen-injector 30 MG	B			129.98007	4/1/2017	
Albiglutide For Soln Pen-injector 50 MG	B			129.98007	4/1/2017	
Albuterol Sulfate Soln Nebu 0.083% (2.5 MG/3ML)	G			0.04063	4/1/2017	
Albuterol Sulfate Soln Nebu 0.5% (5 MG/ML)	G			0.15470	7/1/2013	
Albuterol Sulfate Soln Nebu 0.63 MG/3ML (Base Equiv)	G			0.20253	6/1/2017	
Albuterol Sulfate Soln Nebu 1.25 MG/3ML (Base Equiv)	G			0.15960	4/1/2018	
Albuterol Sulfate Syrup 2 MG/5ML	G			0.01017	11/1/2010	
Albuterol Sulfate Tab 2 MG	G			0.08177	1/1/2010	
Albuterol Sulfate Tab 4 MG	G			2.00000	12/2/2017	
Albuterol Sulfate Tab ER 12HR 4 MG	G			0.77520	4/1/2012	
Alclometasone Dipropionate Cream 0.05%	G			0.68185	11/1/2010	
Alclometasone Dipropionate Oint 0.05%	G			0.68185	4/1/2011	
Alemtuzumab IV Inj 12 MG/1.2ML (10 MG/ML)	B			17222.36859	1/2/2017	
Alendronate Sodium Tab 10 MG	G			0.13200	11/1/2017	
Alendronate Sodium Tab 35 MG	G			0.39875	1/1/2018	
Alendronate Sodium Tab 5 MG	G			0.19460	11/1/2010	
Alendronate Sodium Tab 70 MG	G			0.27875	11/1/2017	
Alfuzosin HCl Tab ER 24HR 10 MG	G			0.11326	4/1/2018	
Alglucosidase Alfa For IV Soln 50 MG	B			750.98400	11/1/2016	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Allopurinol Sodium For Inj 500 MG	B			3971.11176	11/1/2016	
Allopurinol Tab 100 MG	G			0.02531	1/1/2012	
Allopurinol Tab 300 MG	G			0.15479	12/1/2017	
Almotriptan Malate Tab 12.5 MG	G			25.31000	9/1/2017	
Alogliptin Benzoate Tab 12.5 MG (Base Equiv)	G			4.36367	3/1/2018	
Alogliptin Benzoate Tab 25 MG (Base Equiv)	G		5.82800	5.18090	6/1/2018	
Alogliptin Benzoate Tab 6.25 MG (Base Equiv)	G			6.13267	4/1/2017	
Alogliptin-Metformin HCl Tab 12.5-1000 MG	G		2.92483	2.42233	6/1/2018	
Alogliptin-Metformin HCl Tab 12.5-500 MG	G		2.79217	2.37838	6/1/2018	
Alprazolam Orally Disintegrating Tab 2 MG	G			4.19515	4/1/2012	
Alprazolam Tab 0.25 MG	G			0.02113	4/1/2017	
Alprazolam Tab 0.5 MG	G			0.01913	4/1/2017	
Alprazolam Tab 1 MG	G			0.01937	1/1/2012	
Alprazolam Tab 2 MG	G			0.05792	4/1/2017	
Alprazolam Tab ER 24HR 0.5 MG	G			0.18083	10/1/2017	
Alprazolam Tab ER 24HR 1 MG	G			0.21717	10/1/2017	
Alprazolam Tab ER 24HR 2 MG	G			0.57375	4/1/2012	
Alprazolam Tab ER 24HR 3 MG	G			0.35500	10/1/2017	
Alteplase For Inj 2 MG	B			152.44776	1/1/2018	
Alum & Mag Hydroxide-Simethicone Susp 200-200-20 MG/5ML	G			0.00594	4/1/2017	
Aluminum & Magnesium Hydroxides Susp 225-200 MG/5ML	G			0.00594	4/1/2017	
Aluminum Chloride Soln 20%	G			0.15656	4/1/2011	
Aluminum Hydroxide-Magnesium Carbonate Chew Tab 160-105 MG	G			0.00762	11/1/2017	
Aluminum Hydroxide-Magnesium Trisilicate Chew Tab 80-20 MG	G			0.03822	8/1/2011	
Amantadine HCl Cap 100 MG	G			0.50179	4/18/2018	
Amantadine HCl Syrup 50 MG/5ML	G			0.02360	8/1/2016	
Ambrisentan Tab 10 MG	B			307.25305	7/1/2017	
Ambrisentan Tab 5 MG	B			307.25305	7/1/2017	
Amiloride & Hydrochlorothiazide Tab 5-50 MG	G			0.34126	4/1/2017	
Amiloride HCl Tab 5 MG	G			0.18960	10/1/2017	
Aminocaproic Acid Tab 500 MG	G			1.80000	5/1/2014	
Amiodarone HCl Tab 100 MG	G			2.38300	1/1/2018	
Amiodarone HCl Tab 200 MG	G			0.11416	8/1/2017	
Amitriptyline HCl Tab 10 MG	G			0.08140	6/1/2017	
Amitriptyline HCl Tab 100 MG	G		0.75735	0.60065	6/1/2018	
Amitriptyline HCl Tab 150 MG	G			1.02820	6/1/2017	
Amitriptyline HCl Tab 25 MG	G			0.17140	10/1/2017	
Amitriptyline HCl Tab 50 MG	G			0.30203	6/1/2017	
Amitriptyline HCl Tab 75 MG	G			0.52470	6/1/2017	
Amlodipine Besylate Tab 10 MG (Base Equivalent)	G			0.02001	4/1/2017	
Amlodipine Besylate Tab 2.5 MG (Base Equivalent)	G			0.01964	4/1/2017	
Amlodipine Besylate Tab 5 MG (Base Equivalent)	G			0.01208	11/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Amlodipine Besylate-Atorvastatin Calcium Tab 10-10 MG	G			3.63378	8/1/2016	
Amlodipine Besylate-Atorvastatin Calcium Tab 10-20 MG	G			4.71000	8/1/2016	
Amlodipine Besylate-Atorvastatin Calcium Tab 10-40 MG	G		5.55500	3.69400	6/1/2018	
Amlodipine Besylate-Atorvastatin Calcium Tab 10-80 MG	G			4.17000	8/1/2016	
Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-10 MG	G			4.33100	8/1/2016	
Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-20 MG	G			3.01200	10/1/2017	
Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-40 MG	G			5.92660	8/1/2016	
Amlodipine Besylate-Atorvastatin Calcium Tab 5-10 MG	G			2.91367	4/1/2017	
Amlodipine Besylate-Atorvastatin Calcium Tab 5-20 MG	G		5.56013	2.74000	6/1/2018	
Amlodipine Besylate-Atorvastatin Calcium Tab 5-40 MG	G			3.35767	10/1/2017	
Amlodipine Besylate-Atorvastatin Calcium Tab 5-80 MG	G			5.92660	8/1/2016	
Amlodipine Besylate-Benazepril HCl Cap 10-20 MG	G			0.10120	9/1/2017	
Amlodipine Besylate-Benazepril HCl Cap 10-40 MG	G			0.14950	12/1/2017	
Amlodipine Besylate-Benazepril HCl Cap 2.5-10 MG	G			0.08560	10/1/2017	
Amlodipine Besylate-Benazepril HCl Cap 5-10 MG	G			0.14570	9/1/2017	
Amlodipine Besylate-Benazepril HCl Cap 5-20 MG	G			0.10380	10/1/2017	
Amlodipine Besylate-Benazepril HCl Cap 5-40 MG	G			0.09980	5/1/2018	
Amlodipine Besylate-Olmesartan Medoxomil Tab 10-20 MG	G			0.52000	12/1/2017	
Amlodipine Besylate-Olmesartan Medoxomil Tab 10-40 MG	G			0.59044	4/1/2017	
Amlodipine Besylate-Olmesartan Medoxomil Tab 5-20 MG	G			0.44433	1/1/2018	
Amlodipine Besylate-Olmesartan Medoxomil Tab 5-40 MG	G			0.85000	12/1/2017	
Amlodipine Besylate-Valsartan Tab 10-160 MG	G			0.50233	5/1/2017	
Amlodipine Besylate-Valsartan Tab 10-320 MG	G			1.02353	7/1/2015	
Amlodipine Besylate-Valsartan Tab 5-160 MG	G			0.31133	9/1/2017	
Amlodipine Besylate-Valsartan Tab 5-320 MG	G			0.38367	4/1/2017	
Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-12.5 MG	G			1.63800	3/1/2016	
Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-25 MG	G		1.63800	0.91533	6/1/2018	
Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-320-25 MG	G		1.73183	1.41333	6/1/2018	
Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-12.5 MG	G			1.40400	3/1/2016	
Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-25 MG	G			1.40400	3/1/2016	
Amoxicillin & K Clavulanate Chew Tab 400-57 MG	G			1.16750	12/1/2011	
Amoxicillin & K Clavulanate For Susp 200-28.5 MG/5ML	G			0.03290	12/1/2017	
Amoxicillin & K Clavulanate For Susp 250-62.5 MG/5ML	G			0.40980	5/1/2017	
Amoxicillin & K Clavulanate For Susp 400-57 MG/5ML	G			0.08987	4/1/2017	
Amoxicillin & K Clavulanate For Susp 600-42.9 MG/5ML	G			0.07638	3/1/2018	
Amoxicillin & K Clavulanate Tab 500-125 MG	G			0.26356	12/1/2017	
Amoxicillin & K Clavulanate Tab 875-125 MG	G			0.28951	4/1/2018	
Amoxicillin & K Clavulanate Tab ER 12HR 1000-62.5 MG	G			2.48970	4/1/2017	
Amoxicillin (Trihydrate) Cap 250 MG	G			0.05790	1/1/2009	
Amoxicillin (Trihydrate) Cap 500 MG	G			0.04700	6/1/2017	
Amoxicillin (Trihydrate) Chew Tab 250 MG	G			0.16521	1/1/2009	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Amoxicillin (Trihydrate) Chew Tab 400 MG	G			0.44300	1/28/2008	
Amoxicillin (Trihydrate) For Susp 125 MG/5ML	G			0.01427	1/1/2009	
Amoxicillin (Trihydrate) For Susp 200 MG/5ML	G			0.02535	1/1/2012	
Amoxicillin (Trihydrate) For Susp 250 MG/5ML	G			0.01947	4/1/2017	
Amoxicillin (Trihydrate) For Susp 400 MG/5ML	G			0.01869	11/1/2017	
Amoxicillin (Trihydrate) Tab 500 MG	G			0.34190	10/1/2017	
Amoxicillin (Trihydrate) Tab 875 MG	G			0.08590	1/1/2018	
Amphetamine-Dextroamphetamine Cap ER 24HR 10 MG	G		2.77641	1.93720	6/1/2018	
Amphetamine-Dextroamphetamine Cap ER 24HR 15 MG	G			2.64298	4/1/2017	
Amphetamine-Dextroamphetamine Cap ER 24HR 20 MG	G		2.77586	2.06800	6/1/2018	
Amphetamine-Dextroamphetamine Cap ER 24HR 25 MG	G			2.63350	6/1/2017	
Amphetamine-Dextroamphetamine Cap ER 24HR 30 MG	G		2.51060	1.97693	6/1/2018	
Amphetamine-Dextroamphetamine Cap ER 24HR 5 MG	G			2.06428	3/7/2018	
Amphetamine-Dextroamphetamine Tab 10 MG	G			0.37637	10/1/2017	
Amphetamine-Dextroamphetamine Tab 12.5 MG	G			0.23110	10/1/2017	
Amphetamine-Dextroamphetamine Tab 15 MG	G			0.43560	9/1/2017	
Amphetamine-Dextroamphetamine Tab 20 MG	G			0.26890	5/1/2018	
Amphetamine-Dextroamphetamine Tab 30 MG	G			0.31250	4/1/2018	
Amphetamine-Dextroamphetamine Tab 5 MG	G			0.49500	11/1/2017	
Amphetamine-Dextroamphetamine Tab 7.5 MG	G			0.55767	3/1/2017	
Ampicillin & Sulbactam Sodium For Inj 3 (2-1) GM	G			6.39600	11/1/2011	
Ampicillin Cap 250 MG	G			0.06980	4/1/2017	
Ampicillin Cap 500 MG	G			0.12460	4/1/2017	
Anagrelide HCl Cap 0.5 MG	G			0.18265	6/1/2011	
Anagrelide HCl Cap 1 MG	G			0.76180	8/12/2009	
Anakinra Subcutaneous Soln Prefilled Syringe 100 MG/0.67ML	B			207.81784	1/1/2018	
Anastrozole Tab 1 MG	G			0.09700	5/1/2017	
Antihemophilic Factor (Human) For Inj 1000 Unit	B	KOATE-DVI INJ 1000UNIT (13533066550)		0.68720	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj 1000 Unit	B	KOATE-DVI INJ 1000UNIT (76125066750)		0.68720	10/2/2013	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj 220-400 Unit	B			0.76000	3/16/2011	
Antihemophilic Factor (Human) For Inj 250 Unit	B			0.76000	3/16/2011	
Antihemophilic Factor (Human) For Inj 250 Unit	B	KOATE-DVI INJ 250UNIT (13533066520)		0.68720	3/23/2011	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj 250 Unit	B	KOATE-DVI INJ 250UNIT (76125025020)		0.68720	10/2/2013	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj 401-800 Unit	B			0.76000	3/16/2011	
Antihemophilic Factor (Human) For Inj 500 Unit	B			0.76000	3/16/2011	
Antihemophilic Factor (Human) For Inj 500 Unit	B	KOATE-DVI INJ 500UNIT (13533066530)		0.68720	3/23/2011	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj 500 Unit	B	KOATE-DVI INJ 500UNIT (76125050030)		0.68720	10/2/2013	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj Kit 1000 Unit	B	MONOCLATE-P INJ 1000UNIT (00053763302)		0.60000	10/1/2013	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj Kit 1000 Unit	B	MONOCLATE-P INJ 1000UNIT (00053765604)		0.60000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Human) For Inj Kit 1500 Unit	B			0.60000	3/16/2011	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 1000 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 1500 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 2000 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 250 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 3000 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 500 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recomb) rFVIII Fc For Inj 750 Unit	B			1.97540	9/1/2014	
Antihemophilic Factor (Recombinant) For Inj 1000 Unit	B			0.99000	11/1/2016	
Antihemophilic Factor (Recombinant) For Inj 1241-1800 Unit	B			1.02000	3/16/2011	
Antihemophilic Factor (Recombinant) For Inj 1801-2400 Unit	B	RECOMBINATE INJ (00944283501)		1.02000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 1801-2400 Unit	B	RECOMBINATE INJ (00944283510)		1.02000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 1801-2400 Unit	B	RECOMBINATE INJ (00944284510)		1.02000	10/1/2013	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 2000 Unit	B			0.99000	11/1/2016	
Antihemophilic Factor (Recombinant) For Inj 220-400 Unit	B	RECOMBINATE INJ 220-400 (00944283110)		1.02000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 220-400 Unit	B	RECOMBINATE INJ 220-400 (00944284110)		1.02000	10/1/2013	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 250 Unit	B			0.99000	12/1/2016	
Antihemophilic Factor (Recombinant) For Inj 401-800 Unit	B	RECOMBINATE INJ 401-800 (00944283210)		1.02000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 401-800 Unit	B	RECOMBINATE INJ 401-800 (00944284210)		1.02000	10/1/2013	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 801-1240 Unit	B	RECOMBINATE INJ 801-1240 (00944283310)		1.02000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj 801-1240 Unit	B	RECOMBINATE INJ 801-1240 (00944284310)		1.02000	10/1/2013	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 1000 Unit	B	HELIXATE FS INJ 1000UNIT (00053813302)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 1000 Unit	B	HELIXATE FS SOL 1000UNIT (00053813004)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 1000 Unit	B	KOGENATE FS INJ 1000/BS (00026379550)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 1000 Unit	B	KOGENATE FS INJ 1000UNIT (00026378550)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 2000 Unit	B			0.97000	11/1/2016	
Antihemophilic Factor (Recombinant) For Inj Kit 2000 Unit	B	HELIXATE FS INJ 2000UNIT (00053813005)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 2000 Unit	B	HELIXATE FS INJ 2000UNIT (00053813402)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 2000 Unit	B	KOGENATE FS INJ 2000/BS (00026379660)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 2000 Unit	B	KOGENATE FS INJ 2000UNIT (00026378660)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 250 Unit	B			0.97000	11/1/2016	
Antihemophilic Factor (Recombinant) For Inj Kit 250 Unit	B	HELIXATE FS INJ 250UNIT (00053813102)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 250 Unit	B	HELIXATE FS SOL 250UNIT (00053813001)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 250 Unit	B	KOGENATE FS INJ 250/BS (00026379220)		0.99000	3/16/2011	NDC-specific SMAC

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Antihemophilic Factor (Recombinant) For Inj Kit 250 Unit	B	KOGENATE FS INJ 250UNIT (00026378220)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 3000 Unit	B	HELIXATE FS INJ 3000UNIT (00053813502)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 3000 Unit	B	KOGENATE FS INJ 3000/BS (00026379770)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 3000 Unit	B	KOGENATE FS INJ 3000UNIT (00026378770)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 500 Unit	B	HELIXATE FS SOL 500UNIT (00053813002)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 500 Unit	B	KOGENATE FS INJ 500/BS (00026379330)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 500 Unit	B	KOGENATE FS INJ 500UNIT (00026378330)		0.99000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor (Recombinant) For Inj Kit 500 Unit	B	HELIXATE FS INJ 500UNIT (00053813202)		0.95000	3/16/2011	NDC-specific SMAC
Antihemophilic Factor rAHF-PFM For Inj 1000 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor rAHF-PFM For Inj 1500 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor rAHF-PFM For Inj 2000 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor rAHF-PFM For Inj 250 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor rAHF-PFM For Inj 3000 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor rAHF-PFM For Inj 500 Unit	B			1.03000	3/16/2011	
Antihemophilic Factor Recombinant PAF For Inj Kit 1000 Unit	B			1.03750	11/1/2016	
Antihemophilic Factor Recombinant PAF For Inj Kit 2000 Unit	B			1.03750	11/1/2016	
Antihemophilic Factor Recombinant PAF For Inj Kit 250 Unit	B			1.03750	11/1/2016	
Antihemophilic Factor Recombinant PAF For Inj Kit 3000 Unit	B			1.03750	11/1/2016	
Antihemophilic Factor Recombinant PAF For Inj Kit 500 Unit	B			1.03750	11/1/2016	
Antihemophilic Factor/VWF (Human) For Inj 1000 Unit	B			0.79000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 1000-2400 Unit	B			0.80000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 1500 Unit	B			0.79000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 250 Unit	B			0.79000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 250-600 Unit	B			0.80000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 450-450 Unit	B			1.10400	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 500 Unit	B			0.79000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 500-1200 Unit	B			0.80000	3/16/2011	
Antihemophilic Factor/VWF (Human) For Inj 900-900 Unit	B			1.10400	3/16/2011	
Antiinhibitor Coagulant Complex For Inj**	B			1.43000	3/16/2011	
Apixaban Tab 2.5 MG	B			6.44703	1/1/2017	
Apixaban Tab 5 MG	B			6.44660	1/1/2017	
Apraclonidine HCl Ophth Soln 0.5% (Base Equivalent)	G			10.85900	4/1/2017	
Apremilast Tab Starter Therapy Pack 10 MG & 20 MG & 30 MG	B			59.45378	4/4/2018	
Aripiprazole Oral Solution 1 MG/ML	B			6.67460	1/1/2015	
Aripiprazole Oral Solution 1 MG/ML	G			2.79000	2/1/2017	
Aripiprazole Orally Disintegrating Tab 15 MG	B			36.09553	1/1/2015	
Aripiprazole Tab 10 MG	B			30.32687	1/1/2015	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Aripiprazole Tab 10 MG	G		0.44733	0.32633	6/1/2018	
Aripiprazole Tab 15 MG	B			30.32687	1/1/2015	
Aripiprazole Tab 15 MG	G		0.46816	0.39635	6/1/2018	
Aripiprazole Tab 2 MG	B			30.32687	1/1/2015	
Aripiprazole Tab 2 MG	G		0.55857	0.34434	6/1/2018	
Aripiprazole Tab 20 MG	B			42.88590	1/1/2015	
Aripiprazole Tab 20 MG	G		0.60020	0.38334	6/1/2018	
Aripiprazole Tab 30 MG	B			42.88590	1/1/2015	
Aripiprazole Tab 30 MG	G		0.78867	0.39511	6/1/2018	
Aripiprazole Tab 5 MG	B			30.32687	1/1/2015	
Aripiprazole Tab 5 MG	G		0.49233	0.42912	6/1/2018	
Armodafinil Tab 250 MG	G			1.31300	6/1/2017	
Artificial Tear Ophth Ointment***	G			1.86060	9/18/2013	
Asenapine Maleate SL Tab 10 MG (Base Equiv)	B			19.93344	2/28/2018	
Asenapine Maleate SL Tab 5 MG (Base Equiv)	B		18.64276	19.93340	3/5/2018	
Asfotase Alfa Subcutaneous Inj 18 MG/0.45ML	B			2848.56000	2/1/2018	
Asfotase Alfa Subcutaneous Inj 28 MG/0.7ML	B			2848.56000	2/1/2018	
Asfotase Alfa Subcutaneous Inj 40 MG/ML	B			2848.56000	2/1/2018	
Asfotase Alfa Subcutaneous Inj 80 MG/0.8ML	B			7121.40000	2/1/2018	
Aspirin Chew Tab 81 MG	G			0.02527	1/5/2011	
Aspirin Tab 325 MG	G			0.00707	1/5/2011	
Aspirin Tab Delayed Release 325 MG	G			0.00975	1/5/2011	
Aspirin Tab Delayed Release 81 MG	G			0.00780	1/5/2011	
Aspirin-Dipyridamole Cap ER 12HR 25-200 MG	G			3.08317	4/1/2017	
Atazanavir Sulfate Cap 150 MG (Base Equiv)	B			24.29009	1/1/2017	
Atazanavir Sulfate Cap 200 MG (Base Equiv)	B			24.29009	1/1/2017	
Atazanavir Sulfate Cap 300 MG (Base Equiv)	B			48.12064	1/1/2017	
Atazanavir Sulfate-Cobicistat Tab 300-150 MG (Base Equiv)	B			53.30150	1/1/2017	
Atenolol & Chlorthalidone Tab 100-25 MG	G			0.11700	2/1/2012	
Atenolol & Chlorthalidone Tab 50-25 MG	G			0.07629	1/1/2009	
Atenolol Tab 100 MG	G			0.02317	4/1/2017	
Atenolol Tab 25 MG	G			0.01620	4/1/2017	
Atenolol Tab 50 MG	G			0.01560	4/1/2017	
Atomoxetine HCl Cap 10 MG (Base Equiv)	G		3.35000	1.99500	6/1/2018	
Atomoxetine HCl Cap 100 MG (Base Equiv)	G		3.95000	2.73317	6/1/2018	
Atomoxetine HCl Cap 18 MG (Base Equiv)	G			3.35000	7/1/2017	
Atomoxetine HCl Cap 25 MG (Base Equiv)	G			2.53667	11/1/2017	
Atomoxetine HCl Cap 40 MG (Base Equiv)	G		3.09267	2.95567	6/1/2018	
Atomoxetine HCl Cap 60 MG (Base Equiv)	G		3.44067	2.12200	6/1/2018	
Atomoxetine HCl Cap 80 MG (Base Equiv)	G			3.47850	3/1/2018	
Atorvastatin Calcium Tab 10 MG (Base Equivalent)	G			0.06414	4/1/2018	
Atorvastatin Calcium Tab 20 MG (Base Equivalent)	G			0.08920	7/1/2017	
Atorvastatin Calcium Tab 40 MG (Base Equivalent)	G			0.09643	5/1/2017	
Atorvastatin Calcium Tab 80 MG (Base Equivalent)	G			0.08844	6/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Atovaquone Susp 750 MG/5ML	G			2.40754	4/1/2017	
Atovaquone-Proguanil HCl Tab 250-100 MG	G			2.63870	10/1/2017	
Atovaquone-Proguanil HCl Tab 62.5-25 MG	G			1.26500	9/1/2017	
Atropine Sulfate Ophth Soln 1%	G			8.99400	3/1/2018	
Axitinib Tab 1 MG	B			79.48212	1/1/2018	
Axitinib Tab 5 MG	B			238.44638	1/1/2018	
Azathioprine Tab 50 MG	G		0.35000	0.27375	6/1/2018	
Azelastine HCl Nasal Spray 0.1% (137 MCG/SPRAY)	G			0.39100	4/1/2018	
Azelastine HCl Nasal Spray 0.15% (205.5 MCG/SPRAY)	G			1.46267	4/1/2017	
Azelastine HCl Ophth Soln 0.05%	G		2.10944	1.97221	6/1/2018	
Azithromycin For Susp 100 MG/5ML	G			0.73267	10/1/2017	
Azithromycin For Susp 200 MG/5ML	G			0.49172	4/1/2017	
Azithromycin Tab 250 MG	G			0.27106	2/1/2018	
Azithromycin Tab 500 MG	G			0.56111	7/1/2017	
Azithromycin Tab 600 MG	G			1.57567	5/25/2016	
B-Complex w/ C & Folic Acid Cap 1 MG***	G		0.13195	0.09660	6/1/2018	
B-Complex w/ C & Folic Acid Tab 1 MG***	G			0.10190	2/1/2018	
Bacitracin Oint 500 Unit/GM	G			0.08300	9/18/2013	
Bacitracin Ophth Oint 500 Unit/GM	G		26.18395	25.84858	6/1/2018	
Bacitracin Zinc Oint 500 Unit/GM	G			0.08300	9/18/2013	
Bacitracin-Polymyxin B Ophth Oint	G			1.36056	1/1/2009	
Bacitracin-Polymyxin-Neomycin-HC Ophth Oint 1%	G			2.44285	6/1/2010	
Baclofen Powder	G			2.37120	6/1/2010	
Baclofen Tab 10 MG	G		0.13040	0.10130	6/1/2018	
Baclofen Tab 20 MG	G			0.20000	8/1/2017	
Balsalazide Disodium Cap 750 MG	G			0.22313	5/1/2012	
Belimumab For IV Soln 120 MG	B			508.50780	4/1/2018	
Belimumab For IV Soln 400 MG	B			1694.97288	4/1/2018	
Belinostat For IV Inj 500 MG	B			1671.68640	1/9/2017	
Benazepril & Hydrochlorothiazide Tab 10-12.5 MG	G			0.13679	9/1/2011	
Benazepril & Hydrochlorothiazide Tab 20-12.5 MG	G			0.21990	9/1/2017	
Benazepril & Hydrochlorothiazide Tab 20-25 MG	G			0.15431	1/1/2012	
Benazepril & Hydrochlorothiazide Tab 5-6.25 MG	G			0.14950	11/1/2011	
Benazepril HCl Tab 10 MG	G			0.03800	11/1/2017	
