New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
0.9 % SODIUM CHLORIDE	0.9 %	SYRINGE	INJECTION	04/29/2025	0.06766
0.9 % SODIUM CHLORIDE	0.9 %	VIAL	INJECTION	06/10/2025	0.08712
0.9 % SODIUM CHLORIDE	0.9 %	SPRAY	NASAL	06/10/2025	0.04441
0.9 % SODIUM CHLORIDE	0.9 %	IV SOLN	INTRAVEN	06/10/2025	0.00241
ABACAVIR SULFATE	20 MG/ML	SOLUTION	ORAL	06/10/2025	0.49968
ABACAVIR SULFATE	300 MG	TABLET	ORAL	06/10/2025	0.49968
ABACAVIR SULFATE/LAMIVUDINE	600-300 MG	TABLET	ORAL	06/10/2025	1.55359
ABIRATERONE ACETATE	250 MG	TABLET	ORAL	04/22/2025	0.84375
ABIRATERONE ACETATE	500 MG	TABLET	ORAL	06/10/2025	12.84653
ACAI BERRY EXTRACT	500 MG	CAPSULE	ORAL	06/10/2025	0.05659
ACARBOSE	100 MG	TABLET	ORAL	06/10/2025	0.21450
ACARBOSE	50 MG	TABLET	ORAL	06/10/2025	0.16174
ACARBOSE	25 MG	TABLET	ORAL	06/10/2025	0.16205
ACEBUTOLOL HCL	200 MG	CAPSULE	ORAL	06/10/2025	0.40540
ACEBUTOLOL HCL	400 MG	CAPSULE	ORAL	06/10/2025	0.47098
ACETAMINOPHEN	160 MG/5ML	ORAL SUSP	ORAL	08/14/2025	0.00973
ACETAMINOPHEN	160 MG/5ML	ORAL SUSP	ORAL	04/08/2025	0.14472
ACETAMINOPHEN	325/10.15	ORAL SUSP	ORAL	10/10/2024	0.14254
ACETAMINOPHEN	650MG/20.3	ORAL SUSP	ORAL	01/23/2024	0.07129
ACETAMINOPHEN	160 MG/5ML	SOLUTION	ORAL	06/17/2025	0.18482
ACETAMINOPHEN	325/10.15	SOLUTION	ORAL	06/17/2025	0.13295

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ACETAMINOPHEN	650MG/20.3	SOLUTION	ORAL	06/17/2025	0.08413
ACETAMINOPHEN	160 MG/5ML	LIQUID	ORAL	08/28/2025	0.00994
ACETAMINOPHEN	500MG/15ML	LIQUID	ORAL	06/17/2025	0.01081
ACETAMINOPHEN	325 MG	TABLET	ORAL	06/17/2025	0.01322
ACETAMINOPHEN	500 MG	TABLET	ORAL	05/28/2024	0.01490
ACETAMINOPHEN	160 MG	TAB CHEW	ORAL	06/17/2025	0.01105
ACETAMINOPHEN	80 MG	TAB CHEW	ORAL	04/03/2025	0.10631
ACETAMINOPHEN	650 MG	TABLET ER	ORAL	08/28/2025	0.04543
ACETAMINOPHEN	120 MG	SUPP.RECT	RECTAL	11/21/2023	0.18410
ACETAMINOPHEN	325 MG	SUPP.RECT	RECTAL	01/29/2019	0.54916
ACETAMINOPHEN	650 MG	SUPP.RECT	RECTAL	06/17/2025	0.23219
ACETAMINOPHEN	1000MG/100	PIGGYBACK	INTRAVEN	06/17/2025	0.07175
ACETAMINOPHEN	1000MG/100	VIAL	INTRAVEN	06/17/2025	0.07973
ACETAMINOPHEN WITH CODEINE	300MG/12.5	SOLUTION	ORAL	05/06/2022	0.27794
ACETAMINOPHEN WITH CODEINE	300MG-15MG	TABLET	ORAL	07/31/2025	0.19095
ACETAMINOPHEN WITH CODEINE	300MG-30MG	TABLET	ORAL	07/31/2025	0.16549
ACETAMINOPHEN WITH CODEINE	300MG-60MG	TABLET	ORAL	06/17/2025	0.26950
ACETAMINOPHEN/CHLORPHENIRAMINE	325MG-2MG	TABLET	ORAL	12/14/2023	0.40418
ACETAMINOPHEN/D-BROMPHENIRAMIN	500MG-1MG	TABLET	ORAL	10/31/2024	0.10747
ACETAMINOPHEN/DEXTROMETHORPHAN	325-10/10	LIQUID	ORAL	02/20/2025	0.05757
ACETAMINOPHEN/DIPHENHYDRAMINE	500MG-25MG	TABLET	ORAL	03/22/2021	0.01487

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ACETAMINOPHEN/PYRILAMINE/CAFF	500-15-60	TABLET	ORAL	06/05/2025	0.13383
ACETAZOLAMIDE	500 MG	CAPSULE ER	ORAL	02/04/2025	0.26427
ACETAZOLAMIDE	125 MG	TABLET	ORAL	06/17/2025	0.16086
ACETAZOLAMIDE	250 MG	TABLET	ORAL	05/01/2025	0.21909
ACETAZOLAMIDE SODIUM	500 MG	VIAL	INJECTION	08/31/2023	32.13375
ACETIC ACID	2 %	SOLUTION	OTIC (EAR)	06/17/2025	0.00675
ACETIC ACID	0.25 %	IRRIG SOLN	IRRIGATION	06/17/2025	0.00675
ACETONE		LIQUID	MISCELL	08/01/2024	0.02504
ACETYLCARNITINE	500 MG	CAPSULE	ORAL	06/17/2025	0.14186
ACETYLCYST/METHYLB12/LEVOMEFOL	600-2-6 MG	TABLET	ORAL	06/18/2025	5.22287
ACETYLCYSTEINE	200 MG/ML	VIAL	INTRAVEN	08/07/2025	1.11778
ACETYLCYSTEINE	100 MG/ML	VIAL	MISCELL	06/17/2025	0.23203
ACETYLCYSTEINE	200 MG/ML	VIAL	MISCELL	06/17/2025	0.23203
ACITRETIN	10 MG	CAPSULE	ORAL	04/03/2025	5.59266
ACITRETIN	25 MG	CAPSULE	ORAL	06/17/2025	3.20832
ACITRETIN	17.5 MG	CAPSULE	ORAL	06/12/2025	12.76065
ACTIVATED CHARCOAL	260 MG	CAPSULE	ORAL	06/17/2025	0.04282
ACTIVATED CHARCOAL	25 G/120ML	ORAL SUSP	ORAL	06/17/2025	0.03637
ACTIVATED CHARCOAL	50G/240ML	ORAL SUSP	ORAL	06/17/2025	0.02180
ACTIVATED CHARCOAL/SORBITOL	25 G/120ML	ORAL SUSP	ORAL	06/17/2025	0.04211
ACTIVATED CHARCOAL/SORBITOL	50G/240ML	ORAL SUSP	ORAL	07/15/2025	0.08077

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ACYCLOVIR	200 MG	CAPSULE	ORAL	04/03/2025	0.11827
ACYCLOVIR	200 MG/5ML	ORAL SUSP	ORAL	04/03/2025	0.21788
ACYCLOVIR	800 MG	TABLET	ORAL	04/03/2025	0.19899
ACYCLOVIR	400 MG	TABLET	ORAL	07/17/2025	0.12248
ACYCLOVIR	5 %	CREAM (G)	TOPICAL	08/28/2025	11.48620
ACYCLOVIR	5 %	OINT. (G)	TOPICAL	06/17/2025	0.33915
ACYCLOVIR SODIUM	50 MG/ML	VIAL	INTRAVEN	08/19/2025	0.29930
ADAPALENE	0.1 %	GEL (GRAM)	TOPICAL	07/31/2025	0.50891
ADAPALENE	0.3 %	GEL (GRAM)	TOPICAL	04/03/2025	1.45762
ADAPALENE	0.1 %	CREAM (G)	TOPICAL	10/19/2023	3.41293
ADAPALENE	0.3 %	GEL W/PUMP	TOPICAL	08/14/2025	3.92069
ADAPALENE	0.1 %	SOLUTION	TOPICAL	05/06/2022	15.90732
ADAPALENE/BENZOYL PEROXIDE	0.1 %-2.5%	GEL W/PUMP	TOPICAL	06/26/2025	0.79745
ADAPALENE/BENZOYL PEROXIDE	0.3 %-2.5%	GEL W/PUMP	TOPICAL	06/12/2025	1.39241
ADEFOVIR DIPIVOXIL	10 MG	TABLET	ORAL	04/24/2025	38.98861
ADENOSINE	3 MG/ML	VIAL	INTRAVEN	07/11/2023	1.47266
ADENOSINE	3 MG/ML	VIAL	INTRAVEN	08/21/2025	2.27353
ALBENDAZOLE	200 MG	TABLET	ORAL	04/03/2025	11.95700
ALBUTEROL SULFATE	2 MG/5 ML	SYRUP	ORAL	08/22/2023	0.06147
ALBUTEROL SULFATE	2 MG	TABLET	ORAL	04/03/2025	0.82678
ALBUTEROL SULFATE	4 MG	TABLET	ORAL	04/17/2025	0.24937

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ALBUTEROL SULFATE	2.5 MG/3ML	VIAL-NEB	INHALATION	04/01/2025	0.05881
ALBUTEROL SULFATE	0.63MG/3ML	VIAL-NEB	INHALATION	07/17/2025	0.36216
ALBUTEROL SULFATE	1.25MG/3ML	VIAL-NEB	INHALATION	07/24/2025	0.31981
ALBUTEROL SULFATE	2.5 MG/0.5	VIAL-NEB	INHALATION	07/15/2025	0.96250
ALBUTEROL SULFATE	90 MCG	HFA AER AD	INHALATION	08/28/2025	2.33633
ALCLOMETASONE DIPROPIONATE	0.05 %	CREAM (G)	TOPICAL	01/16/2025	1.26272
ALCOHOL ANTISEPTIC PADS		MED. PAD	TOPICAL	12/19/2024	0.00670
ALENDRONATE SODIUM	70 MG/75ML	SOLUTION	ORAL	05/25/2023	0.77043
ALENDRONATE SODIUM	10 MG	TABLET	ORAL	04/03/2025	0.24120
ALENDRONATE SODIUM	70 MG	TABLET	ORAL	05/27/2025	0.21966
ALENDRONATE SODIUM	35 MG	TABLET	ORAL	06/12/2025	0.43550
ALFUZOSIN HCL	10 MG	TAB ER 24H	ORAL	11/28/2023	0.12355
ALISKIREN HEMIFUMARATE	300 MG	TABLET	ORAL	08/28/2025	8.58480
ALISKIREN HEMIFUMARATE	150 MG	TABLET	ORAL	04/03/2025	7.20175
ALLOPURINOL	100 MG	TABLET	ORAL	08/21/2025	0.03953
ALLOPURINOL	300 MG	TABLET	ORAL	08/19/2025	0.04652
ALLOPURINOL	200 MG	TABLET	ORAL	07/08/2025	3.65933
ALLOPURINOL SODIUM	500 MG	VIAL	INTRAVEN	12/28/2023	3882.39968
ALMOTRIPTAN MALATE	12.5 MG	TABLET	ORAL	04/03/2025	19.46262
ALMOTRIPTAN MALATE	6.25 MG	TABLET	ORAL	08/01/2022	21.45879
ALOSETRON HCL	1 MG	TABLET	ORAL	08/21/2025	10.19667

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ALOSETRON HCL	0.5 MG	TABLET	ORAL	08/21/2025	5.74717
ALPHA LIPOIC ACID	200 MG	CAPSULE	ORAL	06/12/2025	0.25951
ALPHA LIPOIC ACID	300 MG	CAPSULE	ORAL	04/24/2025	0.17232
ALPHA LIPOIC ACID	100 MG	CAPSULE	ORAL	09/26/2024	0.10486
ALPHA LIPOIC ACID	600 MG	CAPSULE	ORAL	11/02/2023	0.28855
ALPRAZOLAM	0.25 MG	TABLET	ORAL	02/27/2025	0.02921
ALPRAZOLAM	0.5 MG	TABLET	ORAL	04/15/2025	0.01667
ALPRAZOLAM	1 MG	TABLET	ORAL	04/03/2025	0.04161
ALPRAZOLAM	2 MG	TABLET	ORAL	04/03/2025	0.08201
ALPRAZOLAM	0.5 MG	TAB ER 24H	ORAL	04/03/2025	0.41629
ALPRAZOLAM	1 MG	TAB ER 24H	ORAL	06/12/2025	0.34952
ALPRAZOLAM	2 MG	TAB ER 24H	ORAL	04/03/2025	0.54181
ALPRAZOLAM	3 MG	TAB ER 24H	ORAL	04/03/2025	0.62533
ALPRAZOLAM	0.25 MG	TAB RAPDIS	ORAL	04/03/2025	1.56686
ALPRAZOLAM	0.5 MG	TAB RAPDIS	ORAL	05/06/2022	1.81945
ALPRAZOLAM	1 MG	TAB RAPDIS	ORAL	04/03/2025	2.66700
ALPRAZOLAM	2 MG	TAB RAPDIS	ORAL	05/06/2022	4.06600
ALPROSTADIL	20 MCG	KIT	INTRACAVER	11/03/2020	94.48500
ALPROSTADIL	10 MCG	KIT	INTRACAVER	03/24/2025	92.64333
ALUMINUM HYDROXIDE	0.275 %	OINT. (G)	TOPICAL	05/06/2022	0.23037
ALVIMOPAN	12 MG	CAPSULE	ORAL	08/30/2022	101.18048

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
AMANTADINE HCL	100 MG	CAPSULE	ORAL	07/17/2025	0.20904
AMANTADINE HCL	50 MG/5 ML	SOLUTION	ORAL	06/26/2025	0.07507
AMANTADINE HCL	100 MG	TABLET	ORAL	08/21/2025	0.73164
AMBRISENTAN	5 MG	TABLET	ORAL	04/29/2025	7.71750
AMBRISENTAN	10 MG	TABLET	ORAL	04/29/2025	9.54874
AMIKACIN SULFATE	500 MG/2ML	VIAL	INJECTION	06/18/2025	3.51120
AMIKACIN SULFATE	1000MG/4ML	VIAL	INJECTION	06/26/2025	3.47985
AMILORIDE HCL	5 MG	TABLET	ORAL	04/03/2025	0.42223
AMILORIDE/HYDROCHLOROTHIAZIDE	5 MG-50 MG	TABLET	ORAL	04/03/2025	0.75388
AMINO ACIDS		POWDER	ORAL	04/04/2024	0.29001
AMINO ACIDS		TABLET	ORAL	05/06/2022	0.22333
AMINOCAPROIC ACID	250 MG/ML	SOLUTION	ORAL	06/12/2025	1.81192
AMINOCAPROIC ACID	500 MG	TABLET	ORAL	10/31/2024	7.49440
AMINOCAPROIC ACID	1000 MG	TABLET	ORAL	04/03/2025	15.78185
AMINOCAPROIC ACID	250 MG/ML	VIAL	INTRAVEN	08/14/2025	0.59150
AMIODARONE HCL	200 MG	TABLET	ORAL	06/24/2025	0.10192
AMIODARONE HCL	100 MG	TABLET	ORAL	07/24/2025	1.43961
AMIODARONE HCL	400 MG	TABLET	ORAL	05/22/2025	2.67388
AMIODARONE HCL	50 MG/ML	VIAL	INTRAVEN	11/19/2024	0.49062
AMITRIPTYLINE HCL	10 MG	TABLET	ORAL	08/14/2025	0.03342
AMITRIPTYLINE HCL	100 MG	TABLET	ORAL	09/03/2024	0.09983

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AMITRIPTYLINE HCL	150 MG	TABLET	ORAL	06/17/2025	0.18854
AMITRIPTYLINE HCL	25 MG	TABLET	ORAL	07/03/2025	0.06101
AMITRIPTYLINE HCL	50 MG	TABLET	ORAL	06/17/2025	0.05885
AMITRIPTYLINE HCL	75 MG	TABLET	ORAL	05/27/2025	0.06195
AMLODIPINE BES/OLMESARTAN MED	5 MG-20 MG	TABLET	ORAL	04/02/2024	0.24165
AMLODIPINE BES/OLMESARTAN MED	10 MG-20MG	TABLET	ORAL	04/02/2024	0.31028
AMLODIPINE BES/OLMESARTAN MED	5 MG-40 MG	TABLET	ORAL	04/16/2024	0.30597
AMLODIPINE BES/OLMESARTAN MED	10 MG-40MG	TABLET	ORAL	03/11/2024	0.32115
AMLODIPINE BESYLATE	2.5 MG	TABLET	ORAL	07/31/2025	0.01640
AMLODIPINE BESYLATE	5 MG	TABLET	ORAL	05/06/2025	0.00910
AMLODIPINE BESYLATE	10 MG	TABLET	ORAL	05/06/2025	0.01462
AMLODIPINE BESYLATE/BENAZEPRIL	5 MG-20 MG	CAPSULE	ORAL	08/28/2025	0.19234
AMLODIPINE BESYLATE/BENAZEPRIL	5 MG-10 MG	CAPSULE	ORAL	08/28/2025	0.11503
AMLODIPINE BESYLATE/BENAZEPRIL	2.5MG-10MG	CAPSULE	ORAL	06/18/2025	0.34719
AMLODIPINE BESYLATE/BENAZEPRIL	10 MG-20MG	CAPSULE	ORAL	05/22/2025	0.24750
AMLODIPINE BESYLATE/BENAZEPRIL	5 MG-40 MG	CAPSULE	ORAL	07/24/2025	0.32508
AMLODIPINE BESYLATE/BENAZEPRIL	10 MG-40MG	CAPSULE	ORAL	07/03/2025	0.29078
AMLODIPINE BESYLATE/VALSARTAN	5 MG-160MG	TABLET	ORAL	05/08/2025	0.65854
AMLODIPINE BESYLATE/VALSARTAN	10MG-160MG	TABLET	ORAL	04/03/2025	0.74147
AMLODIPINE BESYLATE/VALSARTAN	5 MG-320MG	TABLET	ORAL	12/01/2022	0.67000
AMLODIPINE BESYLATE/VALSARTAN	10MG-320MG	TABLET	ORAL	05/08/2025	0.94872

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AMLODIPINE/ATORVASTATIN	5 MG-10 MG	TABLET	ORAL	04/01/2025	3.26392
AMLODIPINE/ATORVASTATIN	5 MG-20 MG	TABLET	ORAL	06/12/2025	3.47952
AMLODIPINE/ATORVASTATIN	5 MG-40 MG	TABLET	ORAL	06/12/2025	5.10356
AMLODIPINE/ATORVASTATIN	5 MG-80 MG	TABLET	ORAL	04/01/2025	4.37360
AMLODIPINE/ATORVASTATIN	10 MG-10MG	TABLET	ORAL	04/01/2025	3.09452
AMLODIPINE/ATORVASTATIN	10 MG-20MG	TABLET	ORAL	04/01/2025	4.23280
AMLODIPINE/ATORVASTATIN	10 MG-40MG	TABLET	ORAL	06/12/2025	4.84044
AMLODIPINE/ATORVASTATIN	10 MG-80MG	TABLET	ORAL	04/01/2025	4.23280
AMLODIPINE/ATORVASTATIN	2.5MG-10MG	TABLET	ORAL	06/12/2025	4.52078
AMLODIPINE/ATORVASTATIN	2.5MG-20MG	TABLET	ORAL	08/12/2025	5.19910
AMLODIPINE/ATORVASTATIN	2.5MG-40MG	TABLET	ORAL	08/12/2025	3.31851
AMLODIPINE/VALSARTAN/HCTHIAZID	5-160-12.5	TABLET	ORAL	04/01/2025	4.31200
AMLODIPINE/VALSARTAN/HCTHIAZID	10MG-160MG	TABLET	ORAL	04/08/2025	4.89192
AMLODIPINE/VALSARTAN/HCTHIAZID	5-160-25MG	TABLET	ORAL	04/08/2025	4.31200
AMLODIPINE/VALSARTAN/HCTHIAZID	10-160-25	TABLET	ORAL	04/08/2025	5.45443
AMLODIPINE/VALSARTAN/HCTHIAZID	10-320-25	TABLET	ORAL	06/17/2025	8.27040
AMMONIA	15 % (W/V)	AMPUL	INHALATION	07/10/2025	0.32361
AMMONIUM LACTATE	12 %	CREAM (G)	TOPICAL	04/24/2025	0.08255
AMMONIUM LACTATE	12 %	LOTION	TOPICAL	12/26/2023	0.05384
AMOXAPINE	100 MG	TABLET	ORAL	04/30/2024	1.47780
AMOXAPINE	150 MG	TABLET	ORAL	06/18/2025	4.94648

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AMOXAPINE	25 MG	TABLET	ORAL	08/06/2024	0.98155
AMOXAPINE	50 MG	TABLET	ORAL	04/30/2024	1.09570
AMOXICILLIN	250 MG	CAPSULE	ORAL	03/11/2025	0.06767
AMOXICILLIN	500 MG	CAPSULE	ORAL	03/06/2025	0.10050
AMOXICILLIN	125 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.03761
AMOXICILLIN	250 MG/5ML	SUSP RECON	ORAL	05/08/2025	0.03877
AMOXICILLIN	400 MG/5ML	SUSP RECON	ORAL	08/14/2025	0.04485
AMOXICILLIN	200 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.06566
AMOXICILLIN	500 MG	TABLET	ORAL	04/03/2025	0.20582
AMOXICILLIN	875 MG	TABLET	ORAL	05/29/2025	0.21239
AMOXICILLIN/POTASSIUM CLAV	125-31.25/	SUSP RECON	ORAL	04/25/2024	6.48462
AMOXICILLIN/POTASSIUM CLAV	250-62.5/5	SUSP RECON	ORAL	04/10/2025	0.50920
AMOXICILLIN/POTASSIUM CLAV	400-57MG/5	SUSP RECON	ORAL	07/10/2025	0.06754
AMOXICILLIN/POTASSIUM CLAV	200-28.5/5	SUSP RECON	ORAL	04/03/2025	0.08308
AMOXICILLIN/POTASSIUM CLAV	600-42.9/5	SUSP RECON	ORAL	07/10/2025	0.07571
AMOXICILLIN/POTASSIUM CLAV	250-125 MG	TABLET	ORAL	04/03/2025	2.28381
AMOXICILLIN/POTASSIUM CLAV	500-125 MG	TABLET	ORAL	08/28/2025	0.46096
AMOXICILLIN/POTASSIUM CLAV	875-125 MG	TABLET	ORAL	05/13/2025	0.26338
AMOXICILLIN/POTASSIUM CLAV	1000-62.5	TAB ER 12H	ORAL	05/06/2022	4.42294
AMPHETAMINE SULFATE	10 MG	TABLET	ORAL	04/03/2025	1.35340
AMPHETAMINE SULFATE	5 MG	TABLET	ORAL	04/03/2025	1.46837

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
AMPHOTERICIN B LIPOSOME	50 MG	VIAL	INTRAVEN	08/14/2025	165.47600
AMPICILLIN SOD/SULBACTAM SOD	1.5 G	VIAL	INJECTION	04/03/2025	2.34366
AMPICILLIN SOD/SULBACTAM SOD	3 G	VIAL	INJECTION	07/17/2025	4.59888
AMPICILLIN SOD/SULBACTAM SOD	15 G	VIAL	INJECTION	05/29/2025	22.82280
AMPICILLIN SODIUM	1 G	VIAL	INJECTION	05/22/2025	2.13060
AMPICILLIN SODIUM	10 G	VIAL	INJECTION	07/03/2025	39.81203
AMPICILLIN SODIUM	2 G	VIAL	INJECTION	05/22/2025	2.92182
AMPICILLIN SODIUM	250 MG	VIAL	INJECTION	05/06/2022	0.82410
AMPICILLIN SODIUM	500 MG	VIAL	INJECTION	02/27/2024	1.60800
AMPICILLIN TRIHYDRATE	500 MG	CAPSULE	ORAL	07/30/2024	0.42277
ANAGRELIDE HCL	0.5 MG	CAPSULE	ORAL	01/02/2025	1.20908
ANAGRELIDE HCL	1 MG	CAPSULE	ORAL	04/03/2025	2.78441
ANASTROZOLE	1 MG	TABLET	ORAL	04/03/2025	0.15142
ANISE OIL		OIL	MISCELL	05/06/2022	0.18733
APOMORPHINE HCL	10 MG/ML	CARTRIDGE	SUBCUT	05/06/2022	178.95304
APREPITANT	80 MG	CAPSULE	ORAL	08/28/2025	87.60675
APREPITANT	125 MG	CAPSULE	ORAL	08/28/2025	163.17316
APREPITANT	40 MG	CAPSULE	ORAL	08/28/2025	92.92240
APREPITANT	125MG-80MG	CAP DS PK	ORAL	01/27/2023	117.75399
ARFORMOTEROL TARTRATE	15MCG/2ML	VIAL-NEB	INHALATION	08/28/2025	0.55766
ARGATROBAN	100 MG/ML	VIAL	INTRAVEN	04/03/2025	91.73340

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ARGATROBAN IN 0.9 % SOD CHLOR	50 MG/50ML	VIAL	INTRAVEN	04/03/2025	2.54600
ARGININE	500 MG	CAPSULE	ORAL	12/20/2023	0.05936
ARGININE	500 MG	TABLET	ORAL	05/06/2022	0.08821
ARGININE HCL	500 MG	CAPSULE	ORAL	07/03/2025	0.07504
ARGININE HCL	1000 MG	TABLET	ORAL	08/07/2025	0.12924
ARIPIPRAZOLE	1 MG/ML	SOLUTION	ORAL	09/04/2025	0.75924
ARIPIPRAZOLE	10 MG	TABLET	ORAL	05/27/2025	0.09314
ARIPIPRAZOLE	15 MG	TABLET	ORAL	05/27/2025	0.09529
ARIPIPRAZOLE	20 MG	TABLET	ORAL	08/14/2025	0.08442
ARIPIPRAZOLE	30 MG	TABLET	ORAL	08/14/2025	0.09648
ARIPIPRAZOLE	5 MG	TABLET	ORAL	08/28/2025	0.04824
ARIPIPRAZOLE	2 MG	TABLET	ORAL	08/28/2025	0.04342
ARIPIPRAZOLE	10 MG	TAB RAPDIS	ORAL	07/15/2025	3.30000
ARIPIPRAZOLE	15 MG	TAB RAPDIS	ORAL	11/02/2023	3.30000
ARM BRACE		EACH	MISCELL	05/02/2024	7.30250
ARMODAFINIL	150 MG	TABLET	ORAL	11/12/2024	1.67187
ARMODAFINIL	50 MG	TABLET	ORAL	12/17/2024	0.49089
ARMODAFINIL	250 MG	TABLET	ORAL	11/19/2024	1.24770
ARMODAFINIL	200 MG	TABLET	ORAL	11/12/2024	1.69421
ARSENIC TRIOXIDE	10 MG/10ML	VIAL	INTRAVEN	04/03/2025	5.72224
ARSENIC TRIOXIDE	12 MG/6 ML	VIAL	INTRAVEN	06/12/2025	29.91531

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ASCORBIC ACID	500 MG	CAPSULE	ORAL	12/19/2024	0.06687
ASCORBIC ACID	500 MG	CAPSULE ER	ORAL	11/07/2022	0.05427
ASCORBIC ACID	1000 MG	TABLET	ORAL	07/17/2025	0.06137
ASCORBIC ACID	250 MG	TABLET	ORAL	04/03/2025	0.02787
ASCORBIC ACID	500 MG	TABLET	ORAL	08/07/2025	0.01702
ASCORBIC ACID	250 MG	TAB CHEW	ORAL	04/13/2023	0.06124
ASCORBIC ACID	500 MG	TAB CHEW	ORAL	07/17/2025	0.03374
ASCORBIC ACID	125 MG	TAB CHEW	ORAL	08/21/2025	0.09090
ASCORBIC ACID	1000 MG	TABLET ER	ORAL	04/11/2024	0.05936
ASCORBIC ACID	500 MG	TABLET ER	ORAL	04/11/2024	0.03280
ASCORBIC ACID	500 MG/ML	VIAL	INJECTION	05/06/2022	1.45497
ASCORBIC ACID/ASCORBATE SODIUM	500 MG	TAB CHEW	ORAL	10/12/2021	0.08250
ASENAPINE MALEATE	5 MG	TAB SUBL	SUBLINGUAL	08/21/2025	4.60460
ASENAPINE MALEATE	10 MG	TAB SUBL	SUBLINGUAL	05/14/2025	4.97728
ASENAPINE MALEATE	2.5 MG	TAB SUBL	SUBLINGUAL	12/14/2023	4.66906
ASPIRIN	325 MG	TABLET	ORAL	04/22/2025	0.01372
ASPIRIN	81 MG	TAB CHEW	ORAL	04/29/2025	0.02345
ASPIRIN	325 MG	TABLET DR	ORAL	08/26/2025	0.01913
ASPIRIN	81 MG	TABLET DR	ORAL	08/21/2025	0.01424
ASPIRIN/ACETAMINOPHEN/CAFFEINE	250-250-65	TABLET	ORAL	08/07/2025	0.02915
ASPIRIN/CAFFEINE	1000-65 MG	POWD PACK	ORAL	05/02/2024	0.18034

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ASPIRIN/CALCIUM CARB/MAGNESIUM	325 MG	TABLET	ORAL	11/14/2024	0.04633
ASPIRIN/DIPYRIDAMOLE	25MG-200MG	CPMP 12HR	ORAL	04/03/2025	1.64686
ASPIRIN/SOD BICARB/CITRIC ACID	325-1916MG	TABLET EFF	ORAL	08/07/2025	0.05308
ATAZANAVIR SULFATE	150 MG	CAPSULE	ORAL	07/17/2025	4.78258
ATAZANAVIR SULFATE	200 MG	CAPSULE	ORAL	03/21/2024	3.58028
ATAZANAVIR SULFATE	300 MG	CAPSULE	ORAL	08/21/2025	8.69560
ATENOLOL	100 MG	TABLET	ORAL	05/08/2025	0.04181
ATENOLOL	50 MG	TABLET	ORAL	07/10/2025	0.02916
ATENOLOL	25 MG	TABLET	ORAL	07/31/2025	0.02610
ATENOLOL/CHLORTHALIDONE	100MG-25MG	TABLET	ORAL	04/03/2025	0.60488
ATENOLOL/CHLORTHALIDONE	50 MG-25MG	TABLET	ORAL	08/19/2025	0.18060
ATOMOXETINE HCL	10 MG	CAPSULE	ORAL	09/26/2023	0.51408
ATOMOXETINE HCL	18 MG	CAPSULE	ORAL	08/21/2025	0.69680
ATOMOXETINE HCL	25 MG	CAPSULE	ORAL	05/27/2025	0.50788
ATOMOXETINE HCL	40 MG	CAPSULE	ORAL	08/21/2025	0.51233
ATOMOXETINE HCL	60 MG	CAPSULE	ORAL	08/21/2025	0.59630
ATOMOXETINE HCL	80 MG	CAPSULE	ORAL	08/21/2025	0.94336
ATOMOXETINE HCL	100 MG	CAPSULE	ORAL	08/21/2025	0.94336
ATORVASTATIN CALCIUM	10 MG	TABLET	ORAL	07/17/2025	0.02361
ATORVASTATIN CALCIUM	20 MG	TABLET	ORAL	07/17/2025	0.03028
ATORVASTATIN CALCIUM	40 MG	TABLET	ORAL	07/17/2025	0.04021

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ATORVASTATIN CALCIUM	80 MG	TABLET	ORAL	05/01/2025	0.06874
ATOVAQUONE	750 MG/5ML	ORAL SUSP	ORAL	04/10/2025	1.06039
ATOVAQUONE/PROGUANIL HCL	62.5-25 MG	TABLET	ORAL	11/26/2024	2.63404
ATOVAQUONE/PROGUANIL HCL	250-100 MG	TABLET	ORAL	06/12/2025	3.12035
ATRACURIUM BESYLATE	10 MG/ML	VIAL	INTRAVEN	05/06/2022	1.20426
ATROPINE SULFATE	0.1 MG/ML	SYRINGE	INJECTION	07/31/2025	1.40834
ATROPINE SULFATE	0.4 MG/ML	VIAL	INJECTION	05/08/2025	2.14253
ATROPINE SULFATE	1 %	DROPS	OPHTHALMIC	06/18/2025	5.28000
ATROPINE SULFATE	0.4 MG/ML	VIAL	INTRAVEN	04/03/2025	13.09812
ATROPINE SULFATE	1 MG/ML	VIAL	INTRAVEN	04/03/2025	13.13130
AVANAFIL	50 MG	TABLET	ORAL	03/25/2025	25.32060
AVANAFIL	100 MG	TABLET	ORAL	03/25/2025	25.32060
AVANAFIL	200 MG	TABLET	ORAL	03/25/2025	25.32060
AZACITIDINE	100 MG	VIAL	INJECTION	08/07/2025	22.66950
AZATHIOPRINE	50 MG	TABLET	ORAL	04/03/2025	0.27706
AZATHIOPRINE	75 MG	TABLET	ORAL	06/26/2025	13.16942
AZATHIOPRINE	100 MG	TABLET	ORAL	08/21/2025	8.61564
AZELAIC ACID	15 %	GEL (GRAM)	TOPICAL	04/15/2025	0.43222
AZELASTINE HCL	0.05 %	DROPS	OPHTHALMIC	08/28/2025	1.21940
AZELASTINE HCL	137 MCG	SPRAY/PUMP	NASAL	08/21/2025	0.26755
AZELASTINE HCL	205.5 MCG	SPRAY/PUMP	NASAL	03/11/2024	0.58915

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
AZELASTINE/FLUTICASONE	137-50 MCG	SPRAY/PUMP	NASAL	04/11/2024	3.94049
AZITHROMYCIN	200 MG/5ML	SUSP RECON	ORAL	02/25/2025	0.22631
AZITHROMYCIN	100 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.57531
AZITHROMYCIN	1 G	PACKET	ORAL	10/26/2021	15.29325
AZITHROMYCIN	500 MG	TABLET	ORAL	06/18/2025	0.51367
AZITHROMYCIN	250 MG	TABLET	ORAL	06/18/2025	0.22333
AZITHROMYCIN	600 MG	TABLET	ORAL	09/03/2024	0.64030
AZITHROMYCIN	500 MG	VIAL	INTRAVEN	07/24/2025	3.66168
AZTREONAM	1 G	VIAL	INJECTION	03/13/2025	25.13700
AZTREONAM	2 G	VIAL	INJECTION	04/03/2025	50.09944
B COMPLEX, C NO.20/FOLIC ACID	1 MG	CAPSULE	ORAL	05/06/2022	0.12539
B-COMPLEX WITH VITAMIN C		CAPSULE	ORAL	02/15/2024	0.09300
B-COMPLEX WITH VITAMIN C		TABLET	ORAL	07/03/2025	0.07517
B12/LEVOMEFOLATE CALCIUM/B-6	2-1.13-25	TABLET	ORAL	04/03/2025	1.31960
BACILLUS COAGULANS	1B CELL	TAB CHEW	ORAL	12/19/2024	0.26655
BACILLUS COAGULANS	2.5B CELL	TAB CHEW	ORAL	05/22/2025	0.19642
BACILLUS COAGULANS/INULIN	1B-250 MG	CAPSULE	ORAL	04/03/2025	0.43896
BACITRACIN	500 UNIT/G	OINT. (G)	TOPICAL	04/03/2025	0.16986
BACITRACIN	500 UNIT/G	PACKET	TOPICAL	08/14/2025	0.15494
BACITRACIN	50000 UNIT	VIAL	INTRAMUSC	05/06/2022	6.23761
BACITRACIN ZINC	500 UNIT/G	OINT PACK	TOPICAL	04/24/2025	0.03513

