

ANDREW M. CUOMO Governor HOWARD A. ZUCKER, M.D., J.D. Commissioner

SALLY DRESLIN, M.S., R.N. Executive Deputy Commissioner

UPDATED: Medicaid Fee-for-Service Providers Dispense Brand Name Drug when Less Expensive than Generic Program

Effective June 25, 2015, the following changes will be made to the Dispense Brand Name Drug when Less Expensive than Generic Program:

- Niaspan, Tobradex suspension Tricor, and Trilipix will be added to the program.
- Accolate, Carbatrol, Diovan HCT, Symbyax, Mycobutin, will be REMOVED from the program
- Due to changes in the market, **Suprax suspension will not** be added as previously communicated.

In conformance with State Education Law, which intends that patients receive the lower cost alternative, brand name drugs included in this program:

- Do not require 'Dispense as Written' (DAW) or 'Brand Medically Necessary' on the prescription.
- Have a generic copayment.
- Are paid at the Brand Name Drug reimbursement rate or usual and customary price, whichever is lower (SMAC/FUL are not applied).
- Do not require a new prescription if the drug is removed from this program.

IMPORTANT BILLING INFORMATION

Prescription claims submitted to the Medicaid program **do not require** the submission of Dispense as Written/Product Selection Code of '1'; **Pharmacies can submit any valid NCPDP field (408-D8) value.**

List of Brand Name Drugs included in this program* (Updated 6/11/2015):

Adderall XR	Focalin XR 5mg, 10mg, 15mg, 30mg, 40mg	Soriatane
Aldara	Gabitril 2mg, 4mg	Tegretol suspension
Alphagan P 0.15%	Hepsera	Tegretol XR
Astepro	Intuniv	Tobradex suspension
Bactroban Cream	Kadian	TOBI
Baraclude	Lidoderm	Tricor
Carac	Mepron	Trileptal suspension
Catapres-TTS	Metrogel	Trilipix
Cellcept suspension	Myfortic	Trizivir
Combivir	Niaspan	Valcyte
Depakote sprinkle	Patanase	Wellbutrin
Diastat	Protopic	Xeloda
Epivir HBV tablet	Pulmicort Respules	
Exforge	Rapamune tablet	

^{*}List is subject to change

Please keep in mind that drugs in this program may be subject to prior authorization requirements of other pharmacy programs, promoting the use of the most cost-effective product.