Benazepril HCl Tab 20 MG	G			0.03900	4/1/2017	
Benazepril HCl Tab 40 MG	G			0.04368	11/1/2017	
Benazepril HCl Tab 5 MG	G			0.04180	3/1/2018	
Benzocaine-Antipyrine Otic Soln 1.4-5.4%	G			0.57091	8/1/2014	
Benzonatate Cap 100 MG	G			0.16558	9/1/2017	
Benzonatate Cap 200 MG	G			0.13210	4/1/2018	
Benzoyl Peroxide Gel 10%	G			0.06917	9/1/2010	
Benzoyl Peroxide Gel 5%	G			0.10400	9/1/2010	
Benzoyl Peroxide Liq 10%	G			0.04621	10/1/2017	
Benzoyl Peroxide Liq 5%	G			0.08801	8/12/2009	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Benzoyl Peroxide Pad 3%	G			2.59177	6/1/2010	
Benzoyl Peroxide Pad 6%	G			2.59177	6/1/2010	
Benzoyl Peroxide-Erythromycin Gel 5-3%	G		6.55508	5.09455	6/1/2018	
Benzotropine Mesylate Tab 0.5 MG	G			0.04716	2/1/2011	
Benzotropine Mesylate Tab 1 MG	G			0.09106	9/1/2017	
Benzotropine Mesylate Tab 2 MG	G			0.10637	9/1/2017	
Betamethasone Dipropionate Augmented Cream 0.05%	G			0.31737	9/1/2011	
Betamethasone Dipropionate Augmented Gel 0.05%	G			1.19430	6/1/2006	
Betamethasone Dipropionate Augmented Lotion 0.05%	G			1.37417	1/1/2013	
Betamethasone Dipropionate Augmented Oint 0.05%	G		2.57000	2.22357	6/1/2018	
Betamethasone Dipropionate Cream 0.05%	G			1.16000	7/1/2011	
Betamethasone Dipropionate Lotion 0.05%	G			0.07083	1/1/2009	
Betamethasone Dipropionate Oint 0.05%	G			1.52400	10/14/2015	
Betamethasone Valerate Cream 0.1% (Base Equivalent)	G			0.71020	2/20/2014	
Betamethasone Valerate Lotion 0.1% (Base Equivalent)	G			0.06450	1/28/2008	
Betamethasone Valerate Oint 0.1% (Base Equivalent)	G			0.68540	7/13/2016	
Bethanechol Chloride Tab 10 MG	G			0.13025	6/1/2012	
Bethanechol Chloride Tab 25 MG	G			0.14238	9/1/2011	
Bethanechol Chloride Tab 5 MG	G			0.14400	10/1/2017	
Bethanechol Chloride Tab 50 MG	G			0.25090	5/1/2011	
Bevacizumab IV Soln 100 MG/4ML (For Infusion)	B			184.72065	1/1/2017	
Bevacizumab IV Soln 400 MG/16ML (For Infusion)	B			184.72065	1/1/2017	
Bicalutamide Tab 50 MG	G			0.21667	9/1/2017	
Bisacodyl Suppos 10 MG	G			0.08957	1/5/2011	
Bisacodyl Tab Delayed Release 5 MG	G			0.00660	7/1/2013	
Bismuth Subsalicylate Susp 525 MG/15ML	G			0.00831	4/1/2018	
Bisoprolol & Hydrochlorothiazide Tab 10-6.25 MG	G			0.06619	9/1/2011	
Bisoprolol & Hydrochlorothiazide Tab 2.5-6.25 MG	G			0.03462	3/1/2018	
Bisoprolol & Hydrochlorothiazide Tab 5-6.25 MG	G			0.03900	9/1/2017	
Bisoprolol Fumarate Tab 10 MG	G			0.09470	9/1/2017	
Bisoprolol Fumarate Tab 5 MG	G			0.17367	10/1/2017	
Blinatumomab For IV Infusion 35 MCG	B			3450.49260	1/13/2017	
Bortezomib For Inj 3.5 MG	B			1596.58800	11/1/2016	
Bosentan Tab 125 MG	B			180.62460	11/13/2017	
Bosentan Tab 62.5 MG	B			180.62460	11/13/2017	
Bosutinib Tab 100 MG	B			109.09970	1/1/2017	
Bosutinib Tab 500 MG	B			436.39879	1/1/2017	
Brentuximab Vedotin For IV Soln 50 MG	B			6548.70000	12/29/2016	
Brimonidine Tartrate Ophth Soln 0.15%	G			11.94240	4/4/2011	
Brimonidine Tartrate Ophth Soln 0.2%	G			0.53640	9/1/2017	
Bromocriptine Mesylate Tab 2.5 MG (Base Equivalent)	G			0.74574	10/1/2012	
Brompheniramine & Phenylephrine Elixir 1-2.5 MG/5ML	G			0.01064	8/1/2011	
Budesonide Cap SR 24HR 3 MG	G			9.04200	5/1/2015	
Budesonide Delayed Release Particles Cap 3 MG	G			5.96470	4/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Budesonide Inhalation Susp 0.25 MG/2ML	G		2.11547	1.32767	6/1/2018	
Budesonide Inhalation Susp 0.5 MG/2ML	G		1.22589	1.04350	6/1/2018	
Bumetanide Tab 0.5 MG	G			0.12488	12/1/2011	
Bumetanide Tab 1 MG	G		0.47645	0.39720	6/1/2018	
Bumetanide Tab 2 MG	G			0.16025	8/1/2011	
Bupivacaine HCl Preservative Free (PF) Inj 0.25%	G			0.05460	7/1/2013	
Bupivacaine HCl Preservative Free (PF) Inj 0.5%	G			0.06370	7/1/2013	
Buprenorphine HCl SL Tab 2 MG (Base Equiv)	G			0.43600	10/1/2017	
Buprenorphine HCl SL Tab 8 MG (Base Equiv)	G			1.00767	4/1/2018	
Buprenorphine HCl-Naloxone HCl SL Tab 2-0.5 MG (Base Equiv)	G			2.29567	9/1/2017	
Buprenorphine HCl-Naloxone HCl SL Tab 8-2 MG (Base Equiv)	G			1.56900	10/1/2017	
Bupropion HCl (Smoking Deterrent) Tab ER 12HR 150 MG	G			0.20967	8/1/2017	
Bupropion HCl Tab 100 MG	G			0.18600	10/1/2017	
Bupropion HCl Tab 75 MG	G			0.12725	10/1/2017	
Bupropion HCl Tab ER 12HR 100 MG	G			0.07644	3/1/2018	
Bupropion HCl Tab ER 12HR 150 MG	G			0.10950	6/1/2017	
Bupropion HCl Tab ER 12HR 200 MG	G			0.18917	11/1/2017	
Bupropion HCl Tab ER 24HR 150 MG	G			0.30311	11/1/2017	
Bupropion HCl Tab ER 24HR 300 MG	G		0.43809	0.36090	6/1/2018	
Burrow's Solution w/ Acetic Acid Otic Soln 2%	G			0.08830	6/1/2006	
Buspirone HCl Tab 10 MG	G			0.03980	8/1/2017	
Buspirone HCl Tab 15 MG	G			0.05634	6/1/2017	
Buspirone HCl Tab 30 MG	G			0.39675	1/1/2018	
Buspirone HCl Tab 5 MG	G			0.03640	4/1/2011	
Buspirone HCl Tab 7.5 MG	G			0.41440	10/1/2017	
Butalbital-Acetaminophen Tab 50-325 MG	G			0.42265	8/1/2013	
Butalbital-Acetaminophen-Caff w/ COD Cap 50-325-40-30 MG	G			1.02831	4/1/2017	
Butalbital-Acetaminophen-Caffeine Cap 50-300-40 MG	G			2.36850	4/1/2017	
Butalbital-Acetaminophen-Caffeine Tab 50-325-40 MG	G			0.39770	11/1/2017	
Butalbital-Aspirin-Caff w/ Codeine Cap 50-325-40-30 MG	G			0.60700	5/1/2012	
Butalbital-Aspirin-Caffeine Cap 50-325-40 MG	G			1.01660	4/1/2017	
Butalbital-Aspirin-Caffeine Tab 50-325-40 MG	G			0.12306	2/1/2012	
Butorphanol Tartrate Nasal Soln 10 MG/ML	G			7.03500	8/1/2011	
C1 Esterase Inhibitor (Human) For IV Inj 500 Unit	B			2747.75650	2/22/2017	
C1 Esterase Inhibitor (Human) For IV Inj Kit 500 Unit	B			2803.74000	11/1/2016	
C1 Esterase Inhibitor (Recombinant) For IV Inj 2100 Unit	B			5685.47676	11/1/2016	
Cabergoline Tab 0.5 MG	G		5.34750	4.25125	6/1/2018	
Calcipotriene Cream 0.005%	G		4.79600	2.19831	6/1/2018	
Calcipotriene Oint 0.005%	G			3.14200	12/1/2016	
Calcipotriene Soln 0.005% (50 MCG/ML)	G		2.82646	1.63847	6/1/2018	
Calcitonin (Salmon) Nasal Soln 200 Unit/ACT	G			8.60132	4/1/2017	
Calcitriol Cap 0.25 MCG	G		0.20810	0.15948	6/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Calcitriol Cap 0.5 MCG	G			0.31830	5/1/2018	
Calcitriol Oral Soln 1 MCG/ML	G			5.25167	4/1/2017	
Calcium Acetate (Phosphate Binder) Cap 667 MG (169 MG Ca)	G			0.18790	12/1/2017	
Calcium Carbonate (Antacid) Chew Tab 500 MG	G			0.01465	7/1/2013	
Calcium Carbonate Susp 1250 MG/5ML (500 MG/5ML Elemental Ca)	G			0.01800	1/5/2011	
Calcium Carbonate Tab 1250 MG (500 MG Elemental Ca)	G			0.00695	4/1/2017	
Calcium Carbonate Tab 1500 MG (600 MG Elemental Ca)	G			0.04528	3/1/2011	
Calcium Carbonate Tab 600 MG	G			0.04528	3/1/2011	
Calcium Carbonate-Vitamin D Tab 600 MG-200 Unit	G			0.02274	1/5/2011	
Calcium Carbonate-Vitamin D Tab 600 MG-400 Unit	G			0.04095	1/5/2011	
Calcium Citrate-Vitamin D Tab 315 MG-200 Unit (Elemental Ca)	G			0.06998	3/1/2011	
Calcium Citrate-Vitamin D Tab 315 MG-250 Unit (Elemental Ca)	G			0.06998	3/1/2011	
Calcium Polycarbophil Tab 625 MG	G			0.06573	1/5/2011	
Candesartan Cilexetil Tab 16 MG	G			1.89000	11/1/2014	
Candesartan Cilexetil Tab 32 MG	G			1.88411	5/1/2018	
Candesartan Cilexetil Tab 4 MG	G			2.08598	4/1/2017	
Candesartan Cilexetil Tab 8 MG	G			1.34111	4/1/2017	
Candesartan Cilexetil-Hydrochlorothiazide Tab 16-12.5 MG	G			2.02290	9/1/2013	
Candesartan Cilexetil-Hydrochlorothiazide Tab 32-12.5 MG	G			2.02290	9/1/2013	
Candesartan Cilexetil-Hydrochlorothiazide Tab 32-25 MG	G			3.03985	9/1/2013	
Capecitabine Tab 500 MG	B			45.00516	1/1/2017	
Capecitabine Tab 500 MG	G			5.07000	12/1/2017	
Capsaicin Cream 0.075%	G			0.07042	1/1/2012	
Captopril & Hydrochlorothiazide Tab 25-15 MG	G			0.06265	9/1/2011	
Captopril & Hydrochlorothiazide Tab 50-15 MG	G			0.14030	9/1/2011	
Captopril & Hydrochlorothiazide Tab 50-25 MG	G			0.17880	6/1/2006	
Captopril Tab 100 MG	G			0.07163	1/1/2012	
Captopril Tab 12.5 MG	G			0.01872	1/1/2009	
Captopril Tab 25 MG	G			0.02117	1/1/2009	
Captopril Tab 50 MG	G			1.34740	4/1/2017	
Carbamazepine Cap ER 12HR 100 MG	G			0.62433	1/1/2018	
Carbamazepine Cap ER 12HR 200 MG	G			0.35403	10/1/2016	
Carbamazepine Cap ER 12HR 300 MG	G			0.52067	2/1/2018	
Carbamazepine Chew Tab 100 MG	G			0.25520	12/1/2017	
Carbamazepine Susp 100 MG/5ML	G			0.11359	4/1/2017	
Carbamazepine Tab 200 MG	G		0.45751	0.39575	6/1/2018	
Carbamazepine Tab ER 12HR 100 MG	G		0.75630	0.54345	6/1/2018	
Carbamazepine Tab ER 12HR 200 MG	G		1.25120	0.90340	6/1/2018	
Carbamazepine Tab ER 12HR 400 MG	G		2.33430	1.59656	6/1/2018	
Carbamide Peroxide 6.5% Otic Soln	G			0.06800	9/1/2017	
Carbidopa & Levodopa Orally Disintegrating Tab 25-100 MG	G			0.72230	7/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Carbidopa & Levodopa Tab 10-100 MG	G			0.09610	10/1/2017	
Carbidopa & Levodopa Tab 25-100 MG	G			0.08025	4/1/2018	
Carbidopa & Levodopa Tab 25-250 MG	G			0.12267	4/1/2018	
Carbidopa & Levodopa Tab ER 25-100 MG	G			0.21217	3/1/2012	
Carbidopa & Levodopa Tab ER 50-200 MG	G			0.29771	5/1/2012	
Carbidopa Tab 25 MG	G			6.63800	4/1/2018	
Carbidopa-Levodopa-Entacapone Tabs 25-100-200 MG	G			0.83370	10/1/2017	
Carbidopa-Levodopa-Entacapone Tabs 37.5-150-200 MG	G			1.93249	4/1/2017	
Carbidopa-Levodopa-Entacapone Tabs 50-200-200 MG	G			0.83370	10/1/2017	
Carisoprodol Tab 350 MG	G			0.06011	1/1/2009	
Carteolol HCl Ophth Soln 1%	G			1.65667	12/1/2011	
Carvedilol Tab 12.5 MG	G			0.01990	8/1/2017	
Carvedilol Tab 25 MG	G			0.02935	4/1/2017	
Carvedilol Tab 3.125 MG	G			0.02240	11/1/2017	
Carvedilol Tab 6.25 MG	G			0.01832	11/1/2017	
Caspofungin Acetate For IV Soln 50 MG	B			344.46250	12/19/2012	
Cefaclor Cap 250 MG	G			0.44133	1/1/2009	
Cefaclor Cap 500 MG	G			0.72872	1/1/2009	
Cefadroxil Cap 500 MG	G			0.17120	4/1/2017	
Cefadroxil For Susp 250 MG/5ML	G			0.31820	4/1/2017	
Cefadroxil For Susp 500 MG/5ML	G			0.43635	11/1/2013	
Cefazolin Sodium For Inj 1 GM	G			0.80850	3/1/2012	
Cefdinir Cap 300 MG	G			0.39355	12/1/2017	
Cefdinir For Susp 125 MG/5ML	G		0.20459	0.10693	6/1/2018	
Cefdinir For Susp 250 MG/5ML	G			0.21312	5/1/2018	
Cefepime HCl For Inj 1 GM	G			5.90333	10/1/2012	
Cefepime HCl For Inj 2 GM	G			13.10920	11/1/2010	
Cefpodoxime Proxetil Tab 100 MG	G			2.69550	8/12/2009	
Cefpodoxime Proxetil Tab 200 MG	G			4.90000	4/1/2018	
Cefprozil For Susp 125 MG/5ML	G			0.30840	4/1/2017	
Cefprozil For Susp 250 MG/5ML	G			0.23730	10/1/2017	
Cefprozil Tab 250 MG	G			0.71478	4/1/2017	
Cefprozil Tab 500 MG	G			1.28468	4/1/2017	
Ceftazidime For Inj 1 GM	G			4.95300	6/1/2010	
Ceftazidime For Inj 2 GM	G			11.54400	6/1/2010	
Ceftazidime For Inj 6 GM	G			24.36200	6/1/2010	
Ceftazidime For IV Soln 1 GM	G			8.51500	11/1/2010	
Ceftriaxone Sodium For Inj 1 GM	G			1.40413	3/1/2018	
Ceftriaxone Sodium For Inj 10 GM	G			19.80750	2/1/2014	
Ceftriaxone Sodium For Inj 2 GM	G			1.35200	3/1/2018	
Ceftriaxone Sodium For Inj 250 MG	G		1.56000	0.08900	6/1/2018	
Ceftriaxone Sodium For Inj 500 MG	G			0.85100	9/1/2017	
Cefuroxime Axetil Tab 250 MG	G			0.29000	6/1/2017	
Cefuroxime Axetil Tab 500 MG	G		0.93317	0.84264	6/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Celecoxib Cap 100 MG	G			0.22215	12/1/2017	
Celecoxib Cap 200 MG	G			0.26311	12/1/2017	
Celecoxib Cap 400 MG	G			2.27333	9/1/2016	
Celecoxib Cap 50 MG	G			0.28033	11/1/2017	
Centruroides (Scorpion) Imm F(ab')2 (Equine) For IV Infusion	B			4275.29680	1/1/2017	
Cephalexin Cap 250 MG	G			0.06050	3/1/2018	
Cephalexin Cap 500 MG	G			0.07754	2/1/2018	
Cephalexin For Susp 125 MG/5ML	G			0.09450	12/1/2017	
Cephalexin For Susp 250 MG/5ML	G			0.10126	4/1/2018	
Certolizumab Pegol For Inj Kit 2 X 200 MG	B			4028.14272	1/1/2018	
Certolizumab Pegol Inj Kit 2 X 200 MG/ML	B			4028.14272	1/1/2018	
Certolizumab Pegol Inj Kit 6 X 200 MG/ML	B			4028.14272	1/1/2018	
Cetirizine HCl Chew Tab 10 MG	G			0.57308	10/1/2009	
Cetirizine HCl Chew Tab 5 MG	G			4.37680	9/21/2015	
Cetirizine HCl Oral Soln 1 MG/ML (5 MG/5ML)	G			0.02705	3/24/2014	
Cetirizine HCl Syrup 1 MG/ML (5 MG/5ML)	G			0.02705	7/1/2013	
Cetirizine HCl Tab 10 MG	G			0.03887	4/1/2017	
Cetirizine HCl Tab 5 MG	G			0.14090	9/1/2016	
Cetirizine-Pseudoephedrine Tab ER 12HR 5-120 MG	G			0.60558	1/5/2011	
Cevimeline HCl Cap 30 MG	G			1.15570	4/1/2017	
Chlordiazepoxide HCl Cap 10 MG	G			0.05942	1/1/2010	
Chlordiazepoxide HCl Cap 25 MG	G			0.06297	3/1/2018	
Chlordiazepoxide HCl Cap 5 MG	G			0.09830	1/1/2009	
Chlordiazepoxide HCl-Clidinium Bromide Cap 5-2.5 MG	G		1.97133	1.90000	6/1/2018	
Chlordiazepoxide-Amitriptyline Tab 10-25 MG	G			0.85530	1/1/2007	
Chlordiazepoxide-Amitriptyline Tab 5-12.5 MG	G			1.13777	8/1/2016	
Chlorhexidine Gluconate Soln 0.12%	G			0.00591	3/1/2011	
Chloroquine Phosphate Tab 250 MG	G			3.43840	2/24/2017	
Chloroquine Phosphate Tab 500 MG	G			2.27318	9/1/2011	
Chlorothiazide Tab 250 MG	G			0.10250	12/1/2011	
Chlorothiazide Tab 500 MG	G			0.15275	1/1/2010	
Chlorpheniramine & Phenylephrine Syrup 4-12.5 MG/5ML	G			0.03133	1/5/2011	
Chlorpheniramine Maleate Tab 4 MG	G			0.10188	8/1/2016	
Chlorpromazine HCl Inj 25 MG/ML	G			16.31592	12/19/2012	
Chlorpromazine HCl Tab 10 MG	G			2.45861	8/1/2016	
Chlorpromazine HCl Tab 100 MG	G			4.51660	9/1/2017	
Chlorpromazine HCl Tab 200 MG	G			2.29700	10/1/2013	
Chlorpromazine HCl Tab 25 MG	G		2.87458	2.83355	6/1/2018	
Chlorpromazine HCl Tab 50 MG	G			3.35510	7/1/2017	
Chlorpropamide Tab 250 MG	G			0.21460	6/1/2006	
Chlorthalidone Tab 25 MG	G		0.57585	0.48310	6/1/2018	
Chlorthalidone Tab 50 MG	G			0.66647	4/1/2017	
Chlorzoxazone Tab 500 MG	G			0.20229	4/1/2017	
Cholestyramine Light Powder 4 GM/DOSE	G			0.00000	9/15/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Cholestyramine Light Powder Packets 4 GM	G		1.73933	0.29672	6/1/2018	
Cholestyramine Powder 4 GM/DOSE	G			0.00000	9/15/2013	
Cholestyramine Powder Packets 4 GM	G		1.33367	1.23333	6/1/2018	
Choline & Magnesium Salicylates Tab 500 MG	G			0.10075	6/1/2010	
Choline & Magnesium Salicylates Tab 750 MG	G			0.10725	9/1/2010	
Choline Fenofibrate Cap DR 135 MG (Fenofibric Acid Equiv)	G			1.27133	4/1/2017	
Choline Fenofibrate Cap DR 45 MG (Fenofibric Acid Equiv)	G			0.41211	10/1/2017	
Ciclopirox Gel 0.77%	G			1.15489	12/1/2017	
Ciclopirox Olamine Cream 0.77% (Base Equiv)	G			0.23514	12/1/2017	
Ciclopirox Olamine Susp 0.77% (Base Equiv)	G			0.50000	11/1/2011	
Ciclopirox Shampoo 1%	G		0.79229	0.40764	6/1/2018	
Ciclopirox Solution 8%	G		5.91000	2.22958	6/1/2018	
Cilostazol Tab 100 MG	G			0.11400	4/1/2017	
Cilostazol Tab 50 MG	G			0.12084	9/1/2017	
Cimetidine HCl Soln 300 MG/5ML	G			0.03677	9/1/2011	
Cimetidine Tab 200 MG	G			0.06613	8/1/2011	
Cimetidine Tab 300 MG	G			0.06335	1/1/2009	
Cimetidine Tab 400 MG	G			0.44521	7/20/2015	
Cimetidine Tab 800 MG	G			0.75810	2/15/2018	
Cinacalcet HCl Tab 60 MG (Base Equiv)	B			53.56488	1/12/2017	
Ciprofloxacin 400 MG/200ML in D5W	G			0.01428	1/1/2012	
Ciprofloxacin For Oral Susp 500 MG/5ML (10%) (10 GM/100ML)	G			1.40410	4/1/2017	
Ciprofloxacin HCl Opth Soln 0.3%	G			0.48800	8/1/2017	
Ciprofloxacin HCl Tab 250 MG (Base Equiv)	G			0.08058	1/1/2009	
Ciprofloxacin HCl Tab 500 MG (Base Equiv)	G			0.08930	1/1/2009	
Ciprofloxacin HCl Tab 750 MG (Base Equiv)	G			0.18041	1/1/2009	
Citalopram Hydrobromide Oral Soln 10 MG/5ML	G		0.15841	0.06029	6/1/2018	
Citalopram Hydrobromide Tab 10 MG (Base Equiv)	G			0.01764	1/1/2018	
Citalopram Hydrobromide Tab 20 MG (Base Equiv)	G			0.02841	4/1/2017	
Citalopram Hydrobromide Tab 40 MG (Base Equiv)	G			0.03906	4/1/2017	
Clarithromycin For Susp 125 MG/5ML	G			0.46093	9/17/2012	
Clarithromycin For Susp 250 MG/5ML	G			0.72340	10/1/2015	
Clarithromycin Tab 250 MG	G			0.61400	10/1/2017	
Clarithromycin Tab 500 MG	G			0.57736	12/1/2017	
Clarithromycin Tab ER 24HR 500 MG	G		2.66583	1.24967	6/1/2018	
Clemastine Fumarate Tab 2.68 MG	G			0.22980	1/1/2007	
Clindamycin HCl Cap 150 MG	G			0.07960	9/1/2017	
Clindamycin HCl Cap 300 MG	G			0.21227	4/1/2017	
Clindamycin Palmitate HCl For Soln 75 MG/5ML (Base Equiv)	G			0.19640	10/1/2017	
Clindamycin Phosph-Benzoyl Peroxide (Refrig) Gel 1.2 (1)-5%	G			3.14441	8/1/2016	
Clindamycin Phosphate Gel 1%	G		2.56000	1.46240	6/1/2018	
Clindamycin Phosphate Inj 300 MG/2ML	G			0.33458	3/1/2012	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Clindamycin Phosphate Inj 600 MG/4ML	G			0.33458	3/1/2012	
Clindamycin Phosphate Inj 9 GM/60ML	G			0.33458	3/1/2012	
Clindamycin Phosphate Inj 900 MG/6ML	G			0.33458	3/1/2012	
Clindamycin Phosphate Lotion 1%	G		1.30300	1.14466	6/1/2018	
Clindamycin Phosphate Soln 1%	G		0.87689	0.42538	6/1/2018	
Clindamycin Phosphate Swab 1%	G			0.32988	12/1/2017	
Clindamycin Phosphate Vaginal Cream 2%	G			1.78963	9/1/2017	
Clindamycin Phosphate-Benzoyl Peroxide Gel 1-5%	G			3.62152	2/1/2014	
Clobetasol Propionate Cream 0.05%	G		5.46000	1.64339	6/1/2018	
Clobetasol Propionate Emollient Base Cream 0.05%	G		2.20150	1.81610	6/1/2018	
Clobetasol Propionate Foam 0.05%	G			1.62905	7/1/2013	
Clobetasol Propionate Gel 0.05%	G			0.29125	3/1/2012	
Clobetasol Propionate Oint 0.05%	G		3.65000	1.58894	6/1/2018	
Clobetasol Propionate Soln 0.05%	G		2.04521	0.95661	6/1/2018	
Clomiphene Citrate Tab 50 MG	G			0.51333	4/1/2017	
Clomipramine HCl Cap 25 MG	G			4.51030	10/1/2017	
Clomipramine HCl Cap 50 MG	G			4.99967	10/1/2017	
Clomipramine HCl Cap 75 MG	G			0.22269	1/1/2009	
Clonazepam Orally Disintegrating Tab 0.125 MG	G		0.61682	0.54167	6/1/2018	
Clonazepam Orally Disintegrating Tab 0.25 MG	G			0.48917	9/1/2017	
Clonazepam Orally Disintegrating Tab 0.5 MG	G			0.64733	5/1/2014	
Clonazepam Orally Disintegrating Tab 1 MG	G			0.58810	4/1/2018	
Clonazepam Orally Disintegrating Tab 2 MG	G			1.35500	3/1/2011	
Clonazepam Tab 0.5 MG	G			0.01566	4/1/2017	
Clonazepam Tab 1 MG	G			0.01974	4/1/2017	
Clonazepam Tab 2 MG	G			0.04350	12/1/2010	
Clonidine HCl Tab 0.1 MG	G			0.01652	6/1/2017	
Clonidine HCl Tab 0.2 MG	G			0.03250	1/1/2012	
Clonidine HCl Tab 0.3 MG	G			0.03809	4/1/2017	
Clonidine HCl Tab ER 12HR 0.1 MG	G		2.40046	2.36617	6/1/2018	
Clonidine HCl TD Patch Weekly 0.1 MG/24HR	G		14.00750	11.20500	6/1/2018	
Clonidine HCl TD Patch Weekly 0.2 MG/24HR	G			18.91000	4/1/2017	
Clonidine HCl TD Patch Weekly 0.3 MG/24HR	G		22.79500	18.75000	6/1/2018	
Clopidogrel Bisulfate Tab 75 MG (Base Equiv)	G			0.05800	6/1/2017	
Clorazepate Dipotassium Tab 15 MG	G			0.15605	9/1/2011	
Clorazepate Dipotassium Tab 3.75 MG	G			0.64250	4/1/2017	
Clorazepate Dipotassium Tab 7.5 MG	G			0.65438	10/1/2017	
Clotrimazole Cream 1%	G			0.29322	12/1/2017	
Clotrimazole Soln 1%	G			1.89000	4/21/2015	
Clotrimazole Troche 10 MG	G			0.29457	12/1/2017	
Clotrimazole Vaginal Cream 1%	G			0.06089	9/1/2017	
Clotrimazole w/ Betamethasone Cream 1-0.05%	G		1.27014	0.39419	6/1/2018	
Clotrimazole w/ Betamethasone Lotion 1-0.05%	G			2.03000	11/21/2011	
Clozapine Tab 100 MG	G		0.66970	0.58154	6/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Clozapine Tab 200 MG	G			2.03150	6/1/2017	
Clozapine Tab 25 MG	G			0.27690	9/1/2017	
Clozapine Tab 50 MG	G			0.58414	9/1/2017	
Coagulation Factor IX (Recombinant) For Inj 1000 Unit	B			1.20100	12/1/2016	
Coagulation Factor IX (Recombinant) For Inj 2000 Unit	B			1.10000	12/1/2016	
Coagulation Factor IX (Recombinant) For Inj 250 Unit	B			1.10000	12/1/2016	
Coagulation Factor IX (Recombinant) For Inj 3000 Unit	B			1.10000	12/1/2016	
Coagulation Factor IX (Recombinant) For Inj 500 Unit	B			1.10000	12/1/2016	
Coagulation Factor IX For Inj 1000 Unit	B	ALPHANINE SD INJ 1000UNIT (68516360202)		0.74000	3/16/2011	NDC-specific SMAC
Coagulation Factor IX For Inj 1000 Unit	B	MONONINE INJ 1000UNIT (00053766804)		0.83000	3/16/2011	NDC-specific SMAC
Coagulation Factor IX For Inj 1500 Unit	B			0.74000	3/16/2011	
Coagulation Factor IX For Inj 500 Unit	B	ALPHANINE SD INJ 500UNIT (68516360004)		0.74000	3/23/2011	NDC-specific SMAC
Coagulation Factor IX For Inj 500 Unit	B	ALPHANINE SD INJ 500UNIT (68516360102)		0.74000	3/23/2011	NDC-specific SMAC
Coagulation Factor VIIa (Recomb) For Inj 1 MG (1000 MCG)	B			1.55000	11/1/2016	
Coagulation Factor VIIa (Recomb) For Inj 1.2 MG (1200 MCG)	B			1.17560	3/16/2011	
Coagulation Factor VIIa (Recomb) For Inj 2 MG (2000 MCG)	B			1.55000	11/1/2016	
Coagulation Factor VIIa (Recomb) For Inj 2.4 MG (2400 MCG)	B			1.17560	3/16/2011	
Coagulation Factor VIIa (Recomb) For Inj 4.8 MG (4800 MCG)	B			1.17560	3/16/2011	
Coagulation Factor VIIa (Recomb) For Inj 5 MG (5000 MCG)	B			1.55000	11/1/2016	
Coagulation Factor VIIa (Recomb) For Inj 8 MG (8000 MCG)	B			1.55000	11/1/2016	
Coagulation Factor X (Human) For Inj 250 Unit	B			6.52000	11/1/2016	
Coagulation Factor X (Human) For Inj 500 Unit	B			6.52000	11/1/2016	
Codeine Sulfate Tab 30 MG	G			0.31600	12/1/2017	
Colchicine Cap 0.6 MG	G			4.28125	4/1/2017	
Colchicine Tab 0.6 MG	G			4.00000	4/1/2017	
Colchicine w/ Probenecid Tab 0.5-500 MG	G			0.59370	12/1/2017	
Colestipol HCl Tab 1 GM	G			0.48550	11/1/2017	
Colistimethate Sodium For Inj 150 MG	G			14.87200	1/1/2012	
Corticotropin Inj Gel 80 Unit/ML	B			7747.28640	1/4/2018	