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BACITRACIN ZINC	500 UNIT/G	OINT. (G)	TOPICAL	08/07/2025	0.03398
BACITRACIN ZINC/POLYMYXIN B	500-10K/G	OINT. (G)	TOPICAL	05/15/2024	0.31896
BACITRACIN/POLYMYXIN B SULFATE	500-10K/G	OINT. (G)	OPHTHALMIC	08/15/2024	4.92548
BACLOFEN	25 MG/5 ML	ORAL SUSP	ORAL	10/01/2024	4.66800
BACLOFEN	10 MG/5 ML	SOLUTION	ORAL	03/25/2025	2.30711
BACLOFEN	10 MG	TABLET	ORAL	04/22/2025	0.02659
BACLOFEN	20 MG	TABLET	ORAL	08/28/2025	0.06755
BACLOFEN	5 MG	TABLET	ORAL	08/28/2025	0.18693
BACLOFEN	15 MG	TABLET	ORAL	09/19/2024	1.74200
BACLOFEN	50 MCG/ML	SYRINGE	INTRATHEC	07/13/2023	19.16250
BACLOFEN	10000/20ML	VIAL	INTRATHEC	09/12/2024	9.67725
BACLOFEN	40000/20ML	VIAL	INTRATHEC	08/14/2025	15.05175
BACLOFEN	20K MCG/20	VIAL	INTRATHEC	09/12/2024	17.67150
BACTERIOSTATIC SODIUM CHLORIDE	0.9 %	VIAL	INJECTION	06/05/2025	0.10948
BALSALAZIDE DISODIUM	750 MG	CAPSULE	ORAL	08/07/2025	0.72238
BEESWAX	100 %	WAX	MISCELL	07/25/2024	0.31490
BENAZEPRIL HCL	5 MG	TABLET	ORAL	07/03/2025	0.09313
BENAZEPRIL HCL	10 MG	TABLET	ORAL	07/03/2025	0.10814
BENAZEPRIL HCL	20 MG	TABLET	ORAL	04/03/2025	0.09857
BENAZEPRIL HCL	40 MG	TABLET	ORAL	04/03/2025	0.12449
BENAZEPRIL/HYDROCHLOROTHIAZIDE	5-6.25MG	TABLET	ORAL	12/14/2023	1.09143

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BENAZEPRIL/HYDROCHLOROTHIAZIDE	10-12.5 MG	TABLET	ORAL	04/03/2025	0.68796
BENAZEPRIL/HYDROCHLOROTHIAZIDE	20-12.5 MG	TABLET	ORAL	04/03/2025	0.61586
BENAZEPRIL/HYDROCHLOROTHIAZIDE	20 MG-25MG	TABLET	ORAL	04/03/2025	0.63824
BENDAMUSTINE HCL	25 MG	VIAL	INTRAVEN	07/17/2025	123.63550
BENDAMUSTINE HCL	100 MG	VIAL	INTRAVEN	04/03/2025	511.44425
BENDAMUSTINE HCL	25 MG/ML	VIAL	INTRAVEN	08/28/2025	457.58819
BENTONITE		POWDER	MISCELL	05/06/2022	0.16080
BENZALKONIUM CHLORIDE	0.1 %	GEL (ML)	TOPICAL	04/24/2025	24.65513
BENZETHONIUM CHLORIDE	0.1 %	CLEANSER	TOPICAL	05/06/2022	0.01554
BENZETHONIUM CHLORIDE	0.13 %	CLEANSER	TOPICAL	12/26/2024	0.00957
BENZOCAINE	10 %	GEL (GRAM)	MUCOUS MEM	05/06/2022	1.27874
BENZOCAINE	20 %	GEL (GRAM)	MUCOUS MEM	02/08/2024	0.06520
BENZOCAINE	20 %	GEL PACKET	MUCOUS MEM	01/16/2025	0.64744
BENZOCAINE	20 %	LIQUID	MUCOUS MEM	08/01/2024	0.39586
BENZOCAINE	15 MG	LOZENGE	MUCOUS MEM	07/21/2022	0.22445
BENZOCAINE/MENTH/CETYLPYRD CL	2-0.5-0.1%	SPRAY	MUCOUS MEM	03/14/2024	0.14293
BENZOCAINE/MENTH/CETYLPYRD CL	2-0.5-0.1%	SOLUTION	MUCOUS MEM	01/09/2025	0.15477
BENZOCAINE/MENTHOL	15MG-3.6MG	LOZENGE	MUCOUS MEM	05/09/2023	0.10906
BENZOCAINE/MENTHOL	20 %-1 %	MED. SWAB	TOPICAL	10/31/2024	0.42069
BENZOIN		TINCTURE	TOPICAL	02/13/2025	0.29832
BENZOIN		TINCTURE	TOPICAL	12/23/2024	0.14331

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BENZONATATE	100 MG	CAPSULE	ORAL	07/24/2025	0.08102
BENZONATATE	200 MG	CAPSULE	ORAL	07/17/2025	0.13025
BENZOYL PEROXIDE	9.8 %	FOAM	TOPICAL	06/01/2020	1.52700
BENZOYL PEROXIDE	10 %	GEL (GRAM)	TOPICAL	07/17/2025	0.07370
BENZOYL PEROXIDE	5 %	GEL (GRAM)	TOPICAL	04/03/2025	0.06526
BENZOYL PEROXIDE	10 %	CLEANSER	TOPICAL	08/14/2025	0.06082
BENZOYL PEROXIDE	5 %	CLEANSER	TOPICAL	08/07/2025	0.03103
BENZOYL PEROXIDE	10 %	CLEANSER	TOPICAL	03/11/2024	0.05019
BENZOYL PEROXIDE	7 %	CLEANSER	TOPICAL	05/06/2022	0.26655
BENZOYL PEROXIDE	10 %	LOTION	TOPICAL	03/13/2025	0.05927
BENZOYL PEROXIDE	6 %	TOWELETTE	TOPICAL	05/06/2022	6.18765
BENZPHETAMINE HCL	50 MG	TABLET	ORAL	04/03/2025	0.58196
BENZTROPINE MESYLATE	0.5 MG	TABLET	ORAL	08/21/2025	0.13454
BENZTROPINE MESYLATE	1 MG	TABLET	ORAL	04/22/2025	0.05968
BENZTROPINE MESYLATE	2 MG	TABLET	ORAL	07/03/2025	0.16696
BENZTROPINE MESYLATE	2 MG/2 ML	AMPUL	INJECTION	01/16/2020	27.67500
BENZTROPINE MESYLATE	2 MG/2 ML	VIAL	INJECTION	05/06/2022	23.62500
BEPOTASTINE BESILATE	1.5 %	DROPS	OPHTHALMIC	02/13/2025	10.35000
BETA-CAROTENE	7500 MCG	CAPSULE	ORAL	08/14/2025	0.06023
BETAINE	1G/SCOOP	POWDER	ORAL	05/02/2024	6.95872
BETAMETHASONE ACETATE,SOD PHOS	6 MG/ML	VIAL	INJECTION	10/03/2024	9.12000

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BETAMETHASONE DIPROPIONATE	0.05 %	CREAM (G)	TOPICAL	04/22/2025	0.37754
BETAMETHASONE DIPROPIONATE	0.05 %	OINT. (G)	TOPICAL	08/14/2025	0.70305
BETAMETHASONE DIPROPIONATE	0.05 %	LOTION	TOPICAL	04/03/2025	0.66665
BETAMETHASONE VALERATE	0.12 %	FOAM	TOPICAL	06/26/2025	0.74839
BETAMETHASONE VALERATE	0.1 %	CREAM (G)	TOPICAL	04/24/2025	0.76291
BETAMETHASONE VALERATE	0.1 %	OINT. (G)	TOPICAL	04/03/2025	0.81442
BETAMETHASONE VALERATE	0.1 %	LOTION	TOPICAL	03/19/2025	0.80679
BETAMETHASONE/PROPYLENE GLYC	0.05 %	CREAM (G)	TOPICAL	04/24/2025	0.24549
BETAMETHASONE/PROPYLENE GLYC	0.05 %	OINT. (G)	TOPICAL	04/03/2025	1.15562
BETAMETHASONE/PROPYLENE GLYC	0.05 %	LOTION	TOPICAL	04/15/2025	0.47391
BETAXOLOL HCL	10 MG	TABLET	ORAL	08/24/2023	0.82410
BETAXOLOL HCL	20 MG	TABLET	ORAL	07/14/2022	1.31119
BETHANECHOL CHLORIDE	10 MG	TABLET	ORAL	06/26/2025	0.53774
BETHANECHOL CHLORIDE	25 MG	TABLET	ORAL	08/21/2025	0.56213
BETHANECHOL CHLORIDE	5 MG	TABLET	ORAL	06/26/2025	0.39570
BETHANECHOL CHLORIDE	50 MG	TABLET	ORAL	07/31/2025	1.00862
BEXAROTENE	75 MG	CAPSULE	ORAL	08/07/2025	11.55000
BEXAROTENE	1 %	GEL (GRAM)	TOPICAL	04/03/2025	337.88408
BICALUTAMIDE	50 MG	TABLET	ORAL	09/03/2024	0.44577
BIMATOPROST	0.03 %	DROP W/APP	TOPICAL	03/02/2023	29.42160
BIMATOPROST	0.03 %	DROPS	OPHTHALMIC	04/24/2025	26.38760

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BIOFLAV,LEMON/VIT BCOMP,C	200-100 MG	TABLET	ORAL	05/25/2023	0.22341
BIOTIN	10000 MCG	CAPSULE	ORAL	03/27/2025	0.30632
BIOTIN	5 MG	CAPSULE	ORAL	09/26/2024	0.03350
BIOTIN	2500 MCG	CAPSULE	ORAL	05/06/2022	0.09986
BIOTIN	10 MG	TABLET	ORAL	08/21/2025	0.13735
BIOTIN	1 MG	TABLET	ORAL	02/23/2023	0.06980
BIOTIN	5 MG	TABLET	ORAL	08/15/2024	0.12272
BIOTIN	2500 MCG	TAB CHEW	ORAL	08/21/2025	0.11202
BIOTIN	10000 MCG	TAB RAPDIS	ORAL	06/12/2025	0.18380
BIOTIN	5000 MCG	TAB RAPDIS	ORAL	07/03/2025	0.10876
BISACODYL	5 MG	TABLET DR	ORAL	07/24/2025	0.01447
BISACODYL	10 MG	SUPP.RECT	RECTAL	09/04/2025	0.10519
BISMUTH SUBSALICYLATE	262MG/15ML	ORAL SUSP	ORAL	04/15/2025	0.00846
BISMUTH SUBSALICYLATE	525MG/15ML	ORAL SUSP	ORAL	08/12/2022	0.00894
BISMUTH SUBSALICYLATE	262 MG	TABLET	ORAL	03/19/2025	0.19668
BISMUTH SUBSALICYLATE	262 MG	TAB CHEW	ORAL	02/06/2025	0.13904
BISMUTH/METRONID/TETRACYCLINE	125-125 MG	CAPSULE	ORAL	04/04/2024	3.17795
BISOPROLOL FUMARATE	10 MG	TABLET	ORAL	04/03/2025	0.35229
BISOPROLOL FUMARATE	5 MG	TABLET	ORAL	04/03/2025	0.33098
BISOPROLOL/HYDROCHLOROTHIAZIDE	2.5-6.25MG	TABLET	ORAL	11/14/2024	0.15531
BISOPROLOL/HYDROCHLOROTHIAZIDE	5-6.25MG	TABLET	ORAL	03/13/2025	0.15531

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BISOPROLOL/HYDROCHLOROTHIAZIDE	10-6.25 MG	TABLET	ORAL	11/14/2024	0.15499
BIVALIRUDIN	250 MG	VIAL	INTRAVEN	07/11/2024	35.30100
BIVALIRUDIN	250MG/50ML	VIAL	INTRAVEN	02/06/2025	4.40154
BLEOMYCIN SULFATE	15 UNIT	VIAL	INJECTION	10/26/2021	21.73500
BLEOMYCIN SULFATE	30 UNIT	VIAL	INJECTION	10/26/2021	46.91425
BLOOD SUGAR DIAGNOSTIC		STRIP	MISCELL	11/21/2024	0.12959
BLOOD-GLUCOSE CALIB. CONTROL		COMBO. PKG	MISCELL	05/12/2022	4.55400
BLOOD-GLUCOSE METER, WIRELESS		KIT	MISCELL	05/12/2022	73.03125
BLOOD-KETONE CONTROL, NORMAL		EACH	MISCELL	05/12/2022	13.09350
BORIC ACID	600 MG	SUPP.VAG	VAGINAL	03/19/2025	0.46006
BORTEZOMIB	3.5 MG	VIAL	INJECTION	07/31/2025	17.38800
BOSENTAN	125 MG	TABLET	ORAL	02/06/2025	107.30153
BOSENTAN	62.5 MG	TABLET	ORAL	09/05/2024	107.30153
BRIMONIDINE TARTRATE	0.33 %	GEL W/PUMP	TOPICAL	10/10/2024	16.78810
BRIMONIDINE TARTRATE	0.2 %	DROPS	OPHTHALMIC	04/03/2025	0.59407
BRIMONIDINE TARTRATE	0.15 %	DROPS	OPHTHALMIC	06/12/2025	14.10360
BRIMONIDINE TARTRATE	0.1 %	DROPS	OPHTHALMIC	06/18/2025	6.35000
BRIMONIDINE TARTRATE/TIMOLOL	0.2%-0.5%	DROPS	OPHTHALMIC	07/22/2025	2.41200
BRINZOLAMIDE	1 %	DROPS SUSP	OPHTHALMIC	11/07/2023	5.45677
BROMELAINS	500 MG	TABLET	ORAL	12/08/2022	0.20558
BROMFENAC SODIUM	0.09 %	DROPS	OPHTHALMIC	05/30/2024	78.61750

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BROMFENAC SODIUM	0.07 %	DROPS	OPHTHALMIC	03/06/2025	49.96192
BROMFENAC SODIUM	0.075 %	DROPS	OPHTHALMIC	02/22/2024	47.17460
BROMOCRIPTINE MESYLATE	5 MG	CAPSULE	ORAL	04/24/2025	7.26271
BROMOCRIPTINE MESYLATE	2.5 MG	TABLET	ORAL	08/21/2025	2.65092
BROMPHENIR MAL/DEXTROMETH HBR	2-10MG/10	LIQUID	ORAL	09/04/2025	0.06666
BROMPHENIRAM/PHENYLEPHRINE/DM	1-2.5-5/5	SOLUTION	ORAL	08/28/2024	0.04119
BROMPHENIRAM/PHENYLEPHRINE/DM	2-5-10MG/5	LIQUID	ORAL	05/06/2022	0.05349
BROMPHENIRAM/PHENYLEPHRINE/DM	4-10-20/5	LIQUID	ORAL	05/06/2022	0.02691
BROMPHENIRAMINE/PHENYLEPHRINE	1-2.5 MG/5	SOLUTION	ORAL	07/07/2020	0.04110
BROMPHENIRAMINE/PSEUDOEPHED/DM	2-30-10/5	SYRUP	ORAL	08/28/2025	0.12743
BUDESONIDE	3 MG	CAPDR - ER	ORAL	08/14/2025	0.79489
BUDESONIDE	9 MG	TABDR - ER	ORAL	04/03/2025	27.92681
BUDESONIDE	2 MG	FOAM/APPL	RECTAL	04/03/2025	14.23033
BUDESONIDE	32 MCG	SPRAY/PUMP	NASAL	04/03/2025	2.09345
BUDESONIDE	1 MG/2 ML	AMPUL-NEB	INHALATION	04/03/2025	5.70865
BUDESONIDE	0.25MG/2ML	AMPUL-NEB	INHALATION	06/30/2025	1.13632
BUDESONIDE	0.5 MG/2ML	AMPUL-NEB	INHALATION	07/17/2025	1.00098
BUDESONIDE/FORMOTEROL FUMARATE	80-4.5 MCG	HFA AER AD	INHALATION	08/07/2025	18.54382
BUDESONIDE/FORMOTEROL FUMARATE	160-4.5MCG	HFA AER AD	INHALATION	08/07/2025	20.40294
BUMETANIDE	0.5 MG	TABLET	ORAL	09/04/2025	0.17058
BUMETANIDE	1 MG	TABLET	ORAL	08/21/2025	0.21011

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BUMETANIDE	2 MG	TABLET	ORAL	08/21/2025	0.34344
BUMETANIDE	0.25 MG/ML	VIAL	INJECTION	08/21/2025	0.27433
BUPIVACAINE HCL	2.5 MG/ML	VIAL	INJECTION	06/03/2024	0.06620
BUPIVACAINE HCL	5 MG/ML	VIAL	INJECTION	04/03/2025	0.04904
BUPIVACAINE HCL IN DEXTROSE/PF	0.75 %	AMPUL	INJECTION	04/03/2025	2.22909
BUPIVACAINE HCL/EPINEPHRINE	0.25-.0005	VIAL	INJECTION	05/22/2025	0.30043
BUPIVACAINE HCL/EPINEPHRINE	0.5-1:200K	VIAL	INJECTION	05/22/2025	0.28082
BUPIVACAINE HCL/EPINEPHRINE/PF	0.25-.0005	VIAL	INJECTION	05/22/2025	0.31267
BUPIVACAINE HCL/EPINEPHRINE/PF	0.5-1:200K	VIAL	INJECTION	06/05/2025	0.25651
BUPIVACAINE HCL/PF	2.5 MG/ML	VIAL	INJECTION	06/05/2025	0.08978
BUPIVACAINE HCL/PF	5 MG/ML	VIAL	INJECTION	09/04/2025	0.08933
BUPIVACAINE HCL/PF	7.5 MG/ML	VIAL	INJECTION	05/29/2025	0.17116
BUPRENORPHINE	5 MCG/HR	PATCH TDWK	TRANSDERM	04/03/2025	23.46488
BUPRENORPHINE	10 MCG/HR	PATCH TDWK	TRANSDERM	08/26/2025	27.07560
BUPRENORPHINE	20 MCG/HR	PATCH TDWK	TRANSDERM	01/21/2025	50.79312
BUPRENORPHINE	15 MCG/HR	PATCH TDWK	TRANSDERM	04/03/2025	52.62863
BUPRENORPHINE	7.5 MCG/HR	PATCH TDWK	TRANSDERM	04/03/2025	61.45388
BUPRENORPHINE HCL	2 MG	TAB SUBL	SUBLINGUAL	04/03/2025	0.54047
BUPRENORPHINE HCL	8 MG	TAB SUBL	SUBLINGUAL	07/31/2025	0.80355
BUPRENORPHINE HCL/NALOXONE HCL	2 MG-0.5MG	FILM	SUBLINGUAL	09/17/2024	2.05730
BUPRENORPHINE HCL/NALOXONE HCL	8 MG-2 MG	FILM	SUBLINGUAL	06/10/2024	2.79470

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BUPRENORPHINE HCL/NALOXONE HCL	4MG-1MG	FILM	SUBLINGUAL	08/21/2025	4.08320
BUPRENORPHINE HCL/NALOXONE HCL	12 MG-3 MG	FILM	SUBLINGUAL	09/17/2024	7.02600
BUPRENORPHINE HCL/NALOXONE HCL	2 MG-0.5MG	TAB SUBL	SUBLINGUAL	07/03/2025	1.16133
BUPRENORPHINE HCL/NALOXONE HCL	8 MG-2 MG	TAB SUBL	SUBLINGUAL	04/03/2025	1.08317
BUPROPION HCL	75 MG	TABLET	ORAL	07/17/2025	0.10465
BUPROPION HCL	100 MG	TABLET	ORAL	06/03/2025	0.11808
BUPROPION HCL	150 MG	TAB ER 24H	ORAL	09/04/2025	0.09395
BUPROPION HCL	300 MG	TAB ER 24H	ORAL	05/27/2025	0.06898
BUPROPION HCL	450 MG	TAB ER 24H	ORAL	10/01/2024	7.83330
BUPROPION HCL	150 MG	TAB ER 12H	ORAL	07/10/2025	0.41004
BUPROPION HCL	150 MG	TAB SR 12H	ORAL	05/27/2025	0.04967
BUPROPION HCL	100 MG	TAB SR 12H	ORAL	05/27/2025	0.04809
BUPROPION HCL	200 MG	TAB SR 12H	ORAL	04/03/2025	0.12864
BUSPIRONE HCL	10 MG	TABLET	ORAL	04/15/2025	0.03181
BUSPIRONE HCL	5 MG	TABLET	ORAL	04/15/2025	0.02132
BUSPIRONE HCL	30 MG	TABLET	ORAL	06/26/2025	0.14182
BUSPIRONE HCL	7.5 MG	TABLET	ORAL	05/27/2025	0.03874
BUSULFAN	60 MG/10ML	VIAL	INTRAVEN	10/26/2021	7.42500
BUTALB/ACETAMINOPHEN/CAFFEINE	50-325-40	CAPSULE	ORAL	03/04/2025	3.17731
BUTALB/ACETAMINOPHEN/CAFFEINE	50-300-40	CAPSULE	ORAL	06/26/2025	0.47061
BUTALB/ACETAMINOPHEN/CAFFEINE	50-325-40	TABLET	ORAL	07/17/2025	0.19711

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
BUTALBIT/ACETAMIN/CAFF/CODEINE	50-325-30	CAPSULE	ORAL	04/07/2020	1.08590
BUTALBIT/ACETAMIN/CAFF/CODEINE	50-300-30	CAPSULE	ORAL	07/17/2025	9.29868
BUTALBITAL/ACETAMINOPHEN	50MG-300MG	CAPSULE	ORAL	10/03/2024	8.72988
BUTALBITAL/ACETAMINOPHEN	50MG-325MG	TABLET	ORAL	05/29/2025	1.07200
BUTALBITAL/ACETAMINOPHEN	50MG-300MG	TABLET	ORAL	04/15/2025	1.28385
BUTALBITAL/ASPIRIN/CAFFEINE	50-325-40	CAPSULE	ORAL	08/05/2025	0.62310
BUTENAFINE HCL	1 %	CREAM (G)	TOPICAL	11/22/2023	0.45403
BUTORPHANOL TARTRATE	1 MG/ML	VIAL	INJECTION	06/10/2025	12.00980
BUTORPHANOL TARTRATE	2 MG/ML	VIAL	INJECTION	05/06/2022	4.13820
BUTORPHANOL TARTRATE	10 MG/ML	SPRAY	NASAL	04/03/2025	24.97740
BUTYLATED HYDROXYTOLUENE		GRANULES	MISCELL	07/27/2023	0.21370
CABERGOLINE	0.5 MG	TABLET	ORAL	04/03/2025	5.10381
CAFFEINE	200 MG	TABLET	ORAL	08/14/2025	0.07328
CAFFEINE CITRATE	60 MG/3 ML	SOLUTION	ORAL	05/22/2024	7.56200
CAFFEINE CITRATE	60 MG/3 ML	VIAL	INTRAVEN	06/13/2024	2.36733
CALAMINE/ZINC OXIDE	8 %-8 %	LOTION	TOPICAL	03/27/2025	0.00810
CALCIPOTRIENE	0.005 %	CREAM (G)	TOPICAL	07/17/2025	1.21114
CALCIPOTRIENE	0.005 %	OINT. (G)	TOPICAL	04/03/2025	2.59781
CALCIPOTRIENE/BETAMETHASONE	0.005-.064	SUSPENSION	TOPICAL	09/26/2023	1.49120
CALCIPOTRIENE/BETAMETHASONE	0.005-.064	OINT. (G)	TOPICAL	04/03/2025	2.34433
CALCITONIN,SALMON,SYNTHETIC	200/ML	VIAL	INJECTION	05/14/2025	317.75000

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CALCITONIN,SALMON,SYNTHETIC	200/SPRAY	SPRAY/PUMP	NASAL	08/07/2025	18.30122
CALCITRIOL	0.25 MCG	CAPSULE	ORAL	06/10/2025	0.14517
CALCITRIOL	0.5 MCG	CAPSULE	ORAL	08/19/2025	0.20500
CALCITRIOL	1 MCG/ML	SOLUTION	ORAL	05/13/2025	7.57766
CALCIUM ACETATE	667 MG	CAPSULE	ORAL	08/07/2025	0.31825
CALCIUM ACETATE	667 MG	TABLET	ORAL	04/03/2025	0.20649
CALCIUM ACETATE	667 MG	TABLET	ORAL	06/25/2024	0.35235
CALCIUM ACETATE/ALUMINUM SULF	952-1347MG	POWD PACK	TOPICAL	04/11/2024	0.84760
CALCIUM CARB, CITRATE/VIT D3	600MG-12.5	TABLET ER	ORAL	09/21/2023	0.16097
CALCIUM CARBONATE	500(1250)	TABLET	ORAL	08/07/2025	0.02412
CALCIUM CARBONATE	600 MG	TABLET	ORAL	11/21/2024	0.05695
CALCIUM CARBONATE	500(1250)	TAB CHEW	ORAL	04/13/2023	0.09702
CALCIUM CARBONATE	200(500)MG	TAB CHEW	ORAL	08/28/2025	0.01545
CALCIUM CARBONATE	300MG(750)	TAB CHEW	ORAL	06/05/2025	0.03646
CALCIUM CARBONATE/SIMETHICONE	750MG-80MG	TAB CHEW	ORAL	08/28/2025	0.12541
CALCIUM CARBONATE/VITAMIN D3	600MG-5MCG	CAPSULE	ORAL	05/22/2025	0.09146
CALCIUM CARBONATE/VITAMIN D3	600MG-12.5	CAPSULE	ORAL	02/23/2023	0.12663
CALCIUM CARBONATE/VITAMIN D3	600MG-5MCG	TABLET	ORAL	10/24/2024	0.03283
CALCIUM CARBONATE/VITAMIN D3	250-3.125	TABLET	ORAL	02/27/2025	0.02788
CALCIUM CARBONATE/VITAMIN D3	500 MG-10	TABLET	ORAL	02/08/2024	0.05941
CALCIUM CARBONATE/VITAMIN D3	600 MG-10	TABLET	ORAL	08/07/2025	0.02568

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CALCIUM CARBONATE/VITAMIN D3	500MG-5MCG	TABLET	ORAL	12/12/2024	0.02412
CALCIUM CARBONATE/VITAMIN D3	600 MG-20	TABLET	ORAL	07/17/2025	0.01359
CALCIUM CARBONATE/VITAMIN D3	500 MG-10	TAB CHEW	ORAL	09/14/2023	0.06640
CALCIUM CHLORIDE	100 MG/ML	SYRINGE	INTRAVEN	05/01/2025	1.73318
CALCIUM CHLORIDE	100 MG/ML	VIAL	INTRAVEN	09/10/2024	0.94839
CALCIUM CITRATE	200(950)MG	TABLET	ORAL	03/19/2025	0.06687
CALCIUM CITRATE	250 MG	TABLET	ORAL	05/06/2022	0.05333
CALCIUM CITRATE/VITAMIN D3	315MG-5MCG	TABLET	ORAL	04/03/2025	0.07169
CALCIUM CITRATE/VITAMIN D3	315MG-6.25	TABLET	ORAL	11/14/2024	0.04710
CALCIUM CITRATE/VITAMIN D3	200MG-6.25	TABLET	ORAL	08/28/2025	0.06439
CALCIUM GLUC IN NACL, ISO-OSM	1 G/50 ML	PLAST. BAG	INTRAVEN	04/03/2025	0.47013
CALCIUM GLUC IN NACL, ISO-OSM	2 G/100 ML	PLAST. BAG	INTRAVEN	04/03/2025	0.34817
CALCIUM GLUCONATE	100 MG/ML	VIAL	INTRAVEN	11/14/2023	0.43333
CALCIUM PHOSPHATE TRIB/VIT D3	250MG-12.5	TAB CHEW	ORAL	02/04/2025	0.12433
CALCIUM POLYCARBOPHIL	625 MG	TABLET	ORAL	04/15/2025	0.02411
CALCIUM/MAGNESIUM/ZINC	333-133-5	TABLET	ORAL	04/13/2023	0.07343
CAMPHOR/PHENOL	10.8-4.7%	GEL (GRAM)	TOPICAL	05/06/2022	0.33452
CAMPHOR/PHENOL	10.8-4.7%	SOLUTION	TOPICAL	10/06/2022	0.09960
CANDESARTAN CILEXETIL	4 MG	TABLET	ORAL	08/21/2025	0.88098
CANDESARTAN CILEXETIL	8 MG	TABLET	ORAL	12/26/2024	0.79179
CANDESARTAN CILEXETIL	16 MG	TABLET	ORAL	02/06/2025	0.71660

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CANDESARTAN CILEXETIL	32 MG	TABLET	ORAL	06/12/2025	1.40611
CANDESARTAN/HYDROCHLOROTHIAZID	16-12.5MG	TABLET	ORAL	08/28/2025	1.55604
CANDESARTAN/HYDROCHLOROTHIAZID	32-12.5MG	TABLET	ORAL	04/03/2025	2.40307
CANDESARTAN/HYDROCHLOROTHIAZID	32MG-25MG	TABLET	ORAL	08/28/2025	2.48853
CAPECITABINE	150 MG	TABLET	ORAL	04/03/2025	0.22780
CAPECITABINE	500 MG	TABLET	ORAL	06/17/2025	0.42210
CAPSAICIN	0.025 %	CREAM (G)	TOPICAL	09/18/2023	0.06298
CAPSAICIN	0.075 %	CREAM (G)	TOPICAL	08/14/2025	0.06159
CAPSAICIN	0.1 %	CREAM (G)	TOPICAL	03/27/2025	0.28534
CAPSAICIN	0.025 %	ADH. PATCH	TOPICAL	05/04/2021	1.59907
CAPSAICIN/ME-SALICYLATE/MENTH	0.025%-25%	LOTION	TOPICAL	05/06/2022	2.51250
CAPSAICIN/ME-SALICYLATE/MENTH	0.002%-20%	LOTION	TOPICAL	05/06/2022	2.32987
CAPSAICIN/MENTHOL	0.025-1.25	ADH. PATCH	TOPICAL	06/09/2022	0.66888
CAPSAICIN/MENTHOL	0.0375%-5%	ADH. PATCH	TOPICAL	05/06/2022	18.37500
CAPTOPRIL	100 MG	TABLET	ORAL	06/24/2025	0.46651
CAPTOPRIL	12.5 MG	TABLET	ORAL	06/24/2025	0.46336
CAPTOPRIL	25 MG	TABLET	ORAL	06/24/2025	0.54295
CAPTOPRIL	50 MG	TABLET	ORAL	06/24/2025	0.54295
CAPTOPRIL/HYDROCHLOROTHIAZIDE	25 MG-15MG	TABLET	ORAL	06/24/2025	0.46651
CAPTOPRIL/HYDROCHLOROTHIAZIDE	25 MG-25MG	TABLET	ORAL	06/24/2025	0.46651
CAPTOPRIL/HYDROCHLOROTHIAZIDE	50 MG-15MG	TABLET	ORAL	06/24/2025	0.46651

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CAPTOPRIL/HYDROCHLOROTHIAZIDE	50 MG-25MG	TABLET	ORAL	06/24/2025	0.46651
CARBAMAZEPINE	200 MG	CPMP 12HR	ORAL	04/30/2024	1.35474
CARBAMAZEPINE	300 MG	CPMP 12HR	ORAL	06/03/2024	1.43447
CARBAMAZEPINE	100 MG	CPMP 12HR	ORAL	06/06/2024	2.37560
CARBAMAZEPINE	100 MG/5ML	ORAL SUSP	ORAL	09/04/2025	0.13190
CARBAMAZEPINE	200 MG	TABLET	ORAL	08/14/2025	0.07973
CARBAMAZEPINE	100 MG	TAB CHEW	ORAL	04/24/2025	0.44761
CARBAMAZEPINE	200 MG	TAB ER 12H	ORAL	06/26/2025	0.51536
CARBAMAZEPINE	400 MG	TAB ER 12H	ORAL	05/06/2025	0.73547
CARBAMAZEPINE	100 MG	TAB ER 12H	ORAL	05/13/2025	0.21514
CARBAMIDE PEROXIDE	6.5 %	DROPS	OTIC (EAR)	06/12/2025	0.16040
CARBIDOPA	25 MG	TABLET	ORAL	04/03/2025	1.33866
CARBIDOPA/LEVODOPA	10MG-100MG	TABLET	ORAL	06/03/2025	0.06587
CARBIDOPA/LEVODOPA	25MG-100MG	TABLET	ORAL	07/03/2025	0.12341
CARBIDOPA/LEVODOPA	25MG-250MG	TABLET	ORAL	07/24/2025	0.14432
CARBIDOPA/LEVODOPA	50MG-200MG	TABLET ER	ORAL	05/29/2025	0.40455
CARBIDOPA/LEVODOPA	25MG-100MG	TABLET ER	ORAL	05/29/2025	0.31356
CARBIDOPA/LEVODOPA	10MG-100MG	TAB RAPDIS	ORAL	03/13/2025	0.81392
CARBIDOPA/LEVODOPA	25MG-100MG	TAB RAPDIS	ORAL	03/13/2025	0.91911
CARBIDOPA/LEVODOPA	25MG-250MG	TAB RAPDIS	ORAL	05/06/2022	1.17089
CARBIDOPA/LEVODOPA/ENTACAPONE	37.5-150MG	TABLET	ORAL	08/23/2022	1.19193