Cromolyn Sodium Nasal Aerosol Soln 5.2 MG/ACT (4%)	G			0.26931	11/1/2017	
Cromolyn Sodium Ophth Soln 4%	G			0.52400	10/1/2017	
Cyanocobalamin Inj 1000 MCG/ML	G			2.77440	4/1/2017	
Cyclobenzaprine HCl Tab 10 MG	G			0.02265	1/1/2012	
Cyclobenzaprine HCl Tab 5 MG	G			0.03579	4/1/2012	
Cyclopentolate HCl Ophth Soln 1%	G			0.16289	1/1/2009	
Cyclosporine Cap 100 MG	G			8.66070	4/1/2017	
Cyclosporine Cap 25 MG	G			1.72833	4/1/2017	
Cyclosporine Modified Cap 100 MG	G			1.80600	10/1/2017	
Cyclosporine Modified Cap 25 MG	G			0.27984	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Cyclosporine Modified Oral Soln 100 MG/ML	G			2.00000	10/1/2017	
Cyproheptadine HCl Syrup 2 MG/5ML	G			0.07602	4/1/2017	
Cyproheptadine HCl Tab 4 MG	G		0.30410	0.25302	6/1/2018	
Dabrafenib Mesylate Cap 50 MG (Base Equivalent)	B			60.97014	1/3/2018	
Dabrafenib Mesylate Cap 75 MG (Base Equivalent)	B			82.42555	1/3/2018	
Dalfampridine Tab ER 12HR 10 MG	B			40.80828	1/1/2018	
Dantrolene Sodium Cap 25 MG	G			0.39540	3/1/2018	
Dapsone Tab 100 MG	G			1.81130	5/1/2018	
Dapsone Tab 25 MG	G			1.62468	4/5/2018	
Darifenacin Hydrobromide Tab ER 24HR 15 MG (Base Equiv)	G		7.26457	7.06167	6/1/2018	
Darifenacin Hydrobromide Tab ER 24HR 7.5 MG (Base Equiv)	G			7.09333	3/1/2018	
Darunavir Ethanolate Tab 400 MG (Base Equiv)	B			19.35629	1/7/2014	
Dasatinib Tab 100 MG	B			428.68072	1/1/2018	
Dasatinib Tab 140 MG	B			428.68072	1/1/2018	
Dasatinib Tab 20 MG	B			118.92406	1/1/2018	
Dasatinib Tab 50 MG	B			237.84779	1/1/2018	
Dasatinib Tab 70 MG	B			237.84779	1/1/2018	
Dasatinib Tab 80 MG	B			428.68072	1/1/2018	
Defibrotide Sodium IV Soln 200 MG/2.5ML (80 MG/ML)	B			338.54040	4/5/2017	
Degarelix Acetate For Inj 120 MG (Base Equiv)	B			759.04164	12/1/2016	
Degarelix Acetate For Inj 80 MG (Base Equiv)	B			486.49620	12/1/2016	
Demeclocycline HCl Tab 150 MG	G			2.01942	5/1/2011	
Demeclocycline HCl Tab 300 MG	G			2.81802	5/1/2011	
Denosumab Inj 120 MG/1.7ML	B			1299.03007	1/18/2018	
Denosumab Inj 60 MG/ML	B			1178.81580	1/18/2018	
Desipramine HCl Tab 10 MG	G			0.97333	2/18/2014	
Desipramine HCl Tab 100 MG	G			3.10200	2/26/2016	
Desipramine HCl Tab 150 MG	G			6.62510	12/27/2016	
Desipramine HCl Tab 25 MG	G			0.67442	8/1/2011	
Desipramine HCl Tab 50 MG	G			1.31850	11/1/2017	
Desloratadine Tab 5 MG	G			0.33544	12/1/2017	
Desmopressin Acetate Inj 4 MCG/ML	G			0.00000	2/25/2011	
Desmopressin Acetate Nasal Spray Soln 0.01%	G			12.56615	6/1/2010	
Desmopressin Acetate Nasal Spray Soln 0.01% (Refrigerated)	G			22.54500	8/1/2015	
Desmopressin Acetate Tab 0.1 MG	G			0.47590	9/1/2017	
Desmopressin Acetate Tab 0.2 MG	G		0.86856	0.60335	6/1/2018	
Desogest-Eth Estrad & Eth Estrad Tab 0.15-0.02/0.01 MG (21/5)	G			0.37988	3/1/2018	
Desogest-Ethin Est Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG	G			0.52119	4/1/2017	
Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	G			0.21696	3/1/2018	
Desonide Cream 0.05%	G		3.86000	2.19921	6/1/2018	
Desonide Lotion 0.05%	G			1.66100	3/15/2013	
Desonide Oint 0.05%	G		3.56593	2.81578	6/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Desoximetasone Cream 0.05%	G			5.45030	6/21/2016	
Desoximetasone Cream 0.25%	G			0.85733	6/1/2015	
Desoximetasone Oint 0.25%	G			2.27838	1/5/2011	
Desvenlafaxine Succinate Tab ER 24HR 100 MG (Base Equiv)	G			0.97963	2/1/2018	
Desvenlafaxine Succinate Tab ER 24HR 25 MG (Base Equiv)	G			0.96000	5/1/2018	
Desvenlafaxine Succinate Tab ER 24HR 50 MG (Base Equiv)	G		0.99000	0.86258	6/1/2018	
Dexamethasone Elixir 0.5 MG/5ML	G			0.06692	10/1/2017	
Dexamethasone Sodium Phosphate Inj 10 MG/ML	G			0.53367	5/1/2011	
Dexamethasone Sodium Phosphate Inj 4 MG/ML	G			0.33583	1/1/2010	
Dexamethasone Sodium Phosphate Opth Soln 0.1%	G			2.41406	9/1/2011	
Dexamethasone Soln 0.5 MG/5ML	G			0.03860	3/1/2018	
Dexamethasone Tab 0.5 MG	G			0.05180	4/1/2017	
Dexamethasone Tab 1 MG	G			0.22560	6/1/2017	
Dexamethasone Tab 1.5 MG	G			0.05523	11/1/2017	
Dexamethasone Tab 2 MG	G			0.43030	3/1/2018	
Dexamethasone Tab 4 MG	G			0.07940	4/1/2018	
Dexamethasone Tab 6 MG	G			0.44500	6/1/2014	
Dexmethylphenidate HCl Cap ER 24 HR 10 MG	G			5.54915	9/1/2017	
Dexmethylphenidate HCl Cap ER 24 HR 15 MG	G			3.69410	4/1/2017	
Dexmethylphenidate HCl Cap ER 24 HR 25 MG	G			6.95200	10/1/2017	
Dexmethylphenidate HCl Tab 10 MG	G			0.70663	10/1/2017	
Dexmethylphenidate HCl Tab 2.5 MG	G			0.19260	10/1/2017	
Dexmethylphenidate HCl Tab 5 MG	G			0.44517	4/1/2017	
Dextroamphetamine Sulfate Cap ER 24HR 10 MG	G			1.29950	3/8/2018	
Dextroamphetamine Sulfate Cap ER 24HR 15 MG	G			1.00806	10/1/2017	
Dextroamphetamine Sulfate Cap ER 24HR 5 MG	G			2.87520	4/23/2015	
Dextroamphetamine Sulfate Tab 10 MG	G			0.35912	5/3/2012	
Dextroamphetamine Sulfate Tab 5 MG	G			0.17564	1/1/2009	
Dextromethorphan-Guaifenesin Liquid 10-100 MG/5ML	G			0.00819	10/1/2013	
Dextromethorphan-Guaifenesin Syrup 10-100 MG/5ML	G			0.00819	10/1/2013	
Dextromethorphan-Guaifenesin Tab 20-400 MG	G			0.07778	9/1/2010	
Dextrose Inj 5%	G			0.00449	7/1/2013	
Diazepam Inj 5 MG/ML	G			11.67390	1/1/2016	
Diazepam Oral Soln 1 MG/ML	G			0.10254	2/1/2014	
Diazepam Rectal Gel Delivery System 2.5 MG	G			261.23750	10/1/2012	
Diazepam Tab 10 MG	G			0.02078	4/1/2017	
Diazepam Tab 2 MG	G			0.02072	4/1/2017	
Diazepam Tab 5 MG	G			0.02302	8/1/2011	
Diclofenac Potassium Tab 50 MG	G			0.29960	12/1/2017	
Diclofenac Sodium Opth Soln 0.1%	G			0.88800	10/1/2017	
Diclofenac Sodium Tab Delayed Release 25 MG	G			1.01494	8/1/2016	
Diclofenac Sodium Tab Delayed Release 50 MG	G			0.12768	3/1/2018	
Diclofenac Sodium Tab Delayed Release 75 MG	G			0.10284	4/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Diclofenac Sodium Tab ER 24HR 100 MG	G			0.19545	12/1/2017	
Diclofenac w/ Misoprostol Tab Delayed Release 50-0.2 MG	G			1.66411	4/1/2017	
Diclofenac w/ Misoprostol Tab Delayed Release 75-0.2 MG	G		1.85764	1.74367	6/1/2018	
Dicloxacillin Sodium Cap 250 MG	G			0.27170	9/1/2011	
Dicloxacillin Sodium Cap 500 MG	G			0.72470	4/1/2017	
Dicyclomine HCl Cap 10 MG	G			0.03517	4/1/2011	
Dicyclomine HCl Oral Soln 10 MG/5ML	G			0.19479	8/1/2016	
Dicyclomine HCl Tab 20 MG	G			0.06082	4/1/2017	
Diflorasone Diacetate Cream 0.05%	G			2.49000	1/9/2012	
Diflorasone Diacetate Oint 0.05%	G			0.47961	1/1/2009	
Diflunisal Tab 500 MG	G			1.02450	1/1/2015	
Digoxin Oral Soln 0.05 MG/ML	G			0.58888	4/1/2014	
Digoxin Tab 125 MCG (0.125 MG)	G			0.32950	1/1/2018	
Digoxin Tab 250 MCG (0.25 MG)	G		0.46370	0.41165	6/1/2018	
Diltiazem HCl Cap ER 12HR 60 MG	G			0.89950	6/1/2014	
Diltiazem HCl Cap ER 24HR 120 MG	G			0.33860	11/1/2010	
Diltiazem HCl Cap ER 24HR 180 MG	G			0.31490	4/1/2017	
Diltiazem HCl Cap ER 24HR 240 MG	G			0.42815	4/1/2018	
Diltiazem HCl Coated Beads Cap ER 24HR 120 MG	G			0.20444	8/1/2017	
Diltiazem HCl Coated Beads Cap ER 24HR 180 MG	G			0.23056	6/1/2017	
Diltiazem HCl Coated Beads Cap ER 24HR 240 MG	G			0.25689	5/1/2018	
Diltiazem HCl Coated Beads Cap ER 24HR 300 MG	G			0.41122	11/1/2017	
Diltiazem HCl Coated Beads Cap ER 24HR 360 MG	G			5.51400	7/1/2017	
Diltiazem HCl Coated Beads Tab ER 24HR 240 MG	G			2.07119	4/1/2017	
Diltiazem HCl Coated Beads Tab ER 24HR 360 MG	G			4.59333	1/1/2012	
Diltiazem HCl Coated Beads Tab ER 24HR 420 MG	G			3.64724	4/1/2017	
Diltiazem HCl Extended Release Beads Cap ER 24HR 120 MG	G			0.15856	6/1/2017	
Diltiazem HCl Extended Release Beads Cap ER 24HR 180 MG	G			0.19022	6/1/2017	
Diltiazem HCl Extended Release Beads Cap ER 24HR 240 MG	G			0.41667	12/1/2017	
Diltiazem HCl Extended Release Beads Cap ER 24HR 300 MG	G			0.35589	8/1/2017	
Diltiazem HCl Extended Release Beads Cap ER 24HR 360 MG	G			0.52089	2/1/2018	
Diltiazem HCl Extended Release Beads Cap ER 24HR 420 MG	G			1.32689	11/1/2017	
Diltiazem HCl Tab 120 MG	G			0.13231	9/1/2011	
Diltiazem HCl Tab 30 MG	G			0.04223	1/1/2009	
Diltiazem HCl Tab 60 MG	G			0.06487	3/1/2011	
Diltiazem HCl Tab 90 MG	G			0.10980	6/1/2006	
Dimethyl Fumarate Capsule Delayed Release 120 MG	B			122.27323	1/1/2018	
Dimethyl Fumarate Capsule Delayed Release 240 MG	B			122.26813	1/1/2018	
Diphenhydramine HCl Cap 25 MG	G			0.01777	12/1/2011	
Diphenhydramine HCl Cap 50 MG	G			0.01495	1/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Diphenhydramine HCl Inj 50 MG/ML	G			0.79150	9/18/2013	
Diphenhydramine HCl Liquid 12.5 MG/5ML	G			0.00585	10/1/2013	
Diphenoxylate w/ Atropine Tab 2.5-0.025 MG	G			0.27240	2/1/2018	
Dipyridamole Tab 25 MG	G			0.10356	6/1/2012	
Dipyridamole Tab 50 MG	G			0.20706	6/1/2012	
Dipyridamole Tab 75 MG	G			0.40050	6/1/2012	
Disopyramide Phosphate Cap 100 MG	G			0.34820	9/1/2011	
Disulfiram Tab 250 MG	G			0.67080	9/1/2017	
Divalproex Sodium Cap Delayed Release Sprinkle 125 MG	G			0.35271	4/1/2018	
Divalproex Sodium Tab Delayed Release 125 MG	G			0.05261	4/1/2017	
Divalproex Sodium Tab Delayed Release 250 MG	G			0.07623	9/1/2017	
Divalproex Sodium Tab Delayed Release 500 MG	G			0.10326	2/1/2018	
Divalproex Sodium Tab ER 24 HR 250 MG	G		0.54836	0.51403	6/1/2018	
Divalproex Sodium Tab ER 24 HR 500 MG	G			0.39402	4/1/2018	
Docusate Calcium Cap 240 MG	G			0.05785	1/5/2011	
Docusate Sodium Cap 100 MG	G			0.01733	1/5/2011	
Docusate Sodium Cap 250 MG	G			0.03539	1/5/2011	
Docusate Sodium Liquid 150 MG/15ML	G			0.00855	1/5/2011	
Docusate Sodium Syrup 60 MG/15ML	G			0.00755	1/5/2011	
Docusate Sodium Tab 100 MG	G			0.00754	11/1/2017	
Dofetilide Cap 250 MCG (0.25 MG)	G			3.42517	12/1/2017	
Dofetilide Cap 500 MCG (0.5 MG)	G			4.16650	9/1/2017	
Dolutegravir Sodium Tab 50 MG (Base Equiv)	B			50.98468	1/30/2017	
Donepezil Hydrochloride Orally Disintegrating Tab 10 MG	G			0.85136	2/1/2013	
Donepezil Hydrochloride Orally Disintegrating Tab 5 MG	G			1.30000	9/1/2011	
Donepezil Hydrochloride Tab 10 MG	G			0.04725	4/1/2017	
Donepezil Hydrochloride Tab 23 MG	G			1.03483	10/1/2017	
Donepezil Hydrochloride Tab 5 MG	G			0.04936	4/1/2018	
Dornase Alfa Inhal Soln 1 MG/ML	B			45.78413	1/1/2018	
Dorzolamide HCl Ophth Soln 2%	G			0.80720	4/1/2017	
Dorzolamide HCl-Timolol Maleate Ophth Soln 22.3-6.8 MG/ML	G			0.65700	7/1/2017	
Doxazosin Mesylate Tab 1 MG	G			0.04693	6/1/2011	
Doxazosin Mesylate Tab 2 MG	G			0.09930	1/1/2018	
Doxazosin Mesylate Tab 4 MG	G			0.12169	10/1/2016	
Doxazosin Mesylate Tab 8 MG	G			0.07928	1/1/2009	
Doxepin HCl Cap 10 MG	G			0.05447	1/1/2009	
Doxepin HCl Cap 100 MG	G			0.73000	9/30/2014	
Doxepin HCl Cap 150 MG	G			0.64000	12/1/2017	
Doxepin HCl Cap 25 MG	G			0.05976	1/1/2009	
Doxepin HCl Cap 50 MG	G			0.56210	11/28/2016	
Doxepin HCl Cap 75 MG	G			0.87937	5/25/2016	
Doxepin HCl Conc 10 MG/ML	G			0.05363	6/1/2010	
Doxycycline Hyclate Cap 100 MG	G			0.31458	3/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Doxycycline Hyclate Cap 50 MG	G			0.52936	4/1/2017	
Doxycycline Hyclate Tab 100 MG	G			0.28500	12/1/2017	
Doxycycline Hyclate Tab 20 MG	G			0.21961	7/1/2016	
Doxycycline Monohydrate Cap 100 MG	G			0.31700	6/1/2017	
Doxycycline Monohydrate Cap 50 MG	G			0.14000	3/1/2018	
Doxycycline Monohydrate For Susp 25 MG/5ML	G			0.27133	4/1/2017	
Doxycycline Monohydrate Tab 100 MG	G			0.64913	4/1/2017	
Doxycycline Monohydrate Tab 50 MG	G			0.32590	10/1/2017	
Dronabinol Cap 10 MG	G			7.63483	10/1/2017	
Dronabinol Cap 2.5 MG	G			3.40600	4/1/2014	
Dronabinol Cap 5 MG	G			3.70750	1/1/2018	
Drospirenone-Ethinyl Estrad-Levomefolate Tab 3-0.02-0.451 MG	G		4.07881	2.97274	6/1/2018	
Drospirenone-Ethinyl Estradiol Tab 3-0.02 MG	G			1.01337	3/1/2018	
Drospirenone-Ethinyl Estradiol Tab 3-0.03 MG	G			0.49926	5/1/2018	
Dulaglutide Soln Pen-injector 0.75 MG/0.5ML	B			311.74800	11/1/2016	
Dulaglutide Soln Pen-injector 1.5 MG/0.5ML	B			311.74800	11/1/2016	
Duloxetine HCl Enteric Coated Pellets Cap 20 MG (Base Eq)	B			6.60960	6/28/2013	
Duloxetine HCl Enteric Coated Pellets Cap 20 MG (Base Eq)	G		0.23697	0.16839	6/1/2018	
Duloxetine HCl Enteric Coated Pellets Cap 30 MG (Base Eq)	B			7.41540	6/28/2013	
Duloxetine HCl Enteric Coated Pellets Cap 30 MG (Base Eq)	G			0.15550	11/1/2017	
Duloxetine HCl Enteric Coated Pellets Cap 60 MG (Base Eq)	B			7.41540	6/28/2013	
Duloxetine HCl Enteric Coated Pellets Cap 60 MG (Base Eq)	G			0.20250	7/1/2017	
Dutasteride Cap 0.5 MG	G			0.16178	4/1/2017	
Dutasteride-Tamsulosin HCl Cap 0.5-0.4 MG	G			2.43333	1/1/2018	
Econazole Nitrate Cream 1%	G		6.03500	0.85396	6/1/2018	
Efavirenz Tab 600 MG	B			32.55648	1/1/2017	
Efavirenz-Emtricitabine-Tenofovir DF Tab 600-200-300 MG	B			84.60163	2/6/2017	
Elotuzumab For IV Soln 300 MG	B			1795.43110	1/1/2017	
Elotuzumab For IV Soln 400 MG	B			2393.90260	1/1/2017	
Eltrombopag Olamine Tab 12.5 MG (Base Equiv)	B			147.31869	1/3/2018	
Eltrombopag Olamine Tab 25 MG (Base Equiv)	B			147.31869	1/3/2018	
Eltrombopag Olamine Tab 50 MG (Base Equiv)	B			274.06401	1/3/2018	
Eltrombopag Olamine Tab 75 MG (Base Equiv)	B			411.09634	1/3/2018	
Elvitegrav-Cobic-Emtricitab-Tenofov AF Tab 150-150-200-10 MG	B			91.48316	2/6/2017	
Elvitegrav-Cobic-Emtricitab-TenofovDF Tab 150-150-200-300 MG	B			95.96593	11/1/2016	
Elvitegravir Tab 150 MG	B			39.98774	12/1/2016	
Elvitegravir Tab 85 MG	B			39.98774	12/1/2016	
Emtricitabine Caps 200 MG	B			17.81246	11/1/2016	
Emtricitabine-Rilpivirine-Tenofovir DF Tab 200-25-300 MG	B			83.25697	12/1/2016	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Emtricitabine-Tenofovir Disoproxil Fumarate Tab 200-300 MG	B			63.29248	4/26/2016	
Enalapril Maleate & Hydrochlorothiazide Tab 10-25 MG	G			0.07806	4/1/2012	
Enalapril Maleate & Hydrochlorothiazide Tab 5-12.5 MG	G			0.07613	8/1/2011	
Enalapril Maleate Tab 10 MG	G			0.02388	2/1/2012	
Enalapril Maleate Tab 2.5 MG	G			0.18340	3/1/2018	
Enalapril Maleate Tab 20 MG	G			0.20934	12/1/2017	
Enalapril Maleate Tab 5 MG	G			0.13023	9/1/2017	
Enfuvirtide For Inj 90 MG	B			59.52027	1/1/2017	
Enoxaparin Sodium Inj 100 MG/ML	G			11.25000	9/1/2017	
Enoxaparin Sodium Inj 120 MG/0.8ML	G			17.78481	4/1/2017	
Enoxaparin Sodium Inj 150 MG/ML	G			22.67000	10/1/2017	
Enoxaparin Sodium Inj 30 MG/0.3ML	G			10.44833	9/1/2017	
Enoxaparin Sodium Inj 300 MG/3ML	G			66.34000	5/1/2014	
Enoxaparin Sodium Inj 40 MG/0.4ML	G			10.16000	12/1/2017	
Enoxaparin Sodium Inj 60 MG/0.6ML	G			12.39500	9/1/2017	
Enoxaparin Sodium Inj 80 MG/0.8ML	B			0.00000	8/30/2013	
Enoxaparin Sodium Inj 80 MG/0.8ML	G			11.13000	11/1/2017	
Entacapone Tab 200 MG	G			0.92500	10/1/2017	
Entecavir Tab 0.5 MG	G			3.69000	12/1/2017	
Entecavir Tab 1 MG	G			4.33000	12/1/2017	
Epinastine HCl Ophth Soln 0.05%	G			5.35600	4/1/2017	
Epinephrine HCl Inj 1 MG/ML	G			1.99933	4/1/2017	
Epinephrine Solution Auto-injector 0.15 MG/0.3ML (1:2000)	G			142.97900	11/1/2017	
Epinephrine Solution Auto-injector 0.3 MG/0.3ML (1:1000)	G			144.00000	9/1/2017	
Eplerenone Tab 25 MG	G		1.56573	1.44555	6/1/2018	
Eplerenone Tab 50 MG	G			1.76767	4/1/2017	
Epoetin Alfa Inj 10000 Unit/ML	B			256.19112	1/3/2018	
Ergocalciferol Cap 50000 Unit	G			0.09770	10/1/2017	
Erythromycin Ethylsuccinate For Susp 200 MG/5ML	G			3.27970	9/1/2017	
Erythromycin Ethylsuccinate Tab 400 MG	G			7.71200	8/27/2015	
Erythromycin Gel 2%	G		4.71250	3.15077	6/1/2018	
Erythromycin Ophth Oint 5 MG/GM	G		1.98813	1.91125	6/1/2018	
Erythromycin Pads 2%	G			1.12000	6/1/2014	
Erythromycin Soln 2%	G			0.59498	12/1/2017	
Erythromycin-Sulfisoxazole For Susp 200-600 MG/5ML	G			0.06090	1/1/2007	
Escitalopram Oxalate Soln 5 MG/5ML (Base Equiv)	G			0.34617	5/19/2017	
Escitalopram Oxalate Tab 10 MG (Base Equiv)	G			0.03894	6/1/2017	
Escitalopram Oxalate Tab 20 MG (Base Equiv)	G			0.08133	4/1/2018	
Escitalopram Oxalate Tab 5 MG (Base Equiv)	G			0.03320	11/1/2017	
Esomeprazole Magnesium Cap Delayed Release 20 MG (Base Eq)	G			0.45011	1/1/2018	
Esomeprazole Magnesium Cap Delayed Release 40 MG (Base Eq)	G			0.35200	11/1/2017	
Estazolam Tab 2 MG	G			0.31754	9/1/2011	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Estradiol & Norethindrone Acetate Tab 0.5-0.1 MG	G			2.12624	4/1/2017	
Estradiol & Norethindrone Acetate Tab 1-0.5 MG	G			1.90804	4/1/2012	
Estradiol Tab 0.5 MG	G			0.03175	2/1/2012	
Estradiol Tab 1 MG	G			0.11270	8/1/2017	
Estradiol Tab 2 MG	G			0.11000	11/1/2017	
Estradiol TD Patch Twice Weekly 0.05 MG/24HR	G			7.66250	11/1/2017	
Estradiol TD Patch Twice Weekly 0.075 MG/24HR	G			8.73668	4/1/2017	
Estradiol TD Patch Twice Weekly 0.1 MG/24HR	G		9.08125	7.76500	6/1/2018	
Estradiol TD Patch Weekly 0.025 MG/24HR	G			7.62282	4/1/2011	
Estradiol TD Patch Weekly 0.0375 MG/24HR (37.5 MCG/24HR)	G			7.85424	9/1/2011	
Estradiol TD Patch Weekly 0.05 MG/24HR	G			11.14178	6/1/2012	
Estradiol TD Patch Weekly 0.075 MG/24HR	G			12.51250	1/1/2018	
Estradiol TD Patch Weekly 0.1 MG/24HR	G			15.01200	10/5/2016	
Estradiol Vaginal Cream 0.1 MG/GM	G			5.60000	5/1/2018	
Estradiol Vaginal Tab 10 MCG	G			14.22583	1/1/2018	
Estradiol Valerate IM in Oil 20 MG/ML	G			21.27550	11/1/2017	
Estropipate Tab 0.75 MG	G			0.09130	11/1/2011	
Estropipate Tab 1.5 MG	G			0.53200	1/9/2015	
Eszopiclone Tab 1 MG	G			0.29577	10/1/2017	
Eszopiclone Tab 2 MG	G			0.19400	10/1/2017	
Eszopiclone Tab 3 MG	G			0.20747	9/1/2017	
Etanercept Subcutaneous Soln Prefilled Syringe 25 MG/0.5ML	B			1189.34118	1/1/2018	
Etanercept Subcutaneous Solution Auto-injector 50 MG/ML	B			1237.88571	1/1/2018	
Ethambutol HCl Tab 400 MG	G			0.36260	10/1/2017	
Ethosuximide Cap 250 MG	G			0.81120	10/1/2017	
Ethosuximide Soln 250 MG/5ML	G			0.31936	1/1/2016	
Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-35 MCG	G			0.52290	3/5/2018	
Etodolac Cap 200 MG	G			0.84280	4/1/2017	
Etodolac Cap 300 MG	G			0.12961	1/5/2011	
Etodolac Tab 400 MG	G			0.61860	6/1/2017	
Etodolac Tab 500 MG	G			0.28516	3/1/2013	
Etodolac Tab ER 24HR 400 MG	G			0.62488	3/1/2012	
Etodolac Tab ER 24HR 500 MG	G			1.10000	9/1/2017	
Etodolac Tab ER 24HR 600 MG	G			1.41067	11/1/2012	
Etravirine Tab 100 MG	B			9.76177	1/14/2017	
Everolimus Tab 10 MG	B			517.32418	1/3/2018	
Everolimus Tab 2.5 MG	B			494.58372	1/3/2018	
Everolimus Tab 5 MG	B			517.35228	1/3/2018	
Everolimus Tab 7.5 MG	B			517.33236	1/3/2018	
Everolimus Tab for Oral Susp 2 MG	B			435.59230	1/3/2017	
Everolimus Tab for Oral Susp 3 MG	B			439.95217	1/3/2017	
Everolimus Tab for Oral Susp 5 MG	B			457.90181	1/3/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Exemestane Tab 25 MG	G			3.63678	3/1/2018	
Ezetimibe Tab 10 MG	G			0.40822	2/1/2018	
Ezetimibe-Simvastatin Tab 10-80 MG	G			3.01000	9/1/2017	
Factor IX Complex For Inj 1000 Unit	B			0.62220	3/16/2011	
Factor IX Complex For Inj 1500 Unit	B			0.62220	3/16/2011	
Factor IX Complex For Inj 500 Unit	B			0.62220	3/16/2011	
Famciclovir Tab 125 MG	G			1.35709	3/1/2012	
Famciclovir Tab 250 MG	G		0.61550	0.50833	6/1/2018	
Famciclovir Tab 500 MG	G			0.53333	1/1/2018	
Famotidine For Susp 40 MG/5ML	G			0.62000	4/1/2017	
Famotidine Tab 10 MG	G			0.07732	8/1/2011	
Famotidine Tab 20 MG	G			0.04140	3/1/2011	
Famotidine Tab 40 MG	G			0.06669	8/1/2011	
Fe Fumarate w/ B12-Vit C-FA-IFC Cap 110-0.015-75-0.5-240 MG	G			0.17000	4/1/2017	
Felbamate Susp 600 MG/5ML	G			1.55573	4/1/2017	
Felbamate Tab 400 MG	G			1.34690	11/1/2017	
Felbamate Tab 600 MG	G			1.75880	9/1/2017	
Felodipine Tab ER 24HR 10 MG	G		0.26440	0.09000	6/1/2018	
Felodipine Tab ER 24HR 2.5 MG	G			0.14760	10/1/2017	
Felodipine Tab ER 24HR 5 MG	G			0.07260	12/1/2017	
Fenofibrate Micronized Cap 134 MG	G			0.72960	4/1/2018	
Fenofibrate Micronized Cap 200 MG	G		1.24317	0.88740	6/1/2018	
Fenofibrate Micronized Cap 67 MG	G			0.50950	12/1/2017	
Fenofibrate Tab 145 MG	G		0.34601	0.28443	6/1/2018	
Fenofibrate Tab 160 MG	G			0.31378	11/1/2017	
Fenofibrate Tab 48 MG	G			0.23611	3/1/2018	
Fenofibrate Tab 54 MG	G			0.30761	9/1/2017	
Fenofibric Acid Tab 105 MG	G			2.03967	9/1/2017	
Fenoprofen Calcium Tab 600 MG	G			0.28040	6/1/2006	
Fentanyl Citrate Inj 0.05 MG/ML	G			0.10725	7/1/2013	
Fentanyl Citrate Lozenge on a Handle 1200 MCG	G			21.62250	4/1/2012	
Fentanyl Citrate Lozenge on a Handle 1600 MCG	G			24.83833	4/1/2012	
Fentanyl Citrate Lozenge on a Handle 400 MCG	G			12.47833	4/1/2012	
Fentanyl TD Patch 72HR 100 MCG/HR	G		7.89000	6.84400	6/1/2018	
Fentanyl TD Patch 72HR 12 MCG/HR	G			9.69400	4/1/2018	
Fentanyl TD Patch 72HR 25 MCG/HR	G		2.39933	2.12700	6/1/2018	
Fentanyl TD Patch 72HR 50 MCG/HR	G			4.32533	9/1/2017	
Fentanyl TD Patch 72HR 75 MCG/HR	G			6.83400	9/1/2017	
Ferrous Fumarate Tab 325 MG (106 MG Elemental Fe)	G			0.01810	7/1/2013	
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)	G			0.01586	9/1/2010	
Fexofenadine HCl Susp 30 MG/5ML (6 MG/ML)	G			0.05000	9/1/2017	
Fexofenadine HCl Tab 180 MG	G			0.28000	4/1/2017	
Fexofenadine HCl Tab 30 MG	G			0.32213	8/1/2011	
Fexofenadine HCl Tab 60 MG	G			0.50617	8/1/2011	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Fibrinogen Conc (Human) Inj Approximately 1 GM (900-1300 MG)	B			1.16200	1/1/2016	