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CARBIDOPA/LEVODOPA/ENTACAPONE	25-100-200	TABLET	ORAL	08/23/2022	1.16031
CARBIDOPA/LEVODOPA/ENTACAPONE	12.5-50 MG	TABLET	ORAL	10/26/2021	1.72900
CARBIDOPA/LEVODOPA/ENTACAPONE	50-200-200	TABLET	ORAL	04/03/2025	1.52291
CARBIDOPA/LEVODOPA/ENTACAPONE	18.75-75MG	TABLET	ORAL	07/05/2018	1.72900
CARBIDOPA/LEVODOPA/ENTACAPONE	31.25-125	TABLET	ORAL	07/05/2018	1.72900
CARBINOXAMINE MALEATE	4 MG/5 ML	LIQUID	ORAL	09/02/2025	0.11708
CARBINOXAMINE MALEATE	4 MG	TABLET	ORAL	07/17/2025	0.82745
CARBOMER 934	56% TO 68%	POWDER	MISCELL	07/03/2019	0.63690
CARBOPLATIN	10 MG/ML	VIAL	INTRAVEN	08/28/2025	0.58473
CARBOPROST TROMETHAMINE	250 MCG/ML	VIAL	INTRAMUSC	05/01/2025	30.75000
CARBOXYMETHYLCELLULOSE SODIUM	1 %	DROPER GEL	OPHTHALMIC	09/19/2024	0.25951
CARBOXYMETHYLCELLULOSE SODIUM	1 %	DRP LQ GEL	OPHTHALMIC	05/06/2022	0.42299
CARBOXYMETHYLCELLULOSE SODIUM	0.5 %	DROPERETTE	OPHTHALMIC	08/07/2025	0.28998
CARBOXYMETHYLCELLULOSE SODIUM	0.5 %	DROPS	OPHTHALMIC	08/21/2025	0.57441
CARDIOPLEGIC SOLUTION NO.1	K+=16MEQ/L	PLST BG PR	PERFUSION	05/14/2025	0.08094
CARGLUMIC ACID	200 MG	TAB DISPER	ORAL	06/06/2024	128.86710
CARISOPRODOL	350 MG	TABLET	ORAL	08/28/2025	0.05615
CARISOPRODOL	250 MG	TABLET	ORAL	11/28/2023	1.79500
CARMUSTINE	100 MG	VIAL	INTRAVEN	09/04/2025	277.99025
CARVEDILOL	25 MG	TABLET	ORAL	06/05/2025	0.03481
CARVEDILOL	12.5 MG	TABLET	ORAL	05/13/2025	0.02036

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New Hampshire Medicaid Program
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CARVEDILOL	3.125 MG	TABLET	ORAL	04/03/2025	0.02571
CARVEDILOL	6.25 MG	TABLET	ORAL	05/13/2025	0.01538
CARVEDILOL PHOSPHATE	10 MG	CPMP 24HR	ORAL	06/03/2024	6.29242
CARVEDILOL PHOSPHATE	20 MG	CPMP 24HR	ORAL	06/11/2024	6.10501
CARVEDILOL PHOSPHATE	40 MG	CPMP 24HR	ORAL	06/11/2024	6.10501
CARVEDILOL PHOSPHATE	80 MG	CPMP 24HR	ORAL	06/03/2024	6.29242
CASPOFUNGIN ACETATE	50 MG	VIAL	INTRAVEN	04/03/2025	67.18875
CASPOFUNGIN ACETATE	70 MG	VIAL	INTRAVEN	09/26/2024	68.16250
CASTOR OIL	100 %	OIL	ORAL	06/26/2025	0.04830
CASTOR OIL		OIL	MISCELL	05/06/2022	0.05143
CEFACLOR	250 MG/5ML	SUSP RECON	ORAL	11/02/2023	1.30605
CEFACLOR	375 MG/5ML	SUSP RECON	ORAL	05/06/2022	1.95908
CEFADROXIL	500 MG	CAPSULE	ORAL	08/21/2025	0.47811
CEFADROXIL	250 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.30941
CEFADROXIL	500 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.41040
CEFAZOLIN SODIUM	1 G	VIAL	INJECTION	08/07/2025	0.99345
CEFAZOLIN SODIUM	10 G	VIAL	INJECTION	08/07/2025	6.10730
CEFAZOLIN SODIUM	500 MG	VIAL	INJECTION	04/03/2025	1.06932
CEFAZOLIN SODIUM	3 G	VIAL	INTRAVEN	04/04/2024	6.96595
CEFDINIR	300 MG	CAPSULE	ORAL	07/17/2025	0.45113
CEFDINIR	125 MG/5ML	SUSP RECON	ORAL	05/29/2025	0.15209

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CEFDINIR	250 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.23651
CEFEPIME HCL	1 G	VIAL	INJECTION	11/17/2022	2.07432
CEFEPIME HCL	2 G	VIAL	INJECTION	01/19/2023	7.17550
CEFIXIME	400 MG	CAPSULE	ORAL	05/07/2024	11.08880
CEFIXIME	100 MG/5ML	SUSP RECON	ORAL	07/31/2025	3.02254
CEFIXIME	200 MG/5ML	SUSP RECON	ORAL	05/06/2022	1.92960
CEFOTAXIME SODIUM	1 G	VIAL	INJECTION	02/08/2018	6.37540
CEFOTETAN DISODIUM	2 G	VIAL	INJECTION	08/01/2022	24.56123
CEFOXITIN SODIUM	10 G	VIAL	INTRAVEN	10/26/2023	58.15338
CEFOXITIN SODIUM	1 G	VIAL	INTRAVEN	08/28/2025	4.55400
CEFOXITIN SODIUM	2 G	VIAL	INTRAVEN	07/20/2023	8.52000
CEFPODOXIME PROXETIL	50 MG/5 ML	SUSP RECON	ORAL	07/14/2022	0.57741
CEFPODOXIME PROXETIL	100 MG/5ML	SUSP RECON	ORAL	05/06/2022	1.09853
CEFPODOXIME PROXETIL	100 MG	TABLET	ORAL	04/03/2025	3.75672
CEFPODOXIME PROXETIL	200 MG	TABLET	ORAL	04/03/2025	3.92040
CEFPROZIL	125 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.24870
CEFPROZIL	250 MG/5ML	SUSP RECON	ORAL	04/03/2025	0.41218
CEFPROZIL	250 MG	TABLET	ORAL	04/03/2025	1.82106
CEFPROZIL	500 MG	TABLET	ORAL	04/24/2025	1.71681
CEFTAZIDIME	1 G	VIAL	INJECTION	07/22/2025	3.06600
CEFTAZIDIME	2 G	VIAL	INJECTION	09/26/2024	7.24503

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CEFTAZIDIME	6 G	VIAL	INJECTION	09/26/2024	21.63411
CEFTAZIDIME	1 G	VIAL PORT	INTRAVEN	09/12/2019	6.90677
CEFTAZIDIME	2 G	VIAL PORT	INTRAVEN	09/12/2019	12.67310
CEFTRIAXONE SODIUM	1 G	VIAL	INJECTION	05/31/2023	1.58514
CEFTRIAXONE SODIUM	10 G	VIAL	INJECTION	07/12/2022	12.76000
CEFTRIAXONE SODIUM	2 G	VIAL	INJECTION	05/31/2023	2.76532
CEFTRIAXONE SODIUM	250 MG	VIAL	INJECTION	10/31/2024	1.26027
CEFTRIAXONE SODIUM	500 MG	VIAL	INJECTION	05/22/2025	1.27300
CEFUROXIME AXETIL	250 MG	TABLET	ORAL	08/14/2025	0.31825
CEFUROXIME AXETIL	500 MG	TABLET	ORAL	04/03/2025	0.40178
CEFUROXIME SODIUM	750 MG	VIAL	INJECTION	05/06/2022	2.82150
CEFUROXIME SODIUM	1.5 G	VIAL	INTRAVEN	11/16/2023	6.68122
CEFUROXIME SODIUM	7.5 G	VIAL	INTRAVEN	07/07/2016	19.95000
CELECOXIB	100 MG	CAPSULE	ORAL	08/21/2025	0.08731
CELECOXIB	200 MG	CAPSULE	ORAL	08/21/2025	0.11480
CELECOXIB	400 MG	CAPSULE	ORAL	06/18/2025	0.46744
CELECOXIB	50 MG	CAPSULE	ORAL	06/18/2025	0.09849
CELLULOSE		POWDER	MISCELL	09/08/2022	0.05625
CEPHALEXIN	250 MG	CAPSULE	ORAL	06/18/2025	0.10138
CEPHALEXIN	500 MG	CAPSULE	ORAL	07/10/2025	0.17326
CEPHALEXIN	750 MG	CAPSULE	ORAL	09/04/2025	6.35000

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CEPHALEXIN	125 MG/5ML	SUSP RECON	ORAL	08/21/2025	0.11202
CEPHALEXIN	250 MG/5ML	SUSP RECON	ORAL	08/14/2025	0.05434
CEPHALEXIN	250 MG	TABLET	ORAL	10/21/2024	1.10770
CEPHALEXIN	500 MG	TABLET	ORAL	10/21/2024	2.21500
CETIRIZINE HCL	10 MG	CAPSULE	ORAL	12/12/2024	0.37788
CETIRIZINE HCL	1 MG/ML	SOLUTION	ORAL	07/24/2025	0.04377
CETIRIZINE HCL	10 MG	TABLET	ORAL	05/06/2025	0.01664
CETIRIZINE HCL	5 MG	TABLET	ORAL	05/13/2025	0.04174
CETIRIZINE HCL	5 MG	TAB CHEW	ORAL	11/30/2023	1.65467
CETIRIZINE HCL	10 MG	TAB CHEW	ORAL	01/02/2025	1.21047
CETIRIZINE HCL/PSEUDOEPHEDRINE	5 MG-120MG	TAB ER 12H	ORAL	05/22/2025	0.90729
CETRORELIX ACETATE	0.25 MG	KIT	SUBCUT	08/14/2025	193.83775
CETYL ALC/STEARYL ALC/PG/SLS		CREAM (G)	TOPICAL	05/06/2022	0.03596
CEVIMELINE HCL	30 MG	CAPSULE	ORAL	07/10/2025	1.25625
CHLORDIAZEPOXIDE HCL	10 MG	CAPSULE	ORAL	06/12/2025	0.24830
CHLORDIAZEPOXIDE HCL	25 MG	CAPSULE	ORAL	06/12/2025	0.36247
CHLORDIAZEPOXIDE HCL	5 MG	CAPSULE	ORAL	07/10/2025	0.35966
CHLORDIAZEPOXIDE/CLIDINIUM BR	5 MG-2.5MG	CAPSULE	ORAL	04/03/2025	1.21645
CHLORHEXIDINE GLUCONATE	0.12 %	MOUTHWASH	MUCOUS MEM	04/03/2025	0.01501
CHLORHEXIDINE GLUCONATE	4 %	LIQUID	TOPICAL	03/27/2025	0.02299
CHLORHEXIDINE GLUCONATE	2 %	LIQUID	TOPICAL	03/04/2025	0.01987

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CHLOROPROCAINE HCL/PF	30 MG/ML	VIAL	INJECTION	05/19/2022	1.34938
CHLOROPROCAINE HCL/PF	20 MG/ML	VIAL	INJECTION	05/19/2022	1.28506
CHLOROQUINE PHOSPHATE	250 MG	TABLET	ORAL	04/03/2025	5.24066
CHLOROQUINE PHOSPHATE	500 MG	TABLET	ORAL	04/03/2025	12.01728
CHLOROTHIAZIDE SODIUM	500 MG	VIAL	INTRAVEN	07/14/2022	30.84840
CHLOROXYLENOL	0.43 %	CLEANSER	TOPICAL	05/06/2022	0.00333
CHLORPHENIR/PHENYLEPH/ASPIRIN	2-7.8-325	TABLET EFF	ORAL	07/17/2025	0.20332
CHLORPHENIRAMINE MALEATE	4 MG	TABLET	ORAL	08/07/2025	0.00757
CHLORPHENIRAMINE/DEXTROMETHORP	2-15MG/5ML	LIQUID	ORAL	01/19/2023	0.06343
CHLORPHENIRAMINE/DEXTROMETHORP	4 MG-30 MG	TABLET	ORAL	07/22/2025	0.08599
CHLORPHENIRAMINE/PHENYLEPH/DM	2-5-10MG/5	LIQUID	ORAL	01/11/2024	0.02224
CHLORPHENIRAMINE/PHENYLEPH/DM	4-10-15/5	LIQUID	ORAL	12/20/2023	0.09768
CHLORPHENIRAMINE/PHENYLEPHRINE	1-2.5 MG/5	LIQUID	ORAL	01/26/2023	0.06473
CHLORPROMAZINE HCL	10 MG	TABLET	ORAL	07/03/2025	0.46686
CHLORPROMAZINE HCL	100 MG	TABLET	ORAL	12/20/2023	1.37913
CHLORPROMAZINE HCL	200 MG	TABLET	ORAL	04/03/2025	1.06718
CHLORPROMAZINE HCL	25 MG	TABLET	ORAL	04/03/2025	0.39342
CHLORPROMAZINE HCL	50 MG	TABLET	ORAL	07/03/2025	1.82173
CHLORPROMAZINE HCL	25 MG/ML	AMPUL	INJECTION	04/24/2025	9.26640
CHLORPROMAZINE HCL	25 MG/ML	VIAL	INJECTION	08/14/2025	11.03916
CHLORTHALIDONE	25 MG	TABLET	ORAL	06/12/2025	0.05085

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CHLORTHALIDONE	50 MG	TABLET	ORAL	03/06/2025	0.07584
CHLORZOXAZONE	250 MG	TABLET	ORAL	05/01/2025	13.06375
CHLORZOXAZONE	500 MG	TABLET	ORAL	06/05/2025	0.49486
CHLORZOXAZONE	375 MG	TABLET	ORAL	09/12/2024	1.46408
CHLORZOXAZONE	750 MG	TABLET	ORAL	09/05/2024	2.14025
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	CAPSULE	ORAL	08/07/2025	0.02175
CHOLECALCIFEROL (VITAMIN D3)	10 MCG	CAPSULE	ORAL	12/26/2023	0.02000
CHOLECALCIFEROL (VITAMIN D3)	125 MCG	CAPSULE	ORAL	04/30/2025	0.02293
CHOLECALCIFEROL (VITAMIN D3)	250 MCG	CAPSULE	ORAL	07/03/2025	0.15038
CHOLECALCIFEROL (VITAMIN D3)	1250 MCG	CAPSULE	ORAL	05/27/2025	0.16360
CHOLECALCIFEROL (VITAMIN D3)	50 MCG	CAPSULE	ORAL	05/27/2025	0.03250
CHOLECALCIFEROL (VITAMIN D3)	10(400)/ML	DROPS	ORAL	11/07/2024	0.04837
CHOLECALCIFEROL (VITAMIN D3)	50MCG/DROP	DROPS	ORAL	12/20/2023	2.04773
CHOLECALCIFEROL (VITAMIN D3)	10MCG/DROP	DROPS	ORAL	04/11/2024	1.45058
CHOLECALCIFEROL (VITAMIN D3)	25MCG/DROP	DROPS	ORAL	08/31/2023	0.59989
CHOLECALCIFEROL (VITAMIN D3)	250 MCG	TABLET	ORAL	08/21/2025	0.81070
CHOLECALCIFEROL (VITAMIN D3)	10 MCG	TABLET	ORAL	05/06/2025	0.01227
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	TABLET	ORAL	08/14/2025	0.00893
CHOLECALCIFEROL (VITAMIN D3)	50 MCG	TABLET	ORAL	06/05/2025	0.02533
CHOLECALCIFEROL (VITAMIN D3)	125 MCG	TABLET	ORAL	04/03/2025	0.05025
CHOLECALCIFEROL (VITAMIN D3)	1250 MCG	TABLET	ORAL	08/28/2025	0.73700

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CHOLECALCIFEROL (VITAMIN D3)	10 MCG	TAB CHEW	ORAL	05/06/2022	0.05052
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	TAB CHEW	ORAL	05/11/2023	0.06968
CHOLECALCIFEROL (VITAMIN D3)	50 MCG	TAB CHEW	ORAL	11/05/2024	0.06040
CHOLECALCIFEROL (VITAMIN D3)	62.5 MCG	TAB CHEW	ORAL	08/22/2024	0.25594
CHOLESTEROL-BLOOD GLUCOSE METR		EACH	MISCELL	10/26/2023	185.11500
CHOLESTYRAMINE	4 G	POWD PACK	ORAL	04/30/2025	0.46700
CHOLESTYRAMINE	4 G	POWDER	ORAL	07/31/2025	0.19523
CHOLESTYRAMINE (WITH SUGAR)	4 G	POWD PACK	ORAL	07/03/2024	0.91410
CHOLESTYRAMINE (WITH SUGAR)	4 G	POWDER	ORAL	04/03/2025	0.12648
CHORIONIC GONADOTROPIN, HUMAN	10000 UNIT	VIAL	INTRAMUSC	08/01/2022	256.25465
CHROMIC CHLORIDE	4 MCG/ML	VIAL	INTRAVEN	06/24/2025	1.76484
CHROMIUM PICOLINATE	200 MCG	TABLET	ORAL	06/26/2025	0.04683
CICLOPIROX	0.77 %	GEL (GRAM)	TOPICAL	10/25/2021	0.70630
CICLOPIROX	8 %	SOLUTION	TOPICAL	06/18/2025	3.24400
CICLOPIROX	1 %	SHAMPOO	TOPICAL	06/26/2025	0.36493
CICLOPIROX OLAMINE	0.77 %	CREAM (G)	TOPICAL	04/03/2025	0.19534
CICLOPIROX OLAMINE	0.77 %	SUSPENSION	TOPICAL	08/14/2025	0.85090
CICLOPIROX/UREA/CAMPH/MEN/EUC	8 %	SOLUTION	TOPICAL	12/20/2023	14.74340
CIDOFOVIR	75 MG/ML	VIAL	INTRAVEN	10/26/2021	121.61215
CILOSTAZOL	100 MG	TABLET	ORAL	04/03/2025	0.28073
CILOSTAZOL	50 MG	TABLET	ORAL	04/03/2025	0.14137

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CIMETIDINE	200 MG	TABLET	ORAL	07/10/2025	0.58799
CIMETIDINE	300 MG	TABLET	ORAL	04/01/2025	0.22890
CIMETIDINE	400 MG	TABLET	ORAL	05/29/2025	0.68420
CIMETIDINE	800 MG	TABLET	ORAL	07/24/2025	2.36564
CIMETIDINE HCL	300 MG/5ML	SOLUTION	ORAL	04/03/2025	1.07771
CINACALCET HCL	30 MG	TABLET	ORAL	02/25/2025	0.31825
CINACALCET HCL	60 MG	TABLET	ORAL	04/29/2025	0.84420
CINACALCET HCL	90 MG	TABLET	ORAL	04/29/2025	1.35876
CINNAMON		OIL	MISCELL	07/27/2022	0.36180
CINNAMON BARK	500 MG	CAPSULE	ORAL	07/27/2022	0.05583
CIPROFLOXACIN	250 MG/5ML	SUS MC REC	ORAL	06/22/2023	2.01000
CIPROFLOXACIN	500 MG/5ML	SUS MC REC	ORAL	04/13/2023	2.04042
CIPROFLOXACIN HCL	250 MG	TABLET	ORAL	08/21/2025	0.21708
CIPROFLOXACIN HCL	500 MG	TABLET	ORAL	04/30/2025	0.11931
CIPROFLOXACIN HCL	750 MG	TABLET	ORAL	04/22/2025	0.19537
CIPROFLOXACIN HCL	0.3 %	DROPS	OPHTHALMIC	05/06/2025	1.63651
CIPROFLOXACIN HCL	0.2 %	DROPERETTE	OTIC (EAR)	05/05/2025	7.57006
CIPROFLOXACIN HCL/DEXAMETH	0.3 %-0.1%	DROPS SUSP	OTIC (EAR)	06/11/2024	14.56714
CIPROFLOXACIN IN 5 % DEXTROSE	200MG/0.1L	PIGGYBACK	INTRAVEN	07/24/2025	0.03350
CIPROFLOXACIN IN 5 % DEXTROSE	400MG/0.2L	PIGGYBACK	INTRAVEN	06/10/2025	0.04141
CISATRACURIUM BESYLATE	10 MG/ML	VIAL	INTRAVEN	08/21/2025	4.01280

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CISATRACURIUM BESYLATE	2 MG/ML	VIAL	INTRAVEN	05/19/2025	0.81574
CISPLATIN	1 MG/ML	VIAL	INTRAVEN	08/15/2024	0.15075
CITALOPRAM HYDROBROMIDE	10 MG/5 ML	SOLUTION	ORAL	08/21/2025	0.30362
CITALOPRAM HYDROBROMIDE	20 MG	TABLET	ORAL	07/17/2025	0.03337
CITALOPRAM HYDROBROMIDE	40 MG	TABLET	ORAL	06/12/2025	0.07014
CITALOPRAM HYDROBROMIDE	10 MG	TABLET	ORAL	05/27/2025	0.01911
CITRIC ACID/SODIUM CITRATE	334-500MG	SOLUTION	ORAL	11/25/2024	0.06092
CITRULLINE		POWDER	ORAL	05/06/2022	0.08308
CLADRIBINE	10 MG/10ML	VIAL	INTRAVEN	08/01/2024	34.08125
CLARITHROMYCIN	500 MG	TABLET	ORAL	08/28/2025	0.74482
CLARITHROMYCIN	250 MG	TABLET	ORAL	05/22/2025	1.61649
CLARITHROMYCIN	500 MG	TAB ER 24H	ORAL	04/23/2024	5.94127
CLINDAMYCIN HCL	150 MG	CAPSULE	ORAL	03/13/2025	0.09434
CLINDAMYCIN HCL	300 MG	CAPSULE	ORAL	08/14/2025	0.24107
CLINDAMYCIN HCL	75 MG	CAPSULE	ORAL	03/14/2024	0.29922
CLINDAMYCIN PALMITATE HCL	75 MG/5 ML	SOLN RECON	ORAL	04/03/2025	0.39048
CLINDAMYCIN PHOS/BENZOYL PEROX	1 %-5 %	GEL (GRAM)	TOPICAL	06/26/2025	0.71878
CLINDAMYCIN PHOS/BENZOYL PEROX	1.2(1)%-5%	GEL (GRAM)	TOPICAL	06/26/2025	1.08957
CLINDAMYCIN PHOS/BENZOYL PEROX	1 %-5 %	GEL W/PUMP	TOPICAL	10/17/2024	0.64052
CLINDAMYCIN PHOS/BENZOYL PEROX	1.2%-2.5%	GEL W/PUMP	TOPICAL	08/28/2025	5.66699
CLINDAMYCIN PHOS/BENZOYL PEROX	1.2%-3.75%	GEL W/PUMP	TOPICAL	04/03/2025	10.30745

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CLINDAMYCIN PHOSPHATE	150 MG/ML	VIAL	INJECTION	09/21/2023	0.48798
CLINDAMYCIN PHOSPHATE	1 %	FOAM	TOPICAL	07/31/2025	2.43371
CLINDAMYCIN PHOSPHATE	1 %	MED. SWAB	TOPICAL	05/13/2025	0.25323
CLINDAMYCIN PHOSPHATE	1 %	GEL (GRAM)	TOPICAL	04/03/2025	0.24790
CLINDAMYCIN PHOSPHATE	1 %	SOLUTION	TOPICAL	05/29/2025	0.17867
CLINDAMYCIN PHOSPHATE	1 %	LOTION	TOPICAL	08/28/2025	0.46386
CLINDAMYCIN PHOSPHATE	1 %	GEL DAILY	TOPICAL	09/19/2022	8.53088
CLINDAMYCIN PHOSPHATE	2 %	CREAM/APPL	VAGINAL	01/09/2025	2.44919
CLINDAMYCIN PHOSPHATE/D5W	300MG/50ML	PIGGYBACK	INTRAVEN	01/21/2025	0.21673
CLINDAMYCIN PHOSPHATE/D5W	600MG/50ML	PIGGYBACK	INTRAVEN	11/10/2022	0.10184
CLINDAMYCIN PHOSPHATE/D5W	900MG/50ML	PIGGYBACK	INTRAVEN	11/10/2022	0.12730
CLINDAMYCIN/TRETINOIN	1.2-0.025%	GEL (GRAM)	TOPICAL	04/03/2025	6.09473
CLOBAZAM	2.5 MG/ML	ORAL SUSP	ORAL	06/26/2025	0.27325
CLOBAZAM	10 MG	TABLET	ORAL	04/03/2025	0.43684
CLOBAZAM	20 MG	TABLET	ORAL	04/03/2025	0.75362
CLOBETASOL PROPIONATE	0.05 %	FOAM	TOPICAL	04/03/2025	0.53332
CLOBETASOL PROPIONATE	0.05 %	SPRAY	TOPICAL	06/26/2025	0.41594
CLOBETASOL PROPIONATE	0.05 %	GEL (GRAM)	TOPICAL	01/17/2023	0.52930
CLOBETASOL PROPIONATE	0.05 %	CREAM (G)	TOPICAL	04/03/2025	0.15574
CLOBETASOL PROPIONATE	0.05 %	OINT. (G)	TOPICAL	04/03/2025	0.20100
CLOBETASOL PROPIONATE	0.05 %	SOLUTION	TOPICAL	08/28/2025	0.31034

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CLOBETASOL PROPIONATE	0.05 %	LOTION	TOPICAL	04/03/2025	0.59142
CLOBETASOL PROPIONATE	0.05 %	SHAMPOO	TOPICAL	04/24/2025	0.56814
CLOBETASOL PROPIONATE/EMOLL	0.05 %	FOAM	TOPICAL	05/09/2024	2.19921
CLOBETASOL PROPIONATE/EMOLL	0.05 %	CREAM (G)	TOPICAL	04/03/2025	0.65705
CLOCORTOLONE PIVALATE	0.1 %	CREAM (G)	TOPICAL	06/17/2025	4.72956
CLOFARABINE	20 MG/20ML	VIAL	INTRAVEN	06/12/2025	27.39108
CLOMIPHENE CITRATE	50 MG	TABLET	ORAL	03/19/2025	2.54600
CLOMIPRAMINE HCL	25 MG	CAPSULE	ORAL	06/26/2025	0.32441
CLOMIPRAMINE HCL	50 MG	CAPSULE	ORAL	06/26/2025	0.43885
CLOMIPRAMINE HCL	75 MG	CAPSULE	ORAL	06/26/2025	0.38979
CLONAZEPAM	0.5 MG	TABLET	ORAL	04/22/2025	0.01623
CLONAZEPAM	1 MG	TABLET	ORAL	08/26/2025	0.02788
CLONAZEPAM	2 MG	TABLET	ORAL	08/26/2025	0.03277
CLONAZEPAM	0.125 MG	TAB RAPDIS	ORAL	04/03/2025	1.04140
CLONAZEPAM	0.25 MG	TAB RAPDIS	ORAL	08/28/2025	0.95899
CLONAZEPAM	0.5 MG	TAB RAPDIS	ORAL	06/12/2025	0.97396
CLONAZEPAM	1 MG	TAB RAPDIS	ORAL	04/03/2025	1.03113
CLONAZEPAM	2 MG	TAB RAPDIS	ORAL	04/03/2025	1.78756
CLONIDINE	0.1MG/24HR	PATCH TDWK	TRANSDERM	04/15/2025	5.45302
CLONIDINE	0.2MG/24HR	PATCH TDWK	TRANSDERM	06/24/2025	7.67280
CLONIDINE	0.3MG/24HR	PATCH TDWK	TRANSDERM	09/12/2024	15.38250

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CLONIDINE HCL	0.1 MG	TABLET	ORAL	04/15/2025	0.02116
CLONIDINE HCL	0.2 MG	TABLET	ORAL	04/03/2025	0.04092
CLONIDINE HCL	0.3 MG	TABLET	ORAL	04/03/2025	0.04328
CLONIDINE HCL	0.17 MG	TAB ER 24H	ORAL	04/03/2025	22.15745
CLONIDINE HCL	0.1 MG	TAB ER 12H	ORAL	04/02/2024	0.47726
CLONIDINE HCL/PF	1000MCG/10	VIAL	EPIDURAL	09/28/2023	2.54600
CLONIDINE HCL/PF	5000MCG/10	VIAL	EPIDURAL	05/06/2022	10.92500
CLOPIDOGREL BISULFATE	75 MG	TABLET	ORAL	05/27/2025	0.05379
CLOPIDOGREL BISULFATE	300 MG	TABLET	ORAL	03/27/2025	5.88606
CLORAZEPATE DIPOTASSIUM	15 MG	TABLET	ORAL	07/03/2025	3.22423
CLORAZEPATE DIPOTASSIUM	3.75 MG	TABLET	ORAL	07/03/2025	1.81503
CLORAZEPATE DIPOTASSIUM	7.5 MG	TABLET	ORAL	07/18/2022	1.30000
CLOTRIMAZOLE	10 MG	TROCHE	MUCOUS MEM	04/03/2025	0.48297
CLOTRIMAZOLE	1 %	CREAM (G)	TOPICAL	07/31/2025	0.13757
CLOTRIMAZOLE	1 %	SOLUTION	TOPICAL	09/04/2025	1.16223
CLOTRIMAZOLE	1 %	CREAM/APPL	VAGINAL	04/22/2025	0.04050
CLOTRIMAZOLE	2 %	CREAM/APPL	VAGINAL	04/03/2025	0.38413
CLOTRIMAZOLE/BETAMETHASONE DIP	1 %-0.05 %	CREAM (G)	TOPICAL	04/03/2025	0.27425
CLOZAPINE	25 MG	TABLET	ORAL	04/03/2025	0.36729
CLOZAPINE	100 MG	TABLET	ORAL	04/03/2025	0.60514
CLOZAPINE	50 MG	TABLET	ORAL	04/01/2025	0.46638

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CLOZAPINE	200 MG	TABLET	ORAL	05/27/2025	0.92767
CLOZAPINE	25 MG	TAB RAPDIS	ORAL	05/27/2025	2.46036
CLOZAPINE	100 MG	TAB RAPDIS	ORAL	04/03/2025	5.15899
CLOZAPINE	150 MG	TAB RAPDIS	ORAL	03/24/2025	11.39369
CLOZAPINE	200 MG	TAB RAPDIS	ORAL	04/01/2025	14.50113
COAL TAR	2 %	FOAM	TOPICAL	05/06/2022	0.20100
COAL TAR	0.5 %	SHAMPOO	TOPICAL	07/24/2025	0.06238
COAL TAR	2 %	SHAMPOO	TOPICAL	05/06/2022	0.06796
COCAINE HCL	4 %	SOLUTION	NASAL	06/12/2025	90.87906
COCOA BUTTER		CREAM (G)	MISCELL	05/06/2022	0.21105
COD LIVER OIL		CAPSULE	ORAL	07/30/2024	0.04654
CODEINE PHOSPHATE/GUAIFENESIN	10-100MG/5	LIQUID	ORAL	04/03/2025	0.04508
CODEINE PHOSPHATE/GUAIFENESIN	20-200/10	LIQUID	ORAL	03/09/2023	0.05461
CODEINE SULFATE	30 MG	TABLET	ORAL	04/03/2025	0.99589
CODEINE/BUTALBITAL/ASA/CAFFEIN	30-50-325	CAPSULE	ORAL	07/17/2025	2.84658
COLCHICINE	0.6 MG	CAPSULE	ORAL	05/08/2025	4.07722
COLCHICINE	0.6 MG	TABLET	ORAL	08/28/2025	0.24254
COLESEVELAM HCL	3.75 G	POWD PACK	ORAL	06/18/2025	7.59121
COLESEVELAM HCL	625 MG	TABLET	ORAL	07/31/2025	0.42433
COLESTIPOL HCL	5 G	GRANULES	ORAL	05/06/2022	0.31356
COLESTIPOL HCL	5 G	PACKET	ORAL	11/22/2023	2.63280

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
COLESTIPOL HCL	1 G	TABLET	ORAL	05/29/2025	0.95966
COLISTIN (COLISTIMETHATE NA)	150 MG	VIAL	INJECTION	12/08/2022	12.65000
COLLAGEN,BOVINE	100 %	POWDER	TOPICAL	05/06/2022	10.63750
COLLOIDAL OATMEAL	1 %	CREAM (G)	TOPICAL	05/22/2025	0.06587
COMPOUND VEH.SUSP SUGAR-FREE 1		ORAL SUSP	ORAL	05/06/2022	0.06700
COMPOUND VEHICLE SUGAR-FREE 9		LIQUID	ORAL	04/03/2025	0.04111
COMPOUND VEHICLE SUSP SF NO.20		ORAL SUSP	ORAL	04/03/2025	0.06742
COMPOUND VEHICLE SUSP SF NO.24		ORAL SUSP	ORAL	05/06/2022	0.08835
COMPOUNDING VEHICLE SUSP NO.19		ORAL SUSP	ORAL	04/03/2025	0.06742
COMPOUNDING VEHICLE SYRUP NO23		SYRUP	ORAL	06/03/2025	0.02163
CONNECTOR LUER LOCK,CLOSD SYST		EACH	MISCELL	06/07/2023	6.00075
COSYNTROPIN	0.25 MG	VIAL	INJECTION	10/26/2021	54.22660
COVID-19 ANTIGEN TEST		KIT	MISCELL	04/14/2022	12.00000
CPD VEHICLE SOL.SUGARFREE NO.1		SOLUTION	ORAL	04/24/2025	0.06697
CPD VEHICLE SUSP.SUGAR-FREE 12		ORAL SUSP	ORAL	05/06/2022	0.03266
CRANBERRY FRUIT EXTRACT	425 MG	CAPSULE	ORAL	07/27/2022	0.05572
CRANBERRY FRUIT EXTRACT	250 MG	CAPSULE	ORAL	07/27/2022	0.15321
CRANBERRY FRUIT EXTRACT	200 MG	CAPSULE	ORAL	07/27/2022	0.11167
CROMOLYN SODIUM	20 MG/ML	ORAL CONC	ORAL	07/16/2024	0.48514
CROMOLYN SODIUM	5.2 MG	SPRAY/PUMP	NASAL	06/30/2022	0.68082
CROMOLYN SODIUM	20 MG/2 ML	AMPUL-NEB	INHALATION	02/04/2025	1.67500

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CROTAMITON	10 %	LOTION	TOPICAL	06/12/2025	3.61252
CUPRIC CHLORIDE	0.4 MG/ML	VIAL	INTRAVEN	02/25/2025	2.17750
CYANOCOBALAMIN (VITAMIN B-12)	100 MCG	TABLET	ORAL	11/22/2022	0.02915
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TABLET	ORAL	08/07/2025	0.02575
CYANOCOBALAMIN (VITAMIN B-12)	250 MCG	TABLET	ORAL	07/17/2025	0.02659
CYANOCOBALAMIN (VITAMIN B-12)	500 MCG	TABLET	ORAL	07/17/2025	0.01997
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TABLET ER	ORAL	07/24/2025	0.03936
CYANOCOBALAMIN (VITAMIN B-12)	1000MCG/ML	VIAL	INJECTION	01/14/2025	0.37122
CYANOCOBALAMIN (VITAMIN B-12)	500MCG/SPR	SPRAY	NASAL	08/12/2025	90.33837
CYANOCOBALAMIN (VITAMIN B-12)	5000MCG/ML	DROPS	SUBLINGUAL	10/03/2024	0.27254
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TAB SUBL	SUBLINGUAL	08/19/2025	0.03105
CYANOCOBALAMIN (VITAMIN B-12)	2500 MCG	TAB SUBL	SUBLINGUAL	09/26/2024	0.12690
CYANOCOBALAMIN/COBAMAMIDE	5K-100 MCG	TAB SUBL	SUBLINGUAL	06/15/2023	0.33031
CYANOCOBALAMIN/FOLIC AC/VIT B6	1-2.5-25MG	TABLET	ORAL	04/24/2025	0.20591
CYANOCOBALAMIN/FOLIC AC/VIT B6	2-2.5-25MG	TABLET	ORAL	04/03/2025	0.21872
CYANOCOBALAMIN/FOLIC ACID	0.5 MG-1MG	TABLET	ORAL	05/06/2022	0.19296
CYANOCOBALAMIN/MECOBALAMIN	600-600MCG	TAB SUBL	SUBLINGUAL	05/06/2022	0.30572
CYCLOBENZAPRINE HCL	15 MG	CAP ER 24H	ORAL	08/28/2025	3.79214
CYCLOBENZAPRINE HCL	30 MG	CAP ER 24H	ORAL	05/08/2025	4.50956
CYCLOBENZAPRINE HCL	10 MG	TABLET	ORAL	08/28/2025	0.02104
CYCLOBENZAPRINE HCL	5 MG	TABLET	ORAL	08/21/2025	0.02586