Filgrastim Inj 480 MCG/1.6ML (300 MCG/ML)	B			312.07792	10/19/2017	
Finasteride Tab 5 MG	G			0.06506	6/1/2017	
Flavoxate HCl Tab 100 MG	G			0.53110	10/1/2017	
Flecainide Acetate Tab 100 MG	G			0.24743	8/1/2015	
Flecainide Acetate Tab 150 MG	G		0.66650	0.45690	6/1/2018	
Flecainide Acetate Tab 50 MG	G			0.19855	5/1/2018	
Fluconazole For Susp 10 MG/ML	G			0.24607	3/1/2012	
Fluconazole For Susp 40 MG/ML	G			0.48486	5/1/2017	
Fluconazole in NaCl 0.9% Inj 200 MG/100ML	G			0.01660	9/1/2017	
Fluconazole Tab 100 MG	G		0.76733	0.56622	6/1/2018	
Fluconazole Tab 150 MG	G			1.10050	5/1/2018	
Fluconazole Tab 200 MG	G			0.53100	9/1/2017	
Fluconazole Tab 50 MG	G			0.11834	4/1/2012	
Fludrocortisone Acetate Tab 0.1 MG	G			0.30660	11/1/2017	
Flunisolide Nasal Soln 25 MCG/ACT (0.025%)	G			2.02840	4/1/2018	
Fluocinolone Acetonide Intravitreal Implant 0.19 MG	B			7304.00000	5/25/2016	
Fluocinolone Acetonide Oil 0.01%	G			0.31850	10/1/2013	
Fluocinolone Acetonide Oil 0.01% (Body Oil)	G		1.21057	1.00135	6/1/2018	
Fluocinonide Cream 0.05%	G			0.59000	8/1/2013	
Fluocinonide Emulsified Base Cream 0.05%	G			0.12827	7/1/2011	
Fluocinonide Gel 0.05%	G			3.31000	9/30/2014	
Fluocinonide Oint 0.05%	G		2.13520	1.08434	6/1/2018	
Fluocinonide Soln 0.05%	G			1.12587	4/7/2017	
Fluorometholone Ophth Susp 0.1%	G			12.13800	10/1/2016	
Fluorouracil Cream 5%	G		4.03400	2.60480	6/1/2018	
Fluorouracil IV Soln 500 MG/10ML (50 MG/ML)	G			0.35750	8/1/2011	
Fluorouracil Soln 5%	G			9.30360	1/1/2012	
Fluoxetine HCl (PMDD) Cap 10 MG	G			0.03348	8/1/2011	
Fluoxetine HCl (PMDD) Cap 20 MG	G			0.02281	8/1/2017	
Fluoxetine HCl (PMDD) Tab 10 MG	G			0.43637	10/1/2017	
Fluoxetine HCl (PMDD) Tab 20 MG	G			1.24829	3/1/2018	
Fluoxetine HCl Cap 10 MG	G			0.03348	8/1/2011	
Fluoxetine HCl Cap 20 MG	G			0.02281	8/1/2017	
Fluoxetine HCl Cap 40 MG	G			0.09970	5/1/2017	
Fluoxetine HCl Cap Delayed Release 90 MG	G			28.52000	5/1/2018	
Fluoxetine HCl Solution 20 MG/5ML	G			0.03138	4/1/2017	
Fluoxetine HCl Tab 10 MG	G			0.43637	10/1/2017	
Fluoxetine HCl Tab 20 MG	G			0.67047	10/1/2013	
Fluoxetine HCl Tab 60 MG	G			8.78067	10/1/2017	
Fluphenazine Decanoate Inj 25 MG/ML	G			18.97280	10/26/2012	
Fluphenazine HCl Tab 1 MG	G			0.06475	5/1/2012	
Fluphenazine HCl Tab 10 MG	G			4.97705	9/1/2017	
Fluphenazine HCl Tab 2.5 MG	G			0.07540	1/1/2012	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Fluphenazine HCl Tab 5 MG	G			0.10208	5/1/2012	
Flurazepam HCl Cap 15 MG	G			0.07691	1/1/2009	
Flurazepam HCl Cap 30 MG	G			0.09216	1/1/2009	
Flurbiprofen Sodium Ophth Soln 0.03%	G			1.30800	10/1/2017	
Flurbiprofen Tab 100 MG	G			0.10853	9/1/2011	
Flurbiprofen Tab 50 MG	G			0.19500	6/1/2010	
Flutamide Cap 125 MG	G			0.49094	4/1/2017	
Fluticasone Propionate Cream 0.05%	G		0.48718	0.36747	6/1/2018	
Fluticasone Propionate Nasal Susp 50 MCG/ACT	G			0.23653	2/1/2018	
Fluticasone Propionate Oint 0.005%	G			0.33285	1/1/2009	
Fluticasone-Salmeterol Aer Powder BA 55-14 MCG/ACT	G			85.65000	9/1/2017	
Fluvastatin Sodium Cap 20 MG	G		3.23686	2.73167	6/1/2018	
Fluvastatin Sodium Cap 40 MG	G			2.99907	2/1/2014	
Fluvastatin Sodium Tab ER 24 HR 80 MG	G			3.70167	12/1/2017	
Fluvoxamine Maleate Cap ER 24HR 100 MG	G			6.69867	10/1/2016	
Fluvoxamine Maleate Cap ER 24HR 150 MG	G			5.93383	4/1/2018	
Fluvoxamine Maleate Tab 100 MG	G			0.19054	4/1/2017	
Fluvoxamine Maleate Tab 25 MG	G			0.16767	9/1/2017	
Fluvoxamine Maleate Tab 50 MG	G			0.11695	10/1/2017	
Folic Acid Inj 5 MG/ML	G			5.46900	5/1/2018	
Folic Acid Tab 1 MG	G			0.00273	1/1/2010	
Fondaparinux Sodium Subcutaneous Inj 10 MG/0.8ML	G			65.23250	4/1/2017	
Fondaparinux Sodium Subcutaneous Inj 2.5 MG/0.5ML	G			74.39520	11/1/2012	
Fondaparinux Sodium Subcutaneous Inj 5 MG/0.4ML	G			257.34000	9/1/2011	
Fondaparinux Sodium Subcutaneous Inj 7.5 MG/0.6ML	G			144.25000	12/1/2012	
Fosamprenavir Calcium Tab 700 MG (Base Equiv)	B			19.23220	1/30/2017	
Fosinopril Sodium & Hydrochlorothiazide Tab 10-12.5 MG	G			1.03094	1/1/2009	
Fosinopril Sodium & Hydrochlorothiazide Tab 20-12.5 MG	G			0.69143	4/1/2017	
Fosinopril Sodium Tab 10 MG	G		0.16918	0.10244	6/1/2018	
Fosinopril Sodium Tab 20 MG	G			0.12016	4/1/2017	
Fosinopril Sodium Tab 40 MG	G			0.14937	9/1/2011	
Furosemide Inj 10 MG/ML	G			0.06890	7/1/2013	
Furosemide Oral Soln 10 MG/ML	G			0.07503	7/1/2013	
Furosemide Tab 20 MG	G			0.01761	1/1/2009	
Furosemide Tab 40 MG	G			0.02234	1/1/2009	
Furosemide Tab 80 MG	G			0.03412	4/1/2011	
Gabapentin Cap 100 MG	G			0.02447	11/1/2017	
Gabapentin Cap 300 MG	G			0.04127	4/1/2017	
Gabapentin Cap 400 MG	G			0.04564	1/1/2018	
Gabapentin Oral Soln 250 MG/5ML	G			0.08585	5/1/2017	
Gabapentin Tab 600 MG	G			0.09006	1/1/2018	
Gabapentin Tab 800 MG	G			0.10138	1/1/2018	
Galantamine Hydrobromide Cap ER 24HR 16 MG	G			1.20100	4/1/2017	
Galantamine Hydrobromide Cap ER 24HR 24 MG	G			0.83300	3/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Galantamine Hydrobromide Cap ER 24HR 8 MG	G		2.17400	1.40000	6/1/2018	
Galantamine Hydrobromide Tab 12 MG	G			0.65867	4/1/2017	
Galantamine Hydrobromide Tab 4 MG	G			0.89375	3/1/2018	
Galantamine Hydrobromide Tab 8 MG	G			0.70461	3/1/2018	
Gemcitabine HCl For Inj 1 GM	G			371.23000	9/1/2011	
Gemcitabine HCl For Inj 200 MG	G			74.85000	9/1/2011	
Gemfibrozil Tab 600 MG	G			0.06021	1/1/2018	
Gentamicin in Saline Inj 0.8 MG/ML	G			0.03509	8/1/2011	
Gentamicin Sulfate Cream 0.1%	G			0.09578	1/1/2009	
Gentamicin Sulfate Inj 40 MG/ML	G			0.50340	3/1/2018	
Gentamicin Sulfate Oint 0.1%	G			2.92950	1/27/2017	
Gentamicin Sulfate Ophth Oint 0.3%	G			2.95143	8/1/2017	
Gentamicin Sulfate Ophth Soln 0.3%	G			0.74300	9/1/2017	
Glatiramer Acetate Inj Kit 20 MG/ML	B			202.86860	1/1/2015	
Glatiramer Acetate Soln Prefilled Syringe 20 MG/ML	B			236.18480	1/1/2017	
Glatiramer Acetate Soln Prefilled Syringe 20 MG/ML	G			126.15433	4/1/2017	
Glatiramer Acetate Soln Prefilled Syringe 40 MG/ML	B			484.05600	1/1/2017	
Glimepiride Tab 1 MG	G			0.03200	1/1/2009	
Glimepiride Tab 2 MG	G			0.03750	4/1/2012	
Glimepiride Tab 4 MG	G			0.04760	10/1/2017	
Glipizide Tab 10 MG	G			0.02528	8/1/2017	
Glipizide Tab 5 MG	G			0.01935	11/1/2017	
Glipizide Tab ER 24HR 10 MG	G			0.24611	4/1/2017	
Glipizide Tab ER 24HR 2.5 MG	G			0.15400	1/1/2018	
Glipizide Tab ER 24HR 5 MG	G			0.10660	4/1/2018	
Glipizide-Metformin HCl Tab 5-500 MG	G			0.24565	12/1/2017	
Glyburide Micronized Tab 1.5 MG	G			0.03659	9/1/2011	
Glyburide Micronized Tab 3 MG	G			0.02963	8/1/2011	
Glyburide Micronized Tab 6 MG	G			0.05788	4/1/2012	
Glyburide Tab 1.25 MG	G			0.06222	1/1/2009	
Glyburide Tab 2.5 MG	G			0.03220	10/1/2017	
Glyburide Tab 5 MG	G			0.04420	10/1/2017	
Glyburide-Metformin Tab 1.25-250 MG	G			0.02988	6/1/2012	
Glyburide-Metformin Tab 2.5-500 MG	G			0.06720	4/1/2017	
Glyburide-Metformin Tab 5-500 MG	G			0.04340	9/1/2017	
Glycopyrrolate Inj 0.2 MG/ML	G			0.22100	1/1/2010	
Glycopyrrolate Inj 0.4 MG/2ML (0.2 MG/ML)	G			0.22100	1/1/2010	
Glycopyrrolate Inj 1 MG/5ML (0.2 MG/ML)	G			0.22100	1/1/2010	
Glycopyrrolate Inj 4 MG/20ML (0.2 MG/ML)	G			0.22100	1/1/2010	
Glycopyrrolate Tab 1 MG	G		0.06670	0.18610	6/6/2018	
Glycopyrrolate Tab 2 MG	G			0.17170	3/1/2018	
Golimumab Subcutaneous Soln Auto-injector 100 MG/ML	B			5176.94904	1/3/2018	
Golimumab Subcutaneous Soln Auto-injector 50 MG/0.5ML	B			9003.36192	1/3/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Golimumab Subcutaneous Soln Prefilled Syringe 100 MG/ML	B			5176.94904	1/3/2018	
Golimumab Subcutaneous Soln Prefilled Syringe 50 MG/0.5ML	B			9003.36192	1/3/2018	
Granisetron HCl Inj 1 MG/ML	G			15.47000	2/1/2013	
Granisetron HCl Inj 4 MG/4ML (1 MG/ML)	G			6.87000	2/1/2013	
Granisetron HCl Tab 1 MG	G			3.56000	4/1/2017	
Griseofulvin Microsize Susp 125 MG/5ML	G			0.20572	2/1/2017	
Griseofulvin Microsize Tab 500 MG	G			5.99933	3/1/2018	
Griseofulvin Ultramicrosize Tab 250 MG	G			3.04733	3/1/2018	
Guaifenesin Liquid 100 MG/5ML	G			0.00585	7/1/2013	
Guaifenesin Syrup 100 MG/5ML	G			0.00585	7/1/2013	
Guaifenesin Tab 200 MG	G			0.03900	4/1/2011	
Guaifenesin Tab 400 MG	G			0.06478	7/1/2011	
Guaifenesin-Codeine Soln 100-10 MG/5ML	G			0.02594	9/1/2017	
Guanfacine HCl Tab 1 MG	G			0.09525	2/2/2018	
Guanfacine HCl Tab 2 MG	G			0.08588	9/1/2017	
Guanfacine HCl Tab ER 24HR 1 MG (Base Equiv)	G			0.38700	9/1/2017	
Guanfacine HCl Tab ER 24HR 2 MG (Base Equiv)	G		0.60310	0.54790	6/1/2018	
Guanfacine HCl Tab ER 24HR 3 MG (Base Equiv)	G		0.63306	0.53910	6/1/2018	
Guanfacine HCl Tab ER 24HR 4 MG (Base Equiv)	G			0.40130	10/1/2017	
Halobetasol Propionate Cream 0.05%	G			0.41600	1/1/2010	
Halobetasol Propionate Oint 0.05%	G			3.06000	8/1/2014	
Haloperidol Decanoate IM Soln 100 MG/ML	G			39.59000	4/1/2017	
Haloperidol Decanoate IM Soln 50 MG/ML	G			23.06880	7/1/2013	
Haloperidol Lactate Inj 5 MG/ML	G			5.49900	4/1/2017	
Haloperidol Lactate Oral Conc 2 MG/ML	G			0.06892	1/1/2018	
Haloperidol Tab 0.5 MG	G			0.05993	1/1/2010	
Haloperidol Tab 1 MG	G			0.09510	1/1/2010	
Haloperidol Tab 10 MG	G			0.31960	10/1/2017	
Haloperidol Tab 2 MG	G			0.19690	12/1/2017	
Haloperidol Tab 5 MG	G			0.22540	6/1/2017	
Heparin Sodium (Porcine) Inj 10000 Unit/ML	G			2.98285	10/1/2014	
Heparin Sodium (Porcine) Inj 5000 Unit/ML	G			0.00000	8/8/2008	
Heparin Sodium (Porcine) Lock Flush IV Soln 100 Unit/ML	G			0.43180	9/1/2011	
Histrelin Acetate (CPP) Implant Kit 50 MG	B			17720.78220	4/1/2014	
Histrelin Acetate Implant Kit 50 MG	B			3484.60560	4/3/2017	
Hydralazine HCl Tab 10 MG	G			0.04247	4/1/2017	
Hydralazine HCl Tab 100 MG	G			0.07423	10/1/2016	
Hydralazine HCl Tab 25 MG	G			0.02603	1/1/2018	
Hydralazine HCl Tab 50 MG	G			0.03105	1/1/2018	
Hydrochlorothiazide Cap 12.5 MG	G			0.02628	11/1/2017	
Hydrochlorothiazide Tab 12.5 MG	G			0.08385	11/1/2017	
Hydrochlorothiazide Tab 25 MG	G			0.00892	11/1/2017	
Hydrochlorothiazide Tab 50 MG	G			0.01144	9/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Hydrocodone w/ Homatropine Syrup 5-1.5 MG/5ML	G			0.09857	4/1/2017	
Hydrocodone-Acetaminophen Soln 7.5-325 MG/15ML	G			0.04658	1/1/2018	
Hydrocodone-Acetaminophen Soln 7.5-500 MG/15ML	G			0.02637	7/1/2013	
Hydrocodone-Acetaminophen Tab 10-325 MG	G			0.12036	1/1/2018	
Hydrocodone-Acetaminophen Tab 10-500 MG	G			0.16000	3/5/2014	
Hydrocodone-Acetaminophen Tab 5-300 MG	G		0.65450	0.41600	6/1/2018	
Hydrocodone-Acetaminophen Tab 5-325 MG	G			0.10858	9/1/2017	
Hydrocodone-Acetaminophen Tab 7.5-325 MG	G			0.11234	5/1/2018	
Hydrocodone-Ibuprofen Tab 10-200 MG	G			2.53771	4/1/2017	
Hydrocodone-Ibuprofen Tab 7.5-200 MG	G			0.15400	8/1/2017	
Hydrocortisone Acetate Cream 1%	G			0.07497	7/1/2013	
Hydrocortisone Acetate Lotion 2%	G			1.10782	9/1/2010	
Hydrocortisone Acetate Powder	G			0.94640	6/1/2010	
Hydrocortisone Acetate Suppos 25 MG	G			5.67167	3/1/2018	
Hydrocortisone Acetate Suppos 30 MG	G			2.27500	6/1/2010	
Hydrocortisone Cream 1%	G			0.07497	7/1/2013	
Hydrocortisone Cream 2.5%	G			0.09989	1/1/2009	
Hydrocortisone Enema 100 MG/60ML	G			0.08839	5/1/2012	
Hydrocortisone Lotion 2.5%	G			0.26360	4/1/2011	
Hydrocortisone Micronized Powder	G			0.93600	6/1/2010	
Hydrocortisone Oint 1%	G			0.04185	6/1/2014	
Hydrocortisone Oint 2.5%	G			0.10613	1/1/2009	
Hydrocortisone Powder	G			0.93600	6/1/2010	
Hydrocortisone Rectal Cream 2.5%	G		0.85689	0.64379	6/1/2018	
Hydrocortisone Sodium Succinate For Inj 100 MG	G			2.52200	5/1/2011	
Hydrocortisone Tab 10 MG	G			0.21970	10/1/2017	
Hydrocortisone Tab 20 MG	G			0.45870	4/1/2017	
Hydrocortisone Tab 5 MG	G			0.16140	10/1/2017	
Hydrocortisone Valerate Cream 0.2%	G		3.39000	2.50134	6/1/2018	
Hydrocortisone Valerate Oint 0.2%	G			4.36734	8/1/2016	
Hydrocortisone w/ Acetic Acid Otic Soln 1-2%	G			5.41600	11/1/2017	
Hydrocortisone-Aloe Vera Cream 1%	G			0.07497	7/1/2013	
Hydromorphone HCl Preservative Free (PF) Inj 10 MG/ML	G			1.72380	7/1/2013	
Hydromorphone HCl Tab 2 MG	G			0.07780	9/1/2017	
Hydromorphone HCl Tab 4 MG	G			0.07665	3/1/2018	
Hydromorphone HCl Tab 8 MG	G			0.28435	10/1/2016	
Hydromorphone HCl Tab ER 24HR Deter 8 MG	G			9.19367	4/1/2017	
Hydroxychloroquine Sulfate Tab 200 MG	G			0.35893	3/1/2018	
Hydroxyprogesterone Caproate Soln Auto-Injector 275 MG/1.1ML	B			727.08000	4/1/2018	
Hydroxyurea Cap 500 MG	G			0.18352	3/1/2018	
Hydroxyzine HCl IM Soln 50 MG/ML	G			0.86610	1/28/2008	
Hydroxyzine HCl Syrup 10 MG/5ML	G			0.03692	3/1/2018	
Hydroxyzine HCl Tab 10 MG	G			0.03772	10/1/2017	
Hydroxyzine HCl Tab 25 MG	G			0.04750	6/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Hydroxyzine HCl Tab 50 MG	G			0.05700	6/1/2017	
Hydroxyzine Pamoate Cap 100 MG	G			0.30388	2/1/2012	
Hydroxyzine Pamoate Cap 25 MG	G			0.05450	2/1/2011	
Hydroxyzine Pamoate Cap 50 MG	G			0.05250	4/1/2018	
Hyoscyamine Sulfate Soln 0.125 MG/ML	G			1.16667	6/1/2014	
Hyoscyamine Sulfate Tab 0.125 MG	G			0.13030	10/1/2017	
Hyoscyamine Sulfate Tab Disint 0.125 MG	G			0.18450	3/1/2018	
Hyoscyamine Sulfate Tab SL 0.125 MG	G			0.07000	8/1/2017	
Ibandronate Sodium Tab 150 MG (Base Equivalent)	G			7.94000	3/1/2018	
Ibrutinib Cap 140 MG	B			134.79089	1/2/2018	
Ibrutinib Cap 70 MG	B			404.37280	4/1/2018	
Ibrutinib Tab 140 MG	B			404.37280	4/1/2018	
Ibrutinib Tab 280 MG	B			404.37280	4/1/2018	
Ibrutinib Tab 420 MG	B			404.37280	4/1/2018	
Ibrutinib Tab 560 MG	B			404.37280	4/1/2018	
Ibuprofen Cap 200 MG	G			0.07817	8/1/2011	
Ibuprofen Chew Tab 100 MG	G			0.14070	3/1/2009	
Ibuprofen Susp 100 MG/5ML	G			0.02592	9/1/2017	
Ibuprofen Tab 100 MG	G			0.18440	3/1/2009	
Ibuprofen Tab 200 MG	G			0.01567	1/1/2010	
Ibuprofen Tab 400 MG	G			0.02996	1/1/2009	
Ibuprofen Tab 600 MG	G			0.03420	8/1/2017	
Ibuprofen Tab 800 MG	G			0.03474	8/1/2017	
Iloperidone Tab 12 MG	B			35.65080	3/1/2018	
Iloperidone Tab 8 MG	B			20.91567	1/1/2017	
Imatinib Mesylate Tab 100 MG (Base Equivalent)	G			39.20000	11/1/2017	
Imatinib Mesylate Tab 400 MG (Base Equivalent)	B			336.06478	7/7/2015	
Imatinib Mesylate Tab 400 MG (Base Equivalent)	G			107.82067	9/1/2017	
Imipramine HCl Tab 10 MG	G			0.09280	5/1/2017	
Imipramine HCl Tab 25 MG	G			0.06370	12/1/2017	
Imipramine HCl Tab 50 MG	G			0.14120	4/1/2018	
Imiquimod Cream 5%	G			10.78350	4/27/2016	
Indapamide Tab 1.25 MG	G			0.03313	11/1/2011	
Indapamide Tab 2.5 MG	G			0.05400	1/1/2009	
Indomethacin Cap 25 MG	G			0.07340	12/1/2017	
Indomethacin Cap 50 MG	G			0.09440	3/1/2018	
Indomethacin Cap ER 75 MG	G			0.27750	3/1/2018	
Infliximab For IV Inj 100 MG	B			1163.14540	2/9/2017	
Interferon Alfa-2B Inj 6000000 Unit/ML	B			186.63991	1/5/2018	
Interferon Beta-1a IM Prefilled Syringe Kit 30 MCG/0.5ML	B			6762.79020	1/1/2018	
Interferon Beta-1a Inj 22 MCG/0.5ML (12MU/ML) (44 MCG/ML)	B			956.11296	9/4/2015	
Interferon Beta-1a Inj 44 MCG/0.5ML (24MU/ML) (88 MCG/ML)	B			956.11296	9/4/2015	
Iodoquinol-HC Cream 1%	G			0.76673	9/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Ipratropium Bromide Inhal Soln 0.02%	G			0.05067	4/1/2018	
Ipratropium Bromide Nasal Soln 0.03% (21 MCG/SPRAY)	G			0.23084	5/1/2012	
Ipratropium Bromide Nasal Soln 0.06% (42 MCG/SPRAY)	G			0.54166	2/1/2012	
Ipratropium-Albuterol Nebu Soln 0.5-2.5(3) MG/3ML	G			0.04356	4/1/2018	
Irbesartan Tab 150 MG	G			0.11244	11/1/2017	
Irbesartan Tab 300 MG	G			0.21722	11/1/2017	
Irbesartan Tab 75 MG	G			0.08700	10/1/2017	
Irbesartan-Hydrochlorothiazide Tab 150-12.5 MG	G			0.18022	3/1/2018	
Irbesartan-Hydrochlorothiazide Tab 300-12.5 MG	G			0.20544	9/1/2017	
Iron Polysacch Complex-Vit B12-FA Cap 150-0.025-1 MG	G			0.15890	4/1/2017	
Isoniazid Tab 300 MG	G			0.06552	1/1/2012	
Isosorbide Dinitrate Tab 10 MG	G			0.39080	10/1/2017	
Isosorbide Dinitrate Tab 20 MG	G			0.41250	3/1/2018	
Isosorbide Dinitrate Tab 30 MG	G		0.64906	0.48000	6/1/2018	
Isosorbide Dinitrate Tab 5 MG	G			0.03080	6/1/2006	
Isosorbide Dinitrate Tab ER 40 MG	G			0.61485	7/1/2013	
Isosorbide Mononitrate Tab 10 MG	G			0.12025	5/1/2012	
Isosorbide Mononitrate Tab 20 MG	G			0.09070	2/1/2018	
Isosorbide Mononitrate Tab ER 24HR 120 MG	G			0.24000	12/1/2017	
Isosorbide Mononitrate Tab ER 24HR 30 MG	G			0.11487	4/1/2018	
Isosorbide Mononitrate Tab ER 24HR 60 MG	G			0.14696	9/1/2017	
Isotretinoin Cap 10 MG	G			7.27000	1/26/2011	
Isotretinoin Cap 20 MG	G		6.07100	3.23333	6/1/2018	
Isotretinoin Cap 30 MG	G			7.81200	9/1/2016	
Isotretinoin Cap 40 MG	G		4.76512	2.71200	6/1/2018	
Itraconazole Cap 100 MG	G			3.36333	3/1/2018	
Ivermectin Tab 3 MG	G		3.90225	3.72700	6/1/2018	
Ketoconazole Cream 2%	G		4.36250	0.98490	6/1/2018	
Ketoconazole Shampoo 2%	G			0.05374	12/1/2017	
Ketoconazole Tab 200 MG	G			0.24710	9/1/2010	
Ketoprofen Cap 50 MG	G			0.08738	8/1/2011	
Ketoprofen Cap 75 MG	G			0.09862	4/1/2012	
Ketoprofen Cap ER 24HR 200 MG	G			1.71630	6/1/2006	
Ketorolac Tromethamine IM Inj 30 MG/ML	G			0.89000	9/4/2013	
Ketorolac Tromethamine IM Inj 60 MG/2ML (30 MG/ML)	G			0.89000	9/4/2013	
Ketorolac Tromethamine Inj 30 MG/ML	G			0.91000	1/1/2010	
Ketorolac Tromethamine Inj 60 MG/2ML (30 MG/ML)	G			0.89000	9/4/2013	
Ketorolac Tromethamine Ophth Soln 0.4%	G		2.05140	9.44100	6/1/2018	
Ketorolac Tromethamine Ophth Soln 0.5%	G			1.04333	3/1/2018	
Ketorolac Tromethamine Tab 10 MG	G			0.79990	1/1/2018	
Ketotifen Fumarate Ophth Soln 0.025% (Base Equiv)	G			1.44400	4/1/2017	
L-Methylfolate Tab 15 MG**	G			2.11250	9/1/2010	
L-Methylfolate Tab 7.5 MG**	G			2.11250	9/1/2010	
Labetalol HCl Tab 100 MG	G			0.21068	3/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Labetalol HCl Tab 200 MG	G			0.17810	6/1/2017	
Labetalol HCl Tab 300 MG	G			0.17681	2/1/2012	
Lactated Ringer's Solution	G			0.00287	9/1/2015	
Lactic Acid (Ammonium Lactate) Cream 12%	G			0.04447	1/1/2010	
Lactic Acid (Ammonium Lactate) Lotion 12%	G			0.07958	11/10/2014	
Lactulose (Encephalopathy) Solution 10 GM/15ML	G			0.01304	1/1/2009	
Lactulose Solution 10 GM/15ML	G			0.01550	7/1/2013	
Lamivudine Oral Soln 10 MG/ML	G			0.27563	12/1/2017	
Lamivudine Tab 100 MG (HBV)	G			5.03766	12/1/2017	
Lamivudine Tab 150 MG	B			5.94363	3/25/2015	
Lamivudine Tab 150 MG	G			1.42000	11/1/2017	
Lamivudine Tab 300 MG	G			2.05308	12/1/2017	
Lamivudine-Zidovudine Tab 150-300 MG	G			0.91667	9/1/2017	
Lamotrigine Orally Disintegrating Tab 100 MG	G			6.01200	5/1/2018	
Lamotrigine Tab 100 MG	G			0.03760	5/1/2017	
Lamotrigine Tab 150 MG	G			0.06717	11/1/2017	
Lamotrigine Tab 200 MG	G			0.06233	6/1/2017	
Lamotrigine Tab 25 MG	G			0.03110	8/1/2017	
Lamotrigine Tab Chewable Dispersible 25 MG	G		0.12010	0.08860	6/1/2018	
Lamotrigine Tab Chewable Dispersible 5 MG	G			0.08550	4/1/2018	
Lamotrigine Tab ER 24HR 100 MG	G			4.78267	9/1/2017	
Lamotrigine Tab ER 24HR 200 MG	G			3.34600	10/1/2017	
Lamotrigine Tab ER 24HR 25 MG	G			2.26563	8/1/2016	
Lamotrigine Tab ER 24HR 250 MG	G		12.12733	8.60000	6/1/2018	
Lamotrigine Tab ER 24HR 300 MG	G			6.10533	11/1/2017	
Lamotrigine Tab ER 24HR 50 MG	G			5.45333	5/1/2017	
Lansoprazole Cap Delayed Release 15 MG	G			0.28500	7/1/2017	
Lansoprazole Cap Delayed Release 30 MG	G			0.15656	5/1/2017	
Latanoprost Ophth Soln 0.005%	G			1.60945	4/1/2018	
Leflunomide Tab 10 MG	G			2.90567	4/1/2018	
Leflunomide Tab 20 MG	G		2.41092	1.75625	6/1/2018	
Lenalidomide Cap 10 MG	B			659.71066	10/19/2017	
Lenvatinib Cap Therapy Pack 10 & 4 MG (14 MG Daily Dose)	B			225.54420	12/15/2016	
Lenvatinib Cap Therapy Pack 10 (2) & 4 MG (24 MG Daily Dose)	B			163.00094	12/15/2016	
Lenvatinib Cap Therapy Pack 10 (2) MG (20 MG Daily Dose)	B			244.50140	12/15/2016	
Lenvatinib Cap Therapy Pack 10 MG (10 MG Daily Dose)	B			451.08840	12/15/2016	
Letrozole Tab 2.5 MG	G			0.09933	5/1/2017	
Leucovorin Calcium Tab 25 MG	G			4.84400	4/1/2018	
Leucovorin Calcium Tab 5 MG	G			0.66450	3/1/2018	
Leuprolide Acetate (3 Month) For Inj Kit 11.25 MG	B			3658.70640	1/1/2018	
Leuprolide Acetate (3 Month) For Inj Kit 22.5 MG	B			4359.87048	1/1/2018	
Leuprolide Acetate (3 Month) For Inj Pediatric Kit 30 MG	B			8044.73350	4/3/2017	
Leuprolide Acetate (4 Month) For Inj Kit 30 MG	B			5813.17392	1/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Leuprolide Acetate For Inj Kit 3.75 MG	B			1219.55220	1/1/2018	
Leuprolide Acetate For Inj Kit 7.5 MG	B			1453.29348	1/1/2018	
Leuprolide Acetate For Inj Pediatric Kit 11.25 MG	B			2434.70540	4/3/2017	
Leuprolide Acetate For Inj Pediatric Kit 15 MG	B			2681.57230	4/3/2017	
Leuprolide Acetate For Inj Pediatric Kit 7.5 MG	B			1341.06420	4/3/2017	
Levalbuterol HCl Soln Nebu 0.31 MG/3ML (Base Equiv)	G			0.52707	4/1/2017	
Levalbuterol HCl Soln Nebu 0.63 MG/3ML (Base Equiv)	G		0.49634	0.44833	6/1/2018	
Levalbuterol HCl Soln Nebu 1.25 MG/3ML (Base Equiv)	G			0.38012	3/1/2018	
Levalbuterol Tartrate Inhal Aerosol 45 MCG/ACT (Base Equiv)	G			3.54667	3/1/2018	
Levetiracetam Oral Soln 100 MG/ML	G			0.04385	8/1/2015	
Levetiracetam Tab 1000 MG	G			0.13695	12/1/2017	
Levetiracetam Tab 250 MG	G			0.07342	9/1/2017	
Levetiracetam Tab 500 MG	G			0.07467	6/1/2017	
Levetiracetam Tab 750 MG	G			0.14175	1/1/2018	
Levetiracetam Tab ER 24HR 500 MG	G			0.25000	5/1/2017	
Levetiracetam Tab ER 24HR 750 MG	G			0.35778	4/1/2017	
Levobunolol HCl Ophth Soln 0.25%	G			1.10500	1/1/2010	
Levobunolol HCl Ophth Soln 0.5%	G			0.44115	1/1/2009	
Levocarnitine Oral Soln 1 GM/10ML (10%)	G			0.34929	2/27/2017	
Levocarnitine Tab 330 MG	G			0.53088	10/1/2015	
Levocetirizine Dihydrochloride Soln 2.5 MG/5ML (0.5 MG/ML)	G			0.43460	8/1/2013	
Levocetirizine Dihydrochloride Tab 5 MG	G			0.08221	4/1/2017	
Levofloxacin in D5W IV Soln 500 MG/100ML	G			0.52730	9/1/2017	
Levofloxacin Oral Soln 25 MG/ML	G			0.86325	3/1/2018	
Levofloxacin Tab 250 MG	G		0.19525	0.16355	6/1/2018	
Levofloxacin Tab 500 MG	G			0.13487	1/1/2018	
Levofloxacin Tab 750 MG	G			0.24300	5/1/2017	
Levonorg-Eth Est Tab 0.15-0.03MG(84) & Eth Est Tab 0.01MG(7)	G			1.16209	6/1/2017	
Levonorgestrel & Ethinyl Estradiol (91-Day) Tab 0.15-0.03 MG	G		0.63793	0.54886	6/1/2018	
Levonorgestrel & Ethinyl Estradiol Tab 0.1 MG-20 MCG	G		0.33464	0.24036	6/1/2018	
Levonorgestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG	G			0.12476	5/1/2017	
Levonorgestrel Tab 0.75 MG	G			15.22415	8/1/2011	
Levonorgestrel Tab 1.5 MG	G			21.99000	4/1/2017	
Levonorgestrel-Eth Estra Tab 0.05-30/0.075-40/0.125-30MG-MCG	G			0.34466	4/1/2017	
Levonorgestrel-Ethinyl Estradiol (Continuous) Tab 90-20 MCG	G			1.36393	4/1/2018	
Levothyroxine Sodium Tab 100 MCG	G			0.20882	4/1/2017	
Levothyroxine Sodium Tab 112 MCG	G			0.39990	1/1/2018	
Levothyroxine Sodium Tab 125 MCG	G			0.41990	1/1/2018	
Levothyroxine Sodium Tab 137 MCG	G			0.33710	6/1/2017	
Levothyroxine Sodium Tab 150 MCG	G			0.29216	4/1/2017	
Levothyroxine Sodium Tab 175 MCG	G			0.49990	1/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Levothyroxine Sodium Tab 200 MCG	G			0.50845	6/1/2017	
Levothyroxine Sodium Tab 25 MCG	G			0.26500	2/10/2014	
Levothyroxine Sodium Tab 300 MCG	G			0.25325	8/1/2011	
Levothyroxine Sodium Tab 50 MCG	G			0.30004	8/1/2017	
Levothyroxine Sodium Tab 75 MCG	G			0.35587	8/1/2017	
Levothyroxine Sodium Tab 88 MCG	G			0.33016	12/1/2017	
Lidocaine HCl Cream 3%	G		1.41547	1.24915	6/1/2018	
Lidocaine HCl Gel 2%	G			0.32560	7/1/2013	
Lidocaine HCl IV Inj 20 MG/ML	G			0.48020	9/1/2017	
Lidocaine HCl Local Inj 1%	G			0.02262	6/1/2010	
Lidocaine HCl Local Preservative Free (PF) Inj 1%	G			0.58140	7/1/2013	
Lidocaine HCl Soln 4%	G			0.10019	9/1/2011	
Lidocaine HCl Viscous Soln 2%	G			0.02457	4/1/2011	
Lidocaine Oint 5%	G		3.06250	0.95700	6/1/2018	
Lidocaine Patch 5%	G		6.29367	2.71901	6/1/2018	
Lidocaine-Hydrocortisone Acetate Rectal Cream Kit 3-0.5%	G			7.69340	9/1/2010	
Lidocaine-Prilocaine Cream 2.5-2.5%	G		1.12500	0.81983	6/1/2018	
Linezolid For Susp 100 MG/5ML	B			8.86447	1/1/2018	
Linezolid Tab 600 MG	B			265.92553	1/1/2018	
Linezolid Tab 600 MG	G			3.66350	12/1/2017	
Liothyronine Sodium Tab 25 MCG	G			0.42480	8/1/2017	
Liothyronine Sodium Tab 5 MCG	G			0.26980	6/1/2017	
Liothyronine Sodium Tab 50 MCG	G			0.41850	4/1/2017	
Lisinopril & Hydrochlorothiazide Tab 10-12.5 MG	G			0.03000	4/1/2017	
Lisinopril & Hydrochlorothiazide Tab 20-12.5 MG	G			0.02786	4/1/2018	
Lisinopril & Hydrochlorothiazide Tab 20-25 MG	G			0.02920	11/1/2017	
Lisinopril Tab 10 MG	G			0.01388	11/1/2017	
Lisinopril Tab 2.5 MG	G			0.01030	11/1/2017	
Lisinopril Tab 20 MG	G			0.01652	8/1/2017	
Lisinopril Tab 30 MG	G			0.03080	5/1/2017	
Lisinopril Tab 40 MG	G			0.02822	5/1/2017	
Lisinopril Tab 5 MG	G		0.01183	0.01293	6/1/2018	
Lithium Carbonate Cap 150 MG	G			0.05730	4/1/2017	
Lithium Carbonate Cap 300 MG	G			0.03598	3/1/2011	
Lithium Carbonate Cap 600 MG	G			0.09925	4/1/2017	
Lithium Carbonate Tab 300 MG	G			0.13270	4/1/2017	
Lithium Carbonate Tab ER 300 MG	G			0.15233	4/1/2017	
Lithium Carbonate Tab ER 450 MG	G			0.09360	10/1/2017	
Lithium Oral Solution 8 mEq/5ML	G			0.14356	4/1/2018	
Loperamide HCl Cap 2 MG	G			0.25380	3/21/2017	
Loperamide HCl Liq 1 MG/5ML (0.2 MG/ML)	G			0.04563	8/1/2016	
Loperamide HCl Tab 2 MG	G			0.52850	8/1/2016	
Lopinavir-Ritonavir Tab 200-50 MG	B			8.02679	12/26/2016	
Loratadine & Pseudoephedrine Tab ER 12HR 5-120 MG	G			0.58500	8/12/2009	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Loratadine & Pseudoephedrine Tab ER 24HR 10-240 MG	G			0.52667	5/1/2012	
Loratadine Rapidly-Disintegrating Tab 10 MG	G			0.22273	1/1/2010	
Loratadine Syrup 5 MG/5ML	G			0.03967	4/1/2017	
Loratadine Tab 10 MG	G			0.03157	11/1/2017	
Lorazepam Conc 2 MG/ML	G			0.32867	10/1/2017	
Lorazepam Inj 2 MG/ML	G			0.59480	3/1/2018	
Lorazepam Tab 0.5 MG	G			0.02030	11/1/2017	
Lorazepam Tab 1 MG	G			0.02225	4/1/2017	
Lorazepam Tab 2 MG	G			0.04207	4/1/2017	
Losartan Potassium & Hydrochlorothiazide Tab 100-12.5 MG	G			0.07356	6/1/2017	
Losartan Potassium & Hydrochlorothiazide Tab 100-25 MG	G			0.07044	6/1/2017	
Losartan Potassium & Hydrochlorothiazide Tab 50-12.5 MG	G			0.06700	6/1/2017	
Losartan Potassium Tab 100 MG	G			0.04114	11/1/2017	
Losartan Potassium Tab 25 MG	G			0.03244	8/1/2017	
Losartan Potassium Tab 50 MG	G			0.04335	4/1/2017	
Lovastatin Tab 10 MG	G			0.05220	4/1/2018	
Lovastatin Tab 20 MG	G			0.03900	11/1/2017	
Lovastatin Tab 40 MG	G			0.03670	6/1/2017	
Loxapine Succinate Cap 10 MG	G			0.25298	4/1/2017	
Loxapine Succinate Cap 25 MG	G			0.56280	9/1/2017	
Loxapine Succinate Cap 5 MG	G			0.28570	3/1/2018	
Loxapine Succinate Cap 50 MG	G			0.73150	3/1/2018	
Lurasidone HCl Tab 40 MG	B			40.61688	1/16/2018	
Lurasidone HCl Tab 80 MG	B			40.61688	1/16/2018	
Macitentan Tab 10 MG	B			299.79600	11/21/2017	
Magnesium Hydroxide Susp 400 MG/5ML	G			0.00363	1/5/2011	
Magnesium Oxide Tab 400 MG	G			0.02200	4/1/2017	
Magnesium Oxide Tab 400 MG (241.3 MG Elemental Mg)	G			0.02200	4/1/2017	
Mecasermin Inj 40 MG/4ML (10 MG/ML)	B			1011.18651	1/1/2018	
Meclizine HCl Chew Tab 25 MG	G			0.03190	4/1/2017	
Meclizine HCl Tab 12.5 MG	G			0.02915	10/1/2009	
Meclizine HCl Tab 25 MG	G			0.11236	12/1/2017	
Medroxyprogesterone Acetate IM Susp 150 MG/ML	G			68.97000	4/1/2017	
Medroxyprogesterone Acetate Tab 10 MG	G			0.12420	11/1/2017	
Medroxyprogesterone Acetate Tab 2.5 MG	G			0.05125	8/1/2011	
Medroxyprogesterone Acetate Tab 5 MG	G			0.08900	8/1/2011	
Mefloquine HCl Tab 250 MG	G			3.32640	10/1/2017	
Megestrol Acetate Susp 40 MG/ML	G			0.05000	4/1/2017	
Megestrol Acetate Tab 20 MG	G			0.12563	3/1/2012	
Megestrol Acetate Tab 40 MG	G			0.15820	8/1/2017	
Meloxicam Tab 15 MG	G			0.02106	4/1/2017	
Meloxicam Tab 7.5 MG	G			0.01959	4/1/2017	
Memantine HCl Cap ER 24HR 14 MG	G			11.67633	4/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Memantine HCl Cap ER 24HR 21 MG	G			13.23000	4/1/2018	
Memantine HCl Cap ER 24HR 28 MG	G			12.97367	4/1/2018	
Memantine HCl Cap ER 24HR 7 MG	G			13.23567	4/1/2018	
Memantine HCl Oral Solution 2 MG/ML	G			1.16022	9/1/2017	
Memantine HCl Tab 10 MG	B			5.62823	4/1/2015	
Memantine HCl Tab 10 MG	G			0.12656	10/1/2017	
Memantine HCl Tab 5 MG	B			5.62823	4/1/2015	
Memantine HCl Tab 5 MG	G			0.09917	10/1/2017	
Meperidine HCl Tab 100 MG	G			1.45210	1/4/2016	
Meperidine HCl Tab 50 MG	G			0.20308	12/1/2011	
Mercaptopurine Tab 50 MG	G			0.88334	10/1/2017	
Meropenem IV For Soln 1 GM	G			17.18116	2/1/2014	
Meropenem IV For Soln 500 MG	G			18.50000	9/1/2010	
Mesalamine Enema 4 GM	G			0.11845	5/1/2012	
Mesalamine Tab Delayed Release 1.2 GM	G			8.96742	9/1/2017	
Mesalamine Tab Delayed Release 800 MG	G		6.17417	5.56889	6/1/2018	
Mesna Inj 100 MG/ML	G			2.60000	5/1/2011	
Metaxalone Tab 800 MG	G			1.54535	3/1/2018	
Metformin HCl Tab 1000 MG	G			0.02659	11/1/2017	
Metformin HCl Tab 500 MG	G			0.01592	4/1/2017	
Metformin HCl Tab 850 MG	G			0.02127	1/1/2018	
Metformin HCl Tab ER 24HR 500 MG	G			0.03120	8/1/2017	
Metformin HCl Tab ER 24HR 750 MG	G			0.08408	4/1/2017	
Metformin HCl Tab ER 24HR Osmotic 1000 MG	G		5.59517	4.64267	6/1/2018	
Metformin HCl Tab ER 24HR Osmotic 500 MG	G		4.16033	3.33250	6/1/2018	
Methadone HCl Conc 10 MG/ML	G			2.22067	1/1/2018	
Methadone HCl Tab 10 MG	G			0.10120	5/1/2017	
Methadone HCl Tab 5 MG	G			0.17800	11/1/2017	
Methazolamide Tab 50 MG	G			0.19032	1/1/2009	
Methenamine Hippurate Tab 1 GM	G			0.89903	2/1/2017	
Methenamine-Hyosc-Meth Blue-Sod Phos-Phen Sal Cap 118 MG***	G			2.58650	4/1/2017	
Methimazole Tab 10 MG	G			0.08775	10/1/2017	
Methimazole Tab 5 MG	G			0.04940	10/1/2017	
Methocarbamol Tab 500 MG	G			0.05895	9/1/2017	
Methocarbamol Tab 750 MG	G			0.05730	1/1/2018	
Methotrexate Sodium Inj 25 MG/ML	G			1.37800	1/1/2010	
Methotrexate Sodium Inj 250 MG/10ML (25 MG/ML)	G			1.37800	4/13/2016	
Methotrexate Sodium Inj 50 MG/2ML (25 MG/ML)	G			1.37800	4/13/2016	
Methotrexate Sodium Inj PF 100 MG/4ML (25 MG/ML)	G			0.91800	4/1/2017	
Methotrexate Sodium Inj PF 1000 MG/40ML (25 MG/ML)	G			0.91800	4/1/2017	
Methotrexate Sodium Inj PF 200 MG/8ML (25 MG/ML)	G			0.91800	4/1/2017	
Methotrexate Sodium Inj PF 25 MG/ML	G			0.91800	4/1/2017	
Methotrexate Sodium Inj PF 250 MG/10ML (25 MG/ML)	G			0.81415	4/1/2017	
Methotrexate Sodium Inj PF 50 MG/2ML (25 MG/ML)	G			0.91800	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Methotrexate Sodium Tab 2.5 MG (Base Equiv)	G		0.84893	0.64044	6/1/2018	
Methotrexate Soln PF Auto-Injector 10 MG/0.4ML	B			366.89112	8/17/2016	
Methotrexate Soln PF Auto-Injector 15 MG/0.4ML	B			366.89112	8/17/2016	
Methotrexate Soln PF Auto-Injector 20 MG/0.4ML	B			366.89112	8/17/2016	
Methotrexate Soln PF Auto-Injector 25 MG/0.4ML	B			366.89112	8/17/2016	
Methscopolamine Bromide Tab 2.5 MG	G			1.83769	1/1/2013	
Methylcellulose Powder Laxative	G			0.01682	2/1/2014	
Methyldopa & Hydrochlorothiazide Tab 250-15 MG	G			0.21320	6/1/2010	
Methyldopa & Hydrochlorothiazide Tab 250-25 MG	G			0.21307	6/1/2010	
Methyldopa Tab 250 MG	G			0.06990	3/1/2018	
Methyldopa Tab 500 MG	G			0.14670	6/1/2017	
Methylphenidate HCl Cap ER 20 MG (CD)	G			2.31590	10/1/2017	
Methylphenidate HCl Cap ER 24HR 20 MG (LA)	G			3.69000	6/1/2013	
Methylphenidate HCl Cap ER 24HR 30 MG (LA)	G			3.67445	4/1/2017	
Methylphenidate HCl Cap ER 24HR 40 MG (LA)	G			3.82880	4/1/2017	
Methylphenidate HCl Cap ER 30 MG (CD)	G			2.31590	10/1/2017	
Methylphenidate HCl Cap ER 40 MG (CD)	G			3.42960	4/1/2017	
Methylphenidate HCl Chew Tab 10 MG	G			4.72083	8/1/2016	
Methylphenidate HCl Chew Tab 5 MG	G			3.20039	8/1/2016	
Methylphenidate HCl Soln 10 MG/5ML	G			0.63136	4/1/2017	
Methylphenidate HCl Soln 5 MG/5ML	G			0.55426	8/1/2016	
Methylphenidate HCl Tab 10 MG	G		0.36580	0.31220	6/1/2018	
Methylphenidate HCl Tab 20 MG	G			0.48195	10/1/2017	
Methylphenidate HCl Tab 5 MG	G		0.33080	0.21270	6/1/2018	
Methylphenidate HCl Tab ER 10 MG	G			2.41500	1/1/2018	
Methylphenidate HCl Tab ER 20 MG	G			2.13490	8/1/2017	
Methylphenidate HCl Tab ER 24HR 18 MG	G			4.28290	4/1/2017	
Methylphenidate HCl Tab ER 24HR 27 MG	G			4.02877	4/1/2017	
Methylphenidate HCl Tab ER 24HR 36 MG	G			6.00642	10/1/2016	
Methylphenidate HCl Tab ER 24HR 54 MG	G			3.93500	7/1/2017	
Methylphenidate HCl Tab ER 24HR 54 MG	G	METHYLPHENID TAB 54MG ER (00406015401)	5.96530	5.96530	6/6/2018	NDC-specific SMAC
Methylphenidate HCl Tab ER Osmotic Release (OSM) 18 MG	G		7.54339	6.59200	6/1/2018	
Methylphenidate HCl Tab ER Osmotic Release (OSM) 27 MG	G		7.77625	5.23170	6/1/2018	
Methylphenidate HCl Tab ER Osmotic Release (OSM) 36 MG	G			7.73813	4/24/2017	
Methylphenidate HCl Tab ER Osmotic Release (OSM) 54 MG	G			7.53722	9/1/2017	
Methylprednisolone Acetate Inj Susp 40 MG/ML	G			6.24000	4/1/2017	
Methylprednisolone Acetate Inj Susp 80 MG/ML	G			14.89200	4/1/2017	
Methylprednisolone Tab 4 MG	G			0.31030	2/1/2018	
Methylprednisolone Tab 4 MG Dose Pack	G			0.73589	10/1/2015	
Methylprednisolone Tab 8 MG	G			1.41971	4/1/2017	
Methylprednisolone Tab Therapy Pack 4 MG (21)	G			0.28952	10/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Metoclopramide HCl Soln 5 MG/5ML (10 MG/10ML) (Base Equiv)	G			0.01374	9/18/2013	
Metoclopramide HCl Tab 10 MG (Base Equivalent)	G			0.03988	4/1/2017	
Metoclopramide HCl Tab 5 MG (Base Equivalent)	G			0.02200	10/1/2017	
Metolazone Tab 10 MG	G			0.66462	9/1/2011	
Metolazone Tab 2.5 MG	G		0.84213	0.81000	6/1/2018	
Metolazone Tab 5 MG	G			1.09870	10/1/2017	
Metoprolol & Hydrochlorothiazide Tab 50-25 MG	G			0.67570	3/1/2018	
Metoprolol Succinate Tab ER 24HR 100 MG (Tartrate Equiv)	G			0.25564	2/1/2018	
Metoprolol Succinate Tab ER 24HR 200 MG (Tartrate Equiv)	G			0.26240	2/1/2018	
Metoprolol Succinate Tab ER 24HR 25 MG (Tartrate Equiv)	G			0.15329	12/1/2017	
Metoprolol Succinate Tab ER 24HR 50 MG (Tartrate Equiv)	G			0.18560	7/1/2017	
Metoprolol Tartrate Tab 100 MG	G			0.02870	1/1/2018	
Metoprolol Tartrate Tab 25 MG	G			0.02226	1/1/2018	
Metoprolol Tartrate Tab 50 MG	G			0.01869	11/1/2017	
Metronidazole Cream 0.75%	G		2.25561	1.39143	6/1/2018	
Metronidazole Gel 0.75%	G			2.95000	11/8/2013	
Metronidazole in NaCl 0.79% IV Soln 500 MG/100ML	G			0.01545	1/1/2012	
Metronidazole Tab 250 MG	G			0.17585	3/1/2018	
Metronidazole Tab 500 MG	G			0.14590	10/1/2017	
Metronidazole Vaginal Gel 0.75%	G		0.89938	0.75969	6/1/2018	
Mexiletine HCl Cap 150 MG	G			0.24270	1/1/2009	
Mexiletine HCl Cap 200 MG	G			0.69240	9/1/2017	
Miconazole Nitrate Cream 2%	G			0.05542	7/1/2013	
Miconazole Nitrate Vaginal Cream 2%	G			0.12277	8/12/2009	
Miconazole Nitrate Vaginal Suppos 100 MG	G			0.54786	9/1/2010	
Midazolam HCl Inj 10 MG/10ML (Base Equivalent)	G			0.20280	7/1/2013	
Midazolam HCl Inj 10 MG/2ML (Base Equivalent)	G			0.44200	7/1/2013	
Midazolam HCl Inj 2 MG/2ML (Base Equivalent)	G			0.20280	7/1/2013	
Midazolam HCl Inj 25 MG/5ML (Base Equivalent)	G			0.44200	7/1/2013	
Midazolam HCl Inj 5 MG/5ML (Base Equivalent)	G			0.20280	7/1/2013	
Midazolam HCl Inj 5 MG/ML (Base Equivalent)	G			0.44200	7/1/2013	
Midazolam HCl Inj 50 MG/10ML (Base Equivalent)	G			0.44200	7/1/2013	
Midodrine HCl Tab 10 MG	G			0.53280	3/1/2018	
Midodrine HCl Tab 2.5 MG	G			0.20900	3/1/2018	
Midodrine HCl Tab 5 MG	G			0.32230	10/1/2017	
Milrinone Lactate in Dextrose 5% IV Soln 20 MG/100ML	G			0.21614	7/1/2013	
Milrinone Lactate in Dextrose 5% IV Soln 40 MG/200ML	G			0.21614	7/1/2013	
Milrinone Lactate IV Soln 10 MG/10ML (Base Equivalent)	G			0.29545	9/1/2017	
Milrinone Lactate IV Soln 20 MG/20ML (Base Equivalent)	G			0.29545	9/1/2017	
Milrinone Lactate IV Soln 50 MG/50ML (Base Equivalent)	G			0.29545	9/1/2017	
Minocycline HCl Cap 100 MG	G			0.33177	10/1/2015	
Minocycline HCl Cap 50 MG	G			0.16169	12/1/2011	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Minocycline HCl Cap 75 MG	G			0.28083	4/1/2017	
Minocycline HCl Tab 100 MG	G		1.87500	1.80620	6/1/2018	
Minocycline HCl Tab ER 24HR 135 MG	G			10.48000	1/1/2012	
Minocycline HCl Tab ER 24HR 45 MG	G			16.17500	8/15/2016	
Minocycline HCl Tab ER 24HR 90 MG	G			11.60000	1/1/2012	
Minoxidil Tab 10 MG	G			0.21120	4/1/2017	
Minoxidil Tab 2.5 MG	G			0.01538	9/1/2017	
Mipomersen Sodium Soln Prefilled Syringe 200 MG/ML	B			6922.90758	10/14/2016	
Mirtazapine Orally Disintegrating Tab 15 MG	G			0.58700	3/1/2018	
Mirtazapine Orally Disintegrating Tab 30 MG	G			0.53400	10/1/2017	
Mirtazapine Orally Disintegrating Tab 45 MG	G			1.76854	4/1/2009	
Mirtazapine Tab 15 MG	G			0.06367	6/1/2017	
Mirtazapine Tab 30 MG	G			0.06333	6/1/2017	
Mirtazapine Tab 45 MG	G			0.17345	9/1/2017	
Mirtazapine Tab 7.5 MG	G			0.19917	8/1/2012	
Misoprostol Tab 100 MCG	G			0.39396	11/1/2011	
Misoprostol Tab 200 MCG	G			0.47200	4/1/2011	
Modafinil Tab 100 MG	G			0.49100	10/1/2017	
Modafinil Tab 200 MG	G			0.86500	10/1/2017	
Moexipril HCl Tab 15 MG	G			0.31400	10/1/2017	
Moexipril HCl Tab 7.5 MG	G			0.26780	3/1/2018	
Moexipril-Hydrochlorothiazide Tab 15-12.5 MG	G			0.59644	9/1/2011	
Moexipril-Hydrochlorothiazide Tab 15-25 MG	G			0.53738	8/1/2011	
Mometasone Furoate Cream 0.1%	G			0.37094	12/1/2016	
Mometasone Furoate Nasal Susp 50 MCG/ACT	G		3.94647	3.44749	6/1/2018	
Mometasone Furoate Oint 0.1%	G			0.34989	5/1/2012	
Mometasone Furoate Solution 0.1% (Lotion)	G			0.22323	5/1/2012	
Montelukast Sodium Chew Tab 4 MG (Base Equiv)	G			0.12956	3/1/2018	
Montelukast Sodium Chew Tab 5 MG (Base Equiv)	G			0.09067	10/1/2017	
Montelukast Sodium Oral Granules Packet 4 MG (Base Equiv)	G			2.60331	11/24/2017	
Montelukast Sodium Tab 10 MG (Base Equiv)	G			0.06525	6/1/2017	
Morphine Sulfate Beads Cap ER 24HR 60 MG	G			8.43250	4/1/2017	
Morphine Sulfate Beads Cap ER 24HR 75 MG	G			10.96260	4/1/2017	
Morphine Sulfate Cap ER 24HR 20 MG	G			1.25730	10/1/2017	
Morphine Sulfate Cap ER 24HR 30 MG	G			3.59400	4/1/2017	
Morphine Sulfate Cap ER 24HR 50 MG	G			5.43719	4/1/2017	
Morphine Sulfate Cap ER 24HR 60 MG	G			5.34420	4/1/2017	
Morphine Sulfate Inj 10 MG/ML	G			0.79875	4/1/2012	
Morphine Sulfate Oral Soln 100 MG/5ML (20 MG/ML)	G			0.23267	10/1/2016	
Morphine Sulfate Tab 15 MG	G			0.16520	1/12/2016	
Morphine Sulfate Tab 30 MG	G			0.15355	8/1/2013	
Morphine Sulfate Tab ER 100 MG	G			0.82356	7/1/2013	
Morphine Sulfate Tab ER 15 MG	G			0.15750	5/1/2018	
Morphine Sulfate Tab ER 200 MG	G			1.31927	3/1/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Morphine Sulfate Tab ER 30 MG	G			0.28400	9/1/2017	
Morphine Sulfate Tab ER 60 MG	G		0.63607	0.60430	6/1/2018	
Moxifloxacin HCl Ophth Soln 0.5% (Base Equiv)	G			7.18667	3/1/2018	
Moxifloxacin HCl Tab 400 MG (Base Equiv)	G			2.60900	10/1/2017	
Multiple Vitamin Tab**	G			0.02838	9/1/2010	
Multiple Vitamins w/ Minerals Liquid**	G			0.01355	7/1/2013	
Mupirocin Calcium Cream 2%	G			8.97000	4/19/2018	
Mupirocin Oint 2%	G			0.38562	3/1/2011	
Mycophenolate Mofetil Cap 250 MG	G			0.12520	2/1/2018	
Mycophenolate Mofetil For Oral Susp 200 MG/ML	G		5.37425	5.18739	6/1/2018	
Mycophenolate Mofetil Tab 500 MG	G		0.20743	0.15350	6/1/2018	
Mycophenolate Sodium Tab DR 180 MG (Mycophenolic Acid Equiv)	G			1.99878	4/1/2017	
Mycophenolate Sodium Tab DR 360 MG (Mycophenolic Acid Equiv)	G			4.90000	5/1/2018	
Nabumetone Tab 500 MG	G			0.16110	4/1/2017	
Nabumetone Tab 750 MG	G			0.17590	6/1/2017	
Nadolol Tab 20 MG	G			1.10540	12/1/2017	
Nadolol Tab 40 MG	G			0.80040	10/1/2017	
Nadolol Tab 80 MG	G			0.29675	5/1/2012	
Naloxone HCl Solution Auto-injector 0.4 MG/0.4ML	B			715.87500	4/29/2015	
Naltrexone HCl Tab 50 MG	G		0.66829	0.57500	6/1/2018	
Naproxen Sodium Tab 220 MG	G			0.07228	1/1/2010	
Naproxen Sodium Tab 275 MG	G			0.09529	1/1/2013	
Naproxen Sodium Tab 550 MG	G		1.00870	0.88131	6/1/2018	
Naproxen Susp 125 MG/5ML	G			1.01100	3/16/2017	
Naproxen Tab 250 MG	G			0.03406	8/1/2011	
Naproxen Tab 375 MG	G			0.04990	4/1/2017	
Naproxen Tab 500 MG	G			0.04180	11/1/2017	
Naproxen Tab EC 500 MG	G			0.15681	4/1/2012	
Naratriptan HCl Tab 1 MG (Base Equiv)	G			3.92785	4/1/2017	
Naratriptan HCl Tab 2.5 MG (Base Equiv)	G			1.55944	10/1/2017	
Natalizumab for IV Inj Conc 300 MG/15ML	B			410.35200	1/1/2018	
Nateglinide Tab 120 MG	G			0.50009	12/1/2017	
Nateglinide Tab 60 MG	G			0.37877	10/1/2017	
Nefazodone HCl Tab 100 MG	G			0.52000	1/1/2010	
Nefazodone HCl Tab 150 MG	G			0.54600	1/1/2010	
Nefazodone HCl Tab 200 MG	G			0.57200	1/1/2010	
Nefazodone HCl Tab 250 MG	G			0.59521	10/1/2012	
Nefazodone HCl Tab 50 MG	G			0.31800	10/1/2012	
Nelfinavir Mesylate Tab 250 MG	B			3.73400	1/30/2017	
Neomycin Sulfate Tab 500 MG	G			0.60100	9/1/2017	
Neomycin-Bacitrac Zn-Polymyx 5(3.5)MG-400Unt-10000Unt Op Oin	G			0.83490	1/1/2007	
Neomycin-Bacitracin-Polymyxin Oint***	G			0.07143	6/1/2014	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Neomycin-Polymyx-Gramicid Op Sol 1.75-10000-0.025MG-UNT-MG/ML	G			1.75625	3/1/2012	
Neomycin-Polymyxin B GU Irrigation Soln	G			8.06000	11/1/2010	
Neomycin-Polymyxin-Dexamethasone Ophth Oint 0.1%	G			0.72000	1/1/2009	
Neomycin-Polymyxin-Dexamethasone Ophth Susp 0.1%	G		3.00487	2.64382	6/1/2018	
Neomycin-Polymyxin-HC Otic Soln 1%	G			4.37800	10/1/2017	
Neomycin-Polymyxin-HC Otic Susp 3.5 MG/ML-10000 Unit/ML-1%	G			4.58550	4/1/2018	
Nevirapine Tab 200 MG	G			0.11000	10/1/2017	
Nevirapine Tab ER 24HR 400 MG	G			3.59633	1/1/2018	
Niacin Tab ER 1000 MG (Antihyperlipidemic)	G			0.62311	10/1/2017	
Niacin Tab ER 500 MG (Antihyperlipidemic)	G			0.34556	10/1/2017	
Nicotine Polacrilex Gum 2 MG	G			0.20460	4/1/2017	
Nicotine Polacrilex Gum 4 MG	G			0.14927	2/1/2018	
Nicotine Polacrilex Lozenge 2 MG	G			0.52318	5/1/2012	
Nicotine Polacrilex Lozenge 4 MG	G			0.46160	4/1/2011	
Nicotine TD Patch 24HR 14 MG/24HR	G			1.59357	3/1/2018	
Nicotine TD Patch 24HR 21 MG/24HR	G			1.57857	9/1/2017	
Nicotine TD Patch 24HR 7 MG/24HR	G			1.55742	4/1/2017	
Nifedipine Cap 10 MG	G			0.63981	5/25/2016	
Nifedipine Cap 20 MG	G			1.63720	2/1/2015	
Nifedipine Tab ER 24HR 30 MG	G			0.13326	9/1/2017	
Nifedipine Tab ER 24HR 60 MG	G			0.34036	4/1/2017	
Nifedipine Tab ER 24HR 90 MG	G			0.70270	9/1/2017	
Nifedipine Tab ER 24HR Osmotic Release 30 MG	G		0.17334	0.12832	6/1/2018	