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
CYCLOBENZAPRINE HCL	7.5 MG	TABLET	ORAL	04/01/2025	0.87797
CYCLOPENTOLATE HCL	1 %	DROPS	OPHTHALMIC	04/30/2025	1.75537
CYCLOPHOSPHAMIDE	25 MG	CAPSULE	ORAL	06/12/2025	2.80540
CYCLOPHOSPHAMIDE	50 MG	CAPSULE	ORAL	04/03/2025	4.87780
CYCLOPHOSPHAMIDE	1 G	VIAL	INTRAVEN	04/11/2024	226.97600
CYCLOPHOSPHAMIDE	2 G	VIAL	INTRAVEN	07/30/2024	224.21875
CYCLOPHOSPHAMIDE	500 MG	VIAL	INTRAVEN	08/21/2025	91.79900
CYCLOPHOSPHAMIDE	200 MG/ML	VIAL	INTRAVEN	12/05/2024	47.41958
CYCLOSERINE	250 MG	CAPSULE	ORAL	03/21/2024	79.26564
CYCLOSPORINE	100 MG	CAPSULE	ORAL	07/11/2024	17.18693
CYCLOSPORINE	25 MG	CAPSULE	ORAL	07/11/2024	5.26034
CYCLOSPORINE	0.05 %	DROPERETTE	OPHTHALMIC	04/03/2025	3.77608
CYCLOSPORINE	250 MG/5ML	AMPUL	INTRAVEN	08/12/2025	5.95973
CYCLOSPORINE, MODIFIED	100 MG	CAPSULE	ORAL	04/03/2025	2.26817
CYCLOSPORINE, MODIFIED	25 MG	CAPSULE	ORAL	06/20/2023	0.55000
CYCLOSPORINE, MODIFIED	50 MG	CAPSULE	ORAL	06/18/2025	1.97784
CYCLOSPORINE, MODIFIED	100 MG/ML	SOLUTION	ORAL	03/13/2025	9.46405
CYPROHEPTADINE HCL	2 MG/5 ML	SYRUP	ORAL	06/18/2025	0.06643
CYPROHEPTADINE HCL	4 MG	TABLET	ORAL	08/26/2025	0.07605
CYTARABINE/PF	2 G/20 ML	VIAL	INJECTION	04/17/2025	1.09076
CYTARABINE/PF	100 MG/5ML	VIAL	INJECTION	02/29/2024	0.76380

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
D-METHORPHAN/PE/ACETAMINOPHEN	10-5-325MG	CAPSULE	ORAL	05/31/2023	0.26485
D-METHORPHAN/PE/ACETAMINOPHEN	5-325MG/15	LIQUID	ORAL	08/15/2024	0.03398
D-METHORPHAN/PE/ACETAMINOPHEN	10-5-325MG	TABLET	ORAL	11/07/2024	0.32525
D-METHORPHAN/PE/DEXBROMPHENIR	15-7.5-2/5	LIQUID	ORAL	04/03/2025	0.06790
DABIGATRAN ETEXILATE MESYLATE	75 MG	CAPSULE	ORAL	05/01/2025	0.93130
DABIGATRAN ETEXILATE MESYLATE	110 MG	CAPSULE	ORAL	05/08/2025	3.96284
DABIGATRAN ETEXILATE MESYLATE	150 MG	CAPSULE	ORAL	09/02/2025	1.11513
DACARBAZINE	200 MG	VIAL	INTRAVEN	05/28/2024	4.09530
DACTINOMYCIN	0.5 MG	VIAL	INTRAVEN	04/03/2025	609.87500
DALFAMPRIDINE	10 MG	TAB ER 12H	ORAL	06/12/2025	0.67603
DANAZOL	100 MG	CAPSULE	ORAL	04/03/2025	5.63651
DANAZOL	200 MG	CAPSULE	ORAL	04/03/2025	6.07301
DANAZOL	50 MG	CAPSULE	ORAL	04/03/2025	3.03692
DANTROLENE SODIUM	100 MG	CAPSULE	ORAL	04/24/2025	2.08692
DANTROLENE SODIUM	25 MG	CAPSULE	ORAL	04/03/2025	1.01733
DANTROLENE SODIUM	50 MG	CAPSULE	ORAL	04/03/2025	1.67956
DANTROLENE SODIUM	20 MG	VIAL	INTRAVEN	10/18/2021	69.04861
DAPAGLIFLOZ PROPANED/METFORMIN	5MG-1000MG	TAB BP 24H	ORAL	03/25/2025	5.82033
DAPAGLIFLOZ PROPANED/METFORMIN	10-1000 MG	TAB BP 24H	ORAL	03/25/2025	5.67689
DAPAGLIFLOZIN PROPANEDIOL	10 MG	TABLET	ORAL	01/14/2025	11.92433
DAPAGLIFLOZIN PROPANEDIOL	5 MG	TABLET	ORAL	06/10/2024	11.92433

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DAPSONE	100 MG	TABLET	ORAL	05/01/2025	1.16660
DAPSONE	25 MG	TABLET	ORAL	05/01/2025	0.64816
DAPSONE	5 %	GEL (GRAM)	TOPICAL	06/12/2025	1.75719
DAPSONE	7.5 %	GEL W/PUMP	TOPICAL	02/20/2025	2.01000
DAPTOMYCIN	500 MG	VIAL	INTRAVEN	07/17/2025	18.54353
DAPTOMYCIN	350 MG	VIAL	INTRAVEN	07/17/2025	9.85435
DARIFENACIN HYDROBROMIDE	7.5 MG	TAB ER 24H	ORAL	12/05/2024	1.33926
DARIFENACIN HYDROBROMIDE	15 MG	TAB ER 24H	ORAL	12/05/2024	1.13900
DARUNAVIR	600 MG	TABLET	ORAL	06/18/2025	2.14400
DARUNAVIR	800 MG	TABLET	ORAL	06/18/2025	4.80700
DASATINIB	20 MG	TABLET	ORAL	06/12/2025	28.09525
DASATINIB	50 MG	TABLET	ORAL	06/12/2025	56.19050
DASATINIB	70 MG	TABLET	ORAL	06/12/2025	56.19050
DASATINIB	100 MG	TABLET	ORAL	06/12/2025	101.27376
DASATINIB	80 MG	TABLET	ORAL	06/12/2025	101.27376
DASATINIB	140 MG	TABLET	ORAL	06/12/2025	101.27376
DAUNORUBICIN HCL	5 MG/ML	VIAL	INTRAVEN	08/17/2021	23.00839
DECITABINE	50 MG	VIAL	INTRAVEN	08/07/2025	36.69500
DEFERASIROX	90 MG	GRAN PACK	ORAL	04/03/2025	16.06465
DEFERASIROX	180 MG	GRAN PACK	ORAL	06/18/2025	24.26480
DEFERASIROX	360 MG	GRAN PACK	ORAL	06/18/2025	38.95205

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DEFERASIROX	90 MG	TABLET	ORAL	04/03/2025	0.94291
DEFERASIROX	180 MG	TABLET	ORAL	06/26/2025	2.37359
DEFERASIROX	360 MG	TABLET	ORAL	08/28/2025	3.11388
DEFERASIROX	125 MG	TAB DISPER	ORAL	01/09/2024	5.15152
DEFERASIROX	250 MG	TAB DISPER	ORAL	04/02/2024	9.50000
DEFERASIROX	500 MG	TAB DISPER	ORAL	09/18/2023	7.33340
DEFERIPRONE	500 MG	TABLET	ORAL	04/03/2025	79.63143
DEFERIPRONE	1000 MG	TABLET	ORAL	04/03/2025	194.76333
DEFEROXAMINE MESYLATE	500 MG	VIAL	INJECTION	07/10/2025	12.91763
DEFEROXAMINE MESYLATE	2 G	VIAL	INJECTION	07/15/2025	26.91650
DEFLAZACORT	6 MG	TABLET	ORAL	08/28/2025	89.14620
DEFLAZACORT	30 MG	TABLET	ORAL	04/01/2025	283.18854
DEFLAZACORT	18 MG	TABLET	ORAL	04/01/2025	169.90434
DEFLAZACORT	36 MG	TABLET	ORAL	04/01/2025	327.82250
DEMECLOCYCLINE HCL	150 MG	TABLET	ORAL	06/18/2025	5.72084
DEMECLOCYCLINE HCL	300 MG	TABLET	ORAL	04/03/2025	9.47825
DESIPRAMINE HCL	10 MG	TABLET	ORAL	08/21/2025	0.52354
DESIPRAMINE HCL	100 MG	TABLET	ORAL	07/03/2025	2.15432
DESIPRAMINE HCL	150 MG	TABLET	ORAL	12/05/2024	3.83170
DESIPRAMINE HCL	25 MG	TABLET	ORAL	08/07/2025	0.51322
DESIPRAMINE HCL	50 MG	TABLET	ORAL	07/31/2025	0.52742

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DESIPRAMINE HCL	75 MG	TABLET	ORAL	07/31/2025	2.05770
DESLORATADINE	5 MG	TABLET	ORAL	07/24/2025	0.69318
DESMOPRESSIN (NONREFRIGERATED)	10/SPRAY	SPRAY/PUMP	NASAL	03/25/2025	6.73875
DESMOPRESSIN ACETATE	0.1 MG	TABLET	ORAL	04/03/2025	0.57419
DESMOPRESSIN ACETATE	0.2 MG	TABLET	ORAL	04/03/2025	0.47784
DESMOPRESSIN ACETATE	4 MCG/ML	AMPUL	INJECTION	04/03/2025	37.00250
DESMOPRESSIN ACETATE	4 MCG/ML	VIAL	INJECTION	08/21/2025	14.01750
DESOG-E.ESTRADIOL/E.ESTRADIOL	21-5 (28)	TABLET	ORAL	12/30/2024	0.34330
DESOGESTREL-ETHINYL ESTRADIOL	0.15-0.03	TABLET	ORAL	07/10/2025	0.21679
DESOGESTREL-ETHINYL ESTRADIOL	7 DAYS X 3	TABLET	ORAL	05/06/2022	1.48843
DESONIDE	0.05 %	CREAM (G)	TOPICAL	06/26/2025	0.41093
DESONIDE	0.05 %	OINT. (G)	TOPICAL	08/07/2025	0.36984
DESONIDE	0.05 %	LOTION	TOPICAL	07/31/2025	0.36021
DESOXIMETASONE	0.25 %	SPRAY	TOPICAL	05/08/2025	1.53283
DESOXIMETASONE	0.05 %	CREAM (G)	TOPICAL	04/03/2025	3.27690
DESOXIMETASONE	0.25 %	CREAM (G)	TOPICAL	01/02/2025	0.40200
DESOXIMETASONE	0.25 %	OINT. (G)	TOPICAL	06/18/2025	0.69859
DESOXIMETASONE	0.05 %	OINT. (G)	TOPICAL	05/29/2025	3.26150
DESVENLAFAXINE SUCCINATE	50 MG	TAB ER 24H	ORAL	08/14/2025	0.51903
DESVENLAFAXINE SUCCINATE	100 MG	TAB ER 24H	ORAL	08/14/2025	0.52662
DESVENLAFAXINE SUCCINATE	25 MG	TAB ER 24H	ORAL	08/07/2025	0.89914

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DEXAMETHASONE	0.5 MG/5ML	ELIXIR	ORAL	10/03/2024	0.18002
DEXAMETHASONE	0.5 MG	TABLET	ORAL	06/27/2024	0.09253
DEXAMETHASONE	0.75 MG	TABLET	ORAL	05/14/2025	0.16589
DEXAMETHASONE	1.5 MG	TABLET	ORAL	04/30/2024	0.31959
DEXAMETHASONE	1 MG	TABLET	ORAL	10/31/2024	0.25326
DEXAMETHASONE	2 MG	TABLET	ORAL	10/31/2024	0.39785
DEXAMETHASONE	4 MG	TABLET	ORAL	06/05/2025	0.80145
DEXAMETHASONE	6 MG	TABLET	ORAL	04/03/2025	1.19541
DEXAMETHASONE	1.5MG (21)	TAB DS PK	ORAL	07/10/2025	5.42562
DEXAMETHASONE SODIUM PHOSP/PF	10 MG/ML	SYRINGE	INJECTION	05/20/2025	3.17900
DEXAMETHASONE SODIUM PHOSP/PF	10 MG/ML	VIAL	INJECTION	03/04/2025	1.96980
DEXAMETHASONE SODIUM PHOSPHATE	10 MG/ML	VIAL	INJECTION	04/01/2025	0.11016
DEXAMETHASONE SODIUM PHOSPHATE	4 MG/ML	VIAL	INJECTION	02/13/2025	0.27986
DEXBROMPHENIRAMINE/PSEUDOEPHED	1MG-30MG/5	SOLUTION	ORAL	08/28/2025	0.02287
DEXBROMPHENIRAMINE/PSEUDOEPHED	2MG-60MG/5	SOLUTION	ORAL	04/25/2024	0.03272
DEXBROMPHENIRAMINE/PSEUDOEPHED	2 MG-60 MG	TABLET	ORAL	05/22/2025	0.29313
DEXCHLORPHENIR/PSEUDOEPHED/DM	1-30-15/5	LIQUID	ORAL	05/06/2022	0.07472
DEXCHLORPHENIRAMINE MALEATE	2 MG/5 ML	SOLUTION	ORAL	05/06/2022	7.55596
DEXLANSOPRAZOLE	30 MG	CAP DR BP	ORAL	06/18/2025	6.35000
DEXLANSOPRAZOLE	60 MG	CAP DR BP	ORAL	04/24/2025	7.30758
DEXMEDETOMIDINE HCL	200MCG/2ML	VIAL	INTRAVEN	03/13/2025	2.22775

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DEXMEDETOMIDINE HCL	400MCG/4ML	VIAL	INTRAVEN	02/20/2025	4.29000
DEXMEDETOMIDINE HCL	1000MCG/10	VIAL	INTRAVEN	04/01/2025	8.24730
DEXMEDETOMIDINE IN 0.9 % NACL	200 MCG/50	INFUS. BTL	INTRAVEN	05/22/2025	0.27268
DEXMEDETOMIDINE IN 0.9 % NACL	400MCG/100	INFUS. BTL	INTRAVEN	05/22/2025	0.24327
DEXMEDETOMIDINE IN 0.9 % NACL	80MCG/20ML	VIAL	INTRAVEN	08/31/2023	0.58826
DEXMEDETOMIDINE IN 0.9 % NACL	200 MCG/50	PLAST. BAG	INTRAVEN	07/17/2025	0.32798
DEXMEDETOMIDINE IN 0.9 % NACL	400MCG/100	PLAST. BAG	INTRAVEN	07/10/2025	0.19095
DEXMETHYLPHENIDATE HCL	5 MG	CPBP 50-50	ORAL	04/03/2025	1.93737
DEXMETHYLPHENIDATE HCL	10 MG	CPBP 50-50	ORAL	08/28/2025	2.48744
DEXMETHYLPHENIDATE HCL	20 MG	CPBP 50-50	ORAL	04/03/2025	2.62037
DEXMETHYLPHENIDATE HCL	15 MG	CPBP 50-50	ORAL	06/12/2025	1.97208
DEXMETHYLPHENIDATE HCL	40 MG	CPBP 50-50	ORAL	04/25/2023	2.71050
DEXMETHYLPHENIDATE HCL	25 MG	CPBP 50-50	ORAL	06/18/2025	3.37366
DEXMETHYLPHENIDATE HCL	35 MG	CPBP 50-50	ORAL	08/28/2025	2.82256
DEXMETHYLPHENIDATE HCL	2.5 MG	TABLET	ORAL	02/25/2025	0.21922
DEXMETHYLPHENIDATE HCL	5 MG	TABLET	ORAL	08/28/2025	0.51871
DEXMETHYLPHENIDATE HCL	10 MG	TABLET	ORAL	04/29/2025	0.31758
DEXRAZOXANE HCL	500 MG	VIAL	INTRAVEN	07/31/2025	159.24400
DEXRAZOXANE HCL	250 MG	VIAL	INTRAVEN	07/31/2025	92.50625
DEXTRAN/HYPROMELLOSE/GLYCERIN	0.1-.3-.2%	DROPS	OPHTHALMIC	07/11/2024	0.35420
DEXTROAMPHETAMINE SULFATE	10 MG	CAPSULE ER	ORAL	04/03/2025	1.95327

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DEXTROAMPHETAMINE SULFATE	15 MG	CAPSULE ER	ORAL	04/25/2023	1.81000
DEXTROAMPHETAMINE SULFATE	5 MG	CAPSULE ER	ORAL	04/03/2025	2.65333
DEXTROAMPHETAMINE SULFATE	5 MG/5 ML	SOLUTION	ORAL	08/26/2025	1.08824
DEXTROAMPHETAMINE SULFATE	10 MG	TABLET	ORAL	04/03/2025	0.72186
DEXTROAMPHETAMINE SULFATE	15 MG	TABLET	ORAL	04/24/2025	8.74008
DEXTROAMPHETAMINE SULFATE	5 MG	TABLET	ORAL	08/01/2024	0.90093
DEXTROAMPHETAMINE SULFATE	2.5 MG	TABLET	ORAL	04/01/2025	7.97520
DEXTROAMPHETAMINE SULFATE	7.5 MG	TABLET	ORAL	04/01/2025	7.97520
DEXTROAMPHETAMINE SULFATE	20 MG	TABLET	ORAL	03/04/2025	4.61065
DEXTROAMPHETAMINE SULFATE	30 MG	TABLET	ORAL	04/03/2025	8.64408
DEXTROAMPHETAMINE/AMPHETAMINE	10 MG	CAP ER 24H	ORAL	04/01/2025	0.41615
DEXTROAMPHETAMINE/AMPHETAMINE	5 MG	CAP ER 24H	ORAL	06/17/2025	0.46552
DEXTROAMPHETAMINE/AMPHETAMINE	15 MG	CAP ER 24H	ORAL	04/03/2025	0.48240
DEXTROAMPHETAMINE/AMPHETAMINE	25 MG	CAP ER 24H	ORAL	04/24/2025	0.48240
DEXTROAMPHETAMINE/AMPHETAMINE	12.5 MG	CPTP 24HR	ORAL	04/03/2025	12.58389
DEXTROAMPHETAMINE/AMPHETAMINE	37.5 MG	CPTP 24HR	ORAL	10/19/2023	7.72518
DEXTROAMPHETAMINE/AMPHETAMINE	50 MG	CPTP 24HR	ORAL	04/29/2025	8.11426
DEXTROAMPHETAMINE/AMPHETAMINE	5 MG	TABLET	ORAL	07/28/2025	0.22000
DEXTROAMPHETAMINE/AMPHETAMINE	10 MG	TABLET	ORAL	05/22/2025	0.25661
DEXTROAMPHETAMINE/AMPHETAMINE	30 MG	TABLET	ORAL	05/22/2025	0.29614
DEXTROAMPHETAMINE/AMPHETAMINE	7.5 MG	TABLET	ORAL	04/03/2025	0.52876

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DEXTROAMPHETAMINE/AMPHETAMINE	12.5 MG	TABLET	ORAL	04/03/2025	0.46766
DEXTROAMPHETAMINE/AMPHETAMINE	15 MG	TABLET	ORAL	05/22/2025	0.27215
DEXTROMETHORPHAN HB/DOXYLAMINE	7.5-3.125	LIQUID	ORAL	05/01/2025	0.03968
DEXTROMETHORPHAN HBR	10 MG/5 ML	LIQUID	ORAL	01/19/2023	0.06343
DEXTROMETHORPHAN POLISTIREX	30 MG/5 ML	SUS ER 12H	ORAL	02/06/2025	0.08502
DEXTROMETHORPHAN/PHENYLEPHRINE	5-2.5 MG/5	LIQUID	ORAL	07/31/2025	0.06192
DEXTROSE	40 %	GEL (GRAM)	ORAL	04/03/2025	0.15973
DEXTROSE	4 G	TAB CHEW	ORAL	01/19/2023	0.09367
DEXTROSE 10 % IN WATER	10 %	DEHP FR BG	INTRAVEN	02/06/2025	0.00873
DEXTROSE 10 % IN WATER	10 %	IV SOLN	INTRAVEN	06/12/2025	0.01194
DEXTROSE 2.5 % AND 0.45 % NACL	2.5%-0.45%	IV SOLN	INTRAVEN	05/12/2022	0.00830
DEXTROSE 5 % AND 0.3 % NACL	5 %-0.3 %	IV SOLN	INTRAVEN	05/06/2022	0.00585
DEXTROSE 5 % AND 0.9 % NACL	5 %-0.9 %	IV SOLN	INTRAVEN	06/05/2025	0.00549
DEXTROSE 5 % IN WATER	5 %	IV SOLN	INTRAVEN	07/24/2025	0.00539
DEXTROSE 5 %-0.2 % SOD CHLORID	5 %-0.2 %	IV SOLN	INTRAVEN	02/09/2023	0.00585
DEXTROSE 5 %-0.45 % SOD CHLORD	5 %-0.45 %	IV SOLN	INTRAVEN	05/29/2025	0.00443
DEXTROSE 5%-LACTATED RINGERS	5 %	IV SOLN	INTRAVEN	04/03/2025	0.01107
DEXTROSE 50 % IN WATER	50 %	SYRINGE	INTRAVEN	08/07/2025	0.69042
DEXTROSE 70 % IN WATER	70 %	IV SOLN	INTRAVEN	06/12/2025	0.02443
DIABETIC SUPPLIES,MISCELL		EACH	MISCELL	05/12/2022	1.12560
DIABETIC SUPPLIES,MISCELL		MISCELL	MISCELL	06/26/2025	1.66663

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DIATRIZOATE MEGLUMINE, SODIUM	66 %-10 %	SOLUTION	ORAL	10/03/2024	0.33150
DIAZEPAM	5 MG/5 ML	SOLUTION	ORAL	08/26/2025	0.08652
DIAZEPAM	5 MG/5 ML	SOLUTION	ORAL	08/13/2024	4.54730
DIAZEPAM	5 MG/ML	ORAL CONC	ORAL	04/09/2024	0.92820
DIAZEPAM	10 MG	TABLET	ORAL	04/15/2025	0.02748
DIAZEPAM	2 MG	TABLET	ORAL	08/21/2025	0.03966
DIAZEPAM	5 MG	TABLET	ORAL	06/12/2025	0.03270
DIAZEPAM	5 MG/ML	CARTRIDGE	INJECTION	11/21/2018	12.03345
DIAZEPAM	5 MG/ML	VIAL	INJECTION	04/20/2023	3.16048
DIAZEPAM	5-7.5-10MG	KIT	RECTAL	08/05/2025	212.37692
DIAZEPAM	12.5-15-20	KIT	RECTAL	05/27/2025	191.13150
DIAZOXIDE	50 MG/ML	ORAL SUSP	ORAL	08/01/2022	7.45000
DIBUCAINE	1 %	OINT. (G)	TOPICAL	03/27/2025	0.12658
DICHLORPHENAMIDE	50 MG	TABLET	ORAL	04/18/2024	370.02500
DICLOFENAC EPOLAMINE	1.3 %	PATCH TD12	TRANSDERM	04/03/2025	7.28895
DICLOFENAC POTASSIUM	25 MG	CAPSULE	ORAL	02/29/2024	10.29250
DICLOFENAC POTASSIUM	50 MG	POWD PACK	ORAL	05/14/2025	18.46367
DICLOFENAC POTASSIUM	50 MG	TABLET	ORAL	06/18/2025	0.38043
DICLOFENAC POTASSIUM	25 MG	TABLET	ORAL	10/18/2022	20.47500
DICLOFENAC SODIUM	25 MG	TABLET DR	ORAL	06/25/2024	0.95261
DICLOFENAC SODIUM	50 MG	TABLET DR	ORAL	09/04/2025	0.08911

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DICLOFENAC SODIUM	75 MG	TABLET DR	ORAL	09/04/2025	0.10318
DICLOFENAC SODIUM	100 MG	TAB ER 24H	ORAL	04/03/2025	1.23280
DICLOFENAC SODIUM	1 %	GEL (GRAM)	TOPICAL	09/04/2025	0.03997
DICLOFENAC SODIUM	3 %	GEL (GRAM)	TOPICAL	08/14/2025	0.45439
DICLOFENAC SODIUM	20MG/G(2%)	SOL MD PMP	TOPICAL	09/04/2025	1.40808
DICLOFENAC SODIUM	1.5 %	DROPS	TOPICAL	04/03/2025	0.27202
DICLOFENAC SODIUM	0.1 %	DROPS	OPHTHALMIC	05/22/2025	3.85704
DICLOFENAC SODIUM/MISOPROSTOL	50 MG-200	TAB IR DR	ORAL	07/31/2025	2.09576
DICLOFENAC SODIUM/MISOPROSTOL	75 MG-200	TAB IR DR	ORAL	07/31/2025	2.31820
DICLOXACILLIN SODIUM	250 MG	CAPSULE	ORAL	09/04/2025	1.25612
DICLOXACILLIN SODIUM	500 MG	CAPSULE	ORAL	09/04/2025	1.98762
DICYCLOMINE HCL	10 MG	CAPSULE	ORAL	07/17/2025	0.10741
DICYCLOMINE HCL	10 MG/5 ML	SOLUTION	ORAL	04/03/2025	0.30633
DICYCLOMINE HCL	20 MG	TABLET	ORAL	08/21/2025	0.09983
DICYCLOMINE HCL	10 MG/ML	VIAL	INTRAMUSC	07/17/2025	9.49670
DIETHYLPROPION HCL	25 MG	TABLET	ORAL	07/17/2025	0.34585
DIETHYLPROPION HCL	75 MG	TABLET ER	ORAL	07/10/2025	3.96000
DIETHYLTOLUAMIDE	15 %	AERO POWD	TOPICAL	05/06/2022	0.03486
DIETHYLTOLUAMIDE	25 %	SPRAY	TOPICAL	08/11/2022	0.01564
DIETHYLTOLUAMIDE	15 %	SPRAY	TOPICAL	08/18/2022	0.01844
DIETHYLTOLUAMIDE	10 %	SPRAY	TOPICAL	08/11/2022	0.02947

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DIETHYLTOLUAMIDE	7 %	SPRAY	TOPICAL	08/11/2022	0.01748
DIETHYLTOLUAMIDE	98.11 %	SPRAY	TOPICAL	08/18/2022	0.06240
DIETHYLTOLUAMIDE	25 %	SPRAY	TOPICAL	08/28/2024	0.02113
DIFLORASONE DIACETATE	0.05 %	CREAM (G)	TOPICAL	05/30/2024	6.45033
DIFLORASONE DIACETATE	0.05 %	OINT. (G)	TOPICAL	04/03/2025	3.65200
DIFLUNISAL	500 MG	TABLET	ORAL	04/03/2025	1.99593
DIFLUPREDNATE	0.05 %	DROPS	OPHTHALMIC	03/14/2023	16.15950
DIGOXIN	50 MCG/ML	SOLUTION	ORAL	06/24/2025	1.13693
DIGOXIN	125 MCG	TABLET	ORAL	06/12/2025	0.12341
DIGOXIN	250 MCG	TABLET	ORAL	06/24/2025	0.11347
DIGOXIN	62.5 MCG	TABLET	ORAL	06/25/2024	8.29440
DIGOXIN	250 MCG/ML	AMPUL	INJECTION	06/24/2025	0.60500
DIHYDROERGOTAMINE MESYLATE	1 MG/ML	AMPUL	INJECTION	08/01/2024	57.50250
DIHYDROERGOTAMINE MESYLATE	0.5MG/SPRY	SPRAY/PUMP	NASAL	07/24/2025	66.02922
DILTIAZEM HCL	120 MG	CAP ER 12H	ORAL	08/11/2025	3.65610
DILTIAZEM HCL	60 MG	CAP ER 12H	ORAL	04/17/2025	2.89331
DILTIAZEM HCL	90 MG	CAP ER 12H	ORAL	06/12/2025	3.00960
DILTIAZEM HCL	180 MG	CAP ER 24H	ORAL	04/03/2025	0.28110
DILTIAZEM HCL	240 MG	CAP ER 24H	ORAL	04/24/2025	0.39393
DILTIAZEM HCL	300 MG	CAP ER 24H	ORAL	04/03/2025	0.41486
DILTIAZEM HCL	120 MG	CAP ER 24H	ORAL	08/28/2025	0.28095

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DILTIAZEM HCL	360 MG	CAP ER 24H	ORAL	04/03/2025	0.65050
DILTIAZEM HCL	360 MG	CAP SA 24H	ORAL	07/03/2023	0.29670
DILTIAZEM HCL	120 MG	CAP SA 24H	ORAL	06/12/2025	0.69464
DILTIAZEM HCL	180 MG	CAP SA 24H	ORAL	07/06/2023	0.21142
DILTIAZEM HCL	240 MG	CAP SA 24H	ORAL	08/28/2025	1.18962
DILTIAZEM HCL	300 MG	CAP SA 24H	ORAL	05/13/2024	0.38756
DILTIAZEM HCL	420 MG	CAP SA 24H	ORAL	05/03/2023	1.64634
DILTIAZEM HCL	180 MG	CAP ER DEG	ORAL	04/03/2025	0.71977
DILTIAZEM HCL	240 MG	CAP ER DEG	ORAL	06/12/2025	0.60622
DILTIAZEM HCL	120 MG	CAP ER DEG	ORAL	06/18/2025	0.59094
DILTIAZEM HCL	120 MG	TABLET	ORAL	01/16/2025	0.41352
DILTIAZEM HCL	30 MG	TABLET	ORAL	08/19/2025	0.04675
DILTIAZEM HCL	60 MG	TABLET	ORAL	04/03/2025	0.13266
DILTIAZEM HCL	90 MG	TABLET	ORAL	04/03/2025	0.15182
DILTIAZEM HCL	120 MG	TAB ER 24H	ORAL	04/24/2025	2.58709
DILTIAZEM HCL	180 MG	TAB ER 24H	ORAL	04/04/2024	1.25082
DILTIAZEM HCL	240 MG	TAB ER 24H	ORAL	04/04/2024	2.12569
DILTIAZEM HCL	300 MG	TAB ER 24H	ORAL	08/03/2023	2.51161
DILTIAZEM HCL	360 MG	TAB ER 24H	ORAL	04/04/2024	2.52501
DILTIAZEM HCL	420 MG	TAB ER 24H	ORAL	08/03/2023	2.83741
DILTIAZEM HCL	5 MG/ML	VIAL	INTRAVEN	04/10/2025	0.37108

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DILUENT FOR TREPROSTINIL (GLY)		VIAL	INTRAVEN	05/08/2025	0.30284
DILUENT,CAPLACIZUMAB-YHDP	1 ML	SYRINGE	INJECTION	10/01/2020	0.14003
DIMENHYDRINATE	50 MG	TABLET	ORAL	11/26/2024	0.01491
DIMETHICONE	1 %	CREAM (G)	TOPICAL	05/06/2022	0.05877
DIMETHICONE	5 %	CREAM(ML)	TOPICAL	04/27/2023	0.04021
DIMETHICONE	1 %	OINT. (G)	TOPICAL	06/18/2025	0.05769
DIMETHYL FUMARATE	120-240 MG	CAPSULE DR	ORAL	11/22/2023	3.66190
DIMETHYL FUMARATE	120 MG	CAPSULE DR	ORAL	08/21/2025	3.30000
DIMETHYL FUMARATE	240 MG	CAPSULE DR	ORAL	08/28/2025	1.30404
DIPHENHYD/PHENYLEPH/ACETAMINOP	5-325MG/10	LIQUID	ORAL	09/12/2024	0.04705
DIPHENHYDRAMINE HCL	25 MG	CAPSULE	ORAL	04/30/2025	0.01260
DIPHENHYDRAMINE HCL	50 MG	CAPSULE	ORAL	07/03/2025	0.03902
DIPHENHYDRAMINE HCL	25 MG	CAPSULE	ORAL	12/29/2022	0.24770
DIPHENHYDRAMINE HCL	12.5MG/5ML	ELIXIR	ORAL	03/14/2017	0.45059
DIPHENHYDRAMINE HCL	12.5MG/5ML	LIQUID	ORAL	08/28/2025	0.37986
DIPHENHYDRAMINE HCL	25 MG	TABLET	ORAL	12/12/2024	0.02634
DIPHENHYDRAMINE HCL	50 MG	TABLET	ORAL	10/05/2023	0.26381
DIPHENHYDRAMINE HCL	25 MG	TABLET	ORAL	08/21/2025	0.01273
DIPHENHYDRAMINE HCL	12.5 MG	TAB CHEW	ORAL	03/19/2025	0.37044
DIPHENHYDRAMINE HCL	50 MG/ML	VIAL	INJECTION	08/14/2025	0.80400
DIPHENHYDRAMINE HCL/ZINC ACET	2 %-0.1 %	CREAM (G)	TOPICAL	08/14/2025	0.01665

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DIPHENOXYLATE HCL/ATROPINE	2.5-.025MG	TABLET	ORAL	08/14/2025	0.17609
DIPYRIDAMOLE	25 MG	TABLET	ORAL	10/05/2023	0.17554
DIPYRIDAMOLE	50 MG	TABLET	ORAL	10/05/2023	0.31798
DIPYRIDAMOLE	75 MG	TABLET	ORAL	08/31/2023	0.41741
DISOPYRAMIDE PHOSPHATE	100 MG	CAPSULE	ORAL	06/24/2025	0.63598
DISOPYRAMIDE PHOSPHATE	150 MG	CAPSULE	ORAL	06/24/2025	0.90328
DISULFIRAM	250 MG	TABLET	ORAL	10/19/2023	2.28090
DISULFIRAM	500 MG	TABLET	ORAL	05/22/2025	9.58660
DIVALPROEX SODIUM	125 MG	CAP DR SPR	ORAL	09/04/2025	0.18894
DIVALPROEX SODIUM	125 MG	TABLET DR	ORAL	08/26/2025	0.04417
DIVALPROEX SODIUM	250 MG	TABLET DR	ORAL	08/26/2025	0.07300
DIVALPROEX SODIUM	500 MG	TABLET DR	ORAL	04/25/2023	0.14900
DIVALPROEX SODIUM	500 MG	TAB ER 24H	ORAL	06/26/2025	0.20247
DIVALPROEX SODIUM	250 MG	TAB ER 24H	ORAL	06/26/2025	0.14552
DM/ACETAMINOPHEN/DOXYLAMINE	15MG-325MG	CAPSULE	ORAL	12/12/2024	0.26503
DM/ACETAMINOPHEN/DOXYLAMINE	15-325/15	LIQUID	ORAL	06/26/2025	0.02081
DM/PE/ACETAMINOPHEN/DOXYLAMINE	10-5-325MG	CAP SEQ	ORAL	06/29/2023	0.43885
DM/PE/ACETAMINOPHEN/DOXYLAMINE	5-325MG/15	LIQUID	ORAL	10/19/2023	0.03092
DOBUTAMINE HCL	250MG/20ML	VIAL	INTRAVEN	05/22/2025	0.32347
DOBUTAMINE HCL IN DEXTROSE 5 %	500MG/250	IV SOLN	INTRAVEN	06/06/2023	0.19025
DOBUTAMINE HCL IN DEXTROSE 5 %	1000MG/250	IV SOLN	INTRAVEN	06/05/2025	0.29005

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DOBUTAMINE HCL IN DEXTROSE 5 %	250 MG/250	IV SOLN	INTRAVEN	06/05/2025	0.21969
DOCETAXEL	20MG/ML(1)	VIAL	INTRAVEN	04/03/2025	20.84250
DOCETAXEL	80 MG/4 ML	VIAL	INTRAVEN	05/14/2025	12.94388
DOCETAXEL	160 MG/8ML	VIAL	INTRAVEN	04/03/2025	9.20575
DOCETAXEL	80 MG/8 ML	VIAL	INTRAVEN	08/21/2025	9.07500
DOCETAXEL	20 MG/2 ML	VIAL	INTRAVEN	05/22/2025	7.54680
DOCETAXEL	160MG/16ML	VIAL	INTRAVEN	07/03/2025	7.54817
DOCOSAHEXAENOIC ACID	200 MG	CAPSULE	ORAL	03/23/2023	0.17393
DOCOSANOL	10 %	CREAM (G)	TOPICAL	08/07/2025	9.59675
DOCUSATE CALCIUM	240 MG	CAPSULE	ORAL	10/03/2024	0.06597
DOCUSATE SODIUM	100 MG	CAPSULE	ORAL	04/15/2025	0.01562
DOCUSATE SODIUM	250 MG	CAPSULE	ORAL	06/05/2025	0.04007
DOCUSATE SODIUM	50 MG/5 ML	LIQUID	ORAL	05/08/2025	0.01948
DOCUSATE SODIUM	100 MG	TABLET	ORAL	01/25/2024	0.01357
DOCUSATE SODIUM	283 MG/5ML	ENEMA	RECTAL	04/03/2025	0.65169
DOFETILIDE	125 MCG	CAPSULE	ORAL	12/19/2024	0.17058
DOFETILIDE	250 MCG	CAPSULE	ORAL	03/13/2025	0.18415
DOFETILIDE	500 MCG	CAPSULE	ORAL	03/13/2025	0.17482
DONEPEZIL HCL	10 MG	TABLET	ORAL	04/03/2025	0.04422
DONEPEZIL HCL	5 MG	TABLET	ORAL	06/18/2025	0.04259
DONEPEZIL HCL	23 MG	TABLET	ORAL	04/03/2025	0.96525

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DONEPEZIL HCL	5 MG	TAB RAPDIS	ORAL	05/06/2022	4.95000
DONEPEZIL HCL	10 MG	TAB RAPDIS	ORAL	10/19/2021	1.93000
DOPAMINE HCL	200 MG/5ML	VIAL	INTRAVEN	07/17/2025	1.62526
DOPAMINE HCL	400MG/10ML	VIAL	INTRAVEN	08/21/2025	1.33850
DOPAMINE HCL IN DEXTROSE 5 %	800MG/.25L	PLAST. BAG	INTRAVEN	04/03/2025	0.19892
DOPAMINE HCL IN DEXTROSE 5 %	400MG/.25L	PLAST. BAG	INTRAVEN	04/03/2025	0.12156
DOPAMINE HCL IN DEXTROSE 5 %	800MG/0.5L	PLAST. BAG	INTRAVEN	04/03/2025	0.09642
DORZOLAMIDE HCL	2 %	DROPS	OPHTHALMIC	02/25/2025	0.98490
DORZOLAMIDE HCL/TIMOLOL MALEAT	22.3-6.8/1	DROPS	OPHTHALMIC	08/14/2025	1.26630
DORZOLAMIDE/TIMOLOL/PF	2 %-0.5 %	DROPERETTE	OPHTHALMIC	03/19/2024	1.87600
DOXAZOSIN MESYLATE	1 MG	TABLET	ORAL	04/09/2024	0.04958
DOXAZOSIN MESYLATE	2 MG	TABLET	ORAL	04/09/2024	0.04985
DOXAZOSIN MESYLATE	4 MG	TABLET	ORAL	04/09/2024	0.05534
DOXAZOSIN MESYLATE	8 MG	TABLET	ORAL	04/09/2024	0.06057
DOXEPIN HCL	10 MG	CAPSULE	ORAL	08/07/2025	0.08938
DOXEPIN HCL	100 MG	CAPSULE	ORAL	06/05/2025	0.29132
DOXEPIN HCL	150 MG	CAPSULE	ORAL	04/03/2025	0.80266
DOXEPIN HCL	25 MG	CAPSULE	ORAL	06/05/2025	0.10800
DOXEPIN HCL	50 MG	CAPSULE	ORAL	08/28/2025	0.23584
DOXEPIN HCL	75 MG	CAPSULE	ORAL	06/05/2025	0.27269
DOXEPIN HCL	3 MG	TABLET	ORAL	09/24/2024	2.75000

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DOXEPIN HCL	6 MG	TABLET	ORAL	09/24/2024	2.75000
DOXEPIN HCL	5 %	CREAM (G)	TOPICAL	10/28/2024	9.79391
DOXERCALCIFEROL	2.5 MCG	CAPSULE	ORAL	03/13/2025	13.13400
DOXERCALCIFEROL	0.5 MCG	CAPSULE	ORAL	10/10/2024	11.49962
DOXERCALCIFEROL	1 MCG	CAPSULE	ORAL	03/13/2025	11.22000
DOXERCALCIFEROL	4MCG/2ML	VIAL	INTRAVEN	11/02/2023	0.93800
DOXORUBICIN HCL	50 MG	VIAL	INTRAVEN	04/01/2025	30.12750
DOXORUBICIN HCL	2 MG/ML	VIAL	INTRAVEN	05/22/2025	0.46121
DOXORUBICIN HCL	10 MG/5 ML	VIAL	INTRAVEN	04/10/2025	1.52760
DOXORUBICIN HCL	50 MG/25ML	VIAL	INTRAVEN	11/21/2024	0.70323
DOXORUBICIN HCL	20 MG/10ML	VIAL	INTRAVEN	05/19/2025	1.38375
DOXORUBICIN HCL PEG-LIPOSOMAL	2 MG/ML	VIAL	INTRAVEN	07/17/2025	15.12000
DOXYCYCLINE HYCLATE	100 MG	CAPSULE	ORAL	04/30/2025	0.09443
DOXYCYCLINE HYCLATE	50 MG	CAPSULE	ORAL	04/03/2025	0.20100
DOXYCYCLINE HYCLATE	100 MG	TABLET	ORAL	09/04/2025	0.12513
DOXYCYCLINE HYCLATE	50 MG	TABLET	ORAL	08/15/2024	11.49500
DOXYCYCLINE HYCLATE	20 MG	TABLET	ORAL	04/03/2025	0.48160
DOXYCYCLINE HYCLATE	75 MG	TABLET	ORAL	05/01/2025	2.08080
DOXYCYCLINE HYCLATE	150 MG	TABLET	ORAL	05/01/2025	2.02586
DOXYCYCLINE HYCLATE	75 MG	TABLET DR	ORAL	01/26/2023	3.26612
DOXYCYCLINE HYCLATE	100 MG	TABLET DR	ORAL	05/08/2025	4.74896

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DOXYCYCLINE HYCLATE	150 MG	TABLET DR	ORAL	06/18/2025	4.30148
DOXYCYCLINE HYCLATE	200 MG	TABLET DR	ORAL	04/03/2025	12.32440
DOXYCYCLINE HYCLATE	50 MG	TABLET DR	ORAL	04/24/2025	7.22500
DOXYCYCLINE HYCLATE	100 MG	VIAL	INTRAVEN	07/17/2025	13.77180
DOXYCYCLINE MONOHYDRATE	100 MG	CAPSULE	ORAL	05/06/2025	0.18050
DOXYCYCLINE MONOHYDRATE	50 MG	CAPSULE	ORAL	06/12/2025	0.17072
DOXYCYCLINE MONOHYDRATE	75 MG	CAPSULE	ORAL	10/19/2021	6.34000
DOXYCYCLINE MONOHYDRATE	150 MG	CAPSULE	ORAL	03/13/2025	12.94133
DOXYCYCLINE MONOHYDRATE	40 MG	CAP IR DR	ORAL	07/24/2025	17.05130
DOXYCYCLINE MONOHYDRATE	25 MG/5 ML	SUSP RECON	ORAL	04/10/2025	0.29591
DOXYCYCLINE MONOHYDRATE	100 MG	TABLET	ORAL	04/03/2025	0.30472
DOXYCYCLINE MONOHYDRATE	50 MG	TABLET	ORAL	04/03/2025	0.46739
DOXYCYCLINE MONOHYDRATE	75 MG	TABLET	ORAL	04/03/2025	1.14396
DOXYCYCLINE MONOHYDRATE	150 MG	TABLET	ORAL	04/03/2025	1.41013
DOXYLAMINE SUCCINATE	25 MG	TABLET	ORAL	08/28/2025	0.30708
DOXYLAMINE SUCCINATE/VIT B6	10 MG-10MG	TABLET DR	ORAL	04/24/2025	3.49114
DRONABINOL	2.5 MG	CAPSULE	ORAL	06/25/2024	2.26125
DRONABINOL	5 MG	CAPSULE	ORAL	06/25/2024	4.20618
DROPERIDOL	2.5 MG/ML	VIAL	INJECTION	04/01/2025	3.96780
DROSPIR/ETH ESTRA/LEVOMEFOL CA	3-0.02(24)	TABLET	ORAL	04/03/2025	4.79081
DROSPIR/ETH ESTRA/LEVOMEFOL CA	3-0.03(21)	TABLET	ORAL	06/20/2024	5.08962

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
DROXIDOPA	100 MG	CAPSULE	ORAL	03/13/2025	1.17086
DROXIDOPA	200 MG	CAPSULE	ORAL	03/13/2025	2.38386
DROXIDOPA	300 MG	CAPSULE	ORAL	03/13/2025	3.48040
DULOXETINE HCL	20 MG	CAPSULE DR	ORAL	08/14/2025	0.09134
DULOXETINE HCL	30 MG	CAPSULE DR	ORAL	05/27/2025	0.06898
DULOXETINE HCL	60 MG	CAPSULE DR	ORAL	05/27/2025	0.07802
DULOXETINE HCL	40 MG	CAPSULE DR	ORAL	07/31/2025	1.73664
DUTASTERIDE	0.5 MG	CAPSULE	ORAL	11/07/2024	0.09603
DUTASTERIDE/TAMSULOSIN HCL	0.5-0.4 MG	CPMP 24HR	ORAL	04/24/2025	3.21655
ECHINACEA	400 MG	CAPSULE	ORAL	07/27/2022	0.05065
ECONAZOLE NITRATE	1 %	CREAM (G)	TOPICAL	06/26/2025	0.24467
EDARAVONE	30MG/100ML	PIGGYBACK	INTRAVEN	08/14/2025	4.75708
EFAVIRENZ	600 MG	TABLET	ORAL	04/03/2025	4.88796
EFAVIRENZ/EMTRICIT/TENOFOVR DF	600-200MG	TABLET	ORAL	04/03/2025	3.92084
EFAVIRENZ/LAMIVU/TENOFOV DISOP	600-300 MG	TABLET	ORAL	02/09/2023	60.95641
ELECTROLYTE-148 SOLUTION		IV SOLN	INTRAVEN	07/20/2023	0.01769
ELECTROLYTE-A SOLUTION		IV SOLN	INTRAVEN	04/03/2025	0.03386
ELECTROLYTES/DEXTROSE		PACKET	ORAL	08/14/2025	0.11223
ELECTROLYTES/DEXTROSE		SOLUTION	ORAL	08/14/2025	0.00559
ELETRIPTAN HYDROBROMIDE	20 MG	TABLET	ORAL	05/29/2025	6.70560
ELETRIPTAN HYDROBROMIDE	40 MG	TABLET	ORAL	04/03/2025	2.35840

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ELTROMBOPAG OLAMINE	25 MG	POWD PACK	ORAL	05/29/2025	254.03190
ELTROMBOPAG OLAMINE	12.5 MG	POWD PACK	ORAL	05/29/2025	254.03093
ELTROMBOPAG OLAMINE	25 MG	TABLET	ORAL	05/29/2025	267.40098
ELTROMBOPAG OLAMINE	50 MG	TABLET	ORAL	05/29/2025	483.91055
ELTROMBOPAG OLAMINE	75 MG	TABLET	ORAL	05/29/2025	725.86742
ELTROMBOPAG OLAMINE	12.5 MG	TABLET	ORAL	05/29/2025	267.40098
EMOLLIENT BASE		CREAM (G)	TOPICAL	12/20/2023	0.03100
EMOLLIENT NO56/HYALURONIC ACID		GEL (GRAM)	TOPICAL	10/03/2024	0.10416
EMTRICITABINE	200 MG	CAPSULE	ORAL	05/22/2024	18.77750
EMTRICITABINE/TENOFOVIR (TDF)	200-300 MG	TABLET	ORAL	07/17/2025	0.87100
EMTRICITABINE/TENOFOVIR (TDF)	100-150 MG	TABLET	ORAL	08/21/2025	14.02800
EMTRICITABINE/TENOFOVIR (TDF)	133-200 MG	TABLET	ORAL	05/22/2025	17.12935
EMTRICITABINE/TENOFOVIR (TDF)	167-250 MG	TABLET	ORAL	05/22/2025	16.95785
ENALAPRIL MALEATE	1 MG/ML	SOLUTION	ORAL	10/24/2024	1.26112
ENALAPRIL MALEATE	10 MG	TABLET	ORAL	08/19/2025	0.06150
ENALAPRIL MALEATE	2.5 MG	TABLET	ORAL	06/26/2025	0.05092
ENALAPRIL MALEATE	20 MG	TABLET	ORAL	06/26/2025	0.08040
ENALAPRIL MALEATE	5 MG	TABLET	ORAL	08/19/2025	0.05125
ENALAPRIL/HYDROCHLOROTHIAZIDE	10 MG-25MG	TABLET	ORAL	05/06/2022	1.06296
ENALAPRILAT DIHYDRATE	1.25 MG/ML	VIAL	INTRAVEN	06/17/2025	1.60800
ENOXAPARIN SODIUM	30MG/0.3ML	SYRINGE	SUBCUT	01/02/2025	8.47400

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ENOXAPARIN SODIUM	60MG/0.6ML	SYRINGE	SUBCUT	02/27/2024	7.73300
ENOXAPARIN SODIUM	80MG/0.8ML	SYRINGE	SUBCUT	02/27/2024	7.99425
ENOXAPARIN SODIUM	100 MG/ML	SYRINGE	SUBCUT	02/27/2024	7.99140
ENOXAPARIN SODIUM	40MG/0.4ML	SYRINGE	SUBCUT	05/27/2025	6.40726
ENOXAPARIN SODIUM	150 MG/ML	SYRINGE	SUBCUT	01/02/2025	12.51250
ENOXAPARIN SODIUM	120MG/.8ML	SYRINGE	SUBCUT	01/02/2025	12.53313
ENOXAPARIN SODIUM	300 MG/3ML	VIAL	SUBCUT	01/16/2025	10.95183
ENTACAPONE	200 MG	TABLET	ORAL	07/21/2022	0.16832
ENTECAVIR	0.5 MG	TABLET	ORAL	08/21/2025	0.40289
ENTECAVIR	1 MG	TABLET	ORAL	07/10/2025	0.59943
ENZYMES,DIGESTIVE		CAPSULE	ORAL	04/22/2025	0.00810
EPHEDRINE SULFATE	25 MG/5 ML	SYRINGE	INTRAVEN	01/21/2025	3.09738
EPHEDRINE SULFATE	50MG/ML(1)	VIAL	INTRAVEN	03/19/2025	5.60070
EPINASTINE HCL	0.05 %	DROPS	OPHTHALMIC	02/15/2024	11.76450
EPINEPHRINE	1 MG/ML	VIAL	INJECTION	12/30/2024	7.47320
EPINEPHRINE	1 MG/ML(1)	VIAL	INJECTION	03/11/2025	11.58105
EPINEPHRINE	0.15MG/0.3	AUTO INJCT	INJECTION	02/13/2025	146.06250
EPINEPHRINE	0.3MG/0.3	AUTO INJCT	INJECTION	05/06/2025	139.59479
EPINEPHRINE HCL/PF	1 MG/ML(1)	AMPUL	INJECTION	06/26/2025	10.06250
EPIRUBICIN HCL	50 MG/25ML	VIAL	INTRAVEN	04/03/2025	2.92583
EPIRUBICIN HCL	200MG/0.1L	VIAL	INTRAVEN	06/30/2025	2.56833

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
EPLERENONE	25 MG	TABLET	ORAL	05/27/2025	0.28213
EPLERENONE	50 MG	TABLET	ORAL	05/27/2025	0.37800
EPOPROSTENOL SODIUM	1.5 MG	VIAL	INTRAVEN	04/25/2023	29.10000
EPOPROSTENOL SODIUM	0.5 MG	VIAL	INTRAVEN	08/01/2022	14.85620
EPTIFIBATIDE	75MG/100ML	VIAL	INTRAVEN	04/03/2025	0.88708
EPTIFIBATIDE	2 MG/ML	VIAL	INTRAVEN	04/03/2025	3.17592
ERGOCALCIFEROL (VITAMIN D2)	1250 MCG	CAPSULE	ORAL	04/15/2025	0.05503
ERGOCALCIFEROL (VITAMIN D2)	200 MCG/ML	DROPS	ORAL	04/03/2025	0.73611
ERIBULIN MESYLATE	1 MG/2 ML	VIAL	INTRAVEN	08/21/2025	349.16113
ERLOTINIB HCL	150 MG	TABLET	ORAL	04/10/2025	4.31684
ERLOTINIB HCL	100 MG	TABLET	ORAL	04/10/2025	3.73736
ERLOTINIB HCL	25 MG	TABLET	ORAL	04/10/2025	6.71322
ERTAPENEM SODIUM	1 G	VIAL	INJECTION	08/28/2025	28.38225
ERYTHROMYCIN BASE	250 MG	TABLET	ORAL	08/28/2025	4.04593
ERYTHROMYCIN BASE	500 MG	TABLET	ORAL	08/28/2025	3.81031
ERYTHROMYCIN BASE	250 MG	TABLET DR	ORAL	01/23/2025	5.22690
ERYTHROMYCIN BASE	333 MG	TABLET DR	ORAL	03/19/2025	9.12560
ERYTHROMYCIN BASE	500 MG	TABLET DR	ORAL	09/26/2023	7.08258
ERYTHROMYCIN BASE	5 MG/GRAM	OINT. (G)	OPHTHALMIC	04/03/2025	5.72226
ERYTHROMYCIN BASE IN ETHANOL	2 %	GEL (GRAM)	TOPICAL	04/03/2025	0.86117
ERYTHROMYCIN BASE IN ETHANOL	2 %	SOLUTION	TOPICAL	04/03/2025	0.52416

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ERYTHROMYCIN ETHYLSUCCINATE	200 MG/5ML	SUSP RECON	ORAL	04/03/2025	2.23137
ERYTHROMYCIN ETHYLSUCCINATE	400 MG/5ML	SUSP RECON	ORAL	08/28/2025	3.12272
ERYTHROMYCIN LACTOBIONATE	500 MG	VIAL	INTRAVEN	03/15/2022	66.62600
ERYTHROMYCIN/BENZOYL PEROXIDE	3 %-5 %	GEL (GRAM)	TOPICAL	04/22/2025	1.25100
ESCITALOPRAM OXALATE	5 MG/5 ML	SOLUTION	ORAL	07/24/2025	0.25628
ESCITALOPRAM OXALATE	10 MG	TABLET	ORAL	05/27/2025	0.02940
ESCITALOPRAM OXALATE	20 MG	TABLET	ORAL	07/17/2025	0.08321
ESCITALOPRAM OXALATE	5 MG	TABLET	ORAL	10/07/2024	0.03011
ESMOLOL HCL	100MG/10ML	VIAL	INTRAVEN	04/03/2025	0.54720
ESMOLOL IN SODIUM CHLORIDE,ISO	2500MG/250	IV SOLN	INTRAVEN	08/07/2025	0.69466
ESMOLOL IN SODIUM CHLORIDE,ISO	2000MG/100	IV SOLN	INTRAVEN	08/07/2025	1.74646
ESOMEPRAZOLE MAGNESIUM	20 MG	SUSPDR PKT	ORAL	07/28/2025	6.95000
ESOMEPRAZOLE MAGNESIUM	40 MG	SUSPDR PKT	ORAL	10/26/2021	6.19484
ESOMEPRAZOLE MAGNESIUM	10 MG	SUSPDR PKT	ORAL	05/27/2025	6.19484
ESOMEPRAZOLE MAGNESIUM	2.5 MG	SUSPDR PKT	ORAL	01/21/2025	6.19484
ESOMEPRAZOLE MAGNESIUM	5 MG	SUSPDR PKT	ORAL	01/21/2025	6.19484
ESOMEPRAZOLE MAGNESIUM	20 MG	CAPSULE DR	ORAL	05/08/2025	0.15544
ESOMEPRAZOLE MAGNESIUM	40 MG	CAPSULE DR	ORAL	04/17/2025	0.14472
ESOMEPRAZOLE SODIUM	40 MG	VIAL	INTRAVEN	06/06/2024	21.98700
ESTAZOLAM	1 MG	TABLET	ORAL	04/03/2025	2.32034
ESTAZOLAM	2 MG	TABLET	ORAL	07/18/2023	1.63453

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ESTRADIOL	1 MG	TABLET	ORAL	08/19/2025	0.06328
ESTRADIOL	2 MG	TABLET	ORAL	08/19/2025	0.07519
ESTRADIOL	0.5 MG	TABLET	ORAL	04/03/2025	0.08053
ESTRADIOL	1 MG/GRAM	GEL PACKET	TRANSDERM	06/12/2025	4.77840
ESTRADIOL	1.25/1.25G	GEL PACKET	TRANSDERM	09/12/2024	1.78631
ESTRADIOL	1.25 G	GEL MD PMP	TRANSDERM	05/07/2024	2.82980
ESTRADIOL	0.5MG/0.5G	GEL PACKET	TRANSDERM	08/21/2025	4.16064
ESTRADIOL	0.25/0.25G	GEL PACKET	TRANSDERM	04/03/2025	4.82636
ESTRADIOL	0.75/0.75G	GEL PACKET	TRANSDERM	04/03/2025	4.55048
ESTRADIOL	0.1MG/24HR	PATCH TDWK	TRANSDERM	10/26/2021	12.15000
ESTRADIOL	0.05MG/24H	PATCH TDWK	TRANSDERM	04/01/2025	13.13950
ESTRADIOL	.025MG/24H	PATCH TDWK	TRANSDERM	05/06/2022	11.95150
ESTRADIOL	.075MG/24H	PATCH TDWK	TRANSDERM	04/03/2025	17.62688
ESTRADIOL	0.06MG/24H	PATCH TDWK	TRANSDERM	10/19/2023	13.58175
ESTRADIOL	.0375MG/24	PATCH TDWK	TRANSDERM	02/13/2025	14.13825
ESTRADIOL	0.05MG/24H	PATCH TDSW	TRANSDERM	08/19/2025	5.12522
ESTRADIOL	0.1MG/24HR	PATCH TDSW	TRANSDERM	04/03/2025	7.46400
ESTRADIOL	.025MG/24H	PATCH TDSW	TRANSDERM	07/17/2025	7.67400
ESTRADIOL	.075MG/24H	PATCH TDSW	TRANSDERM	08/21/2025	7.75200
ESTRADIOL	.0375MG/24	PATCH TDSW	TRANSDERM	08/21/2025	8.10300
ESTRADIOL	0.01 %	CREAM/APPL	VAGINAL	06/18/2025	0.62586

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ESTRADIOL	10 MCG	TABLET	VAGINAL	08/28/2025	7.37250
ESTRADIOL VALERATE	10 MG/ML	VIAL	INTRAMUSC	03/28/2024	27.20965
ESTRADIOL VALERATE	20 MG/ML	VIAL	INTRAMUSC	08/19/2025	16.41933
ESTRADIOL VALERATE	40 MG/ML	VIAL	INTRAMUSC	04/03/2025	39.24725
ESTRADIOL/NORETHINDRONE ACET	1 MG-0.5MG	TABLET	ORAL	07/10/2025	1.45151
ESTRADIOL/NORETHINDRONE ACET	0.5-0.1 MG	TABLET	ORAL	08/21/2025	1.82144
ESZOPICLONE	3 MG	TABLET	ORAL	02/06/2025	0.15464
ESZOPICLONE	2 MG	TABLET	ORAL	06/26/2025	0.13400
ESZOPICLONE	1 MG	TABLET	ORAL	06/18/2025	0.20368
ETHACRYNATE SODIUM	50 MG	VIAL	INTRAVEN	07/17/2025	1405.80800
ETHACRYNIC ACID	25 MG	TABLET	ORAL	07/31/2025	2.63002
ETHAMBUTOL HCL	100 MG	TABLET	ORAL	04/03/2025	0.55476
ETHAMBUTOL HCL	400 MG	TABLET	ORAL	07/10/2025	1.04507
ETHINYL ESTRADIOL/DROSPIRENONE	0.03MG-3MG	TABLET	ORAL	08/07/2025	0.21615
ETHINYL ESTRADIOL/DROSPIRENONE	0.02-3(28)	TABLET	ORAL	02/13/2025	0.18090
ETHOSUXIMIDE	250 MG	CAPSULE	ORAL	08/21/2025	0.48481
ETHOSUXIMIDE	250 MG/5ML	SOLUTION	ORAL	04/03/2025	0.22616
ETHYL ALCOHOL	62 %	GEL (ML)	TOPICAL	05/06/2022	0.00425
ETHYL ALCOHOL	70 %	GEL (ML)	TOPICAL	03/06/2025	0.22278
ETHYL ALCOHOL	70 %	TOWELETTE	TOPICAL	05/31/2023	0.03196
ETHYL ALCOHOL	99 %	AMPUL	INTRAARTER	08/21/2025	188.47700

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ETHYL ALCOHOL	99 %	VIAL	INTRAARTER	07/24/2025	155.82173
ETHYNODIOL D-ETHINYL ESTRADIOL	1 MG-35MCG	TABLET	ORAL	06/12/2025	0.82601
ETHYNODIOL D-ETHINYL ESTRADIOL	1 MG-50MCG	TABLET	ORAL	04/03/2025	0.71610
ETODOLAC	200 MG	CAPSULE	ORAL	06/26/2025	0.72199
ETODOLAC	300 MG	CAPSULE	ORAL	04/03/2025	0.86644
ETODOLAC	400 MG	TABLET	ORAL	06/26/2025	0.59375
ETODOLAC	500 MG	TABLET	ORAL	08/21/2025	0.49325
ETODOLAC	600 MG	TAB ER 24H	ORAL	10/17/2024	1.99660
ETODOLAC	400 MG	TAB ER 24H	ORAL	06/26/2025	1.42487
ETODOLAC	500 MG	TAB ER 24H	ORAL	04/15/2025	1.28385
ETONOGESTREL/ETHINYL ESTRADIOL	.12-.015MG	VAG RING	VAGINAL	05/08/2025	101.06500
ETOPOSIDE	20 MG/ML	VIAL	INTRAVEN	07/31/2025	1.40432
ETRAVIRINE	100 MG	TABLET	ORAL	06/20/2022	10.07755
ETRAVIRINE	200 MG	TABLET	ORAL	05/14/2025	23.11767
EUCALYPTOL		LIQUID	MISCELL	05/02/2024	3.27202
EUCALYPTUS OIL		OIL	MISCELL	05/06/2022	0.14041
EUCALYPTUS OIL	100 %	OIL	MISCELL	05/06/2022	0.50920
EUCALYPTUS OIL/MENTHOL/CAMPHOR	1.2%-4.8%	OINT. (G)	TOPICAL	10/31/2024	0.00764
EVENING PRIMROSE OIL	500 MG	CAPSULE	ORAL	07/27/2022	0.07028
EVEROLIMUS	0.25 MG	TABLET	ORAL	06/26/2025	6.21496
EVEROLIMUS	0.5 MG	TABLET	ORAL	08/21/2025	6.99453

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
EVEROLIMUS	0.75 MG	TABLET	ORAL	08/21/2025	12.08533
EVEROLIMUS	5 MG	TABLET	ORAL	04/30/2025	12.88730
EVEROLIMUS	10 MG	TABLET	ORAL	04/03/2025	34.56996
EVEROLIMUS	1 MG	TABLET	ORAL	06/26/2025	14.51292
EVEROLIMUS	2.5 MG	TABLET	ORAL	04/03/2025	20.01713
EVEROLIMUS	7.5 MG	TABLET	ORAL	04/03/2025	30.21920
EVEROLIMUS	2 MG	TAB SUSP	ORAL	01/28/2025	295.03014
EVEROLIMUS	3 MG	TAB SUSP	ORAL	01/28/2025	297.98544
EVEROLIMUS	5 MG	TAB SUSP	ORAL	01/28/2025	310.14303
EXEMESTANE	25 MG	TABLET	ORAL	02/20/2025	0.62578
EZETIMIBE	10 MG	TABLET	ORAL	07/10/2025	0.05047
EZETIMIBE/SIMVASTATIN	10 MG-10MG	TABLET	ORAL	04/03/2025	0.85001
EZETIMIBE/SIMVASTATIN	10 MG-20MG	TABLET	ORAL	04/03/2025	0.39992
EZETIMIBE/SIMVASTATIN	10 MG-80MG	TABLET	ORAL	04/03/2025	0.44577
EZETIMIBE/SIMVASTATIN	10 MG-40MG	TABLET	ORAL	08/28/2025	0.69635
FAMCICLOVIR	250 MG	TABLET	ORAL	07/10/2025	0.92996
FAMCICLOVIR	500 MG	TABLET	ORAL	07/10/2025	1.47579
FAMCICLOVIR	125 MG	TABLET	ORAL	06/22/2021	0.41987
FAMOTIDINE	20 MG	TABLET	ORAL	07/24/2025	0.02677
FAMOTIDINE	40 MG	TABLET	ORAL	06/12/2025	0.04598
FAMOTIDINE	10 MG	TABLET	ORAL	07/17/2025	0.09067

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
FAMOTIDINE	10 MG/ML	VIAL	INTRAVEN	02/15/2024	0.41473
FAMOTIDINE/CA CARB/MAG HYDROX	10-800-165	TAB CHEW	ORAL	12/12/2024	0.34116
FAMOTIDINE/PF	20 MG/2 ML	VIAL	INTRAVEN	02/13/2025	0.40200
FAT EMULSIONS	20 %	EMULSION	INTRAVEN	07/06/2023	0.05756
FAT EMULSIONS	30 %	EMULSION	INTRAVEN	06/27/2023	0.05270
FEBUXOSTAT	40 MG	TABLET	ORAL	04/03/2025	0.24299
FEBUXOSTAT	80 MG	TABLET	ORAL	04/03/2025	0.33723
FELBAMATE	600 MG/5ML	ORAL SUSP	ORAL	04/03/2025	0.65338
FELBAMATE	400 MG	TABLET	ORAL	06/26/2025	1.12225
FELBAMATE	600 MG	TABLET	ORAL	04/03/2025	1.41960
FELODIPINE	5 MG	TAB ER 24H	ORAL	05/06/2025	0.11918
FELODIPINE	10 MG	TAB ER 24H	ORAL	02/06/2025	0.15946
FELODIPINE	2.5 MG	TAB ER 24H	ORAL	05/08/2025	0.22633
FENOFIBRATE	160 MG	TABLET	ORAL	09/04/2025	0.14517
FENOFIBRATE	40 MG	TABLET	ORAL	03/05/2024	6.63222
FENOFIBRATE	120 MG	TABLET	ORAL	03/05/2024	16.45000
FENOFIBRATE	54 MG	TABLET	ORAL	06/26/2025	0.09008
FENOFIBRATE NANOCRYSTALLIZED	48 MG	TABLET	ORAL	11/30/2023	0.14874
FENOFIBRATE NANOCRYSTALLIZED	145 MG	TABLET	ORAL	05/27/2025	0.12883
FENOFIBRATE,MICRONIZED	200 MG	CAPSULE	ORAL	04/03/2025	0.21922
FENOFIBRATE,MICRONIZED	67 MG	CAPSULE	ORAL	05/13/2025	0.07245

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FENOFIBRATE,MICRONIZED	134 MG	CAPSULE	ORAL	04/03/2025	0.14378
FENOFIBRATE,MICRONIZED	43 MG	CAPSULE	ORAL	04/17/2025	0.92371
FENOFIBRATE,MICRONIZED	130 MG	CAPSULE	ORAL	04/03/2025	1.32303
FENOFIBRIC ACID (CHOLINE)	45 MG	CAPSULE DR	ORAL	04/03/2025	0.20606
FENOFIBRIC ACID (CHOLINE)	135 MG	CAPSULE DR	ORAL	06/12/2025	0.32711
FENOPROFEN CALCIUM	200 MG	CAPSULE	ORAL	06/22/2023	10.10850
FENOPROFEN CALCIUM	400 MG	CAPSULE	ORAL	04/04/2024	9.99030
FENTANYL	25 MCG/HR	PATCH TD72	TRANSDERM	08/20/2024	4.69392
FENTANYL	50MCG/HR	PATCH TD72	TRANSDERM	02/11/2025	3.65900
FENTANYL	75MCG/HR	PATCH TD72	TRANSDERM	06/12/2025	11.11880
FENTANYL	100 MCG/HR	PATCH TD72	TRANSDERM	06/26/2025	13.83480
FENTANYL	12 MCG/HR	PATCH TD72	TRANSDERM	07/17/2025	8.92800
FENTANYL	62.5MCG/HR	PATCH TD72	TRANSDERM	04/08/2025	54.73296
FENTANYL	87.5MCG/HR	PATCH TD72	TRANSDERM	04/15/2025	66.22320
FENTANYL	37.5MCG/HR	PATCH TD72	TRANSDERM	04/08/2025	36.80447
FENTANYL CITRATE	400 MCG	TABLET EFF	BUCCAL	04/04/2024	88.67202
FENTANYL CITRATE	600 MCG	TABLET EFF	BUCCAL	04/04/2024	115.11702
FENTANYL CITRATE	800 MCG	TABLET EFF	BUCCAL	04/04/2024	141.82119
FENTANYL CITRATE/PF	50 MCG/ML	AMPUL	INJECTION	01/05/2023	0.55172
FENTANYL CITRATE/PF	50 MCG/ML	SYRINGE	INJECTION	07/15/2025	0.09600
FENTANYL CITRATE/PF	50 MCG/ML	VIAL	INJECTION	05/22/2025	0.54103