Nifedipine Tab ER 24HR Osmotic Release 60 MG	G			0.22235	3/1/2018	
Nifedipine Tab ER 24HR Osmotic Release 90 MG	G			0.28260	3/1/2018	
Nisoldipine Tab ER 24HR 17 MG	G		6.03000	5.60720	6/1/2018	
Nisoldipine Tab ER 24HR 25.5 MG	G			6.55000	7/1/2011	
Nisoldipine Tab ER 24HR 34 MG	G			6.55000	7/1/2011	
Nisoldipine Tab ER 24HR 8.5 MG	G			4.77000	7/1/2011	
Nitrofurantoin Macrocrystalline Cap 100 MG	G			0.74480	3/1/2018	
Nitrofurantoin Macrocrystalline Cap 50 MG	G			0.32360	10/1/2017	
Nitrofurantoin Monohydrate Macrocrystalline Cap 100 MG	G			0.68440	5/1/2018	
Nitrofurantoin Susp 25 MG/5ML	G			1.31539	3/1/2018	
Nitroglycerin Cap ER 6.5 MG	G			0.35200	3/14/2016	
Nitroglycerin SL Tab 0.3 MG	G			0.28280	9/1/2017	
Nitroglycerin SL Tab 0.4 MG	G			0.23690	4/1/2017	
Nitroglycerin TD Patch 24HR 0.1 MG/HR	G			0.63166	5/1/2012	
Nitroglycerin TD Patch 24HR 0.2 MG/HR	G			0.36667	1/1/2018	
Nitroglycerin TD Patch 24HR 0.4 MG/HR	G		0.42359	0.36667	6/1/2018	
Nitroglycerin TD Patch 24HR 0.6 MG/HR	G			0.54533	11/1/2017	
Nitroglycerin TL Soln 0.4 MG/SPRAY (400 MCG/SPRAY)	G			27.95209	10/1/2012	
Nizatidine Cap 150 MG	G			0.18833	9/1/2017	
Norethindrone & Ethinyl Estradiol Tab 0.4 MG-35 MCG	G			0.39583	7/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG	G		0.68964	0.64667	6/1/2018	
Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG	G			0.47755	4/1/2017	
Norethindrone & Ethinyl Estradiol-Fe Chew Tab 0.8 MG-25 MCG	G			1.80607	10/1/2017	
Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG	G			1.43244	1/1/2012	
Norethindrone Ace & Ethinyl Estradiol Tab 1 MG-20 MCG	G			0.33593	10/1/2017	
Norethindrone Ace & Ethinyl Estradiol Tab 1.5 MG-30 MCG	G			0.57873	10/1/2017	
Norethindrone Ace & Ethinyl Estradiol-FE Tab 1 MG-20 MCG	G			0.28067	11/1/2017	
Norethindrone Ace & Ethinyl Estradiol-FE Tab 1.5 MG-30 MCG	G			0.39994	9/1/2017	
Norethindrone Ace-Ethinyl Estradiol-FE Tab 1 MG-20 MCG (24)	G			1.05273	12/1/2017	
Norethindrone Acetate Tab 5 MG	G		1.35764	1.18127	6/1/2018	
Norethindrone Tab 0.35 MG	G			0.10917	4/1/2018	
Norethindrone-Eth Estradiol Tab 0.5-35/0.75-35/1-35 MG-MCG	G			0.37331	4/1/2017	
Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35 MG-MCG	G			0.77929	4/1/2017	
Norgestimate & Ethinyl Estradiol Tab 0.25 MG-35 MCG	G			0.24173	8/1/2017	
Norgestimate-Eth Estrad Tab 0.18-25/0.215-25/0.25-25 MG-MCG	G			0.23750	4/1/2017	
Norgestimate-Eth Estrad Tab 0.18-35/0.215-35/0.25-35 MG-MCG	G			0.20485	2/1/2018	
Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG	G			0.41253	11/1/2017	
Nortriptyline HCl Cap 10 MG	G			0.06356	10/1/2017	
Nortriptyline HCl Cap 25 MG	G			0.09760	3/1/2018	
Nortriptyline HCl Cap 50 MG	G			0.11622	7/1/2017	
Nortriptyline HCl Cap 75 MG	G			0.12989	10/1/2017	
Nortriptyline HCl Soln 10 MG/5ML	G			0.31010	6/20/2016	
Nutritional Supplement Liquid**	G			0.03000	2/1/2013	
Nystatin Cream 100000 Unit/GM	G		0.78113	0.28476	6/1/2018	
Nystatin Oint 100000 Unit/GM	G		0.55733	0.47311	6/1/2018	
Nystatin Susp 100000 Unit/ML	G			0.05914	4/1/2017	
Nystatin Tab 500000 Unit	G			0.37950	6/1/2017	
Nystatin Topical Powder	G			0.79455	12/1/2016	
Nystatin-Triamcinolone Cream 100000-0.1 Unit/GM-%	G		4.36918	1.63402	6/1/2018	
Nystatin-Triamcinolone Oint 100000-0.1 Unit/GM-%	G			0.09750	1/6/2016	
Obinutuzumab Soln for IV Infusion 1000 MG/40ML (25 MG/ML)	B			143.90789	1/1/2017	
Ocriplasmin Intravitreal Inj 0.5 MG/0.2ML (2.5 MG/ML)	B			16392.50000	5/25/2016	
Octreotide Acetate For IM Inj Kit 30 MG	B			6086.69544	1/3/2018	
Octreotide Acetate Inj 1000 MCG/ML (1 MG/ML)	B			271.26226	1/5/2016	
Octreotide Acetate Inj 1000 MCG/ML (1 MG/ML)	G			72.80000	6/1/2010	
Octreotide Acetate Inj 200 MCG/ML (0.2 MG/ML)	B			55.12860	1/5/2016	
Octreotide Acetate Inj 200 MCG/ML (0.2 MG/ML)	G			12.40000	11/21/2011	
Octreotide Acetate Inj 50 MCG/ML (0.05 MG/ML)	B			13.78381	1/5/2016	
Octreotide Acetate Inj 50 MCG/ML (0.05 MG/ML)	G			5.72000	9/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Octreotide Acetate Inj 500 MCG/ML (0.5 MG/ML)	B			128.96042	1/5/2016	
Octreotide Acetate Inj 500 MCG/ML (0.5 MG/ML)	G			21.45000	9/1/2010	
Ofloxacin Ophth Soln 0.3%	G			2.31667	4/1/2018	
Ofloxacin Otic Soln 0.3%	G		7.75450	4.48765	6/1/2018	
Ofloxacin Tab 200 MG	G			2.47300	9/1/2010	
Ofloxacin Tab 300 MG	G			2.72700	9/1/2010	
Ofloxacin Tab 400 MG	G			2.98400	12/1/2010	
Olanzapine For IM Inj 10 MG	G			34.41570	1/1/2015	
Olanzapine Orally Disintegrating Tab 10 MG	G		1.13717	0.34400	6/1/2018	
Olanzapine Orally Disintegrating Tab 15 MG	G		1.32800	0.74833	6/1/2018	
Olanzapine Orally Disintegrating Tab 20 MG	G		1.49000	0.61067	6/1/2018	
Olanzapine Orally Disintegrating Tab 5 MG	G			0.27200	3/1/2018	
Olanzapine Tab 10 MG	G			0.16420	9/1/2017	
Olanzapine Tab 15 MG	G			0.15220	10/1/2017	
Olanzapine Tab 2.5 MG	G			0.07267	3/1/2018	
Olanzapine Tab 20 MG	G			0.26133	1/1/2018	
Olanzapine Tab 5 MG	G			0.09611	9/1/2017	
Olanzapine Tab 7.5 MG	G		0.17967	0.13867	6/1/2018	
Olanzapine-Fluoxetine HCl Cap 6-25 MG	G			10.74475	2/1/2014	
Olanzapine-Fluoxetine HCl Cap 6-50 MG	G			9.54467	4/1/2017	
Olmesartan Medoxomil Tab 20 MG	G			0.02211	1/1/2018	
Olmesartan Medoxomil Tab 40 MG	G			0.18067	9/1/2017	
Olmesartan Medoxomil Tab 5 MG	G			0.04767	10/1/2017	
Olmesartan Medoxomil-Hydrochlorothiazide Tab 20-12.5 MG	G			0.10567	3/1/2018	
Olmesartan Medoxomil-Hydrochlorothiazide Tab 40-12.5 MG	G			0.21033	2/1/2018	
Olmesartan Medoxomil-Hydrochlorothiazide Tab 40-25 MG	G			0.24078	1/1/2018	
Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-10-25 MG	G		3.11667	1.91000	6/1/2018	
Olmesartan-Amlodipine-Hydrochlorothiazide Tab 40-5-25 MG	G			3.23450	4/1/2017	
Olopatadine HCl Nasal Soln 0.6%	G			4.01000	9/1/2017	
Olopatadine HCl Ophth Soln 0.1% (Base Equivalent)	G		4.51600	3.49425	6/1/2018	
Olopatadine HCl Ophth Soln 0.2% (Base Equivalent)	G		41.13200	14.55806	6/1/2018	
Omega-3-acid Ethyl Esters Cap 1 GM	G			0.33750	6/1/2017	
Omeprazole Cap Delayed Release 10 MG	G			0.11633	9/1/2017	
Omeprazole Cap Delayed Release 20 MG	G			0.04290	4/1/2017	
Omeprazole Cap Delayed Release 40 MG	G			0.07110	4/1/2018	
Omeprazole Delayed Release Tab 20 MG	G			0.47857	9/1/2017	
Omeprazole-Sodium Bicarbonate Cap 20-1100 MG	G			5.38045	8/4/2010	
Omeprazole-Sodium Bicarbonate Cap 40-1100 MG	G			5.38045	8/4/2010	
Ondansetron HCl Inj 4 MG/2ML (2 MG/ML)	G			0.26000	7/1/2013	
Ondansetron HCl Inj 40 MG/20ML (2 MG/ML)	G			0.10075	1/1/2012	
Ondansetron HCl Oral Soln 4 MG/5ML	G			0.28000	3/1/2018	
Ondansetron HCl Tab 24 MG	G			7.02000	1/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Ondansetron HCl Tab 4 MG	G			0.09463	9/1/2017	
Ondansetron HCl Tab 8 MG	G			0.08367	10/1/2017	
Ondansetron Orally Disintegrating Tab 4 MG	G			0.24933	10/1/2017	
Ondansetron Orally Disintegrating Tab 8 MG	G			0.32500	1/1/2018	
Opium Tincture 1% (10 MG/ML) (Morphine Equiv)	G			2.38890	3/1/2018	
Oral Electrolyte Solution***	G			0.00560	1/5/2011	
Oral Vehicles***	B			0.00381	11/1/2013	
Orphenadrine Citrate Tab ER 12HR 100 MG	G			0.18230	10/1/2017	
Orphenadrine w/ Aspirin & Caffeine Tab 50-770-60 MG	G			1.08430	6/1/2006	
Oseltamivir Phosphate Cap 30 MG (Base Equiv)	G			7.13117	3/1/2018	
Oseltamivir Phosphate Cap 75 MG (Base Equiv)	G		8.34687	7.72180	6/1/2018	
Oseltamivir Phosphate For Susp 6 MG/ML (Base Equiv)	G			1.42708	4/1/2018	
Oxaliplatin For IV Inj 100 MG	G			1607.58000	8/4/2010	
Oxaliplatin For IV Inj 50 MG	G			772.20000	8/4/2010	
Oxaliplatin IV Soln 100 MG/20ML	G			77.66590	8/4/2010	
Oxaliplatin IV Soln 50 MG/10ML	G			77.66590	8/4/2010	
Oxaprozin Tab 600 MG	G			1.81265	4/1/2017	
Oxazepam Cap 10 MG	G			0.21366	3/1/2011	
Oxazepam Cap 15 MG	G			0.97855	1/7/2014	
Oxazepam Cap 30 MG	G			1.06925	1/1/2010	
Oxcarbazepine Susp 300 MG/5ML (60 MG/ML)	G			0.34844	2/24/2018	
Oxcarbazepine Tab 150 MG	G			0.10790	4/1/2018	
Oxcarbazepine Tab 300 MG	G			0.16567	11/1/2017	
Oxcarbazepine Tab 600 MG	G			0.27790	6/1/2017	
Oxybutynin Chloride Syrup 5 MG/5ML	G			0.02410	3/1/2011	
Oxybutynin Chloride Tab 5 MG	G			0.19000	1/1/2018	
Oxybutynin Chloride Tab ER 24HR 10 MG	G		0.40600	0.34824	6/1/2018	
Oxybutynin Chloride Tab ER 24HR 15 MG	G			0.34100	10/1/2017	
Oxybutynin Chloride Tab ER 24HR 5 MG	G			0.35660	6/1/2017	
Oxycodone HCl Cap 5 MG	G			0.13100	1/5/2011	
Oxycodone HCl Conc 100 MG/5ML (20 MG/ML)	G		4.58107	1.30667	6/1/2018	
Oxycodone HCl Soln 5 MG/5ML	G			0.19731	4/1/2017	
Oxycodone HCl Tab 10 MG	G			0.14490	6/1/2017	
Oxycodone HCl Tab 15 MG	G			0.11260	3/1/2018	
Oxycodone HCl Tab 20 MG	G			0.19825	9/1/2017	
Oxycodone HCl Tab 30 MG	G			0.25900	6/1/2017	
Oxycodone HCl Tab 5 MG	G			0.07850	5/1/2017	
Oxycodone HCl Tab ER 12HR Deter 10 MG	G			2.25750	11/1/2017	
Oxycodone HCl Tab ER 12HR Deter 20 MG	G			4.51409	5/1/2015	
Oxycodone HCl Tab ER 12HR Deter 30 MG	G			6.12361	4/1/2017	
Oxycodone HCl Tab ER 12HR Deter 40 MG	G			7.46624	1/1/2018	
Oxycodone HCl Tab ER 12HR Deter 80 MG	G			13.00370	1/1/2018	
Oxycodone w/ Acetaminophen Cap 5-500 MG	G			0.09063	8/1/2011	
Oxycodone w/ Acetaminophen Tab 10-325 MG	G			0.31324	3/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Oxycodone w/ Acetaminophen Tab 10-650 MG	G			0.37149	7/1/2013	
Oxycodone w/ Acetaminophen Tab 5-325 MG	G			0.10393	2/1/2017	
Oxycodone w/ Acetaminophen Tab 7.5-325 MG	G			0.20010	2/1/2018	
Oxycodone w/ Acetaminophen Tab 7.5-500 MG	G			0.39555	3/1/2011	
Oxycodone-Aspirin Tab 4.8355-325 MG	G			0.52840	4/1/2014	
Oxymorphone HCl Tab 10 MG	G		1.94922	1.86200	6/1/2018	
Oxymorphone HCl Tab 5 MG	G			1.36790	12/1/2017	
Oxymorphone HCl Tab ER 12HR 10 MG	G			2.45323	1/1/2015	
Oxymorphone HCl Tab ER 12HR 15 MG	G			3.46650	7/1/2017	
Oxymorphone HCl Tab ER 12HR 20 MG	G			4.79157	4/1/2017	
Oxymorphone HCl Tab ER 12HR 30 MG	G			6.61165	4/1/2017	
Oxymorphone HCl Tab ER 12HR 7.5 MG	G			2.29390	9/1/2011	
Paclitaxel IV Conc 100 MG/16.7ML (6 MG/ML)	G			1.69423	4/1/2013	
Paclitaxel IV Conc 150 MG/25ML (6 MG/ML)	G			1.69423	4/1/2013	
Paclitaxel IV Conc 30 MG/5ML (6 MG/ML)	G			1.69423	4/1/2013	
Paclitaxel IV Conc 300 MG/50ML (6 MG/ML)	G			1.69423	4/1/2013	
Paliperidone Palmitate IM Extend-Release Susp 117 MG/0.75ML	B			1562.28867	1/14/2017	
Paliperidone Palmitate IM Extended-Release Susp 156 MG/ML	B			1562.35100	1/14/2017	
Paliperidone Palmitate IM Extended-Release Susp 234 MG/1.5ML	B		1562.31133	1569.96600	5/23/2018	
Paliperidone Palmitate IM Extended-Release Susp 78 MG/0.5ML	B			1562.26600	1/14/2017	
Paliperidone Tab ER 24HR 1.5 MG	B			36.77530	1/11/2018	
Paliperidone Tab ER 24HR 3 MG	B			37.21188	4/18/2016	
Paliperidone Tab ER 24HR 3 MG	G		11.03167	9.76300	6/1/2018	
Paliperidone Tab ER 24HR 6 MG	G			8.55193	12/1/2017	
Paliperidone Tab ER 24HR 9 MG	B			51.87520	4/4/2017	
Paliperidone Tab ER 24HR 9 MG	G			15.95867	1/1/2018	
Palivizumab IM Soln 100 MG/ML	B			2817.90312	7/1/2017	
Palivizumab IM Soln 50 MG/0.5ML	B			2984.61360	7/1/2017	
Pantoprazole Sodium EC Tab 20 MG (Base Equiv)	G			0.04411	2/1/2018	
Pantoprazole Sodium EC Tab 40 MG (Base Equiv)	G			0.04722	6/1/2017	
Paricalcitol Cap 1 MCG	G			1.91567	9/1/2017	
Paricalcitol Cap 2 MCG	G			8.16667	4/1/2017	
Paroxetine HCl Tab 10 MG	G			0.05431	1/1/2018	
Paroxetine HCl Tab 20 MG	G			0.05879	8/1/2017	
Paroxetine HCl Tab 30 MG	G			0.08967	10/1/2017	
Paroxetine HCl Tab 40 MG	G			0.07622	8/1/2017	
Paroxetine HCl Tab ER 24HR 12.5 MG	G		3.13075	2.25134	6/1/2018	
Paroxetine HCl Tab ER 24HR 25 MG	G			2.26500	12/1/2017	
Paroxetine HCl Tab ER 24HR 37.5 MG	G		4.09933	1.70433	6/1/2018	
Pediatric Multiple Vitamins w/ FI-Fe Drops 0.25-10 MG/ML**	G			0.11440	1/5/2011	
Pediatric Multiple Vitamins w/ Fluoride Chew Tab 0.25 MG***	G			0.04778	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Pediatric Multiple Vitamins w/ Fluoride Chew Tab 0.5 MG***	G			0.08078	4/1/2017	
Pediatric Multiple Vitamins w/ Fluoride Chew Tab 1 MG***	G			0.05065	1/1/2018	
Pediatric Multiple Vitamins w/ Fluoride Soln 0.25 MG/ML***	G			0.18823	4/1/2017	
Pediatric Multiple Vitamins w/ Fluoride Soln 0.5 MG/ML***	G			0.10270	1/5/2011	
Pediatric Multiple Vitamins w/ Iron Chew Tab 15 MG**	G			0.04251	1/5/2011	
Pediatric Multiple Vitamins w/ Iron Drops 10 MG/ML**	G			0.08632	1/5/2011	
Pediatric Vitamins ACD Fluoride & Fe Drops 0.25-10 MG/ML***	G			0.12480	6/1/2010	
Pediatric Vitamins ACD w/ Fluoride Soln 0.25 MG/ML***	G		0.16700	0.10820	6/1/2018	
PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate For Soln 236 GM	G			0.00353	1/1/2012	
PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate For Soln 240 GM	G			0.00000	10/1/2013	
PEG 3350-KCl-Sod Bicarb-NaCl For Soln 420 GM	G			0.00494	12/1/2010	
Pegfilgrastim Soln Prefilled Syringe 6 MG/0.6ML	B			10343.55960	1/1/2018	
Pegfilgrastim Soln Prefilled Syringe Kit 6 MG/0.6ML	B			10343.55960	1/1/2018	
Peginterferon alfa-2a Inj Kit 180 MCG/0.5ML	B			2617.58350	12/19/2012	
Peginterferon alfa-2b For Inj Kit 150 MCG/0.5ML	B			867.21720	8/1/2014	
Peginterferon Beta-1a Soln Pen-inj 63 & 94 MCG/0.5ML Pack	B			6762.79020	1/1/2018	
Peginterferon Beta-1a Soln Pen-injector 125 MCG/0.5ML	B			6762.79020	1/1/2018	
Peginterferon Beta-1a Soln Pref Syr 63 & 94 MCG/0.5ML Pack	B			6762.79020	1/1/2018	
Peginterferon Beta-1a Soln Prefilled Syringe 125 MCG/0.5ML	B			6762.79020	1/1/2018	
Penicillin G Potassium For Inj 5000000 Unit	G			8.65150	11/1/2010	
Penicillin V Potassium For Soln 250 MG/5ML	G			0.02409	1/1/2009	
Penicillin V Potassium Tab 250 MG	G			0.07000	1/1/2018	
Penicillin V Potassium Tab 500 MG	G			0.09173	12/1/2017	
Pentazocine w/ Naloxone Tab 50-0.5 MG	G			1.07057	1/1/2009	
Pentosan Polysulfate Sodium Caps 100 MG	B			8.26082	2/9/2017	
Pentoxifylline Tab ER 400 MG	G			0.10604	1/1/2009	
Permethrin Cream 5%	G		1.10300	0.59477	6/1/2018	
Permethrin Creme Rinse 1%	G			0.18206	2/1/2014	
Perphenazine Tab 16 MG	G			1.39240	1/1/2013	
Perphenazine Tab 2 MG	G			0.21581	1/1/2009	
Perphenazine Tab 4 MG	G		0.79950	0.75200	6/1/2018	
Perphenazine Tab 8 MG	G		0.69210	0.73590	6/6/2018	
Perphenazine-Amitriptyline Tab 2-25 MG	G			0.57972	9/1/2012	
Perphenazine-Amitriptyline Tab 4-50 MG	G			2.47290	5/1/2018	
Phenazopyridine HCl Tab 100 MG	G			0.39729	4/1/2014	
Phenazopyridine HCl Tab 200 MG	G			0.12480	4/1/2011	
Phenelzine Sulfate Tab 15 MG	G			0.55133	4/1/2018	
Phenobarbital Elixir 20 MG/5ML	G			0.11977	11/1/2017	
Phenobarbital Tab 16.2 MG	G			0.17470	8/1/2013	
Phenobarbital Tab 30 MG	G			0.24228	8/1/2016	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Phenobarbital Tab 32.4 MG	G			0.21000	8/16/2013	
Phenobarbital Tab 64.8 MG	G			0.57540	6/1/2017	
Phenobarbital Tab 97.2 MG	G			0.45461	2/5/2014	
Phenol Liquid 1.4%	G			0.01127	4/1/2017	
Phentermine HCl Cap 15 MG	G			0.16000	10/1/2017	
Phentermine HCl Cap 30 MG	G			0.03575	1/1/2010	
Phentermine HCl Tab 37.5 MG	G			0.06320	5/1/2017	
Phenylephrine-Brompheniramine-DM Elixir 2.5-1-5 MG/5ML	G			0.01737	4/1/2017	
Phenylephrine-Brompheniramine-DM Liquid 2.5-1-5 MG/5ML	G			0.01737	4/1/2017	
Phenylephrine-Chlorphen-DM Syrup 12.5-4-15 MG/5ML	G			0.03188	1/5/2011	
Phenytoin Chew Tab 50 MG	G			0.31060	10/1/2017	
Phenytoin Sodium Extended Cap 100 MG	G			0.22293	9/1/2017	
Phenytoin Sodium Extended Cap 300 MG	G			1.06375	1/1/2013	
Phenytoin Susp 125 MG/5ML	G			0.06937	4/1/2017	
Pilocarpine HCl Opth Soln 2%	G		4.92676	4.59782	6/1/2018	
Pilocarpine HCl Tab 5 MG	G			0.38580	10/1/2017	
Pimozide Tab 1 MG	B			1.59202	1/1/2014	
Pimozide Tab 1 MG	G			1.27510	9/1/2017	
Pindolol Tab 10 MG	G			0.13190	6/1/2006	
Pindolol Tab 5 MG	G			0.10960	6/1/2006	
Pioglitazone HCl Tab 15 MG (Base Equiv)	G			0.11086	4/1/2017	
Pioglitazone HCl Tab 30 MG (Base Equiv)	G			0.11644	12/1/2017	
Pioglitazone HCl Tab 45 MG (Base Equiv)	G		0.14000	0.08233	6/1/2018	
Pioglitazone HCl-Metformin HCl Tab 15-850 MG	G			1.15650	11/1/2017	
Piroxicam Cap 10 MG	G			0.70392	4/1/2017	
Piroxicam Cap 20 MG	G			1.23780	4/1/2017	
Plerixafor Subcutaneous Inj 24 MG/1.2ML (20 MG/ML)	B			6337.17450	1/5/2018	
Podofilox Soln 0.5%	G		14.12000	13.16362	6/1/2018	
Polyethylene Glycol 3350 Oral Packet	G			1.36863	4/1/2017	
Polyethylene Glycol 3350 Oral Powder	G			0.02018	11/1/2017	
Polyethylene Glycol-Propylene Glycol Opth Soln 0.4-0.3%	G			0.22800	4/1/2017	
Polymyxin B-Trimethoprim Opth Soln 10000 Unit/ML-0.1%	G			0.38800	5/1/2017	
Polysaccharide Iron Complex Cap 150 MG (Iron Equivalent)	G		0.13494	0.10125	6/1/2018	
Polyvinyl Alcohol Opth Soln 1.4%	G			0.09600	10/1/2017	
Pomalidomide Cap 1 MG	B			688.93718	4/4/2017	
Pomalidomide Cap 2 MG	B			688.93718	4/4/2017	
Pomalidomide Cap 3 MG	B			688.93718	4/4/2017	
Pomalidomide Cap 4 MG	B			688.93718	4/4/2017	
Pot Bicarbonate & Chloride Effer Tab 25 mEq	G			1.14000	9/1/2017	
Pot Phos Monobasic w/Sod Phos Di & Monobas Tab 155-852-130MG	G			0.17733	10/1/2013	
Potassium Bicarbonate Effer Tab 25 mEq	G			0.18933	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Potassium Chloride Cap ER 10 mEq	G			0.09794	10/1/2017	
Potassium Chloride Cap ER 8 mEq	G			0.27517	4/1/2017	
Potassium Chloride Inj 2 mEq/ML	G			0.03240	7/1/2013	
Potassium Chloride Microencapsulated Crys ER Tab 10 mEq	G			0.22600	1/1/2018	
Potassium Chloride Microencapsulated Crys ER Tab 20 mEq	G			0.18769	6/1/2017	
Potassium Chloride Oral Liq 10%	G			0.27854	8/20/2015	
Potassium Chloride Oral Liq 20%	G			0.00871	3/1/2011	
Potassium Chloride Oral Soln 10% (20 MEQ/15ML)	G			0.40452	1/1/2018	
Potassium Chloride Oral Soln 20% (40 MEQ/15ML)	G			0.79564	9/1/2017	
Potassium Chloride Powder Packet 20 mEq	G			5.09400	12/23/2017	
Potassium Chloride Tab ER 10 mEq	G			0.18004	4/1/2017	
Potassium Chloride Tab ER 20 mEq (1500 MG)	G			0.25374	4/1/2017	
Potassium Chloride Tab ER 8 mEq (600 MG)	G			0.08420	1/28/2008	
Potassium Citrate Tab ER 10 MEQ (1080 MG)	G			0.91575	2/1/2017	
Potassium Citrate Tab ER 15 MEQ (1620 MG)	G			1.59000	4/1/2017	
Potassium Citrate Tab ER 5 MEQ (540 MG)	G			0.37687	4/1/2011	
Pramipexole Dihydrochloride Tab 0.125 MG	G			0.03978	10/1/2017	
Pramipexole Dihydrochloride Tab 0.25 MG	G			0.04211	11/1/2017	
Pramipexole Dihydrochloride Tab 0.5 MG	G			0.03839	4/1/2017	
Pramipexole Dihydrochloride Tab 0.75 MG	G			0.21594	4/1/2011	
Pramipexole Dihydrochloride Tab 1 MG	G			0.05389	5/1/2017	
Pramipexole Dihydrochloride Tab 1.5 MG	G			0.05506	4/1/2017	
Pramipexole Dihydrochloride Tab ER 24HR 0.75 MG	G			10.61706	4/1/2017	
Prasugrel HCl Tab 10 MG (Base Equiv)	G			0.70000	5/1/2018	
Prasugrel HCl Tab 5 MG (Base Equiv)	G			0.63000	5/1/2018	
Pravastatin Sodium Tab 10 MG	G			0.09535	9/1/2011	
Pravastatin Sodium Tab 20 MG	G			0.07688	2/1/2018	
Pravastatin Sodium Tab 40 MG	G			0.06651	2/1/2018	
Pravastatin Sodium Tab 80 MG	G			0.11322	1/1/2018	
Prazosin HCl Cap 1 MG	G			0.20622	9/1/2017	
Prazosin HCl Cap 2 MG	G			0.41330	10/1/2017	
Prazosin HCl Cap 5 MG	G			0.72700	9/1/2017	
Prednisolone Acetate Ophth Susp 1%	G			6.44450	5/1/2018	
Prednisolone Sod Phosph Oral Soln 6.7 MG/5ML (5 MG/5ML Base)	G			0.63195	2/1/2014	
Prednisolone Sod Phosphate Oral Soln 15 MG/5ML (Base Equiv)	G			0.05667	9/1/2017	
Prednisolone Sodium Phosphate Ophth Soln 1%	G			1.13700	9/1/2011	
Prednisolone Syrup 15 MG/5ML (USP Solution Equivalent)	G			0.03578	1/1/2009	
Prednisone Oral Soln 5 MG/5ML	G			0.18413	4/1/2017	
Prednisone Tab 1 MG	G			0.08970	5/1/2017	
Prednisone Tab 10 MG	G			0.02545	12/1/2010	
Prednisone Tab 2.5 MG	G			0.03438	8/1/2011	
Prednisone Tab 20 MG	G			0.11890	2/1/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Prednisone Tab 5 MG	G			0.06881	9/1/2017	
Prednisone Tab 50 MG	G			0.22660	4/1/2017	
Pregabalin Cap 150 MG	B			7.40180	2/9/2018	
Pregabalin Cap 200 MG	B			7.40183	3/5/2018	
Pregabalin Cap 75 MG	B			7.40183	1/26/2018	
Prenat MV & Min w/ L-Methylfolate-FA Chew Tab 0.6-0.4 MG***	B			0.17500	7/1/2013	
Prenat Vit-Fe Poly Cmplx-Fe Heme Poly-FA Tab 22-6-1 MG***	B			0.17500	7/1/2013	
Prenat Vit-Fe Poly Cmplx-Fe Heme Poly-FA Tab 28-6-1 MG***	B			0.17500	7/1/2013	
Prenat w/ B2-B6-B12-D3-Methylfol-FA Chew Tab 0.6-0.4 MG**	B			0.17500	7/1/2013	
Prenat w/ Fe Cbn-Fe Bisglyc-FA-Fish Oil Cap 35-5-1.2 MG**	B			0.17500	7/1/2013	
Prenat w/ Fe Fum-FA Tab 28-0.8 MG & Omega 3 Cap 440 MG Pak*	B			0.17500	7/1/2013	
Prenat w/ Fe Poly Cmplx-Fe Asp-Fe Gly-FA Tab & DHA Cap Pak*	B			0.17500	7/1/2013	
Prenat w/ Iron Cbn-Fe Asp Glyc-FA-Omega Cap 30-10-1-200 MG*	B			0.17500	7/1/2013	
Prenat w/Fe Fum-FA Tab 28-0.8 MG &Omega 3 Cap DR 656 MG Pk*	B			0.17500	7/1/2013	
Prenat w/Fe Fum-L Methylfolate-FA-DHA Cap 27-1.13-0.4 MG***	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 24-1 & Omega Cap 272 MG***	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 25-1 & Omega Cap 400 MG***	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 25-1 & Omega Cap DR 400MG*	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 25-1 & Omega Cap DR 430MG*	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 26-1 & Omega Cap 278 MG***	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 27-1 & Omega Cap DR 300MG*	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 27-1 & Omega Cap DR 374MG*	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 27-1 & Omega Cap DR 380MG*	B			0.17500	7/1/2013	
Prenat w/Fe Poly-Na Fered-FA Tab 27-1 & Omega Cap DR 430MG*	B			0.17500	7/1/2013	
Prenat w/FeCbn-FA-DSS Tab 29-1 MG & Omega 3 Cap 387 MG Pak*	B			0.17500	7/1/2013	
Prenat w/o A FeFum-FA Tab 27-1 MG & Fish Oil Chew Cap Pak**	B			0.17500	7/1/2013	
Prenat w/o A w/ Fe Asp Gly-FA-DSS-Omega Ther Pak 30-1 MG***	B			0.17500	7/1/2013	
Prenat w/o A w/ Fe Bisgly-FA-DHA Tab & DHA Cap 300 MG Pak*	B			0.17500	7/1/2013	
Prenat w/o A w/ Fe Bisglyc-FA Tab 32-1 MG & Omega Cap Pack*	B			0.17500	7/1/2013	
Prenat w/o A w/ Fe Cbnyl-FA Tab 20-1 MG & Vit B6 Tab Pak*	B			0.17500	7/1/2013	
Prenat w/o A w/ Fe Chelate-L Methylfol-FA Tab & DHA Cap Pk*	B			0.17500	7/1/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Prenat w/o A w/ Fe Fumerate-Methylfolate-FA-Omega 3 Cap***	B			0.17500	7/1/2013	
Prenat w/o A w/FeAsp-Methylf-FA-Omeg Cap 29-0.6-0.4-340 MG*	B			0.17500	3/20/2014	
Prenat w/o A w/FeCbn-FeAspGlyc-FA-Omega Cap 35-5-1-200 MG**	B			0.17500	7/1/2013	
Prenat w/o A w/FeCbn-FeGI-DSS-FA Tab & DHA Cap 250 MG Pack*	B			0.17500	7/1/2013	
Prenat w/o A w/FeCbn-FeGI-DSS-FA Tab & DHA Cap 300 MG Pack*	B			0.17500	7/1/2013	
Prenat w/o A w/FeCbn-FeGI-DSS-FA Tab 90 &DHA Cap 300MG Pak*	B			0.17500	7/1/2013	
Prenat w/o A w/FeCbn-FeGlu-FA Tab 20-1 MG & Vit B6 Tab Pak*	B			0.17500	7/1/2013	
Prenat w/o A w/FeCbn-Methylf-FA-DHA Cap 29-0.6-0.4-350 MG**	B			0.17500	7/1/2013	
Prenat w/o A w/FeFum-Methfol-FA-DHA Cap 27-0.6-0.4-300 MG**	B			0.17500	7/1/2013	
Prenat w/o A w/FeFum-Methfol-FA-DHA Cap 28-0.6-0.4-300 MG**	B			0.17500	7/1/2013	
Prenat w/o A w/FeFum-Methfol-FA-DHA Cap 30-0.6-0.4-200 MG**	B			0.17500	7/1/2013	
Prenat w/o A w/FeFum-Methylfol-FA-Omeegas Cap 27-1.53 MG***	B			0.17500	7/1/2013	
Prenat w/o A w/FeFum-Methylfol-Omeegas Cap 27-1.13 MG***	B			0.17500	7/1/2013	
Prenat w/o Vit A w/ Fe Fum-DSS-FA-DHA Cap 29-1.25-337.5 MG*	B			0.17500	7/1/2013	
Prenat-Fe Bis-Fe Prot Succ-FA-Ca Tab & Omega 3 Cap 250 Pk**	B			0.17500	7/1/2013	
Prenat-Fe Bis-Fe Prot Succ-FA-Ca Tab & Omega 3 Cap 400 Pk**	B			0.17500	7/1/2013	
Prenat-Fe Bis-Fe Prot Succ-FA-Ca Tab & Omega 3 Cap 430 Pk**	B			0.17500	7/1/2013	
Prenat-Fe Bis-Fe Prot Succ-FA-Ca Tab & Omega Cap DR 400 Pk*	B			0.17500	7/1/2013	
Prenat-Fe Bis-Fe Prot Succ-FA-Ca Tab & Omega Cap DR 430 Pk*	B			0.17500	7/1/2013	
Prenat-Fe Poly Cmplx-Fe Heme Poly-FA Tab & Omega 3 Cap Pck*	B			0.17500	7/1/2013	
Prenat-Fe Poly Cmplx-Fe Heme Poly-FA-DHA Cap 22-6-1-200 MG*	B			0.17500	7/1/2013	
Prenat-FePoly-NaFered-FA Tab 13-13-1 & Omega Cap DR 374 MG*	B			0.17500	7/1/2013	
Prenatal Multivitamins & Minerals w/ Iron & FA Cap 1 MG***	B			0.17500	7/1/2013	
Prenatal Multivitamins & Minerals w/Iron & FA Tab 0.1 MG***	B			0.17500	7/1/2013	
Prenatal Multivitamins & Minerals w/Iron & FA Tab 0.8 MG***	B			0.17500	7/1/2013	
Prenatal MV & Min w/Fe Carbonyl-FA-DHA Tab 15-0.5-50 MG***	B			0.17500	7/1/2013	
Prenatal MV & Min w/Fe Carbonyl-FA-DHA Tab 7-0.4-100 MG***	B			0.17500	7/1/2013	
Prenatal MV & Min w/Fe Fum-FA-DHA Cap 27-0.8-250 MG***	B			0.17500	7/1/2013	
Prenatal MV & Min w/Fe Fum-FA-DHA Cap 30-0.975-200 MG***	B			0.17500	7/1/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Prenatal MV w/ Fe Polysac Cmplx-FA-DHA Cap 27-1-200 MG***	B			0.17500	7/1/2013	
Prenatal MV w/ Fe Polysac Cmplx-FA-DHA Cap 29-1-200 MG***	B			0.17500	7/1/2013	
Prenatal MV w/Fe Carbonyl-DSS-FA-DHA Tab 15-25-0.5-50 MG***	B			0.17500	7/1/2013	
Prenatal MV w/Fe Fum-FA Tab 28-1 MG & DHA Cap 250 MG Pack *	B			0.17500	7/1/2013	
Prenatal MV w/Fe Fum-FA Tab 65-1 MG & DHA Cap 250 MG Pack *	B			0.17500	7/1/2013	
Prenatal MV w/Fe Poly-FA Chw 29-1 MG & DHA Cap 250 MG Pak *	B			0.17500	7/1/2013	
Prenatal Vit & Min w/ FA-Fish Oil Chew Tab 0.4-113.5 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ DSS-Fe Fumarate-FA Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ DSS-Fe Fumarate-FA Tab ER 90-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ DSS-Iron Carbonyl-FA Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ DSS-Iron Carbonyl-FA Tab 90-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ DSS-Iron Carbonyl-FA Tab DR 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Bisglycinate Chelate-FA Tab 27-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Bisglycinate Chelate-FA Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Cbn-Fe Asp Glyc-FA Tab 30-20-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Cbn-Fe Asp Glyc-FA-Omega 3 Cap 27-1MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-FA-Omega 3 Cap 27-0.8-228 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-FA-Omega 3 Cap 28-1-200 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-FA-Omega 3 Cap 28-1-215.8 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-FA-Omega 3 Cap 28-1.25-200 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-Fe Bisglycin-FA Chew Tab 28-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-Fe Bisglycinate-FA Tab 25-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-Methylfolate-FA Tab 26-0.6-0.4 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fum-Methylfolate-FA Tab 27-0.6-0.4 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Cap 13.5-0.4 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Chew Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 14-0.4 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 15-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 17-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 25-0.8 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 27-0.8 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 27-1 MG***	B			0.17500	10/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 28-0.8 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 28-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 29-1 MG***	B			0.17500	7/1/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Prenatal Vit w/ Fe Fumarate-FA Tab 6.75-0.2 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 60-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 65-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Fumarate-FA Tab 75-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Gluconate-FA Tab 30-0.4 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Gluconate-FA Tab 30-0.8 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Fe Polysac Cmplx-FA Chew Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Iron Carbonyl-FA Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Iron Carbonyl-FA Tab 29-1 MG***	B	VOL-TAB RX TAB (13811051690)		0.51210	6/25/2014	NDC-specific SMAC
Prenatal Vit w/ Iron Carbonyl-FA Tab 50-1.25 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Iron Carbonyl-Fe Gluc-FA Tab 27-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Sel-Fe Fumarate-FA Tab 27-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/ Sel-Fe Fumarate-FA Tab 9-0.5 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/o Vit A w/ Fe Bisglyc-FA Tab 30-0.975 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/o Vit A w/ Fe Bisglycinate-FA Tab 32-1 MG***	B			0.17500	7/1/2013	
Prenatal Vit w/Poly Fe-FA-Fish Oil Tab DR 13.5-0.5-700 MG**	B			0.17500	7/1/2013	
Prenatal w/ Calcium Carbonate-B6-B12-FA Tab 1 MG***	B			0.17500	7/1/2013	
Prenatal w/ Calcium-Vit B6-FA-Ginger Tab 1.2 MG**	B			0.17500	7/1/2013	
Prenatal w/ Calcium-Vit B6-FA-Ginger Tab 1.22 MG**	B			0.17500	7/1/2013	
Prenatal w/ Sod Feredetate-FA Tab 30-1 & Omega 3 Cap DR***	B			0.17500	7/1/2013	
Prenatal w/Fe Cbnyl-Fe Asp Glyc-FA-DSS-Omega Cap 20 -7-1 MG*	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-FA Tab 27-0.8 MG & DHA Cap 200 MG Pack *	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-FA Tab 27-1 MG & Vit-DHA Cap 300 MG Pak *	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-FA Tab 28-0.8 MG & DHA Cap 200 MG Pack*	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-FA Tab 28-0.975 MG & DHA Cap 200 MG Pack*	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-FA Tab DR 27-1 MG & DHA Cap 250 MG Pack *	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-Fe Poly -FA-Omega 3 Cap 53.5-38-1 MG***	B			0.17500	7/1/2013	
Prenatal w/Fe Fum-Iron Polysacch Cmplx -FA-Omega 3 Cap***	B			0.17500	7/1/2013	
Prenatal w/Fe Fumarate-FA-DSS-Fish Oil Cap 27-1-500 MG***	B			0.17500	7/1/2013	
Prenatal w/Fe Fumarate-FA-DSS-Fish Oil Cap 27-1-710 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Carbonyl-FA Tab 29-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Cbn-Fe Fum-FA Tab 60-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fum-FA Tab Chew 28-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fum-FA Tab Chew 29-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fum-FA Tab Chew 40-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fumarate-FA Cap 106.5-1 MG***	B			0.17500	7/1/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Prenatal w/o A Vit w/ Fe Fumarate-FA Tab 30-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fumarate-FA Tab 9-0.267 MG***	B			0.17500	7/1/2013	
Prenatal w/o A Vit w/ Fe Fumarate-FA Tab DR 30-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/ Fe Carbonyl-Fe Gluc-DSS-FA Tab 27-1MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/Fe Cbn-DSS-FA-DHA Cap 27-1-250 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/Fe Cbn-DSS-FA-DHA Cap 28-1-250 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/Fe Cbn-DSS-FA-DHA Cap 29-1-265 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/Fe Fum-Fe Poly-FA Cap 130-92.4-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/Fe Fum-Fe Poly-FA Cap 162.115.2-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o A w/FeCbn-Fe Asp Glyc-FA-Fish Cap 40-10-1 MG*	B			0.17500	7/1/2013	
Prenatal w/o A w/FeCbn-Fe Asp Glyc-FA-Fish Cap 50-1-476 MG*	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Cbn-DSS-FA-DHA Cap 30-1-260 MG***	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-Doc-FA-DHA Cap 29-1.25-350 MG*	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-DSS-FA-DHA Cap 26-1.2-300 MG**	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-DSS-FA-DHA Cap 27-1.25-300 MG*	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-DSS-FA-DHA Cap 29-1.25-325 MG*	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-DSS-FA-DHA Cap 30-1.2-265 MG**	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-FA-Omega 3 Cap 27-1-250 MG***	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Fum-FA-Omega 3 Cap 28-1-250 MG***	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Polysac Cmplx-FA Cap 155-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/ Fe Polysac Cmplx-FA Cap 60-1 MG***	B			0.17500	7/1/2013	
Prenatal w/o Vit A w/Fe Fum-DSS-FA-DHA Cap 30-1.24-265 MG**	B			0.17500	7/1/2013	
Prenatal without A w/ Fe Asparto Gly-Doc-FA Tab 30-1MG***	B			0.17500	7/1/2013	
Prenatal without A w/ Fe Carbonyl-Docusate-FA Tab 90-1MG***	B			0.17500	7/1/2013	
Primidone Tab 250 MG	G			0.13772	4/1/2017	
Primidone Tab 50 MG	G			0.06000	9/1/2017	
Probenecid Tab 500 MG	G			0.37921	9/1/2011	
Prochlorperazine Maleate Tab 10 MG (Base Equivalent)	G			0.05200	1/1/2012	
Prochlorperazine Maleate Tab 5 MG (Base Equivalent)	G			0.04463	6/1/2012	
Prochlorperazine Suppos 25 MG	G			2.49000	8/1/2012	
Progesterone IM in Oil 50 MG/ML	G			1.55900	4/1/2018	
Progesterone Micronized Cap 100 MG	G			0.50270	2/1/2018	
Progesterone Micronized Cap 200 MG	G			1.01340	3/1/2018	
Progesterone Micronized Powder	G			0.37440	9/1/2011	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Progesterone Powder	G			0.37440	9/1/2011	
Promethazine & Phenylephrine Syrup 6.25-5 MG/5ML	G			0.01547	3/1/2011	
Promethazine HCl (Bulk) Crystals	G			0.40664	6/1/2010	
Promethazine HCl (Bulk) Powder	G			0.40664	6/1/2010	
Promethazine HCl Inj 25 MG/ML	G			1.09200	9/1/2011	
Promethazine HCl Inj 50 MG/ML	G			1.94342	7/1/2013	
Promethazine HCl Suppos 12.5 MG	G			8.29925	4/1/2017	
Promethazine HCl Suppos 25 MG	G			3.73917	10/1/2017	
Promethazine HCl Syrup 6.25 MG/5ML	G			0.01218	4/1/2017	
Promethazine HCl Tab 12.5 MG	G			0.04160	1/1/2018	
Promethazine HCl Tab 25 MG	G			0.03140	8/1/2017	
Promethazine HCl Tab 50 MG	G			0.17998	7/1/2014	
Promethazine w/ Codeine Syrup 6.25-10 MG/5ML	G			0.01853	1/1/2009	
Promethazine-DM Syrup 6.25-15 MG/5ML	G			0.01002	4/1/2017	
Promethazine-Phenylephrine-Codeine Syrup 6.25-5-10 MG/5ML	G			0.21814	10/1/2017	
Propafenone HCl Tab 150 MG	G			0.11450	9/1/2017	
Propafenone HCl Tab 225 MG	G			0.18555	4/1/2017	
Propafenone HCl Tab 300 MG	G			1.00328	9/1/2011	
Proparacaine HCl Ophth Soln 0.5%	G			0.42900	1/1/2010	
Propoxyphene HCl Cap 65 MG	G			0.18951	1/1/2009	
Propoxyphene-N w/ APAP Tab 100-650 MG	G			0.05426	1/5/2011	
Propranolol & Hydrochlorothiazide Tab 40-25 MG	G			0.08040	6/1/2006	
Propranolol & Hydrochlorothiazide Tab 80-25 MG	G			0.11800	6/1/2006	
Propranolol HCl Cap ER 24HR 120 MG	G			0.77990	1/1/2018	
Propranolol HCl Cap ER 24HR 160 MG	G			1.24163	4/1/2017	
Propranolol HCl Cap ER 24HR 60 MG	G			0.44990	3/1/2018	
Propranolol HCl Cap ER 24HR 80 MG	G		1.03870	0.89154	6/1/2018	
Propranolol HCl Oral Soln 20 MG/5ML	G			0.09186	9/1/2017	
Propranolol HCl Oral Soln 40 MG/5ML	G			0.17850	8/1/2016	
Propranolol HCl Tab 10 MG	G			0.12840	5/1/2017	
Propranolol HCl Tab 20 MG	G			0.15650	1/1/2018	
Propranolol HCl Tab 40 MG	G			0.14260	6/1/2017	
Propranolol HCl Tab 60 MG	G			0.55000	4/1/2017	
Propranolol HCl Tab 80 MG	G			0.05975	8/1/2011	
Propylthiouracil Tab 50 MG	G			0.43088	8/1/2013	
Protriptyline HCl Tab 10 MG	G			1.57340	9/1/2017	
Pseudoephed-Bromphen-DM Elixir 15-1-5 MG/5ML	G			0.01201	8/1/2011	
Pseudoephed-Bromphen-DM Syrup 30-2-10 MG/5ML	G			0.11860	12/1/2017	
Pseudoephedrine HCl Tab 30 MG	G			0.11268	8/1/2013	
Pseudoephedrine HCl Tab 60 MG	G			0.03220	4/1/2017	
Pseudoephedrine HCl Tab ER 12HR 120 MG	G			0.28600	4/1/2017	
Pseudoephedrine-Ibuprofen Susp 15-100 MG/5ML	G			0.04730	3/1/2009	
Pseudoephedrine-Ibuprofen Tab 30-200 MG	G			0.13975	1/1/2010	
Psyllium Powder 28.3%	G			0.03530	9/18/2013	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Psyllium Powder 30.9%	G			0.03530	9/18/2013	
Psyllium Powder 33%	G			0.03530	9/18/2013	
Psyllium Powder 48.57%	G			0.03530	9/18/2013	
Psyllium Powder 58.6%	G			0.03530	9/18/2013	
Psyllium Powder 95%	G			0.03530	9/18/2013	
Pyrethrins-Piperonyl Butoxide Shampoo 0.3-3%	G			0.04323	9/1/2011	
Pyrethrins-Piperonyl Butoxide Shampoo 0.33-4%	G			0.04323	9/1/2011	
Pyridostigmine Bromide Tab 60 MG	G			0.41075	10/1/2017	
Pyridoxine HCl Powder	G			0.24781	5/1/2011	
Quetiapine Fumarate Tab 100 MG	G			0.05276	2/1/2018	
Quetiapine Fumarate Tab 200 MG	G			0.10140	5/1/2017	
Quetiapine Fumarate Tab 25 MG	G			0.02259	4/1/2018	
Quetiapine Fumarate Tab 300 MG	G			0.13367	2/1/2018	
Quetiapine Fumarate Tab 400 MG	G			0.16000	6/1/2017	
Quetiapine Fumarate Tab 50 MG	G			0.05550	2/1/2018	
Quetiapine Fumarate Tab ER 24HR 150 MG	B			13.92674	1/1/2015	
Quetiapine Fumarate Tab ER 24HR 150 MG	G			1.40000	12/1/2017	
Quetiapine Fumarate Tab ER 24HR 200 MG	B			16.55460	1/1/2016	
Quetiapine Fumarate Tab ER 24HR 200 MG	G		1.48017	0.72278	6/1/2018	
Quetiapine Fumarate Tab ER 24HR 300 MG	B			21.70531	9/27/2016	
Quetiapine Fumarate Tab ER 24HR 300 MG	G			0.81667	3/1/2018	
Quetiapine Fumarate Tab ER 24HR 400 MG	B			23.61946	1/1/2015	
Quetiapine Fumarate Tab ER 24HR 400 MG	G		1.12000	0.83039	6/1/2018	
Quetiapine Fumarate Tab ER 24HR 50 MG	B			7.75617	1/1/2015	
Quetiapine Fumarate Tab ER 24HR 50 MG	G		0.63983	0.54817	6/1/2018	
Quinapril HCl Tab 10 MG	G			0.14389	12/1/2017	
Quinapril HCl Tab 20 MG	G			0.08320	2/1/2012	
Quinapril HCl Tab 40 MG	G			0.09236	2/1/2012	
Quinapril HCl Tab 5 MG	G			0.08710	1/1/2012	
Quinapril-Hydrochlorothiazide Tab 10-12.5 MG	G			1.19239	1/1/2010	
Quinapril-Hydrochlorothiazide Tab 20-12.5 MG	G			0.81000	11/13/2013	
Quinapril-Hydrochlorothiazide Tab 20-25 MG	G			0.23233	4/1/2017	
Quinidine Sulfate Tab 200 MG	G			0.18140	1/28/2008	
Quinine Sulfate Cap 324 MG	G			1.83367	10/1/2017	
Rabeprazole Sodium EC Tab 20 MG	G			0.31567	11/1/2017	
Raloxifene HCl Tab 60 MG	G			0.60592	9/1/2017	
Raltegravir Potassium Tab 400 MG (Base Equiv)	B			23.06736	1/6/2017	
Ramipril Cap 1.25 MG	G			0.10250	11/1/2011	
Ramipril Cap 10 MG	G			0.03852	11/1/2017	
Ramipril Cap 2.5 MG	G			0.04500	1/1/2018	
Ramipril Cap 5 MG	G			0.09120	4/1/2017	
Ranibizumab Intravitreal Inj 0.3 MG/0.05ML (6 MG/ML)	B			23306.40000	5/15/2017	
Ranibizumab Intravitreal Inj 0.5 MG/0.05ML (10 MG/ML)	B			38844.00000	5/15/2017	
Ranitidine HCl Cap 150 MG	G			0.61973	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Ranitidine HCl Cap 300 MG	G			1.01710	4/1/2017	
Ranitidine HCl Syrup 15 MG/ML (75 MG/5ML)	G			0.02587	4/1/2017	
Ranitidine HCl Tab 150 MG	G			0.03095	1/1/2009	
Ranitidine HCl Tab 300 MG	G			0.04160	1/1/2012	
Ranitidine HCl Tab 75 MG	G			0.05750	12/1/2017	
Rasagiline Mesylate Tab 1 MG (Base Equiv)	G			7.00000	12/1/2017	
Repaglinide Tab 0.5 MG	G			0.17060	12/1/2017	
Repaglinide Tab 1 MG	G			0.15930	1/1/2018	
Repaglinide Tab 2 MG	G			0.18605	1/1/2018	
Rho D Immune Globulin (Human) IM Inj 300 MCG	B			96.09740	1/1/2014	
Rho D Immune Globulin IM Soln Pref Syr 1500 Unit (300MCG)	B			90.32724	4/29/2015	
Rho D Immune Globulin IM Soln Pref Syr 250 Unit (50 MCG)	B			28.83420	6/1/2016	
Rho D Immune Globulin Sol Pref Syr 1500 Unt/2ML (300MCG/2ML)	B			72.60840	4/29/2015	
Ribavirin Cap 200 MG	G			0.58585	10/1/2013	
Ribavirin Tab 200 MG	G			0.61390	7/1/2013	
Rifampin Cap 150 MG	G			0.75014	4/1/2012	
Rifampin Cap 300 MG	G		0.68667	0.50500	6/1/2018	
Rifaximin Tab 550 MG	B			33.21314	3/31/2017	
Riluzole Tab 50 MG	G			2.41626	4/1/2017	
Risedronate Sodium Tab 150 MG	G			45.74000	1/1/2018	
Risedronate Sodium Tab 30 MG	G			29.56000	8/1/2016	
Risedronate Sodium Tab 35 MG	G		6.04312	5.00000	6/1/2018	
Risedronate Sodium Tab 5 MG	G			4.65000	8/1/2016	
Risperidone Microspheres For Inj 37.5 MG	B			637.20250	1/14/2017	
Risperidone Microspheres For Inj 50 MG	B			903.35200	1/28/2018	
Risperidone Orally Disintegrating Tab 0.5 MG	G			0.50733	5/1/2018	
Risperidone Orally Disintegrating Tab 1 MG	G			0.48786	3/1/2018	
Risperidone Orally Disintegrating Tab 2 MG	G			0.87357	4/1/2017	
Risperidone Orally Disintegrating Tab 3 MG	G			1.75000	5/1/2016	
Risperidone Orally Disintegrating Tab 4 MG	G			10.55584	1/1/2012	
Risperidone Soln 1 MG/ML	G			0.07167	4/1/2018	
Risperidone Tab 0.25 MG	G			0.05188	4/1/2017	
Risperidone Tab 0.5 MG	G			0.04035	4/1/2017	
Risperidone Tab 1 MG	G			0.03897	10/1/2017	
Risperidone Tab 2 MG	G			0.03868	1/1/2018	
Risperidone Tab 3 MG	G			0.04333	1/1/2018	
Risperidone Tab 4 MG	G			0.07709	10/1/2017	
Ritonavir Oral Soln 80 MG/ML	B			6.12085	12/19/2012	
Rivastigmine Tartrate Cap 1.5 MG	G			0.61033	3/1/2018	
Rivastigmine Tartrate Cap 3 MG	G			0.65000	11/1/2017	
Rivastigmine Tartrate Cap 4.5 MG	G			0.26333	10/1/2017	
Rivastigmine Tartrate Cap 6 MG	G			0.45891	10/1/2017	
Rivastigmine TD Patch 24HR 13.3 MG/24HR	G			5.46950	12/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Rivastigmine TD Patch 24HR 4.6 MG/24HR	G			5.22100	3/1/2018	
Rivastigmine TD Patch 24HR 9.5 MG/24HR	G			6.68167	10/1/2017	
Rizatriptan Benzoate Oral Disintegrating Tab 10 MG (Base Eq)	G			0.83889	10/1/2017	
Rizatriptan Benzoate Oral Disintegrating Tab 5 MG (Base Eq)	G			1.83547	11/1/2015	
Rizatriptan Benzoate Tab 10 MG (Base Equivalent)	G		0.81667	0.55556	6/1/2018	
Rizatriptan Benzoate Tab 5 MG (Base Equivalent)	G			0.67718	4/1/2017	
Ropinirole Hydrochloride Tab 0.25 MG	G			0.06600	10/1/2017	
Ropinirole Hydrochloride Tab 0.5 MG	G			0.05230	4/1/2018	
Ropinirole Hydrochloride Tab 1 MG	G			0.04490	5/1/2018	
Ropinirole Hydrochloride Tab 2 MG	G			0.08506	4/1/2017	
Ropinirole Hydrochloride Tab 3 MG	G			0.08220	9/1/2017	
Ropinirole Hydrochloride Tab 4 MG	G			0.06920	2/1/2018	
Ropinirole Hydrochloride Tab 5 MG	G			0.18167	11/1/2014	
Ropinirole Hydrochloride Tab ER 24HR 12 MG (Base Equivalent)	G			5.12133	4/1/2017	
Ropinirole Hydrochloride Tab ER 24HR 2 MG (Base Equivalent)	G			0.99967	4/1/2017	
Ropinirole Hydrochloride Tab ER 24HR 4 MG (Base Equivalent)	G			1.18656	9/1/2017	
Rosuvastatin Calcium Tab 10 MG	G			0.08622	4/1/2018	
Rosuvastatin Calcium Tab 20 MG	G			0.12200	11/1/2017	
Rosuvastatin Calcium Tab 40 MG	G			0.16356	8/1/2017	
Rosuvastatin Calcium Tab 5 MG	G			0.08878	11/1/2017	
Sacrosidase Soln 8500 Unit/ML	B			25.79174	12/19/2012	
Saline Injection Bacteriostatic	G			0.02190	1/1/2007	
Saline Injection w/ Benzyl Alcohol	G			0.02190	1/1/2007	
Saline Nasal Spray 0.65%	G			0.14407	8/1/2013	