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
FERROUS FUMARATE	324(106)MG	TABLET	ORAL	04/03/2025	0.31651
FERROUS GLUCONATE	240(27)MG	TABLET	ORAL	04/24/2025	0.03377
FERROUS GLUCONATE	324(38)MG	TABLET	ORAL	06/05/2025	0.03015
FERROUS GLUCONATE	324(37.5)	TABLET	ORAL	04/13/2023	0.06606
FERROUS SULFATE	220 (44)/5	ELIXIR	ORAL	07/31/2025	0.05873
FERROUS SULFATE	220 (44)/5	SOLUTION	ORAL	08/05/2025	0.03783
FERROUS SULFATE	300 MG/5ML	LIQUID	ORAL	08/21/2025	0.55442
FERROUS SULFATE	15 MG/ML	DROPS	ORAL	05/27/2025	0.06820
FERROUS SULFATE	325(65) MG	TABLET	ORAL	04/03/2025	0.01005
FERROUS SULFATE	325(65) MG	TABLET DR	ORAL	08/07/2025	0.13605
FERROUS SULFATE	324(65)MG	TABLET DR	ORAL	06/10/2025	0.04040
FERUMOXYTOL	510MG/17ML	VIAL	INTRAVEN	07/17/2025	13.10091
FESOTERODINE FUMARATE	4 MG	TAB ER 24H	ORAL	04/03/2025	1.45792
FESOTERODINE FUMARATE	8 MG	TAB ER 24H	ORAL	08/21/2025	1.48606
FEXOFENADINE HCL	30 MG/5 ML	ORAL SUSP	ORAL	04/03/2025	0.10530
FEXOFENADINE HCL	60 MG	TABLET	ORAL	07/17/2025	0.15155
FEXOFENADINE HCL	180 MG	TABLET	ORAL	07/17/2025	0.36046
FEXOFENADINE/PSEUDOEPHEDRINE	180-240MG	TAB ER 24H	ORAL	06/18/2025	1.20044
FEXOFENADINE/PSEUDOEPHEDRINE	60MG-120MG	TAB ER 12H	ORAL	04/24/2025	0.76125
FINASTERIDE	1 MG	TABLET	ORAL	04/03/2025	0.08458
FINASTERIDE	5 MG	TABLET	ORAL	08/07/2025	0.07775

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
FINGOLIMOD HCL	0.5 MG	CAPSULE	ORAL	07/24/2025	10.76247
FISH OIL/BORAGE/FLAX/OM3,6,9 1	400-400 MG	CAPSULE	ORAL	09/01/2022	0.10943
FLAVOXATE HCL	100 MG	TABLET	ORAL	07/17/2025	0.85907
FLAXSEED OIL	1000 MG	CAPSULE	ORAL	07/27/2022	0.07436
FLECAINIDE ACETATE	100 MG	TABLET	ORAL	06/24/2025	0.13510
FLECAINIDE ACETATE	150 MG	TABLET	ORAL	06/24/2025	0.18398
FLECAINIDE ACETATE	50 MG	TABLET	ORAL	06/24/2025	0.10280
FLUCONAZOLE	40 MG/ML	SUSP RECON	ORAL	04/03/2025	0.73777
FLUCONAZOLE	10 MG/ML	SUSP RECON	ORAL	04/03/2025	0.37788
FLUCONAZOLE	100 MG	TABLET	ORAL	06/05/2025	0.19966
FLUCONAZOLE	200 MG	TABLET	ORAL	04/03/2025	0.44850
FLUCONAZOLE	50 MG	TABLET	ORAL	04/03/2025	0.27336
FLUCONAZOLE	150 MG	TABLET	ORAL	05/13/2025	0.53496
FLUCONAZOLE IN NACL,ISO-OSM	200MG/0.1L	PIGGYBACK	INTRAVEN	04/24/2025	0.05101
FLUCONAZOLE IN NACL,ISO-OSM	400MG/0.2L	PIGGYBACK	INTRAVEN	02/20/2025	0.03819
FLUCYTOSINE	250 MG	CAPSULE	ORAL	06/27/2024	11.11000
FLUCYTOSINE	500 MG	CAPSULE	ORAL	06/05/2025	24.90401
FLUDARABINE PHOSPHATE	50 MG	VIAL	INTRAVEN	06/05/2025	107.11250
FLUDARABINE PHOSPHATE	50 MG/2 ML	VIAL	INTRAVEN	07/03/2024	89.99500
FLUDROCORTISONE ACETATE	0.1 MG	TABLET	ORAL	10/07/2024	0.39490
FLUMAZENIL	0.1 MG/ML	VIAL	INTRAVEN	03/06/2025	1.40030

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
FLUNISOLIDE	25 MCG	SPRAY	NASAL	02/29/2024	1.70636
FLUOCINOLONE ACETONIDE	0.01 %	CREAM (G)	TOPICAL	09/05/2024	1.49008
FLUOCINOLONE ACETONIDE	0.025 %	CREAM (G)	TOPICAL	09/17/2024	1.13565
FLUOCINOLONE ACETONIDE	0.025 %	OINT. (G)	TOPICAL	02/01/2024	1.32660
FLUOCINOLONE ACETONIDE	0.01 %	SOLUTION	TOPICAL	06/26/2025	0.48463
FLUOCINOLONE ACETONIDE	0.01 %	OIL	TOPICAL	08/28/2025	0.31076
FLUOCINOLONE ACETONIDE OIL	0.01 %	DROPS	OTIC (EAR)	04/03/2025	1.88136
FLUOCINOLONE/SHOWER CAP	0.01 %	OIL	TOPICAL	04/03/2025	0.37476
FLUOCINONIDE	0.05 %	GEL (GRAM)	TOPICAL	05/29/2025	1.43782
FLUOCINONIDE	0.05 %	CREAM (G)	TOPICAL	04/03/2025	0.47123
FLUOCINONIDE	0.1 %	CREAM (G)	TOPICAL	11/28/2023	0.22601
FLUOCINONIDE	0.05 %	OINT. (G)	TOPICAL	04/24/2025	0.36314
FLUOCINONIDE	0.05 %	SOLUTION	TOPICAL	07/31/2025	0.27336
FLUOCINONIDE/EMOLLIENT BASE	0.05 %	CREAM (G)	TOPICAL	04/03/2025	0.73767
FLURESCEIN SODIUM	500 MG/5ML	VIAL	INTRAVEN	04/08/2025	9.93600
FLUORIDE (SODIUM)	0.5 MG/ML	DROPS	ORAL	08/21/2025	0.32348
FLUOROMETHOLONE	0.1 %	DROPS SUSP	OPHTHALMIC	07/24/2025	21.14700
FLUOROURACIL	5 %	CREAM (G)	TOPICAL	06/05/2025	2.01000
FLUOROURACIL	0.5 %	CREAM (G)	TOPICAL	08/07/2025	85.33638
FLUOROURACIL	5 %	SOLUTION	TOPICAL	06/26/2025	9.24000
FLUOROURACIL	500MG/10ML	VIAL	INTRAVEN	08/10/2023	0.35008

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
FLUOROURACIL	1 G/20 ML	VIAL	INTRAVEN	09/14/2023	0.40133
FLUOROURACIL	2.5 G/50ML	VIAL	INTRAVEN	08/21/2025	0.30297
FLUOROURACIL	5 G/100 ML	VIAL	INTRAVEN	03/13/2025	0.23517
FLUOXETINE HCL	10 MG	CAPSULE	ORAL	05/27/2025	0.02047
FLUOXETINE HCL	20 MG	CAPSULE	ORAL	05/27/2025	0.02688
FLUOXETINE HCL	40 MG	CAPSULE	ORAL	06/05/2025	0.07290
FLUOXETINE HCL	20 MG/5 ML	SOLUTION	ORAL	06/25/2024	0.20833
FLUOXETINE HCL	10 MG	TABLET	ORAL	09/04/2025	0.12596
FLUOXETINE HCL	20 MG	TABLET	ORAL	09/04/2025	0.12105
FLUOXETINE HCL	60 MG	TABLET	ORAL	05/14/2025	0.49357
FLUPHENAZINE DECANOATE	25 MG/ML	VIAL	INJECTION	08/07/2025	9.69680
FLUPHENAZINE HCL	1 MG	TABLET	ORAL	07/31/2025	0.36984
FLUPHENAZINE HCL	2.5 MG	TABLET	ORAL	04/15/2025	0.29452
FLUPHENAZINE HCL	5 MG	TABLET	ORAL	06/26/2025	0.45131
FLURANDRENOLIDE	0.05 %	CREAM (G)	TOPICAL	05/06/2022	5.24066
FLURANDRENOLIDE	0.05 %	LOTION	TOPICAL	10/18/2021	1.70839
FLUTICASONE PROPION/SALMETEROL	45-21 MCG	HFA AER AD	INHALATION	05/27/2025	17.23396
FLUTICASONE PROPION/SALMETEROL	115-21MCG	HFA AER AD	INHALATION	05/27/2025	20.53674
FLUTICASONE PROPION/SALMETEROL	230-21MCG	HFA AER AD	INHALATION	05/27/2025	28.52850
FLUTICASONE PROPION/SALMETEROL	100-50 MCG	BLST W/DEV	INHALATION	06/18/2025	1.85344
FLUTICASONE PROPION/SALMETEROL	250-50 MCG	BLST W/DEV	INHALATION	04/03/2025	2.06740

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FLUTICASONE PROPION/SALMETEROL	500-50 MCG	BLST W/DEV	INHALATION	09/17/2024	2.31950
FLUTICASONE PROPIONATE	0.05 %	CREAM (G)	TOPICAL	01/02/2024	0.22333
FLUTICASONE PROPIONATE	0.005 %	OINT. (G)	TOPICAL	04/03/2025	0.82946
FLUTICASONE PROPIONATE	0.05 %	LOTION	TOPICAL	01/21/2025	2.72516
FLUTICASONE PROPIONATE	50 MCG	SPRAY SUSP	NASAL	05/06/2025	0.40969
FLUTICASONE PROPIONATE	50 MCG	SPRAY SUSP	NASAL	08/21/2025	0.89305
FLUTICASONE/VILANTEROL	100-25MCG	BLST W/DEV	INHALATION	09/17/2024	3.90870
FLUTICASONE/VILANTEROL	200-25 MCG	BLST W/DEV	INHALATION	05/22/2024	5.94805
FLUVASTATIN SODIUM	20 MG	CAPSULE	ORAL	11/14/2024	3.39781
FLUVASTATIN SODIUM	40 MG	CAPSULE	ORAL	08/07/2025	3.51281
FLUVASTATIN SODIUM	80 MG	TAB ER 24H	ORAL	04/03/2025	4.30672
FLUVOXAMINE MALEATE	100 MG	CAP ER 24H	ORAL	05/28/2024	5.64443
FLUVOXAMINE MALEATE	150 MG	CAP ER 24H	ORAL	07/22/2025	5.07044
FLUVOXAMINE MALEATE	25 MG	TABLET	ORAL	06/12/2025	0.34090
FLUVOXAMINE MALEATE	50 MG	TABLET	ORAL	04/03/2025	0.30887
FLUVOXAMINE MALEATE	100 MG	TABLET	ORAL	04/17/2025	0.31624
FOLIC ACID	0.8 MG	CAPSULE	ORAL	05/06/2022	0.05561
FOLIC ACID	0.4 MG	TABLET	ORAL	08/07/2025	0.01426
FOLIC ACID	0.8 MG	TABLET	ORAL	07/17/2025	0.00925
FOLIC ACID	1 MG	TABLET	ORAL	08/07/2025	0.01884
FOLIC ACID	5 MG/ML	VIAL	INJECTION	09/14/2023	3.34818

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FOLIC ACID/MULTIVIT,IRON,MINER	0.4MG-18MG	TABLET	ORAL	05/06/2022	0.04348
FOLIC ACID/VIT B COMPLEX AND C	0.8 MG	TABLET	ORAL	04/03/2025	0.07732
FOLIC ACID/VIT B COMPLEX AND C	400 MCG	TABLET	ORAL	04/03/2025	0.08013
FOMEPIZOLE	1 G/ML	VIAL	INTRAVEN	06/03/2024	349.99996
FONDAPARINUX SODIUM	2.5 MG/0.5	SYRINGE	SUBCUT	05/27/2025	10.92000
FONDAPARINUX SODIUM	10MG/0.8ML	SYRINGE	SUBCUT	04/27/2023	35.99288
FONDAPARINUX SODIUM	5MG/0.4ML	SYRINGE	SUBCUT	01/25/2024	85.44656
FONDAPARINUX SODIUM	7.5 MG/0.6	SYRINGE	SUBCUT	01/02/2025	36.52246
FORMOTEROL FUMARATE	20 MCG/2ML	VIAL-NEB	INHALATION	07/17/2025	2.02662
FOSAMPRENAVIR CALCIUM	700 MG	TABLET	ORAL	02/06/2025	16.91725
FOSAPREPITANT DIMEGLUMINE	150 MG	VIAL	INTRAVEN	06/18/2025	14.70000
FOSCARNET SODIUM	24 MG/ML	INFUS. BTL	INTRAVEN	07/31/2025	0.99160
FOSCARNET SODIUM	24 MG/ML	PLAST. BAG	INTRAVEN	10/03/2024	1.90280
FOSFOMYCIN TROMETHAMINE	3 G	PACKET	ORAL	06/18/2025	69.91525
FOSINOPRIL SODIUM	10 MG	TABLET	ORAL	04/03/2025	0.31445
FOSINOPRIL SODIUM	20 MG	TABLET	ORAL	04/24/2025	0.20353
FOSINOPRIL SODIUM	40 MG	TABLET	ORAL	04/03/2025	0.30507
FOSINOPRIL/HYDROCHLOROTHIAZIDE	20-12.5 MG	TABLET	ORAL	06/12/2025	1.44747
FOSINOPRIL/HYDROCHLOROTHIAZIDE	10-12.5 MG	TABLET	ORAL	05/28/2024	0.87000
FOSPHENYTOIN SODIUM	100MG PE/2	VIAL	INJECTION	10/17/2023	0.86564
FOSPHENYTOIN SODIUM	500 PE/10	VIAL	INJECTION	10/17/2023	0.62759

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FROVATRIPTAN SUCCINATE	2.5 MG	TABLET	ORAL	04/03/2025	13.99417
FRUCTOOLIGOSACCHARIDES/POLYDEX	15 G/30 ML	LIQUID	ORAL	05/06/2022	0.02374
FULVESTRANT	250 MG/5ML	SYRINGE	INTRAMUSC	08/21/2025	14.90790
FUROSEMIDE	20 MG	TABLET	ORAL	08/21/2025	0.03477
FUROSEMIDE	40 MG	TABLET	ORAL	08/21/2025	0.05205
FUROSEMIDE	80 MG	TABLET	ORAL	03/28/2024	0.06000
FUROSEMIDE	10 MG/ML	VIAL	INJECTION	08/07/2025	0.13266
GABAPENTIN	100 MG	CAPSULE	ORAL	08/28/2025	0.00954
GABAPENTIN	300 MG	CAPSULE	ORAL	09/04/2025	0.01490
GABAPENTIN	400 MG	CAPSULE	ORAL	06/26/2025	0.01762
GABAPENTIN	250 MG/5ML	SOLUTION	ORAL	09/02/2025	0.07413
GABAPENTIN	250 MG/5ML	SOLUTION	ORAL	08/21/2025	1.27983
GABAPENTIN	300 MG/6ML	SOLUTION	ORAL	07/17/2025	1.08077
GABAPENTIN	600 MG	TABLET	ORAL	05/27/2025	0.05353
GABAPENTIN	800 MG	TABLET	ORAL	05/27/2025	0.06592
GABAPENTIN	300 MG	TAB ER 24H	ORAL	07/10/2025	2.38222
GABAPENTIN	600 MG	TAB ER 24H	ORAL	07/10/2025	2.93333
GADOBUTROL	1 MMOL/ML	VIAL	INTRAVEN	02/20/2025	2.68000
GADOBUTROL	15 MMOL/15	VIAL	INTRAVEN	06/12/2025	6.32816
GADOBUTROL	7.5/7.5 ML	VIAL	INTRAVEN	06/26/2025	6.43365
GADOBUTROL	10 MMOL/10	VIAL	INTRAVEN	03/19/2025	2.68000

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GADOBUTROL	2 MMOL/2ML	VIAL	INTRAVEN	03/19/2025	2.68000
GADOTERATE MEGLUMINE	5MMOL/10ML	SYRINGE	INTRAVEN	05/06/2022	6.98513
GADOTERATE MEGLUMINE	7.5MMOL/15	SYRINGE	INTRAVEN	05/06/2022	6.63575
GADOTERATE MEGLUMINE	10MMOL/20	SYRINGE	INTRAVEN	05/06/2022	6.55419
GADOTERATE MEGLUMINE	5MMOL/10ML	VIAL	INTRAVEN	06/05/2025	1.65182
GADOTERATE MEGLUMINE	10MMOL/20	VIAL	INTRAVEN	06/05/2025	1.54100
GADOTERATE MEGLUMINE	7.5MMOL/15	VIAL	INTRAVEN	06/05/2025	1.54100
GADOTERATE MEGLUMINE	50MMOL/100	VIAL	INTRAVEN	06/05/2025	1.80234
GADOTERATE MEGLUMINE	2.5MMOL/5	VIAL	INTRAVEN	06/05/2025	2.79312
GALANTAMINE HBR	8 MG	CAP24H PEL	ORAL	04/03/2025	1.82017
GALANTAMINE HBR	16 MG	CAP24H PEL	ORAL	04/24/2025	1.81168
GALANTAMINE HBR	24 MG	CAP24H PEL	ORAL	04/17/2025	2.00955
GALANTAMINE HBR	12 MG	TABLET	ORAL	08/28/2025	1.14994
GALANTAMINE HBR	4 MG	TABLET	ORAL	04/03/2025	0.77318
GALANTAMINE HBR	8 MG	TABLET	ORAL	04/03/2025	1.12404
GANCICLOVIR SODIUM	500 MG	VIAL	INTRAVEN	06/26/2025	57.50250
GANIRELIX ACETATE	250MCG/0.5	SYRINGE	SUBCUT	04/03/2025	90.20000
GARLIC	1000 MG	CAPSULE	ORAL	07/27/2022	0.03350
GARLIC	500 MG	CAPSULE	ORAL	07/27/2022	0.06043
GATIFLOXACIN	0.5 %	DROPS	OPHTHALMIC	04/27/2023	24.81360
GEFITINIB	250 MG	TABLET	ORAL	04/03/2025	143.80067

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GELATIN		POWDER	MISCELL	05/06/2022	0.39195
GELATIN CAPSULES (EMPTY)		CAPSULE	ORAL	09/08/2022	0.01273
GEMCITABINE HCL	200 MG	VIAL	INTRAVEN	05/06/2022	7.22400
GEMCITABINE HCL	1 G	VIAL	INTRAVEN	04/03/2025	39.88070
GEMCITABINE HCL	2 G	VIAL	INTRAVEN	07/29/2025	82.50000
GEMCITABINE HCL	1 G/26.3ML	VIAL	INTRAVEN	07/29/2025	0.77634
GEMCITABINE HCL	2 G/52.6ML	VIAL	INTRAVEN	07/31/2025	0.73598
GEMCITABINE HCL	200MG/5.26	VIAL	INTRAVEN	11/02/2023	0.76426
GEMCITABINE HCL	100 MG/ML	VIAL	INTRAVEN	05/21/2024	2.66574
GEMFIBROZIL	600 MG	TABLET	ORAL	05/29/2025	0.14533
GENTAMICIN SULFATE	40 MG/ML	VIAL	INJECTION	06/13/2024	1.15779
GENTAMICIN SULFATE	0.1 %	CREAM (G)	TOPICAL	07/29/2025	0.11000
GENTAMICIN SULFATE	0.1 %	OINT. (G)	TOPICAL	04/03/2025	1.08987
GENTAMICIN SULFATE	0.3 %	DROPS	OPHTHALMIC	07/29/2025	0.53300
GENTAMICIN SULFATE/PF	20 MG/2 ML	VIAL	INJECTION	03/28/2024	1.39360
GENTIAN VIOLET	2 %	SOLUTION	TOPICAL	07/29/2025	0.02713
GINGER	500 MG	CAPSULE	ORAL	07/27/2022	0.08085
GINGER ROOT	550 MG	CAPSULE	ORAL	07/27/2022	0.03618
GINKGO BILOBA LEAF EXTRACT	60 MG	CAPSULE	ORAL	07/27/2022	0.13400
GINSENG	100 MG	CAPSULE	ORAL	07/27/2022	0.05360
GLATIRAMER ACETATE	20 MG/ML	SYRINGE	SUBCUT	07/29/2025	39.65628

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GLATIRAMER ACETATE	40 MG/ML	SYRINGE	SUBCUT	09/10/2024	102.46327
GLIMEPIRIDE	1 MG	TABLET	ORAL	07/29/2025	0.01793
GLIMEPIRIDE	2 MG	TABLET	ORAL	07/29/2025	0.02202
GLIMEPIRIDE	4 MG	TABLET	ORAL	07/29/2025	0.03843
GLIPIZIDE	10 MG	TAB ER 24	ORAL	05/13/2025	0.10514
GLIPIZIDE	5 MG	TAB ER 24	ORAL	08/21/2025	0.10197
GLIPIZIDE	2.5 MG	TAB ER 24	ORAL	08/28/2025	0.17599
GLIPIZIDE	10 MG	TABLET	ORAL	07/17/2025	0.04677
GLIPIZIDE	5 MG	TABLET	ORAL	09/04/2025	0.03154
GLIPIZIDE/METFORMIN HCL	2.5-250 MG	TABLET	ORAL	04/03/2025	0.49861
GLIPIZIDE/METFORMIN HCL	2.5-500 MG	TABLET	ORAL	04/03/2025	0.52582
GLIPIZIDE/METFORMIN HCL	5 MG-500MG	TABLET	ORAL	04/03/2025	0.44716
GLOVES		EACH	MISCELL	07/27/2022	0.60045
GLUCAGON	1 MG	VIAL	INJECTION	03/16/2021	268.65250
GLUCOSAMINE HCL/CHONDROITIN SU	500-400 MG	CAPSULE	ORAL	07/29/2025	0.13304
GLUCOSAMINE SULFATE	500 MG	CAPSULE	ORAL	01/23/2025	0.04243
GLUCOSAMINE SULFATE	500 MG	TABLET	ORAL	07/29/2025	0.07378
GLUCOSAMINE SULFATE	750 MG	TABLET	ORAL	07/29/2025	0.03125
GLUCOSAMINE/CHONDRO SU A	500-400 MG	TABLET	ORAL	07/29/2025	0.06380
GLUCOSAMINE/CHONDROITIN A/MSM	500-200 MG	TABLET	ORAL	05/06/2022	1.18418
GLUCOSAMINE/CHONDROITIN/C/MANG	500-400 MG	CAPSULE	ORAL	03/24/2016	0.12049

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GLUTAMINE	100 %	POWDER	ORAL	07/29/2025	0.03960
GLY/DIMETH/PETROLAT,WHT/WATER		CREAM (G)	TOPICAL	11/07/2024	0.05690
GLYBURIDE	1.25 MG	TABLET	ORAL	04/03/2025	0.18264
GLYBURIDE	2.5 MG	TABLET	ORAL	04/17/2025	0.05499
GLYBURIDE	5 MG	TABLET	ORAL	11/26/2024	0.04591
GLYBURIDE/METFORMIN HCL	2.5-500 MG	TABLET	ORAL	08/12/2025	0.04812
GLYBURIDE/METFORMIN HCL	1.25-250MG	TABLET	ORAL	07/29/2025	0.04702
GLYBURIDE/METFORMIN HCL	5 MG-500MG	TABLET	ORAL	07/29/2025	0.32230
GLYCERIN	ADULT	SUPP.RECT	RECTAL	04/15/2025	0.02754
GLYCERIN	PEDIATRIC	SUPP.RECT	RECTAL	07/29/2025	0.02464
GLYCERIN	99.5 %	SOLUTION	TOPICAL	07/29/2025	0.02288
GLYCERIN/MIN OIL/POLYCARBOPHIL		GEL W/APPL	VAGINAL	06/26/2025	0.21237
GLYCERYL MONOSTEARATE		POWDER	MISCELL	05/06/2022	0.50920
GLYCINE		POWDER	ORAL	05/06/2022	0.36810
GLYCINE UROLOGIC SOLUTION	1.5 %	IRRIG SOLN	IRRIGATION	04/03/2025	0.00919
GLYCOPYRROLATE	1 MG/5 ML	SOLUTION	ORAL	08/28/2025	0.63821
GLYCOPYRROLATE	1 MG	TABLET	ORAL	07/31/2025	0.21145
GLYCOPYRROLATE	2 MG	TABLET	ORAL	07/31/2025	0.25505
GLYCOPYRROLATE	1.5 MG	TABLET	ORAL	11/17/2022	11.44250
GLYCOPYRROLATE	0.2 MG/ML	VIAL	INJECTION	02/27/2024	0.25728
GLYCOPYRROLATE IN WATER/PF	0.2 MG/ML	SYRINGE	INJECTION	11/21/2024	5.61340

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GLYCOPYRROLATE IN WATER/PF	0.4MG/2ML	SYRINGE	INTRAVEN	04/03/2025	6.72719
GLYCOPYRROLATE/PF	0.4MG/2ML	SYRINGE	INJECTION	04/03/2025	6.72719
GRANISETRON HCL	1 MG	TABLET	ORAL	05/13/2025	0.47250
GRANISETRON HCL	1 MG/ML	VIAL	INTRAVEN	04/03/2025	9.25865
GRANISETRON HCL	1 MG/ML(1)	VIAL	INTRAVEN	03/09/2023	12.96900
GRANISETRON HCL/PF	1 MG/ML(1)	VIAL	INTRAVEN	10/18/2021	5.93090
GRAPE SEED EXTRACT	50 MG	CAPSULE	ORAL	07/27/2022	0.12037
GREEN SOAP		TINCTURE	TOPICAL	06/15/2023	0.00313
GREEN TEA LEAF EXTRACT		CAPSULE	ORAL	07/27/2022	0.16722
GRISEOFULVIN ULTRAMICROSIZE	125 MG	TABLET	ORAL	11/08/2023	4.53460
GRISEOFULVIN, MICROSIZE	125 MG/5ML	ORAL SUSP	ORAL	04/03/2025	0.82477
GRISEOFULVIN, MICROSIZE	500 MG	TABLET	ORAL	11/26/2024	9.39128
GUAIFEN/DEXTROMETHORPHAN/PE	100-10-5MG	LIQUID	ORAL	04/03/2025	0.01760
GUAIFEN/DEXTROMETHORPHAN/PE	200-30-10	LIQUID	ORAL	11/22/2022	0.03747
GUAIFEN/DEXTROMETHORPHAN/PE	300-15-10	LIQUID	ORAL	05/17/2023	0.04161
GUAIFEN/DEXTROMETHORPHAN/PE	75-5-2.5/5	LIQUID	ORAL	06/26/2025	0.00883
GUAIFEN/DEXTROMETHORPHAN/PE	200-10-5/5	LIQUID	ORAL	06/18/2025	0.00957
GUAIFEN/DEXTROMETHORPHAN/PE	388-28-10	LIQUID	ORAL	06/26/2025	0.01069
GUAIFEN/DEXTROMETHORPHAN/PE	400-20-10	LIQUID	ORAL	07/03/2025	0.01554
GUAIFEN/DEXTROMETHORPHAN/PE	18-10MG/15	LIQUID	ORAL	08/13/2024	0.08199
GUAIFEN/DEXTROMETHORPHAN/PE	50-5-2.5/1	DROPS	ORAL	05/06/2022	0.16057

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GUAIFEN/PHENYLEPH/ACETAMINOPHN	200-5-325	TABLET	ORAL	01/30/2025	0.43215
GUAIFENESIN	1200 MG	TAB ER 12H	ORAL	08/28/2025	0.47522
GUAIFENESIN	600 MG	TAB ER 12H	ORAL	08/28/2025	0.24490
GUAIFENESIN	200 MG/5ML	LIQUID	ORAL	06/23/2022	0.00817
GUAIFENESIN	100 MG/5ML	LIQUID	ORAL	05/13/2025	0.00838
GUAIFENESIN	200 MG	TABLET	ORAL	04/17/2025	0.02010
GUAIFENESIN	400 MG	TABLET	ORAL	08/21/2025	0.03471
GUAIFENESIN/DEXTROMETHORPHAN	200MG-10MG	CAPSULE	ORAL	08/13/2024	0.53131
GUAIFENESIN/DEXTROMETHORPHAN	100-10MG/5	LIQUID	ORAL	08/21/2025	0.01071
GUAIFENESIN/DEXTROMETHORPHAN	100-5 MG/5	LIQUID	ORAL	07/31/2024	0.04110
GUAIFENESIN/DEXTROMETHORPHAN	200-10MG/5	LIQUID	ORAL	02/04/2025	0.03463
GUAIFENESIN/DEXTROMETHORPHAN	200-15MG/5	LIQUID	ORAL	01/19/2023	0.06343
GUAIFENESIN/DEXTROMETHORPHAN	187-10MG/5	LIQUID	ORAL	05/06/2022	0.07251
GUAIFENESIN/DEXTROMETHORPHAN	50-5MG/5ML	LIQUID	ORAL	07/10/2025	0.03770
GUAIFENESIN/DEXTROMETHORPHAN	100-10MG/5	SYRUP	ORAL	02/27/2025	0.01554
GUAIFENESIN/DEXTROMETHORPHAN	400MG-20MG	TABLET	ORAL	08/07/2025	0.04824
GUAIFENESIN/DEXTROMETHORPHAN	600MG-30MG	TAB ER 12H	ORAL	08/14/2025	0.59362
GUAIFENESIN/DEXTROMETHORPHAN	1200-60MG	TAB ER 12H	ORAL	09/03/2024	0.57360
GUAIFENESIN/DM/PSEUDOEPHEDRINE	200-15-30	SOLUTION	ORAL	04/25/2024	0.02294
GUAIFENESIN/DM/PSEUDOEPHEDRINE	50-5-15/5	LIQUID	ORAL	01/04/2024	0.03824
GUAIFENESIN/DM/PSEUDOEPHEDRINE	187-10-30	LIQUID	ORAL	08/28/2025	0.04525

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
GUAIFENESIN/DM/PSEUDOEPHEDRINE	200-10-30	TABLET	ORAL	05/06/2022	0.14499
GUAIFENESIN/PHENYLEPHRINE HCL	100-5 MG/5	LIQUID	ORAL	01/21/2025	0.03316
GUAIFENESIN/PHENYLEPHRINE HCL	400MG-10MG	TABLET	ORAL	07/27/2023	0.05641
GUAIFENESIN/PSEUDOEPHEDRNE HCL	375MG-60MG	TABLET	ORAL	05/06/2022	0.61091
GUAIFENESIN/PSEUDOEPHEDRNE HCL	600MG-60MG	TAB ER 12H	ORAL	04/03/2025	0.60184
GUAIFENESIN/PSEUDOEPHEDRNE HCL	1200-120MG	TAB ER 12H	ORAL	07/29/2025	0.41737
GUANFACINE HCL	1 MG	TABLET	ORAL	06/24/2025	0.10867
GUANFACINE HCL	2 MG	TABLET	ORAL	07/29/2025	0.30030
GUANFACINE HCL	1 MG	TAB ER 24H	ORAL	09/04/2025	0.14914
GUANFACINE HCL	2 MG	TAB ER 24H	ORAL	09/04/2025	0.14914
GUANFACINE HCL	3 MG	TAB ER 24H	ORAL	09/04/2025	0.14914
GUANFACINE HCL	4 MG	TAB ER 24H	ORAL	09/04/2025	0.14914
HALCINONIDE	0.1 %	CREAM (G)	TOPICAL	07/29/2025	9.30426
HALOBETASOL PROPIONATE	0.05 %	CREAM (G)	TOPICAL	07/29/2025	0.51943
HALOBETASOL PROPIONATE	0.05 %	OINT. (G)	TOPICAL	04/03/2025	0.88011
HALOPERIDOL	0.5 MG	TABLET	ORAL	08/28/2025	0.11390
HALOPERIDOL	1 MG	TABLET	ORAL	08/28/2025	0.12060
HALOPERIDOL	10 MG	TABLET	ORAL	04/01/2025	0.17588
HALOPERIDOL	2 MG	TABLET	ORAL	08/28/2025	0.20716
HALOPERIDOL	20 MG	TABLET	ORAL	04/01/2025	0.30150
HALOPERIDOL	5 MG	TABLET	ORAL	08/28/2025	0.12261

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HALOPERIDOL DECANOATE	50 MG/ML	AMPUL	INTRAMUSC	04/25/2023	16.65200
HALOPERIDOL DECANOATE	100 MG/ML	AMPUL	INTRAMUSC	07/29/2025	33.60000
HALOPERIDOL DECANOATE	50 MG/ML	VIAL	INTRAMUSC	08/07/2025	7.22160
HALOPERIDOL DECANOATE	100 MG/ML	VIAL	INTRAMUSC	08/07/2025	7.80000
HALOPERIDOL LACTATE	2 MG/ML	ORAL CONC	ORAL	07/29/2025	0.13057
HALOPERIDOL LACTATE	5 MG/ML	VIAL	INJECTION	04/03/2025	1.52626
HALOPERIDOL LACTATE	5 MG/ML	SYRINGE	INTRAMUSC	08/27/2020	9.29948
HEPARIN SOD,PORK IN 0.45% NACL	25000/250	IV SOLN	INTRAVEN	08/07/2025	0.09945
HEPARIN SOD,PORK IN 0.45% NACL	25000/500	IV SOLN	INTRAVEN	08/07/2025	0.03971
HEPARIN SODIUM,PORCINE	5000/ML	SYRINGE	INJECTION	05/31/2023	3.94680
HEPARIN SODIUM,PORCINE	1000/ML	VIAL	INJECTION	05/08/2025	0.21235
HEPARIN SODIUM,PORCINE	10000/ML	VIAL	INJECTION	04/17/2025	2.10680
HEPARIN SODIUM,PORCINE	20000/ML	VIAL	INJECTION	10/19/2021	8.23000
HEPARIN SODIUM,PORCINE	5000/ML	VIAL	INJECTION	04/17/2025	0.97488
HEPARIN SODIUM,PORCINE/D5W	25000/250	IV SOLN	INTRAVEN	04/03/2025	0.08011
HEPARIN SODIUM,PORCINE/D5W	25000/500	IV SOLN	INTRAVEN	02/06/2025	0.04401
HEPARIN SODIUM,PORCINE/NS/PF	1000/500ML	IV SOLN	INTRAVEN	02/06/2025	0.01193
HEPARIN SODIUM,PORCINE/NS/PF	2K/1000ML	IV SOLN	INTRAVEN	07/17/2025	0.00811
HEPARIN SODIUM,PORCINE/PF	1000/ML	VIAL	INJECTION	04/03/2025	3.30000
HEPARIN SODIUM,PORCINE/PF	5000/0.5ML	VIAL	INJECTION	12/20/2023	11.48400
HERBAL COMPLEX NO.174	450 MG	CAPSULE	ORAL	03/06/2025	0.13601

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HETASTARCH IN 0.9 % NACL	6 %-0.9 %	PLAST. BAG	INTRAVEN	03/21/2024	0.06884
HORSE CHESTNUT SEED	300 MG	CAPSULE	ORAL	07/27/2022	0.11167
HYDRALAZINE HCL	10 MG	TABLET	ORAL	06/24/2025	0.02100
HYDRALAZINE HCL	100 MG	TABLET	ORAL	06/24/2025	0.06300
HYDRALAZINE HCL	25 MG	TABLET	ORAL	06/24/2025	0.04512
HYDRALAZINE HCL	50 MG	TABLET	ORAL	06/24/2025	0.04063
HYDRALAZINE HCL	20 MG/ML	VIAL	INJECTION	09/04/2025	4.38900
HYDROCHLOROTHIAZIDE	12.5 MG	CAPSULE	ORAL	05/29/2025	0.03069
HYDROCHLOROTHIAZIDE	25 MG	TABLET	ORAL	07/17/2025	0.01548
HYDROCHLOROTHIAZIDE	50 MG	TABLET	ORAL	07/03/2025	0.03865
HYDROCHLOROTHIAZIDE	12.5 MG	TABLET	ORAL	08/07/2025	0.06901
HYDROCODONE BIT/HOMATROP ME-BR	5-1.5 MG/5	SOLUTION	ORAL	06/12/2025	0.15845
HYDROCODONE BIT/HOMATROP ME-BR	5 MG-1.5MG	TABLET	ORAL	08/01/2022	0.66000
HYDROCODONE BITARTRATE	20 MG	TAB ER 24H	ORAL	01/09/2025	13.44893
HYDROCODONE BITARTRATE	30 MG	TAB ER 24H	ORAL	09/21/2023	12.66577
HYDROCODONE BITARTRATE	40 MG	TAB ER 24H	ORAL	08/01/2022	11.56240
HYDROCODONE BITARTRATE	60 MG	TAB ER 24H	ORAL	03/21/2024	22.55365
HYDROCODONE BITARTRATE	80 MG	TAB ER 24H	ORAL	03/21/2024	29.68366
HYDROCODONE BITARTRATE	100 MG	TAB ER 24H	ORAL	01/09/2025	61.32695
HYDROCODONE/ACETAMINOPHEN	7.5-325/15	SOLUTION	ORAL	09/17/2024	0.41226
HYDROCODONE/ACETAMINOPHEN	7.5-325/15	SOLUTION	ORAL	10/19/2023	0.23781

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HYDROCODONE/ACETAMINOPHEN	2.5-108/5	SOLUTION	ORAL	05/06/2022	0.61774
HYDROCODONE/ACETAMINOPHEN	5-217MG/10	SOLUTION	ORAL	05/06/2022	0.31758
HYDROCODONE/ACETAMINOPHEN	2.5-325 MG	TABLET	ORAL	04/17/2025	0.16067
HYDROCODONE/ACETAMINOPHEN	10MG-325MG	TABLET	ORAL	08/21/2025	0.06533
HYDROCODONE/ACETAMINOPHEN	5 MG-325MG	TABLET	ORAL	07/10/2025	0.05836
HYDROCODONE/ACETAMINOPHEN	7.5-325 MG	TABLET	ORAL	08/14/2025	0.07404
HYDROCODONE/ACETAMINOPHEN	10MG-300MG	TABLET	ORAL	04/01/2025	0.22477
HYDROCODONE/ACETAMINOPHEN	5 MG-300MG	TABLET	ORAL	08/26/2025	0.16543
HYDROCODONE/ACETAMINOPHEN	7.5-300 MG	TABLET	ORAL	08/26/2025	0.20985
HYDROCODONE/IBUPROFEN	7.5-200 MG	TABLET	ORAL	06/12/2025	0.76816
HYDROCOLLOID DRESSING	2"X2.75"	BANDAGE	TOPICAL	12/17/2024	2.65716
HYDROCORTISONE	10 MG	TABLET	ORAL	07/29/2025	0.23274
HYDROCORTISONE	20 MG	TABLET	ORAL	07/29/2025	0.27268
HYDROCORTISONE	5 MG	TABLET	ORAL	07/29/2025	0.12255
HYDROCORTISONE	100MG/60ML	ENEMA	RECTAL	07/29/2025	0.12878
HYDROCORTISONE	1 %	CREAM (G)	TOPICAL	07/29/2025	0.03727
HYDROCORTISONE	2.5 %	CREAM (G)	TOPICAL	04/22/2025	0.07426
HYDROCORTISONE	1 %	CREAM PACK	TOPICAL	07/29/2025	0.03727
HYDROCORTISONE	2.5 %	CRM/PE APP	TOPICAL	07/29/2025	0.19635
HYDROCORTISONE	1 %	OINT. (G)	TOPICAL	07/29/2025	0.06153
HYDROCORTISONE	2.5 %	OINT. (G)	TOPICAL	07/29/2025	0.06982

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HYDROCORTISONE	1 %	SOLUTION	TOPICAL	07/29/2025	0.12547
HYDROCORTISONE	1 %	LOTION	TOPICAL	07/29/2025	0.02947
HYDROCORTISONE	1 %	LOTION	TOPICAL	07/29/2025	0.03269
HYDROCORTISONE ACETATE	1 %	CREAM (G)	TOPICAL	05/05/2025	0.04912
HYDROCORTISONE BUTYRATE	0.1 %	LOTION	TOPICAL	04/11/2024	2.53805
HYDROCORTISONE SOD SUCCINATE	100 MG	VIAL	INJECTION	05/05/2025	14.91500
HYDROCORTISONE VALERATE	0.2 %	CREAM (G)	TOPICAL	04/18/2023	0.24857
HYDROCORTISONE VALERATE	0.2 %	OINT. (G)	TOPICAL	04/03/2025	3.32405
HYDROCORTISONE/ACETIC ACID	1 %-2 %	DROPS	OTIC (EAR)	08/21/2025	12.54220
HYDROCORTISONE/ALOE VERA	1 %	CREAM (G)	TOPICAL	08/21/2025	0.07514
HYDROGEN PEROXIDE	3 %	SOLUTION	MISCELL	08/07/2025	0.00098
HYDROMORPHONE HCL	1 MG/ML	LIQUID	ORAL	06/26/2025	0.78026
HYDROMORPHONE HCL	2 MG	TABLET	ORAL	04/25/2023	0.09002
HYDROMORPHONE HCL	4 MG	TABLET	ORAL	08/07/2025	0.26385
HYDROMORPHONE HCL	8 MG	TABLET	ORAL	05/30/2024	1.24218
HYDROMORPHONE HCL	12 MG	TAB ER 24H	ORAL	04/03/2025	8.28438
HYDROMORPHONE HCL	32 MG	TAB ER 24H	ORAL	04/03/2025	12.78270
HYDROMORPHONE HCL	16 MG	TAB ER 24H	ORAL	09/04/2025	7.70538
HYDROMORPHONE HCL	8 MG	TAB ER 24H	ORAL	09/04/2025	4.25337
HYDROMORPHONE HCL	1 MG/ML	CARTRIDGE	INJECTION	08/31/2017	3.05976
HYDROMORPHONE HCL	2 MG/ML	CARTRIDGE	INJECTION	08/31/2017	3.28020

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HYDROMORPHONE HCL	4 MG/ML	CARTRIDGE	INJECTION	01/04/2018	4.28868
HYDROMORPHONE HCL	2 MG/ML	VIAL	INJECTION	04/25/2023	1.43800
HYDROMORPHONE HCL/PF	0.5MG/.5ML	SYRINGE	INJECTION	03/27/2025	8.20800
HYDROMORPHONE HCL/PF	0.2 MG/ML	SYRINGE	INJECTION	10/17/2024	3.76200
HYDROMORPHONE HCL/PF	10 MG/ML	VIAL	INJECTION	05/06/2022	1.57785
HYDROMORPHONE HCL/PF	2 MG/ML	VIAL	INJECTION	04/20/2023	5.21208
HYDROXYCHLOROQUINE SULFATE	200 MG	TABLET	ORAL	07/31/2025	0.15276
HYDROXYCHLOROQUINE SULFATE	400 MG	TABLET	ORAL	04/03/2025	1.38114
HYDROXYCHLOROQUINE SULFATE	100 MG	TABLET	ORAL	04/03/2025	0.39570
HYDROXYCHLOROQUINE SULFATE	300 MG	TABLET	ORAL	12/26/2023	0.67938
HYDROXYPROPYL CELLULOSE		POWDER	MISCELL	05/06/2022	0.73700
HYDROXYUREA	500 MG	CAPSULE	ORAL	01/02/2025	0.36850
HYDROXYZINE HCL	10 MG/5 ML	SOLUTION	ORAL	08/19/2025	0.14618
HYDROXYZINE HCL	10 MG	TABLET	ORAL	08/19/2025	0.02585
HYDROXYZINE HCL	25 MG	TABLET	ORAL	04/15/2025	0.02883
HYDROXYZINE HCL	50 MG	TABLET	ORAL	08/19/2025	0.05541
HYDROXYZINE PAMOATE	25 MG	CAPSULE	ORAL	09/21/2021	0.06135
HYDROXYZINE PAMOATE	50 MG	CAPSULE	ORAL	04/15/2025	0.06466
HYPOCHLOROUS ACID/SODIUM CHLOR	0.01 %	SPRAY	TOPICAL	07/31/2025	0.31698
HYPROMELLOSE	2.5 %	DROPS	OPHTHALMIC	11/30/2023	1.08093
HYPROMELLOSE		POWDER	MISCELL	05/06/2022	0.08971

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
HYPROMELLOSE CAPSULES (EMPTY)		CAPSULE	ORAL	11/22/2022	0.02495
HYPROMELLOSE DR CAP (EMPTY)		CAPSULE DR	ORAL	05/06/2022	0.18090
IBANDRONATE SODIUM	150 MG	TABLET	ORAL	06/12/2025	3.88520
IBANDRONATE SODIUM	3 MG/3 ML	SYRINGE	INTRAVEN	04/03/2025	74.34325
IBUPROFEN	200 MG	CAPSULE	ORAL	07/24/2025	0.06784
IBUPROFEN	100 MG/5ML	ORAL SUSP	ORAL	08/07/2025	0.03009
IBUPROFEN	50 MG/1.25	DROPS SUSP	ORAL	12/19/2024	0.20323
IBUPROFEN	200 MG	TABLET	ORAL	04/30/2025	0.00542
IBUPROFEN	400 MG	TABLET	ORAL	08/14/2025	0.03997
IBUPROFEN	600 MG	TABLET	ORAL	04/30/2025	0.04503
IBUPROFEN	800 MG	TABLET	ORAL	04/30/2025	0.04983
IBUPROFEN	100 MG	TAB CHEW	ORAL	08/03/2021	0.16499
IBUPROFEN LYSINE/PF	20 MG/2 ML	VIAL	INTRAVEN	08/17/2023	209.79529
IBUPROFEN/ACETAMINOPHEN	125-250 MG	TABLET	ORAL	08/07/2025	0.19458
IBUPROFEN/DIPHENHYDRAMINE CIT	200MG-38MG	TABLET	ORAL	07/10/2025	0.18156
IBUPROFEN/FAMOTIDINE	800-26.6MG	TABLET	ORAL	08/21/2025	2.55776
IBUPROFEN/PHENYLEPHRINE HCL	200MG-10MG	TABLET	ORAL	04/10/2025	0.39798
IBUTILIDE FUMARATE	0.1 MG/ML	VIAL	INTRAVEN	05/22/2025	15.75000
ICARIDIN	20 %	SPRAY/PUMP	TOPICAL	08/18/2022	0.03015
ICATIBANT ACETATE	30 MG/3 ML	SYRINGE	SUBCUT	08/07/2025	338.25000
ICOSAPENT ETHYL	1 G	CAPSULE	ORAL	07/31/2025	0.82589

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ICOSAPENT ETHYL	0.5 GRAM	CAPSULE	ORAL	02/11/2025	0.48575
IDARUBICIN HCL	1 MG/ML	VIAL	INTRAVEN	09/04/2025	7.23900
IFOSFAMIDE	1 G	VIAL	INTRAVEN	05/06/2022	34.30521
IFOSFAMIDE	1 G/20 ML	VIAL	INTRAVEN	05/06/2022	3.63974
IFOSFAMIDE	3 G/60 ML	VIAL	INTRAVEN	06/03/2024	1.64220
IMATINIB MESYLATE	400 MG	TABLET	ORAL	04/17/2025	5.44153
IMATINIB MESYLATE	100 MG	TABLET	ORAL	08/07/2025	1.64492
IMIPENEM/CILASTATIN SODIUM	500 MG	VIAL	INTRAVEN	03/13/2025	11.71863
IMIPRAMINE HCL	10 MG	TABLET	ORAL	06/17/2025	0.04824
IMIPRAMINE HCL	25 MG	TABLET	ORAL	06/17/2025	0.05655
IMIPRAMINE HCL	50 MG	TABLET	ORAL	04/16/2024	0.04188
IMIPRAMINE PAMOATE	100 MG	CAPSULE	ORAL	07/05/2018	8.24760
IMIPRAMINE PAMOATE	125 MG	CAPSULE	ORAL	07/05/2018	8.24760
IMIPRAMINE PAMOATE	150 MG	CAPSULE	ORAL	04/03/2025	15.98590
IMIPRAMINE PAMOATE	75 MG	CAPSULE	ORAL	07/05/2018	7.70040
IMIQUIMOD	3.75 %	CRM MD PMP	TOPICAL	07/22/2025	71.75000
IMIQUIMOD	5 %	CREAM PACK	TOPICAL	11/05/2024	6.24790
IMIQUIMOD	3.75 %	CREAM PACK	TOPICAL	04/03/2025	42.16264
INDAPAMIDE	2.5 MG	TABLET	ORAL	04/03/2025	0.34505
INDAPAMIDE	1.25 MG	TABLET	ORAL	04/03/2025	0.40696
INDOCYANINE GREEN	25 MG	VIAL	INJECTION	08/22/2023	50.71614

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
INDOMETHACIN	25 MG	CAPSULE	ORAL	05/08/2025	0.15906
INDOMETHACIN	50 MG	CAPSULE	ORAL	04/03/2025	0.29480
INDOMETHACIN	75 MG	CAPSULE ER	ORAL	02/08/2024	0.14829
INDOMETHACIN	25 MG/5 ML	ORAL SUSP	ORAL	04/03/2025	10.73741
INDOMETHACIN	50 MG	SUPP.RECT	RECTAL	05/29/2025	334.78466
INSULIN ASPART	100/ML (3)	INSULN PEN	SUBCUT	05/27/2025	6.08424
INSULIN NPH HUM/REG INSULIN HM	70-30/ML	VIAL	SUBCUT	05/12/2022	15.93795
INSULIN NPH HUM/REG INSULIN HM	70-30/ML	INSULN PEN	SUBCUT	05/19/2022	30.59523
INSULIN NPH HUMAN ISOPHANE	100/ML	VIAL	SUBCUT	05/12/2022	15.93795
INSULIN NPH HUMAN ISOPHANE	100/ML (3)	INSULN PEN	SUBCUT	01/28/2025	5.74000
INSULIN REGULAR, HUMAN	100/ML	VIAL	INJECTION	05/12/2022	15.93795
INTRAVENOUS ADMINISTRATION SET		INFUS.SET	MISCELL	08/10/2023	0.21775
INTRAVENOUS EXTENSION SET		INFUS.SET	MISCELL	05/06/2022	2.01536
INULIN	2 G	TAB CHEW	ORAL	04/22/2025	0.10519
IODINE/POTASSIUM IODIDE	5 %-10 %	SOLUTION	TOPICAL	05/06/2022	0.20100
IODINE/SODIUM IODIDE	2 %	TINCTURE	TOPICAL	06/26/2025	0.09433
IODIXANOL	320 MG/ML	INFUS. BTL	INTRAVEN	01/18/2024	0.40200
IODIXANOL	270 MG/ML	INFUS. BTL	INTRAVEN	01/18/2024	0.40200
IOPAMIDOL	300 MG/ML	VIAL	INTRAVEN	04/03/2025	0.59668
IOPAMIDOL	370 MG/ML	VIAL	INTRAVEN	08/01/2024	0.64872
IOPAMIDOL	250 MG/ML	VIAL	INTRAVEN	04/03/2025	0.62281

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IOPAMIDOL	200 MG/ML	VIAL	INTRATHEC	08/07/2025	3.34607
IOPAMIDOL	300 MG/ML	VIAL	INTRATHEC	09/07/2023	6.90673
IPRATROPIUM BROMIDE	42 MCG	SPRAY	NASAL	08/28/2025	1.11667
IPRATROPIUM BROMIDE	21 MCG	SPRAY	NASAL	08/28/2025	0.55833
IPRATROPIUM BROMIDE	0.2 MG/ML	SOLUTION	INHALATION	05/13/2025	0.03204
IPRATROPIUM/ALBUTEROL SULFATE	0.5-3MG/3	AMPUL-NEB	INHALATION	05/27/2025	0.07602
IRBESARTAN	150 MG	TABLET	ORAL	06/12/2025	0.17286
IRBESARTAN	300 MG	TABLET	ORAL	06/25/2024	0.17122
IRBESARTAN	75 MG	TABLET	ORAL	03/11/2024	0.15730
IRBESARTAN/HYDROCHLOROTHIAZIDE	150-12.5MG	TABLET	ORAL	02/18/2025	0.19981
IRBESARTAN/HYDROCHLOROTHIAZIDE	300-12.5MG	TABLET	ORAL	08/21/2025	0.27827
IRINOTECAN HCL	40 MG/2 ML	VIAL	INTRAVEN	06/26/2025	4.29000
IRINOTECAN HCL	100 MG/5ML	VIAL	INTRAVEN	01/09/2025	5.01600
IRINOTECAN HCL	300MG/15ML	VIAL	INTRAVEN	10/19/2021	4.33300
IRON FUMARATE/VIT C/VIT B12/FA	460-60MG	CAPSULE	ORAL	10/26/2022	0.44213
IRON POLYSACCHARIDE COMPLEX	150 MG	CAPSULE	ORAL	04/15/2025	0.08225
IRON PS COMPLEX/B12/FOLIC ACID	150-25-1	CAPSULE	ORAL	09/12/2019	0.15330
IRON,CARB/VIT C/VIT B12/FOLIC	100-250-1	TABLET	ORAL	05/06/2022	0.31825
IRON,CARBONYL	15MG/1.25	ORAL SUSP	ORAL	05/31/2023	0.35907
IRON,CARBONYL/ASCORBIC ACID	100-250 MG	TABLET	ORAL	04/03/2025	0.21842
ISONIAZID	50 MG/5 ML	SOLUTION	ORAL	04/10/2025	1.27476

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ISONIAZID	100 MG	TABLET	ORAL	07/24/2025	2.26594
ISONIAZID	300 MG	TABLET	ORAL	08/12/2025	0.18225
ISOPROPYL ALCOHOL		SOLUTION	MISCELL	05/06/2022	0.00392
ISOPROPYL ALCOHOL	70 %	SOLUTION	MISCELL	07/17/2025	0.00475
ISOPROPYL ALCOHOL	99 %	SOLUTION	MISCELL	08/08/2024	0.00893
ISOPROPYL ALCOHOL IN GLYCERIN	95 %-5 %	DROPS	OTIC (EAR)	10/24/2024	0.11238
ISOPROTERENOL HCL	0.2 MG/ML	VIAL	INJECTION	08/28/2025	14.28000
ISOSORBIDE DINIT/HYDRALAZINE	20-37.5MG	TABLET	ORAL	10/24/2024	0.95244
ISOSORBIDE DINITRATE	10 MG	TABLET	ORAL	08/19/2025	0.16002
ISOSORBIDE DINITRATE	20 MG	TABLET	ORAL	04/03/2025	0.49982
ISOSORBIDE DINITRATE	30 MG	TABLET	ORAL	08/21/2025	0.68465
ISOSORBIDE DINITRATE	40 MG	TABLET	ORAL	08/11/2025	9.05782
ISOSORBIDE DINITRATE	5 MG	TABLET	ORAL	06/12/2025	0.36796
ISOSORBIDE MONONITRATE	60 MG	TAB ER 24H	ORAL	04/03/2025	0.09045
ISOSORBIDE MONONITRATE	120 MG	TAB ER 24H	ORAL	04/03/2025	0.38659
ISOSORBIDE MONONITRATE	30 MG	TAB ER 24H	ORAL	07/03/2025	0.09380
ISOSULFAN BLUE	1 %	VIAL	SUBCUT	05/06/2022	108.78461
ISOTRETINOIN	10 MG	CAPSULE	ORAL	10/03/2024	4.74672
ISOTRETINOIN	20 MG	CAPSULE	ORAL	05/09/2024	7.59164
ISOTRETINOIN	40 MG	CAPSULE	ORAL	05/09/2024	7.59164
ISOTRETINOIN	25 MG	CAPSULE	ORAL	05/09/2024	23.96205

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ISOTRETINOIN	35 MG	CAPSULE	ORAL	05/09/2024	23.96205
ISRADIPINE	2.5 MG	CAPSULE	ORAL	07/24/2025	3.12127
ISRADIPINE	5 MG	CAPSULE	ORAL	04/03/2025	4.11061
ITRACONAZOLE	100 MG	CAPSULE	ORAL	07/17/2025	0.69457
ITRACONAZOLE	10 MG/ML	SOLUTION	ORAL	04/03/2025	1.81740
IVABRADINE HCL	5 MG	TABLET	ORAL	08/07/2025	4.01566
IVABRADINE HCL	7.5 MG	TABLET	ORAL	08/07/2025	4.01566
IVERMECTIN	3 MG	TABLET	ORAL	11/25/2024	3.27954
IVERMECTIN	1 %	CREAM (G)	TOPICAL	04/24/2025	7.45493
IVERMECTIN	0.5 %	LOTION	TOPICAL	03/07/2024	1.86913
KELP	150 MCG	TABLET	ORAL	07/27/2022	0.02844
KETOCONAZOLE	200 MG	TABLET	ORAL	07/24/2025	0.94403
KETOCONAZOLE	2 %	FOAM	TOPICAL	06/18/2025	6.22046
KETOCONAZOLE	2 %	CREAM (G)	TOPICAL	04/03/2025	0.27850
KETOCONAZOLE	2 %	SHAMPOO	TOPICAL	08/14/2025	0.11803
KETOPROFEN	50 MG	CAPSULE	ORAL	10/20/2022	1.52989
KETOPROFEN	75 MG	CAPSULE	ORAL	05/06/2022	1.69984
KETOROLAC TROMETHAMINE	10 MG	TABLET	ORAL	08/21/2025	0.42786
KETOROLAC TROMETHAMINE	15 MG/ML	VIAL	INJECTION	01/09/2025	0.89780
KETOROLAC TROMETHAMINE	30MG/ML(1)	VIAL	INJECTION	08/21/2025	0.89110
KETOROLAC TROMETHAMINE	0.5 %	DROPS	OPHTHALMIC	06/12/2025	2.60764

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
KETOROLAC TROMETHAMINE	0.4 %	DROPS	OPHTHALMIC	08/01/2022	11.95464
KETOROLAC TROMETHAMINE	60 MG/2 ML	VIAL	INTRAMUSC	08/21/2025	0.63704
KETOTIFEN FUMARATE	0.025 %	DROPS	OPHTHALMIC	10/31/2024	2.85648
KIT FOR PREP TC-99M/MEBROFENIN	45 MG	VIAL	INTRAVEN	05/06/2022	73.80000
L-MEFOL/A-CYST/MEB12/ALGAL OIL	6-600-2 MG	TABLET	ORAL	02/06/2025	2.54466
L-NORGEST/E.ESTRADIOL-E.ESTRAD	150-30(84)	TBDSPK 3MO	ORAL	08/28/2025	0.35017
L-NORGEST/E.ESTRADIOL-E.ESTRAD	100-20(84)	TBDSPK 3MO	ORAL	04/09/2024	0.47889
L-NORGEST/E.ESTRADIOL-E.ESTRAD	0.15MG(84)	TBDSPK 3MO	ORAL	06/12/2025	3.65132
L. ACIDOPH/L. PLANTAR/L. RHAMN	15B CELL	CAPSULE	ORAL	07/10/2025	0.42880
L. ACIDOPHILUS/BIFID. ANIMALIS	31B CELL	CAPSULE	ORAL	07/11/2023	27.33330
L. ACIDOPHILUS/BIFID. ANIMALIS	15.5B CELL	CAPSULE	ORAL	06/18/2025	52.74479
L. ACIDOPHILUS/BIFID. ANIMALIS	32B CELL	CAPSULE	ORAL	09/29/2022	31.98000
L. ACIDOPHILUS/BIFID. ANIMALIS	33B CELL	CAPSULE	ORAL	01/16/2025	32.38983
L. ACIDOPHILUS/L.BULGARICUS	100MM CELL	GRAN PACK	ORAL	04/03/2025	2.41200
L. ACIDOPHILUS/L.BULGARICUS	1MM CELL	TABLET	ORAL	08/21/2025	0.27390
L. REUTERI/L. RHAMNOSUS	5B CELL	CAPSULE	ORAL	06/26/2025	0.46006
L. RHAMNOSUS GG/INULIN	20B-200 MG	CAPSULE	ORAL	03/02/2023	1.17317
L.ACIDOPH/L.BULG/B.BIF/S.THERM	1B-250 MG	TABLET	ORAL	08/21/2025	0.33433
LABETALOL HCL	100 MG	TABLET	ORAL	04/03/2025	0.12971
LABETALOL HCL	200 MG	TABLET	ORAL	04/03/2025	0.14711
LABETALOL HCL	300 MG	TABLET	ORAL	06/18/2025	0.24388

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LABETALOL HCL	20 MG/4 ML	SYRINGE	INTRAVEN	11/08/2018	2.04853
LABETALOL HCL	5 MG/ML	VIAL	INTRAVEN	05/22/2025	0.18268
LACOSAMIDE	10 MG/ML	SOLUTION	ORAL	04/03/2025	0.17420
LACOSAMIDE	50 MG	TABLET	ORAL	12/26/2024	0.12752
LACOSAMIDE	100 MG	TABLET	ORAL	12/26/2024	0.25773
LACOSAMIDE	150 MG	TABLET	ORAL	12/26/2024	0.36716
LACOSAMIDE	200 MG	TABLET	ORAL	08/28/2025	0.35041
LACOSAMIDE	200MG/20ML	VIAL	INTRAVEN	09/04/2025	1.04808
LACTASE	3000 UNIT	TABLET	ORAL	09/04/2025	0.08531
LACTASE	9000 UNIT	TABLET	ORAL	08/14/2025	0.14300
LACTOBACIL 2/BIFIDO 1/S.THERMO	112.5B	CAPSULE	ORAL	06/24/2025	0.71444
LACTOBACIL 2/BIFIDO 1/S.THERMO	450B CELL	PACKET	ORAL	06/18/2025	4.96980
LACTOBACIL 2/BIFIDO 1/S.THERMO	900B CELL	PACKET	ORAL	01/07/2025	4.98597
LACTOBACILLUS ACIDOPHILUS	680 MG	CAPSULE	ORAL	05/22/2025	0.33768
LACTOBACILLUS ACIDOPHILUS	500MM CELL	CAPSULE	ORAL	09/04/2025	0.04074
LACTOBACILLUS ACIDOPHILUS/PECT	75 MM-100	CAPSULE	ORAL	02/13/2025	0.02472
LACTOBACILLUS PLANTARUM	10B CELL	CAPSULE	ORAL	01/23/2025	16.40625
LACTOBACILLUS REUTERI	100MM/5DRP	DROPS SUSP	ORAL	05/06/2022	2.17750
LACTOBACILLUS REUTERI/VIT D3	100 MM-10	DROPS	ORAL	05/06/2022	3.53892
LACTULOSE	10 G/15 ML	SOLUTION	ORAL	11/05/2024	0.01240
LACTULOSE	10 G/15 ML	SOLUTION	ORAL	06/18/2025	0.01883

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LAMIVUDINE	10 MG/ML	SOLUTION	ORAL	08/28/2025	0.51724
LAMIVUDINE	150 MG	TABLET	ORAL	04/03/2025	7.39080
LAMIVUDINE	100 MG	TABLET	ORAL	09/04/2025	9.25366
LAMIVUDINE	300 MG	TABLET	ORAL	09/10/2024	2.36421
LAMIVUDINE/ZIDOVUDINE	150-300 MG	TABLET	ORAL	04/03/2025	0.90606
LAMOTRIGINE	25 MG	TAB ER 24	ORAL	08/21/2025	0.70037
LAMOTRIGINE	50 MG	TAB ER 24	ORAL	04/03/2025	1.19305
LAMOTRIGINE	100 MG	TAB ER 24	ORAL	04/03/2025	1.37797
LAMOTRIGINE	200 MG	TAB ER 24	ORAL	04/03/2025	1.46909
LAMOTRIGINE	300 MG	TAB ER 24	ORAL	01/28/2025	1.74268
LAMOTRIGINE	250 MG	TAB ER 24	ORAL	10/01/2024	3.03230
LAMOTRIGINE	100 MG	TABLET	ORAL	06/26/2025	0.04690
LAMOTRIGINE	25 MG	TABLET	ORAL	06/26/2025	0.03826
LAMOTRIGINE	150 MG	TABLET	ORAL	06/26/2025	0.10224
LAMOTRIGINE	200 MG	TABLET	ORAL	05/13/2025	0.06384
LAMOTRIGINE	25MG (35)	TAB DS PK	ORAL	01/11/2024	14.84700
LAMOTRIGINE	25(84)-100	TAB DS PK	ORAL	01/11/2024	14.84700
LAMOTRIGINE	25(42)-100	TAB DS PK	ORAL	08/08/2024	15.43500
LAMOTRIGINE	50 MG	TAB RAPDIS	ORAL	04/03/2025	4.01764
LAMOTRIGINE	25 MG	TAB RAPDIS	ORAL	08/28/2025	3.47072
LAMOTRIGINE	100 MG	TAB RAPDIS	ORAL	08/28/2025	4.37448

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LAMOTRIGINE	200 MG	TAB RAPDIS	ORAL	08/28/2025	5.49868
LAMOTRIGINE	25-50-100	TB RD DSPK	ORAL	12/19/2024	20.08380
LAMOTRIGINE	25(21)-50	TB RD DSPK	ORAL	05/17/2023	16.69601
LAMOTRIGINE	50(42)-100	TB RD DSPK	ORAL	05/17/2023	23.84880
LAMOTRIGINE	25 MG	TB CHW DSP	ORAL	10/25/2021	0.29507
LAMOTRIGINE	5 MG	TB CHW DSP	ORAL	08/28/2025	0.40763
LANCETS		EACH	MISCELL	04/30/2025	0.05396
LANOLIN	50 %	OINT. (G)	TOPICAL	06/07/2023	0.02007
LANOLIN		WAX	MISCELL	05/06/2022	0.12518
LANOLIN ALCOHOL/MO/W.PET/CERES		CREAM (G)	TOPICAL	04/03/2025	0.03320
LANOLIN/MINERAL OIL		LOTION	TOPICAL	06/26/2025	0.01431
LANREOTIDE ACETATE	120MG/0.5	SYRINGE	SUBCUT	06/20/2024	13035.39650
LANSOPRAZOLE	15 MG	CAPSULE DR	ORAL	07/03/2025	0.19519
LANSOPRAZOLE	30 MG	CAPSULE DR	ORAL	04/03/2025	0.12382
LANSOPRAZOLE	15 MG	TAB RAP DR	ORAL	04/03/2025	5.42544
LANSOPRAZOLE	30 MG	TAB RAP DR	ORAL	04/23/2024	5.16688
LANSOPRAZOLE/AMOXICILN/CLARITH	30-500-500	COMBO. PKG	ORAL	02/01/2024	4.68417
LANTHANUM CARBONATE	500 MG	TAB CHEW	ORAL	08/14/2025	6.54375
LANTHANUM CARBONATE	1000 MG	TAB CHEW	ORAL	08/14/2025	5.87798
LANTHANUM CARBONATE	750 MG	TAB CHEW	ORAL	11/25/2024	4.70305
LAPATINIB DITOSYLATE	250 MG	TABLET	ORAL	04/03/2025	50.73736

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LATANOPROST	0.005 %	DROPS	OPHTHALMIC	08/21/2025	2.46560
LAVENDER OIL		OIL	MISCELL	07/27/2022	1.50750
LECITHIN	1200 MG	CAPSULE	ORAL	06/06/2024	0.05554
LEFLUNOMIDE	10 MG	TABLET	ORAL	04/18/2023	0.27961
LEFLUNOMIDE	20 MG	TABLET	ORAL	05/01/2025	0.33902
LEMON EUCALYPTUS OIL	30 %	SPRAY	TOPICAL	05/06/2022	0.02821
LEMON OIL		OIL	MISCELL	05/06/2022	1.84250
LENALIDOMIDE	5 MG	CAPSULE	ORAL	05/14/2025	745.28293
LENALIDOMIDE	10 MG	CAPSULE	ORAL	05/14/2025	745.28293
LENALIDOMIDE	15 MG	CAPSULE	ORAL	05/14/2025	745.28293
LENALIDOMIDE	25 MG	CAPSULE	ORAL	05/14/2025	745.28293
LENALIDOMIDE	2.5 MG	CAPSULE	ORAL	05/14/2025	745.28293
LENALIDOMIDE	20 MG	CAPSULE	ORAL	05/14/2025	745.28293
LETROZOLE	2.5 MG	TABLET	ORAL	05/01/2025	0.22557
LEUCOVORIN CALCIUM	10 MG	TABLET	ORAL	04/03/2025	6.72571
LEUCOVORIN CALCIUM	15 MG	TABLET	ORAL	04/03/2025	8.72650
LEUCOVORIN CALCIUM	25 MG	TABLET	ORAL	07/21/2022	5.56800
LEUCOVORIN CALCIUM	5 MG	TABLET	ORAL	08/25/2022	0.89557
LEUCOVORIN CALCIUM	100 MG	VIAL	INJECTION	06/12/2025	9.61400
LEUCOVORIN CALCIUM	350 MG	VIAL	INJECTION	06/12/2025	17.55600
LEUCOVORIN CALCIUM	50 MG	VIAL	INJECTION	04/03/2025	6.37032