Salsalate Tab 500 MG	G			0.31785	4/1/2011	
Salsalate Tab 750 MG	G		1.23000	0.60680	6/1/2018	
Scopolamine TD Patch 72HR 1 MG/3DAYS	G			20.09700	9/1/2017	
Secukinumab Subcutaneous Soln Auto-injector 150 MG/ML	B			1703.16000	4/29/2015	
Secukinumab Subcutaneous Soln Auto-injector 150 MG/ML	B	COSENTYX PEN INJ 150MG/ML (00078063968)		4693.53048	1/3/2018	NDC-specific SMAC
Secukinumab Subcutaneous Soln Auto-injector 150 MG/ML	B	COSENTYX PEN INJ 300DOSE (00078063941)		2346.76524	1/3/2018	NDC-specific SMAC
Secukinumab Subcutaneous Soln Prefilled Syringe 150 MG/ML	B			1703.16000	4/29/2015	
Secukinumab Subcutaneous Soln Prefilled Syringe 150 MG/ML	B	COSENTYX INJ 150MG/ML (00078063997)		4693.53048	1/3/2018	NDC-specific SMAC
Secukinumab Subcutaneous Soln Prefilled Syringe 150 MG/ML	B	COSENTYX INJ 300DOSE (00078063998)		2346.76524	1/3/2018	NDC-specific SMAC
Selegiline HCl Cap 5 MG	G			0.34440	1/1/2009	
Selegiline HCl Tab 5 MG	G			0.12300	1/28/2008	
Selenium Sulfide Lotion 2.5%	G			0.04323	3/1/2011	
Selenium Sulfide-Pyrithione Zinc in Urea Shampoo 2.25%	G			0.60556	8/1/2016	
Selexipag Tab 1000 MCG	B			273.00360	1/3/2018	
Selexipag Tab 1200 MCG	B			273.00360	1/3/2018	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Selexipag Tab 1400 MCG	B			273.00360	1/3/2018	
Selexipag Tab 1600 MCG	B			273.00360	1/3/2018	
Selexipag Tab 200 MCG	B			175.54500	1/3/2018	
Selexipag Tab 400 MCG	B			273.00360	1/3/2018	
Selexipag Tab 600 MCG	B			273.00360	1/3/2018	
Selexipag Tab 800 MCG	B			273.00360	1/3/2018	
Selexipag Tab Therapy Pack 200 MCG (140) & 800 MCG (60)	B			122.88150	1/3/2018	
Senna Tab 187 MG	G			0.01115	1/5/2011	
Sennosides Syrup 8.8 MG/5ML	G			0.03144	10/1/2017	
Sennosides Tab 8.6 MG	G			0.01115	1/5/2011	
Sennosides-Docusate Sodium Tab 8.6-50 MG	G			0.01893	1/5/2011	
Sertraline HCl Oral Concentrate for Solution 20 MG/ML	G			0.60536	5/1/2016	
Sertraline HCl Tab 100 MG	G			0.04402	6/1/2017	
Sertraline HCl Tab 25 MG	G			0.03522	6/1/2017	
Sertraline HCl Tab 50 MG	G			0.03352	8/1/2017	
Sildenafil Citrate Tab 20 MG	B			47.50444	1/1/2018	
Sildenafil Citrate Tab 20 MG	G			0.31200	9/1/2017	
Silver Sulfadiazine Cream 1%	G			0.25900	1/16/2013	
Simeprevir Sodium Cap 150 MG (Base Equivalent)	B			786.84000	3/1/2014	
Simethicone Cap 180 MG	G			0.03333	4/1/2018	
Simethicone Chew Tab 125 MG	G			0.03558	11/1/2017	
Simethicone Chew Tab 80 MG	G			0.02470	2/1/2011	
Simethicone Susp 40 MG/0.6ML	G			0.09633	1/18/2017	
Simvastatin Tab 10 MG	G			0.02311	11/1/2017	
Simvastatin Tab 20 MG	G			0.01816	6/1/2017	
Simvastatin Tab 40 MG	G			0.03787	4/1/2017	
Simvastatin Tab 5 MG	G			0.04656	4/1/2017	
Simvastatin Tab 80 MG	G			0.04911	4/1/2017	
Sirolimus Tab 0.5 MG	G			5.70661	4/1/2017	
Sirolimus Tab 1 MG	G			9.60000	12/1/2017	
Sodium Bicarbonate Inj 8.4%	G			0.22510	10/11/2016	
Sodium Bicarbonate Tab 325 MG	G			0.06543	8/1/2016	
Sodium Bicarbonate Tab 650 MG	G			0.01677	10/1/2017	
Sodium Chloride Hypertonic Ophth Soln 5%	G			0.23533	3/1/2018	
Sodium Chloride Inj 0.9%	G			0.02514	7/1/2013	
Sodium Chloride Irrigation Soln 0.9%	G			0.00203	2/1/2011	
Sodium Chloride IV Soln 0.9%	G			0.00786	10/1/2016	
Sodium Chloride Soln Nebu 0.9%	G			0.00000	4/1/2017	
Sodium Citrate & Citric Acid Soln 500-334 MG/5ML	G			0.01645	2/1/2011	
Sodium Fluoride Chew Tab 0.25 MG F (from 0.55 MG NaF)	G			0.02792	11/1/2017	
Sodium Fluoride Chew Tab 0.5 MG F (from 1.1 MG NaF)	G			0.04146	7/4/2012	
Sodium Fluoride Chew Tab 1 MG F (from 2.2 MG NaF)	G			0.04105	2/1/2011	
Sodium Fluoride Cream 1.1%	G			0.06373	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Sodium Fluoride Rinse 0.2%	G			0.02587	9/1/2017	
Sodium Fluoride Soln 0.5 MG/ML F (from 1.1 MG/ML NaF)	G			0.13153	4/1/2017	
Sodium Phenylbutyrate Oral Powder 3 GM/Teaspoonful	B			49.40160	4/1/2017	
Sodium Polystyrene Sulfonate Oral Susp 15 GM/60ML	G			0.10000	3/1/2018	
Sodium Polystyrene Sulfonate Powder**	G			0.11032	12/1/2016	
Sofosbuvir Tab 400 MG	B			996.00000	3/1/2014	
Somatropin (Non-Refrigerated) For Inj 5 MG	B			588.48660	1/5/2018	
Somatropin (Non-Refrigerated) For Inj 8.8 MG	B			941.57856	1/5/2018	
Somatropin (Non-Refrigerated) For Subcutaneous Inj 5 MG	B			411.74640	1/5/2018	
Somatropin For Inj 0.4 MG	B			52.71259	1/1/2018	
Somatropin For Inj 1 MG	B			131.77934	1/1/2018	
Somatropin For Inj 12 MG (13.8 MG Overfill)	B			1450.81344	1/1/2018	
Somatropin For Inj 12 MG (36 Unit)	B			1466.51040	12/15/2017	
Somatropin For Inj 24 MG	B			2933.02080	12/15/2017	
Somatropin For Inj 6 MG (18 Unit)	B			733.25520	12/15/2017	
Somatropin For Subcutaneous Inj 5 MG	B			604.49232	1/1/2018	
Somatropin Inj 10 MG/1.5ML	B			790.76424	1/1/2018	
Somatropin Inj 10 MG/2ML	B			626.16030	12/15/2017	
Somatropin Inj 15 MG/1.5ML	B			1173.08880	12/5/2017	
Somatropin Inj 20 MG/2ML	B			1252.31064	12/15/2017	
Somatropin Inj 30 MG/3ML	B			1173.08880	12/5/2017	
Somatropin Inj 5 MG/1.5ML	B			395.38544	1/1/2018	
Sorafenib Tosylate Tab 200 MG (Base Equivalent)	B			143.61822	12/29/2017	
Sotalol HCl (AFIB/AFL) Tab 120 MG	G			0.11880	4/1/2017	
Sotalol HCl (AFIB/AFL) Tab 160 MG	G		0.22217	0.18620	6/1/2018	
Sotalol HCl (AFIB/AFL) Tab 80 MG	G			0.04110	4/1/2017	
Sotalol HCl Tab 120 MG	G			0.11880	4/1/2017	
Sotalol HCl Tab 160 MG	G		0.22217	0.18620	6/1/2018	
Sotalol HCl Tab 240 MG	G			0.33276	9/1/2011	
Sotalol HCl Tab 80 MG	G			0.04110	4/1/2017	
Spironolactone & Hydrochlorothiazide Tab 25-25 MG	G			0.72300	10/1/2017	
Spironolactone Powder	G			2.34000	6/1/2010	
Spironolactone Tab 100 MG	G			0.16880	1/1/2018	
Spironolactone Tab 25 MG	G			0.05420	6/1/2017	
Spironolactone Tab 50 MG	G			0.14490	9/1/2017	
Stavudine Cap 15 MG	G			1.95477	4/1/2009	
Stavudine Cap 20 MG	B			1.24811	8/1/2013	
Stavudine Cap 20 MG	G			1.21300	3/1/2016	
Stavudine Cap 30 MG	G			0.86000	3/1/2016	
Stavudine Cap 40 MG	G			0.91833	12/1/2017	
Sucralfate Susp 1 GM/10ML	G			0.36433	4/1/2017	
Sucralfate Tab 1 GM	G			0.21102	1/30/2018	
Sulfacetamide Sodium Lotion 10% (Acne)	G			1.35200	8/22/2016	
Sulfacetamide Sodium Ophth Soln 10%	G			0.00000	10/4/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Sulfacetamide Sodium w/ Sulfur Emulsion 10-5%	G			0.13190	9/1/2011	
Sulfamethoxazole-Trimethoprim Susp 200-40 MG/5ML	G			0.11342	9/1/2017	
Sulfamethoxazole-Trimethoprim Tab 400-80 MG	G			0.07540	1/5/2011	
Sulfamethoxazole-Trimethoprim Tab 800-160 MG	G			0.04090	1/1/2018	
Sulfasalazine Tab 500 MG	G			0.07159	2/1/2012	
Sulfasalazine Tab Delayed Release 500 MG	G			0.12670	9/1/2017	
Sulindac Tab 150 MG	G			0.14038	8/1/2011	
Sulindac Tab 200 MG	G			0.16336	5/1/2012	
Sumatriptan Nasal Spray 5 MG/ACT	G			45.20722	4/1/2017	
Sumatriptan Succinate Inj 6 MG/0.5ML	G			132.55000	4/1/2014	
Sumatriptan Succinate Tab 100 MG	G			0.36778	3/1/2018	
Sumatriptan Succinate Tab 25 MG	G			0.66067	12/1/2017	
Sumatriptan Succinate Tab 50 MG	G			0.46667	8/1/2017	
Tacrolimus Cap 0.5 MG	G			0.14287	9/1/2017	
Tacrolimus Cap 1 MG	G			0.19394	4/1/2017	
Tacrolimus Cap 5 MG	G			0.75000	3/1/2018	
Tamoxifen Citrate Tab 10 MG (Base Equivalent)	G			0.15000	12/1/2017	
Tamoxifen Citrate Tab 20 MG (Base Equivalent)	G			0.47567	2/1/2017	
Tamsulosin HCl Cap 0.4 MG	G			0.09815	12/1/2017	
Tbo-Filgrastim Soln Prefilled Syringe 300 MCG/0.5ML	B			596.80320	1/1/2017	
Tbo-Filgrastim Soln Prefilled Syringe 480 MCG/0.8ML	B			593.98950	1/1/2017	
Teduglutide (rDNA) For Inj Kit 5 MG	B			1372.44816	7/18/2017	
Teduglutide (rDNA) For Inj Kit 5 MG	B	GATTEX KIT 5MG (68875010201)		36869.43996	1/1/2018	NDC-specific SMAC
Teduglutide (rDNA) For Inj Kit 5 MG	B	GATTEX KIT 5MG (68875010301)		1413.62280	1/1/2018	NDC-specific SMAC
Telaprevir Tab 375 MG	B			130.73508	1/20/2014	
Telmisartan Tab 20 MG	G			0.25467	10/1/2017	
Telmisartan Tab 40 MG	G			0.26333	10/1/2017	
Telmisartan Tab 80 MG	G			0.28567	10/1/2017	
Telmisartan-Hydrochlorothiazide Tab 40-12.5 MG	G		3.01450	0.73467	6/1/2018	
Telmisartan-Hydrochlorothiazide Tab 80-12.5 MG	G			4.25000	5/1/2014	
Telmisartan-Hydrochlorothiazide Tab 80-25 MG	G			1.83284	4/1/2017	
Temazepam Cap 15 MG	G			0.05614	4/1/2017	
Temazepam Cap 30 MG	G			0.08710	12/1/2010	
Temazepam Cap 7.5 MG	G			2.63914	12/15/2017	
Temozolomide Cap 100 MG	B			453.77760	1/5/2018	
Temozolomide Cap 100 MG	G			61.45950	8/1/2016	
Temozolomide Cap 140 MG	B			635.28864	1/5/2018	
Temozolomide Cap 140 MG	G			402.09520	3/1/2016	
Temozolomide Cap 180 MG	G			126.00000	10/1/2017	
Temozolomide Cap 20 MG	G			23.25000	10/1/2015	
Temozolomide Cap 250 MG	G			226.25000	8/1/2016	
Temozolomide Cap 5 MG	G			5.85000	10/1/2015	
Terazosin HCl Cap 1 MG (Base Equivalent)	G			0.05380	4/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Terazosin HCl Cap 10 MG (Base Equivalent)	G			0.04130	9/1/2017	
Terazosin HCl Cap 2 MG (Base Equivalent)	G			0.05740	4/1/2017	
Terazosin HCl Cap 5 MG (Base Equivalent)	G			0.05040	1/1/2018	
Terbinafine HCl Tab 250 MG	G			0.10133	6/1/2017	
Terbutaline Sulfate Tab 2.5 MG	G			3.61752	10/23/2017	
Terbutaline Sulfate Tab 5 MG	G			0.42438	12/1/2011	
Terconazole Vaginal Cream 0.4%	G			0.56728	4/1/2017	
Terconazole Vaginal Cream 0.8%	G			0.58381	9/1/2011	
Testosterone Cypionate IM in Oil 100 MG/ML	G			5.38200	6/1/2010	
Testosterone Cypionate IM in Oil 200 MG/ML	G			17.15769	7/1/2014	
Testosterone Enanthate IM in Oil 200 MG/ML	G			12.05063	8/1/2013	
Testosterone Powder	G			0.19136	6/1/2010	
Testosterone Propionate Powder	G			1.55480	6/1/2010	
Testosterone TD Soln 30 MG/ACT	G			2.84744	4/1/2018	
Tetrabenazine Tab 12.5 MG	B			114.08824	1/3/2018	
Tetrabenazine Tab 25 MG	B			228.17649	1/3/2018	
Tetracycline HCl Cap 250 MG	G			4.68138	4/1/2017	
Tetracycline HCl Cap 500 MG	G			9.78069	2/27/2017	
Theophylline Tab ER 12HR 100 MG	G			0.42510	2/9/2015	
Theophylline Tab ER 12HR 200 MG	G			0.17477	1/1/2009	
Theophylline Tab ER 12HR 300 MG	G			2.19265	1/10/2018	
Theophylline Tab ER 24HR 400 MG	G			0.41220	10/1/2017	
Thioridazine HCl Tab 10 MG	G			0.09707	11/1/2011	
Thioridazine HCl Tab 100 MG	G		0.24100	0.71790	6/6/2018	
Thioridazine HCl Tab 25 MG	G			0.11875	5/1/2012	
Thioridazine HCl Tab 50 MG	G			0.17937	8/1/2011	
Thiothixene Cap 10 MG	G			1.84450	9/1/2017	
Thiothixene Cap 2 MG	G			0.10752	1/1/2009	
Thiothixene Cap 5 MG	G			1.16400	9/23/2015	
Thyroid Tab 15 MG (1/4 Grain)	G			0.52110	4/1/2017	
Thyroid Tab 60 MG (1 Grain)	G			0.33280	9/1/2017	
Thyroid Tab 90 MG (1 1/2 Grain)	G			0.71227	11/1/2017	
Tiagabine HCl Tab 2 MG	G			5.78000	2/1/2013	
Tiagabine HCl Tab 4 MG	G			5.83210	11/11/2016	
Ticlopidine HCl Tab 250 MG	G			0.16835	1/1/2010	
Timolol Maleate Ophth Gel Forming Soln 0.5%	G			13.45000	6/1/2017	
Timolol Maleate Ophth Soln 0.25%	G			0.32416	12/1/2011	
Timolol Maleate Ophth Soln 0.5%	G			0.33162	1/1/2009	
Tinidazole Tab 500 MG	G			3.49750	12/1/2017	
Tizanidine HCl Cap 2 MG (Base Equivalent)	G			1.03127	10/1/2017	
Tizanidine HCl Cap 4 MG (Base Equivalent)	G		0.88000	0.55853	6/1/2018	
Tizanidine HCl Tab 2 MG (Base Equivalent)	G			0.07947	5/1/2017	
Tizanidine HCl Tab 4 MG (Base Equivalent)	G			0.08947	10/1/2017	
Tobramycin Nebu Soln 300 MG/5ML	B			26.10184	4/2/2014	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Tobramycin Nebu Soln 300 MG/5ML	G			16.73285	3/1/2016	
Tobramycin Opth Soln 0.3%	G			0.81000	11/1/2017	
Tobramycin Sulfate For Inj 1.2 GM	G			101.01000	8/4/2010	
Tobramycin Sulfate Inj 1.2 GM/30ML (40 MG/ML) (Base Equiv)	G			0.67297	8/4/2010	
Tobramycin Sulfate Inj 2 GM/50ML (40 MG/ML) (Base Equiv)	G			0.67297	8/4/2010	
Tobramycin Sulfate Inj 40 MG/ML	G			2.40800	4/1/2017	
Tobramycin Sulfate Inj 80 MG/2ML (40 MG/ML) (Base Equiv)	G			0.67297	8/4/2010	
Tobramycin-Dexamethasone Opth Susp 0.3-0.1%	G			12.90400	9/1/2017	
Tocilizumab Subcutaneous Soln Prefilled Syringe 162 MG/0.9ML	B			1089.75680	1/1/2018	
Tolazamide Tab 250 MG	G			0.18640	2/1/2014	
Tolazamide Tab 500 MG	G			0.72640	2/1/2014	
Tolmetin Sodium Cap 400 MG	G			0.99645	1/1/2010	
Tolnaftate Aerosol 1%	G			0.15765	9/18/2013	
Tolnaftate Aerosol Pow 1%	G			0.15765	9/18/2013	
Tolnaftate Cream 1%	G			0.05287	8/12/2009	
Tolnaftate Powder 1%	G			0.15765	9/18/2013	
Tolterodine Tartrate Cap ER 24HR 2 MG	G		2.70133	2.28183	6/1/2018	
Tolterodine Tartrate Cap ER 24HR 4 MG	G		2.16167	1.92643	6/1/2018	
Tolterodine Tartrate Tab 1 MG	G			0.87467	3/1/2018	
Tolterodine Tartrate Tab 2 MG	G			0.64583	4/1/2017	
Topiramate Cap ER 24HR Sprinkle 100 MG	G			10.06000	4/1/2017	
Topiramate Cap ER 24HR Sprinkle 25 MG	G			5.17067	4/1/2017	
Topiramate Sprinkle Cap 15 MG	G			0.19343	4/1/2017	
Topiramate Sprinkle Cap 25 MG	G			0.26867	4/1/2017	
Topiramate Tab 100 MG	G			0.06431	11/1/2017	
Topiramate Tab 200 MG	G			0.08979	3/1/2018	
Topiramate Tab 25 MG	G			0.03272	1/1/2012	
Topiramate Tab 50 MG	G			0.04168	1/1/2018	
Torsemide Tab 10 MG	G			0.06650	11/1/2017	
Torsemide Tab 100 MG	G			0.25220	3/1/2018	
Torsemide Tab 20 MG	G			0.07950	6/1/2017	
Torsemide Tab 5 MG	G			0.09400	10/1/2017	
Tramadol HCl Tab 50 MG	G			0.01978	4/1/2017	
Tramadol HCl Tab ER 24HR 100 MG	G			1.58733	4/1/2017	
Tramadol HCl Tab ER 24HR 200 MG	G			1.30933	10/1/2017	
Tramadol HCl Tab ER 24HR 300 MG	G			3.23534	4/1/2017	
Tramadol HCl Tab ER 24HR Biphasic Release 300 MG	G			3.59200	5/25/2016	
Tramadol-Acetaminophen Tab 37.5-325 MG	G			0.08010	10/1/2017	
Trametinib Dimethyl Sulfoxide Tab 0.5 MG (Base Equivalent)	B			100.26234	1/3/2018	
Trametinib Dimethyl Sulfoxide Tab 2 MG (Base Equivalent)	B			357.96572	1/3/2018	
Trandolapril Tab 1 MG	G			0.21365	12/1/2010	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Trandolapril Tab 2 MG	G			0.21365	12/1/2010	
Trandolapril Tab 4 MG	G			0.21365	12/1/2010	
Tranylcypromine Sulfate Tab 10 MG	G			1.07898	1/1/2012	
Trazodone HCl Tab 100 MG	G			0.06178	8/1/2017	
Trazodone HCl Tab 150 MG	G			0.15340	10/1/2017	
Trazodone HCl Tab 300 MG	G			2.65933	1/1/2015	
Trazodone HCl Tab 50 MG	G			0.04140	11/1/2017	
Tretinoin Cream 0.025%	G			4.64000	2/13/2015	
Tretinoin Cream 0.05%	G		4.17850	4.00014	6/1/2018	
Tretinoin Cream 0.1%	G			3.95200	5/28/2014	
Tretinoin Gel 0.01%	G			3.42440	10/29/2015	
Tretinoin Gel 0.025%	G			1.00804	7/1/2013	
Triamcinolone Acetonide Cream 0.025%	G			0.25190	7/9/2013	
Triamcinolone Acetonide Cream 0.1%	G			0.00000	1/21/2011	
Triamcinolone Acetonide Cream 0.5%	G			0.38333	7/1/2017	
Triamcinolone Acetonide Dental Paste 0.1%	G		8.81800	6.55178	6/1/2018	
Triamcinolone Acetonide Lotion 0.025%	G			0.52983	5/1/2014	
Triamcinolone Acetonide Lotion 0.1%	G			0.37993	9/1/2011	
Triamcinolone Acetonide Nasal Inhal 55 MCG/ACT	G			4.68079	5/1/2013	
Triamcinolone Acetonide Oint 0.025%	G			0.03250	1/1/2010	
Triamcinolone Acetonide Oint 0.1%	G			0.14106	4/21/2015	
Triamcinolone Acetonide Oint 0.5%	G		0.53792	0.39159	6/1/2018	
Triamterene & Hydrochlorothiazide Cap 37.5-25 MG	G			0.04697	1/1/2018	
Triamterene & Hydrochlorothiazide Cap 50-25 MG	G			0.41268	1/1/2009	
Triamterene & Hydrochlorothiazide Tab 37.5-25 MG	G			0.04515	2/1/2012	
Triamterene & Hydrochlorothiazide Tab 75-50 MG	G			0.04310	1/28/2008	
Triazolam Tab 0.125 MG	G			0.20610	1/28/2008	
Triazolam Tab 0.25 MG	G			0.12500	8/1/2012	
Trientine HCl Cap 250 MG	B			197.03934	7/18/2014	
Trifluoperazine HCl Tab 10 MG (Base Equivalent)	G			1.32850	5/1/2016	
Trifluoperazine HCl Tab 2 MG (Base Equivalent)	G			0.26338	12/1/2010	
Trifluoperazine HCl Tab 5 MG (Base Equivalent)	G			0.43737	2/1/2012	
Trifluridine Opth Soln 1%	G			16.35250	6/1/2012	
Trihexyphenidyl HCl Elixir 0.4 MG/ML	G			0.04529	9/1/2017	
Trihexyphenidyl HCl Tab 2 MG	G			0.04546	9/1/2017	
Trihexyphenidyl HCl Tab 5 MG	G			0.06878	2/1/2018	
Trimethobenzamide HCl Cap 300 MG	G			1.36000	5/17/2010	
Trimethoprim Tab 100 MG	G			0.16520	10/1/2017	
Tropium Chloride Cap ER 24HR 60 MG	G			4.28817	8/1/2016	
Urea Cream 40%	G			0.39500	12/19/2013	
Urea Gel 40%	G			3.42333	6/1/2010	
Ursodiol (Bulk) Powder	G			1.52880	9/1/2010	
Ursodiol Cap 300 MG	G		2.41280	2.18293	6/1/2018	
Ursodiol Tab 250 MG	G			0.75000	9/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Ursodiol Tab 500 MG	G			1.00865	12/1/2017	
Ustekinumab Inj 45 MG/0.5ML	B			20501.96280	1/3/2018	
Ustekinumab Soln Prefilled Syringe 45 MG/0.5ML	B			20501.96280	1/3/2018	
Ustekinumab Soln Prefilled Syringe 90 MG/ML	B			20501.96280	1/3/2018	
Valacyclovir HCl Tab 1 GM	G			0.37833	2/1/2018	
Valacyclovir HCl Tab 500 MG	G			0.25322	7/1/2017	
Valganciclovir HCl For Soln 50 MG/ML (Base Equiv)	B			11.42674	1/1/2017	
Valproate Sodium Oral Soln 250 MG/5ML (Base Equiv)	G			0.01063	9/1/2017	
Valproate Sodium Syrup 250 MG/5ML	G			0.02042	7/1/2013	
Valproic Acid Cap 250 MG	G			0.12720	9/1/2017	
Valsartan Tab 160 MG	G			0.10856	11/1/2017	
Valsartan Tab 320 MG	G			0.10489	9/1/2017	
Valsartan Tab 40 MG	G			0.05556	12/1/2017	
Valsartan Tab 80 MG	G			0.06100	6/1/2017	
Valsartan-Hydrochlorothiazide Tab 160-12.5 MG	G			0.11778	4/1/2018	
Valsartan-Hydrochlorothiazide Tab 160-25 MG	G			0.14689	4/1/2018	
Valsartan-Hydrochlorothiazide Tab 320-12.5 MG	G			0.23115	12/1/2017	
Valsartan-Hydrochlorothiazide Tab 320-25 MG	G			0.20818	3/1/2018	
Valsartan-Hydrochlorothiazide Tab 80-12.5 MG	G			0.13678	9/1/2017	
Vancomycin HCl Cap 125 MG	G			4.67097	2/26/2018	
Vancomycin HCl For Inj 1000 MG	G			12.00000	9/1/2017	
Vemurafenib Tab 240 MG	B			45.03084	9/8/2015	
Venlafaxine HCl Cap ER 24HR 150 MG (Base Equivalent)	G			0.14914	8/1/2017	
Venlafaxine HCl Cap ER 24HR 37.5 MG (Base Equivalent)	G			0.10578	2/1/2018	
Venlafaxine HCl Cap ER 24HR 75 MG (Base Equivalent)	G			0.12041	1/1/2018	
Venlafaxine HCl Tab 100 MG	G			0.15430	6/1/2017	
Venlafaxine HCl Tab 25 MG	G			0.19030	9/1/2017	
Venlafaxine HCl Tab 37.5 MG	G			0.14692	4/1/2017	
Venlafaxine HCl Tab 50 MG	G			0.21390	4/1/2017	
Venlafaxine HCl Tab 75 MG	G			0.09780	1/1/2018	
Venlafaxine HCl Tab ER 24HR 150 MG (Base Equivalent)	G			2.20528	6/1/2014	
Venlafaxine HCl Tab ER 24HR 75 MG (Base Equivalent)	G			3.00392	1/1/2013	
Verapamil HCl Cap ER 24HR 100 MG	G			1.09780	11/1/2017	
Verapamil HCl Cap ER 24HR 120 MG	G			0.42305	4/1/2011	
Verapamil HCl Cap ER 24HR 180 MG	G			0.31925	3/1/2012	
Verapamil HCl Cap ER 24HR 200 MG	G			1.04240	10/1/2017	
Verapamil HCl Cap ER 24HR 240 MG	G			0.49987	11/1/2011	
Verapamil HCl Cap ER 24HR 300 MG	G			1.54090	10/1/2017	
Verapamil HCl Cap ER 24HR 360 MG	G			3.33117	4/1/2017	
Verapamil HCl Tab 120 MG	G			0.05950	4/1/2017	
Verapamil HCl Tab 40 MG	G			0.13940	4/1/2017	
Verapamil HCl Tab 80 MG	G			0.04565	4/1/2017	
Verapamil HCl Tab ER 120 MG	G			0.16670	5/1/2017	
Verapamil HCl Tab ER 180 MG	G			0.10355	10/1/2017	

**Wyoming Medicaid
Office of Pharmacy Services
State Maximum Allowable Cost (SMAC) List**

As of 06/06/2018

Generic Name	Brand or Generic	Drug Name Specific to SMAC	Old SMAC Price	Current SMAC Price	Effective Date	Notes
Verapamil HCl Tab ER 240 MG	G			0.12965	11/1/2017	
Vigabatrin Powd Pack 500 MG	B			132.42298	1/3/2018	
Vigabatrin Tab 500 MG	B			132.42298	1/3/2018	
Vincristine Sulfate Liposome IV Susp 5 MG/31ML (0.16 MG/ML)	B			12693.25640	4/1/2017	
Voriconazole Tab 200 MG	G			6.81000	9/1/2017	
Voriconazole Tab 50 MG	G			0.89967	9/1/2017	
Warfarin Sodium Tab 1 MG	G			0.10650	3/1/2018	
Warfarin Sodium Tab 10 MG	G			0.04875	4/1/2012	
Warfarin Sodium Tab 2 MG	G			0.10020	8/1/2017	
Warfarin Sodium Tab 2.5 MG	G			0.05970	9/1/2017	
Warfarin Sodium Tab 3 MG	G			0.09608	12/1/2017	
Warfarin Sodium Tab 4 MG	G			0.08767	12/1/2017	
Warfarin Sodium Tab 5 MG	G			0.09438	7/1/2017	
Warfarin Sodium Tab 6 MG	G			0.09487	8/1/2011	
Warfarin Sodium Tab 7.5 MG	G			0.08633	5/1/2012	
Water For Injection	G			0.05714	12/16/2014	
Water For Irrigation, Sterile Irrigation Soln	G			0.00525	8/4/2017	
Water For IV Injection	G			0.00203	3/1/2018	
White Petrolatum-Mineral Oil Ophth Ointment***	G			1.86060	9/18/2013	
Zafirlukast Tab 10 MG	G			1.04000	2/1/2014	
Zafirlukast Tab 20 MG	G			1.06150	10/1/2013	
Zaleplon Cap 10 MG	G			0.13820	10/1/2017	
Zaleplon Cap 5 MG	G			0.23025	8/1/2012	
Zidovudine Cap 100 MG	G			0.12230	10/1/2017	
Zidovudine Syrup 10 MG/ML	G			0.09521	12/1/2017	
Zidovudine Tab 300 MG	G			0.30183	12/1/2017	
Ziprasidone HCl Cap 20 MG	G			0.40530	4/1/2017	
Ziprasidone HCl Cap 40 MG	G		0.31667	0.28225	6/1/2018	
Ziprasidone HCl Cap 60 MG	G		0.61567	0.41737	6/1/2018	
Ziprasidone HCl Cap 80 MG	G			0.43250	3/1/2018	
Zolmitriptan Orally Disintegrating Tab 2.5 MG	G			7.56800	9/1/2013	
Zolmitriptan Orally Disintegrating Tab 5 MG	G			3.89667	10/1/2017	
Zolmitriptan Tab 2.5 MG	G			7.57163	9/1/2013	
Zolmitriptan Tab 5 MG	G			3.36000	12/1/2017	
Zolpidem Tartrate Tab 10 MG	G			0.02565	4/1/2011	
Zolpidem Tartrate Tab 5 MG	G			0.02670	11/1/2017	
Zolpidem Tartrate Tab ER 12.5 MG	G		0.48879	0.38520	6/1/2018	
Zolpidem Tartrate Tab ER 6.25 MG	G			1.15000	11/1/2017	
Zonisamide Cap 100 MG	G			0.09670	4/1/2018	
Zonisamide Cap 25 MG	G			0.07950	8/1/2017	
Zonisamide Cap 50 MG	G			0.12555	12/1/2010	