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LEUCOVORIN CALCIUM	200 MG	VIAL	INJECTION	06/12/2025	10.92500
LEUCOVORIN CALCIUM	500 MG	VIAL	INJECTION	04/03/2025	64.13425
LEUPROLIDE ACETATE	1 MG/0.2ML	KIT	SUBCUT	05/29/2025	153.75000
LEVALBUTEROL HCL	0.63MG/3ML	VIAL-NEB	INHALATION	04/03/2025	0.46096
LEVALBUTEROL HCL	1.25MG/3ML	VIAL-NEB	INHALATION	04/03/2025	0.46096
LEVALBUTEROL HCL	0.31MG/3ML	VIAL-NEB	INHALATION	04/03/2025	0.53511
LEVALBUTEROL HCL	1.25MG/0.5	VIAL-NEB	INHALATION	11/07/2024	4.42200
LEVETIRACETAM	100 MG/ML	SOLUTION	ORAL	05/27/2025	0.03392
LEVETIRACETAM	500 MG/5ML	SOLUTION	ORAL	04/24/2025	0.63261
LEVETIRACETAM	250 MG	TABLET	ORAL	08/08/2024	0.02897
LEVETIRACETAM	500 MG	TABLET	ORAL	05/27/2025	0.06730
LEVETIRACETAM	750 MG	TABLET	ORAL	04/03/2025	0.06543
LEVETIRACETAM	1000 MG	TABLET	ORAL	08/19/2025	0.15559
LEVETIRACETAM	500 MG	TAB ER 24H	ORAL	04/03/2025	0.33031
LEVETIRACETAM	750 MG	TAB ER 24H	ORAL	08/28/2025	0.58290
LEVETIRACETAM	500 MG/5ML	VIAL	INTRAVEN	02/15/2024	0.34371
LEVETIRACETAM IN NACL (ISO-OS)	500MG/0.1L	PIGGYBACK	INTRAVEN	07/31/2025	0.08375
LEVETIRACETAM IN NACL (ISO-OS)	1000MG/100	PIGGYBACK	INTRAVEN	07/31/2025	0.10653
LEVETIRACETAM IN NACL (ISO-OS)	1500MG/100	PIGGYBACK	INTRAVEN	07/31/2025	0.14740
LEVOCARNITINE	100 MG/ML	SOLUTION	ORAL	10/01/2024	0.31169
LEVOCARNITINE	330 MG	TABLET	ORAL	07/17/2025	1.70954

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LEVOCARNITINE	200 MG/ML	VIAL	INTRAVEN	08/08/2024	8.13276
LEVOCARNITINE (WITH SUGAR)	100 MG/ML	SOLUTION	ORAL	10/01/2024	0.20415
LEVOCARNITINE TARTRATE	500 MG	CAPSULE	ORAL	12/08/2022	0.28254
LEVOCETIRIZINE DIHYDROCHLORIDE	2.5 MG/5ML	SOLUTION	ORAL	05/27/2025	0.28380
LEVOCETIRIZINE DIHYDROCHLORIDE	5 MG	TABLET	ORAL	05/29/2025	0.12060
LEVOFLOXACIN	250MG/10ML	SOLUTION	ORAL	04/02/2024	1.11449
LEVOFLOXACIN	250 MG	TABLET	ORAL	01/30/2024	0.27604
LEVOFLOXACIN	500 MG	TABLET	ORAL	04/03/2025	0.41379
LEVOFLOXACIN	750 MG	TABLET	ORAL	04/03/2025	0.33500
LEVOFLOXACIN IN DEXTROSE 5 %	250MG/50ML	PIGGYBACK	INTRAVEN	07/17/2025	0.07048
LEVOFLOXACIN IN DEXTROSE 5 %	500MG/0.1L	PIGGYBACK	INTRAVEN	07/25/2024	0.04569
LEVOFLOXACIN IN DEXTROSE 5 %	750MG/.15L	PIGGYBACK	INTRAVEN	07/17/2025	0.03564
LEVOLEUCOVORIN CALCIUM	10 MG/ML	VIAL	INTRAVEN	07/15/2025	3.03675
LEVOMEFOLATE CALCIUM	7.5 MG	TABLET	ORAL	04/03/2025	2.63578
LEVOMEFOLATE CALCIUM	15 MG	TABLET	ORAL	09/05/2024	2.06568
LEVOMEFOLATE/ALGAL OIL	7.5-90.314	CAPSULE	ORAL	12/26/2024	2.71568
LEVOMEFOLATE/ALGAL OIL	15-90.314	CAPSULE	ORAL	04/03/2025	6.11039
LEVOMEFOLATE/B6/B12/ALGAL OIL	3-35-2 MG	CAPSULE	ORAL	04/03/2025	2.66464
LEVONORGEST/ETH.ESTRADIOL/IRON	0.1-0.02MG	TABLET	ORAL	10/03/2023	6.81325
LEVONORGESTREL	1.5 MG	TABLET	ORAL	03/11/2025	5.05741
LEVONORGESTREL/ETHIN.ESTRADIOL	0.15-0.03	TABLET	ORAL	04/03/2025	0.20052

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LEVONORGESTREL/ETHIN.ESTRADIOL	6-5-10	TABLET	ORAL	05/06/2022	0.72599
LEVONORGESTREL/ETHIN.ESTRADIOL	0.1-0.02MG	TABLET	ORAL	08/21/2025	0.34282
LEVONORGESTREL/ETHIN.ESTRADIOL	90-20 MCG	TABLET	ORAL	07/17/2025	0.96640
LEVONORGESTREL/ETHIN.ESTRADIOL	0.15-0.03	TBDSPK 3MO	ORAL	08/07/2025	0.35454
LEVORPHANOL TARTRATE	2 MG	TABLET	ORAL	07/17/2025	33.38446
LEVORPHANOL TARTRATE	3 MG	TABLET	ORAL	05/29/2025	114.36192
LEVOTHYROXINE SODIUM	150 MCG	CAPSULE	ORAL	07/15/2025	3.34906
LEVOTHYROXINE SODIUM	137 MCG	CAPSULE	ORAL	05/16/2023	3.97470
LEVOTHYROXINE SODIUM	125 MCG	CAPSULE	ORAL	09/17/2024	3.55500
LEVOTHYROXINE SODIUM	112 MCG	CAPSULE	ORAL	04/01/2025	3.97470
LEVOTHYROXINE SODIUM	100 MCG	CAPSULE	ORAL	07/09/2024	3.97470
LEVOTHYROXINE SODIUM	88 MCG	CAPSULE	ORAL	08/21/2025	6.00922
LEVOTHYROXINE SODIUM	75 MCG	CAPSULE	ORAL	06/26/2025	5.13715
LEVOTHYROXINE SODIUM	50 MCG	CAPSULE	ORAL	07/09/2024	3.97470
LEVOTHYROXINE SODIUM	25 MCG	CAPSULE	ORAL	04/01/2025	3.97470
LEVOTHYROXINE SODIUM	13 MCG	CAPSULE	ORAL	07/09/2024	3.97470
LEVOTHYROXINE SODIUM	175 MCG	CAPSULE	ORAL	05/16/2023	3.97470
LEVOTHYROXINE SODIUM	200 MCG	CAPSULE	ORAL	07/09/2024	3.97470
LEVOTHYROXINE SODIUM	25 MCG	TABLET	ORAL	08/21/2025	0.05851
LEVOTHYROXINE SODIUM	50 MCG	TABLET	ORAL	07/17/2025	0.07182
LEVOTHYROXINE SODIUM	75 MCG	TABLET	ORAL	04/03/2025	0.07590

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LEVOTHYROXINE SODIUM	100 MCG	TABLET	ORAL	08/14/2025	0.07915
LEVOTHYROXINE SODIUM	112 MCG	TABLET	ORAL	05/01/2025	0.09192
LEVOTHYROXINE SODIUM	125 MCG	TABLET	ORAL	04/03/2025	0.08128
LEVOTHYROXINE SODIUM	150 MCG	TABLET	ORAL	04/01/2025	0.05052
LEVOTHYROXINE SODIUM	175 MCG	TABLET	ORAL	06/18/2025	0.05314
LEVOTHYROXINE SODIUM	200 MCG	TABLET	ORAL	04/01/2025	0.07258
LEVOTHYROXINE SODIUM	300 MCG	TABLET	ORAL	04/22/2025	0.08046
LEVOTHYROXINE SODIUM	88 MCG	TABLET	ORAL	08/07/2025	0.08000
LEVOTHYROXINE SODIUM	137 MCG	TABLET	ORAL	04/03/2025	0.08593
LEVOTHYROXINE SODIUM	200 MCG	VIAL	INTRAVEN	04/03/2025	174.33200
LEVOTHYROXINE SODIUM	500 MCG	VIAL	INTRAVEN	04/03/2025	463.16419
LEVOTHYROXINE SODIUM	100 MCG	VIAL	INTRAVEN	04/03/2025	64.26750
LIDOCAINE	5 %	CREAM (G)	TOPICAL	06/05/2025	0.34706
LIDOCAINE	4 %	CREAM (G)	TOPICAL	07/17/2025	0.50106
LIDOCAINE	5 %	OINT. (G)	TOPICAL	08/14/2025	0.19430
LIDOCAINE	4 %	ADH. PATCH	TOPICAL	11/01/2022	0.79060
LIDOCAINE	5 %	ADH. PATCH	TOPICAL	09/04/2025	2.62059
LIDOCAINE HCL	5 MG/ML	VIAL	INJECTION	04/03/2025	0.15242
LIDOCAINE HCL	10 MG/ML	VIAL	INJECTION	08/28/2025	0.09332
LIDOCAINE HCL	20 MG/ML	VIAL	INJECTION	07/03/2025	0.10693
LIDOCAINE HCL	2 %	JEL/PF APP	MUCOUS MEM	04/03/2025	0.86878

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LIDOCAINE HCL	40 MG/ML	SOLUTION	MUCOUS MEM	07/31/2025	1.02242
LIDOCAINE HCL	2 %	SOLUTION	MUCOUS MEM	02/27/2024	0.09710
LIDOCAINE HCL	2.8 %	GEL (GRAM)	TOPICAL	08/22/2024	10.03728
LIDOCAINE HCL	3 %	CREAM (G)	TOPICAL	09/02/2025	5.60294
LIDOCAINE HCL	4 %	CREAM (G)	TOPICAL	08/21/2025	0.10821
LIDOCAINE HCL	4 %	LOTION	TOPICAL	05/06/2022	0.83742
LIDOCAINE HCL	4 %	LIQD ROLON	TOPICAL	03/11/2025	0.06834
LIDOCAINE HCL/BENZALKONIUM CHL	2.5%-0.13%	SPRAY	TOPICAL	05/06/2022	4.47920
LIDOCAINE HCL/BENZALKONIUM CHL	4%-0.13%	SPRAY	TOPICAL	10/12/2023	0.08658
LIDOCAINE HCL/BENZALKONIUM CHL	0.5%-0.13%	CREAM PACK	TOPICAL	08/08/2024	0.03308
LIDOCAINE HCL/DEXTROSE 5 %/PF	4 MG/ML	IV SOLN	INTRAVEN	06/12/2025	0.02773
LIDOCAINE HCL/DEXTROSE 5 %/PF	8 MG/ML	IV SOLN	INTRAVEN	04/03/2025	0.06417
LIDOCAINE HCL/EPINEPHRINE	0.5-1:200K	VIAL	INJECTION	07/14/2022	0.12274
LIDOCAINE HCL/EPINEPHRINE	1%-1:100K	VIAL	INJECTION	06/05/2025	0.15121
LIDOCAINE HCL/EPINEPHRINE	2 %-1:100K	VIAL	INJECTION	06/05/2025	0.23664
LIDOCAINE HCL/EPINEPHRINE BIT	2 %-1:100K	CARTRIDGE	INJECTION	07/08/2021	0.22630
LIDOCAINE HCL/EPINEPHRINE BIT	2%-1:50000	CARTRIDGE	INJECTION	05/06/2022	0.22630
LIDOCAINE HCL/EPINEPHRINE/PF	1.5-1:200K	AMPUL	INJECTION	06/25/2024	0.59560
LIDOCAINE HCL/EPINEPHRINE/PF	1.5-1:200K	VIAL	INJECTION	06/05/2025	0.84688
LIDOCAINE HCL/EPINEPHRINE/PF	2%-1:200K	VIAL	INJECTION	10/24/2024	0.63851
LIDOCAINE HCL/ME SAL/CAP/MENTH	4 %-27.5 %	OINT/APPL	TOPICAL	01/02/2025	3.69386

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LIDOCAINE HCL/MENTHOL	4 %-1 %	GEL (ML)	TOPICAL	09/29/2022	2.66480
LIDOCAINE HCL/MENTHOL	4 %-1 %	CREAM (G)	TOPICAL	03/06/2025	0.09415
LIDOCAINE HCL/MENTHOL	4 %-1 %	ADH. PATCH	TOPICAL	05/06/2022	18.37500
LIDOCAINE HCL/MENTHOL	4 %-4 %	ADH. PATCH	TOPICAL	06/09/2022	85.61313
LIDOCAINE HCL/PF	40 MG/ML	AMPUL	INJECTION	05/13/2024	0.46900
LIDOCAINE HCL/PF	15 MG/ML	AMPUL	INJECTION	01/12/2023	0.87264
LIDOCAINE HCL/PF	10 MG/ML	AMPUL	INJECTION	06/17/2025	0.14231
LIDOCAINE HCL/PF	20 MG/ML	AMPUL	INJECTION	06/17/2025	0.16361
LIDOCAINE HCL/PF	20 MG/ML	VIAL	INJECTION	07/03/2025	0.28770
LIDOCAINE HCL/PF	10 MG/ML	VIAL	INJECTION	07/03/2025	0.10943
LIDOCAINE HCL/PF	5 MG/ML	VIAL	INJECTION	08/24/2023	0.36877
LIDOCAINE HCL/PF	100 MG/5ML	SYRINGE	INTRAVEN	01/30/2024	1.65356
LIDOCAINE/MENTHOL	4 %-1 %	ADH. PATCH	TOPICAL	03/06/2025	2.49240
LIDOCAINE/MENTHOL	4 %-4 %	ADH. PATCH	TOPICAL	11/03/2022	25.46250
LIDOCAINE/METHYL SAL/MENTHOL	4 %-2 %-1%	ADH. PATCH	TOPICAL	07/20/2023	29.53025
LIDOCAINE/PRILOCAINE	2.5 %-2.5%	CREAM (G)	TOPICAL	08/21/2025	0.32517
LIDOCAINE/PRILOCAINE	2.5 %-2.5%	KIT	TOPICAL	04/04/2024	1.99124
LIDOCAINE/TRANSPARENT DRESSING	4 %	KIT	TOPICAL	10/24/2024	22.05000
LINCOMYCIN HCL	300 MG/ML	VIAL	INJECTION	08/07/2025	5.72694
LINEZOLID	100 MG/5ML	SUSP RECON	ORAL	06/25/2025	1.73545
LINEZOLID	600 MG	TABLET	ORAL	04/03/2025	2.97990

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LINEZOLID IN DEXTROSE 5%	600MG/300	PIGGYBACK	INTRAVEN	05/22/2025	0.03566
LIOTHYRONINE SODIUM	25 MCG	TABLET	ORAL	09/04/2025	0.43322
LIOTHYRONINE SODIUM	5 MCG	TABLET	ORAL	09/04/2025	0.31825
LIOTHYRONINE SODIUM	50 MCG	TABLET	ORAL	09/04/2025	0.61895
LIRAGLUTIDE	0.6 MG/0.1	PEN INJCTR	SUBCUT	08/26/2025	46.45414
LISDEXAMFETAMINE DIMESYLATE	30 MG	CAPSULE	ORAL	08/21/2025	4.20493
LISDEXAMFETAMINE DIMESYLATE	50 MG	CAPSULE	ORAL	08/28/2025	4.45936
LISDEXAMFETAMINE DIMESYLATE	70 MG	CAPSULE	ORAL	08/21/2025	4.20737
LISDEXAMFETAMINE DIMESYLATE	20 MG	CAPSULE	ORAL	08/21/2025	4.12529
LISDEXAMFETAMINE DIMESYLATE	40 MG	CAPSULE	ORAL	08/21/2025	4.38387
LISDEXAMFETAMINE DIMESYLATE	60 MG	CAPSULE	ORAL	08/21/2025	3.82496
LISDEXAMFETAMINE DIMESYLATE	10 MG	CAPSULE	ORAL	08/21/2025	4.67491
LISDEXAMFETAMINE DIMESYLATE	10 MG	TAB CHEW	ORAL	08/28/2025	13.57241
LISDEXAMFETAMINE DIMESYLATE	20 MG	TAB CHEW	ORAL	08/21/2025	13.57241
LISDEXAMFETAMINE DIMESYLATE	30 MG	TAB CHEW	ORAL	08/28/2025	13.57241
LISDEXAMFETAMINE DIMESYLATE	40 MG	TAB CHEW	ORAL	08/21/2025	13.57241
LISDEXAMFETAMINE DIMESYLATE	50 MG	TAB CHEW	ORAL	08/28/2025	13.57241
LISDEXAMFETAMINE DIMESYLATE	60 MG	TAB CHEW	ORAL	08/28/2025	13.57241
LISINOPRIL	10 MG	TABLET	ORAL	08/28/2025	0.01734
LISINOPRIL	20 MG	TABLET	ORAL	12/19/2024	0.02079
LISINOPRIL	40 MG	TABLET	ORAL	04/15/2025	0.03574

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LISINOPRIL	5 MG	TABLET	ORAL	04/15/2025	0.01070
LISINOPRIL	2.5 MG	TABLET	ORAL	04/03/2025	0.01339
LISINOPRIL	30 MG	TABLET	ORAL	12/19/2024	0.04499
LISINOPRIL/HYDROCHLOROTHIAZIDE	20-12.5 MG	TABLET	ORAL	04/03/2025	0.07196
LISINOPRIL/HYDROCHLOROTHIAZIDE	20 MG-25MG	TABLET	ORAL	08/19/2025	0.04205
LISINOPRIL/HYDROCHLOROTHIAZIDE	10-12.5 MG	TABLET	ORAL	04/03/2025	0.05695
LITHIUM CARBONATE	150 MG	CAPSULE	ORAL	08/12/2025	0.07400
LITHIUM CARBONATE	300 MG	CAPSULE	ORAL	09/05/2023	0.07300
LITHIUM CARBONATE	600 MG	CAPSULE	ORAL	08/26/2025	0.19956
LITHIUM CARBONATE	300 MG	TABLET	ORAL	12/26/2024	0.13903
LITHIUM CARBONATE	300 MG	TABLET ER	ORAL	08/26/2025	0.15375
LITHIUM CARBONATE	450 MG	TABLET ER	ORAL	04/03/2025	0.55985
LITHIUM CITRATE	8 MEQ/5 ML	SOLUTION	ORAL	05/09/2024	0.90491
LOFEXIDINE HCL	0.18 MG	TABLET	ORAL	08/14/2025	7.83733
LOPERAMIDE HCL	2 MG	CAPSULE	ORAL	07/24/2025	0.06700
LOPERAMIDE HCL	1MG/7.5ML	LIQUID	ORAL	04/03/2025	0.04052
LOPERAMIDE HCL	2 MG	TABLET	ORAL	02/06/2025	0.10050
LOPERAMIDE HCL/SIMETHICONE	2-125MG	TABLET	ORAL	04/03/2025	0.36403
LOPINAVIR/RITONAVIR	200MG-50MG	TABLET	ORAL	04/03/2025	7.40833
LOPINAVIR/RITONAVIR	100MG-25MG	TABLET	ORAL	04/03/2025	5.03184
LORATADINE	5 MG/5 ML	SOLUTION	ORAL	04/03/2025	0.07002

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LORATADINE	10 MG	TABLET	ORAL	04/17/2025	0.03350
LORATADINE	5 MG	TAB CHEW	ORAL	01/16/2025	0.45560
LORATADINE	10 MG	TAB RAPDIS	ORAL	08/28/2024	0.35225
LORATADINE/PSEUDOEPHEDRINE	10MG-240MG	TAB ER 24H	ORAL	04/24/2025	1.39271
LORATADINE/PSEUDOEPHEDRINE	5 MG-120MG	TAB ER 12H	ORAL	08/21/2025	0.47430
LORAZEPAM	2 MG/ML	ORAL CONC	ORAL	11/21/2023	0.70900
LORAZEPAM	0.5 MG	TABLET	ORAL	08/07/2025	0.05607
LORAZEPAM	1 MG	TABLET	ORAL	04/15/2025	0.03621
LORAZEPAM	2 MG	TABLET	ORAL	04/15/2025	0.05410
LORAZEPAM	2 MG/ML	VIAL	INJECTION	08/14/2025	1.63467
LORAZEPAM	4 MG/ML	VIAL	INJECTION	04/11/2019	1.52586
LOSARTAN POTASSIUM	25 MG	TABLET	ORAL	09/27/2023	0.02239
LOSARTAN POTASSIUM	50 MG	TABLET	ORAL	05/13/2025	0.02783
LOSARTAN POTASSIUM	100 MG	TABLET	ORAL	07/24/2025	0.05941
LOSARTAN/HYDROCHLOROTHIAZIDE	50-12.5 MG	TABLET	ORAL	03/19/2025	0.04243
LOSARTAN/HYDROCHLOROTHIAZIDE	100MG-25MG	TABLET	ORAL	02/20/2025	0.05954
LOSARTAN/HYDROCHLOROTHIAZIDE	100-12.5MG	TABLET	ORAL	07/17/2025	0.05813
LOTEPREDNOL ETABONATE	0.5 %	DROPS GEL	OPHTHALMIC	08/27/2024	18.46950
LOTEPREDNOL ETABONATE	0.2 %	DROPS SUSP	OPHTHALMIC	04/09/2024	23.71500
LOTEPREDNOL ETABONATE	0.5 %	DROPS SUSP	OPHTHALMIC	06/11/2024	19.72000
LOVASTATIN	20 MG	TABLET	ORAL	08/21/2025	0.06521

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
LOVASTATIN	40 MG	TABLET	ORAL	04/03/2025	0.09313
LOVASTATIN	10 MG	TABLET	ORAL	08/07/2025	0.04256
LOXAPINE SUCCINATE	10 MG	CAPSULE	ORAL	09/04/2025	0.82949
LOXAPINE SUCCINATE	25 MG	CAPSULE	ORAL	09/04/2025	1.08245
LOXAPINE SUCCINATE	5 MG	CAPSULE	ORAL	04/03/2025	0.78176
LOXAPINE SUCCINATE	50 MG	CAPSULE	ORAL	04/24/2025	1.69255
LUBIPROSTONE	24MCG	CAPSULE	ORAL	08/28/2025	2.31507
LUBIPROSTONE	8 MCG	CAPSULE	ORAL	08/14/2025	1.71118
LURASIDONE HCL	40 MG	TABLET	ORAL	09/04/2025	0.43148
LURASIDONE HCL	80 MG	TABLET	ORAL	09/04/2025	0.53041
LURASIDONE HCL	20 MG	TABLET	ORAL	09/04/2025	0.25058
LURASIDONE HCL	120 MG	TABLET	ORAL	09/04/2025	0.73298
LURASIDONE HCL	60 MG	TABLET	ORAL	09/04/2025	0.49858
LUTEIN	6 MG	CAPSULE	ORAL	05/06/2022	0.08687
LUTEIN	20 MG	CAPSULE	ORAL	12/20/2023	0.10050
LYSINE	500 MG	TABLET	ORAL	05/06/2022	0.03075
LYSINE HCL	500 MG	CAPSULE	ORAL	08/25/2022	0.23521
MAFENIDE ACETATE	50 G	PACKET	TOPICAL	06/07/2023	3.60772
MAG CARB/ALUMINUM HYDROX/ALGIN	237.5-254	ORAL SUSP	ORAL	10/17/2024	0.03012
MAG HYDROX/ALUMINUM HYD/SIMETH	200-200-20	ORAL SUSP	ORAL	07/31/2025	0.01046
MAG HYDROX/ALUMINUM HYD/SIMETH	400-400-40	ORAL SUSP	ORAL	08/07/2025	0.01573

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MAG HYDROX/ALUMINUM HYD/SIMETH	200-200-25	TAB CHEW	ORAL	12/05/2024	0.07571
MAGNESIUM	200 MG	TABLET	ORAL	05/04/2023	0.04013
MAGNESIUM CARB/ALUMINUM HYDROX	105-160MG	TAB CHEW	ORAL	10/17/2024	0.10693
MAGNESIUM CHLORIDE	64 MG	TABLET DR	ORAL	07/17/2025	0.12239
MAGNESIUM CHLORIDE	71.5 MG	TABLET DR	ORAL	11/25/2024	0.14820
MAGNESIUM CITRATE	125 MG	CAPSULE	ORAL	07/17/2025	0.19653
MAGNESIUM CITRATE		SOLUTION	ORAL	03/27/2025	0.00251
MAGNESIUM GLUCONATE	27 MG(500)	TABLET	ORAL	01/12/2023	0.07430
MAGNESIUM GLYCINATE	100 MG	CAPSULE	ORAL	03/13/2025	0.21574
MAGNESIUM HYDROXIDE	400 MG/5ML	ORAL SUSP	ORAL	08/07/2025	0.00592
MAGNESIUM HYDROXIDE	2400 MG/10	ORAL SUSP	ORAL	06/16/2022	0.23272
MAGNESIUM L-LACTATE	84 MG	TABLET ER	ORAL	06/17/2025	0.17504
MAGNESIUM OXIDE	400 MG	CAPSULE	ORAL	02/23/2023	0.16973
MAGNESIUM OXIDE	250 MG	TABLET	ORAL	06/26/2025	0.01927
MAGNESIUM OXIDE	400 MG	TABLET	ORAL	08/19/2025	0.01608
MAGNESIUM OXIDE	420 MG	TABLET	ORAL	05/02/2024	0.05414
MAGNESIUM OXIDE	500 MG	TABLET	ORAL	01/30/2025	0.07243
MAGNESIUM OXIDE	400 MG	TABLET	ORAL	06/12/2025	0.01608
MAGNESIUM SALICYLATE	580(467)MG	TABLET	ORAL	12/20/2023	0.31378
MAGNESIUM STEARATE		POWDER	MISCELL	05/06/2022	0.09574
MAGNESIUM SULFATE	500 MG/ML	VIAL	INJECTION	08/21/2025	0.22126

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MAGNESIUM SULFATE IN WATER	20 G/500ML	IV SOLN	INTRAVEN	11/07/2024	0.01410
MAGNESIUM SULFATE IN WATER	40G/1000ML	IV SOLN	INTRAVEN	06/26/2025	0.01567
MAGNESIUM SULFATE IN WATER	2 G/50 ML	PIGGYBACK	INTRAVEN	08/22/2024	0.08737
MAGNESIUM SULFATE IN WATER	4 G/100 ML	PIGGYBACK	INTRAVEN	08/15/2024	0.03629
MAGNESIUM SULFATE IN WATER	4 G/50 ML	PIGGYBACK	INTRAVEN	07/24/2025	0.10972
MAGNESIUM SULFATE/D5W	1 G/100 ML	PIGGYBACK	INTRAVEN	01/05/2023	0.02961
MANNITOL	20 %	IV SOLN	INTRAVEN	02/06/2025	0.13456
MANNITOL	25 %	VIAL	INTRAVEN	06/10/2025	0.12207
MARAVIROC	150 MG	TABLET	ORAL	08/07/2025	9.48000
MARAVIROC	300 MG	TABLET	ORAL	08/07/2025	9.48000
MECLIZINE HCL	12.5 MG	TABLET	ORAL	04/01/2025	0.01734
MECLIZINE HCL	25 MG	TABLET	ORAL	04/03/2025	0.10050
MECLIZINE HCL	50 MG	TABLET	ORAL	05/01/2025	2.84559
MECLIZINE HCL	25 MG	TAB CHEW	ORAL	06/07/2022	0.03400
MECOBAL/LEVOMEFOLAT CA/B6 PHOS	2-3-35 MG	TABLET	ORAL	06/18/2025	1.53177
MECOBALAMIN	1000 MCG	TAB CHEW	ORAL	10/13/2022	0.12841
MECOBALAMIN	5000 MCG	TAB RAPDIS	ORAL	04/13/2023	0.77172
MECOBALAMIN	1000 MCG	TAB RAPDIS	SUBLINGUAL	04/17/2025	0.07247
MEDIUM CHAIN TRIGLYCERIDES	7.7KCAL/ML	OIL	ORAL	11/10/2022	0.08684
MEDIUM CHAIN TRIGLYCERIDES	14G-130/15	OIL	ORAL	03/19/2025	0.02826
MEDROXYPROGESTERONE ACETATE	10 MG	TABLET	ORAL	08/19/2025	0.13499

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MEDROXYPROGESTERONE ACETATE	2.5 MG	TABLET	ORAL	04/03/2025	0.14673
MEDROXYPROGESTERONE ACETATE	5 MG	TABLET	ORAL	04/03/2025	0.19591
MEDROXYPROGESTERONE ACETATE	150 MG/ML	SYRINGE	INTRAMUSC	08/28/2025	39.84175
MEDROXYPROGESTERONE ACETATE	150 MG/ML	VIAL	INTRAMUSC	08/21/2025	21.19950
MEFENAMIC ACID	250 MG	CAPSULE	ORAL	04/03/2025	3.41264
MEFLOQUINE HCL	250 MG	TABLET	ORAL	12/05/2024	8.12856
MEGESTROL ACETATE	400MG/10ML	ORAL SUSP	ORAL	04/03/2025	0.19525
MEGESTROL ACETATE	400MG/10ML	ORAL SUSP	ORAL	02/29/2024	0.30318
MEGESTROL ACETATE	20 MG	TABLET	ORAL	09/04/2025	0.39610
MEGESTROL ACETATE	40 MG	TABLET	ORAL	04/03/2025	0.34049
MELATONIN	10 MG	CAPSULE	ORAL	02/06/2025	0.24924
MELATONIN	1 MG/ML	LIQUID	ORAL	07/03/2024	0.13712
MELATONIN	2.5MG/10ML	LIQUID	ORAL	06/18/2025	0.05151
MELATONIN	3 MG	TABLET	ORAL	09/19/2024	0.02211
MELATONIN	1 MG	TABLET	ORAL	04/24/2025	0.01988
MELATONIN	5 MG	TABLET	ORAL	02/06/2025	0.02597
MELATONIN	2.5 MG	TAB CHEW	ORAL	09/26/2024	0.08688
MELATONIN	5 MG	TAB CHEW	ORAL	06/18/2025	0.12921
MELATONIN	1 MG	TAB CHEW	ORAL	08/28/2025	0.15499
MELATONIN	3 MG	TABLET ER	ORAL	05/06/2022	0.09592
MELATONIN	10 MG	TABLET ER	ORAL	07/09/2024	0.13380

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MELATONIN	5 MG	TAB RAPDIS	ORAL	06/05/2025	0.08911
MELATONIN	3 MG	TAB RAPDIS	ORAL	10/13/2022	0.04243
MELATONIN	10 MG	TAB RAPDIS	ORAL	07/31/2025	0.04243
MELATONIN/PYRIDOXINE HCL (B6)	5 MG-10 MG	TAB IR ER	ORAL	10/19/2023	0.28345
MELATONIN/TRYPTOPHAN	3 MG-100MG	CAPSULE	ORAL	05/06/2022	4.90380
MELOXICAM	7.5 MG	TABLET	ORAL	07/03/2025	0.03591
MELOXICAM	15 MG	TABLET	ORAL	08/28/2025	0.03089
MELOXICAM, SUBMICRONIZED	5 MG	CAPSULE	ORAL	02/11/2025	18.25970
MELOXICAM, SUBMICRONIZED	10 MG	CAPSULE	ORAL	04/17/2025	24.57210
MELPHALAN HCL	50 MG	VIAL	INTRAVEN	08/21/2025	115.28175
MEMANTINE HCL	7 MG	CAP SPR 24	ORAL	08/21/2025	0.54940
MEMANTINE HCL	14 MG	CAP SPR 24	ORAL	08/21/2025	0.43505
MEMANTINE HCL	21 MG	CAP SPR 24	ORAL	08/21/2025	0.66553
MEMANTINE HCL	28 MG	CAP SPR 24	ORAL	08/21/2025	0.43505
MEMANTINE HCL	2 MG/ML	SOLUTION	ORAL	04/03/2025	1.70292
MEMANTINE HCL	10 MG	TABLET	ORAL	07/31/2025	0.08217
MEMANTINE HCL	5 MG	TABLET	ORAL	08/21/2025	0.09000
MEMANTINE HCL	5 MG-10 MG	TAB DS PK	ORAL	12/14/2021	2.25160
MEMANTINE HCL/DONEPEZIL HCL	14MG-10MG	CAP SPR 24	ORAL	08/26/2025	10.36658
MEMANTINE HCL/DONEPEZIL HCL	28 MG-10MG	CAP SPR 24	ORAL	04/01/2025	18.05265
MENTHOL	8 MG	LOZENGE	MUCOUS MEM	04/24/2025	0.05360

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MENTHOL	5.8 MG	LOZENGE	MUCOUS MEM	07/02/2024	0.03870
MENTHOL	4 %	GEL (ML)	TOPICAL	07/17/2025	0.02737
MENTHOL	2 %	GEL (GRAM)	TOPICAL	07/03/2025	0.02506
MENTHOL	2.5 %	GEL (GRAM)	TOPICAL	10/17/2024	0.10767
MENTHOL	5 %	ADH. PATCH	TOPICAL	07/10/2025	0.97954
MENTHOL/CAMPHOR	3.5%-0.2%	GEL (GRAM)	TOPICAL	04/03/2025	0.07979
MENTHOL/CAMPHOR	0.5 %-0.5%	LOTION	TOPICAL	04/03/2025	0.03386
MENTHOL/ZINC OXIDE	0.44-20.6%	OINT PACK	TOPICAL	06/07/2023	0.08561
MENTHOL/ZINC OXIDE	0.44-20.6%	OINT. (G)	TOPICAL	03/30/2023	0.02638
MEPERIDINE HCL	50 MG	TABLET	ORAL	06/27/2025	0.70068
MEPIVACAINE HCL/PF	20 MG/ML	VIAL	INJECTION	05/06/2022	0.52639
MEPIVACAINE HCL/PF	15 MG/ML	VIAL	INJECTION	05/06/2022	0.37073
MEPIVACAINE HCL/PF	10 MG/ML	VIAL	INJECTION	05/06/2022	0.31612
MEPROBAMATE	200 MG	TABLET	ORAL	04/03/2025	5.61696
MEPROBAMATE	400 MG	TABLET	ORAL	04/25/2023	5.35100
MERCAPTOPURINE	20 MG/ML	ORAL SUSP	ORAL	06/18/2025	9.39257
MERCAPTOPURINE	50 MG	TABLET	ORAL	08/21/2025	1.78756
MEROPENEM	500 MG	VIAL	INTRAVEN	01/02/2025	1.76880
MEROPENEM	1 G	VIAL	INTRAVEN	04/01/2025	6.51256
MEROPENEM	2 G	VIAL	INTRAVEN	07/24/2025	32.01929
MESALAMINE	0.375G	CAP ER 24H	ORAL	06/12/2025	1.17485

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MESALAMINE	500 MG	CAPSULE ER	ORAL	03/28/2024	7.28690
MESALAMINE	400 MG	CAP(DRTAB)	ORAL	03/06/2025	2.52687
MESALAMINE	800 MG	TABLET DR	ORAL	11/05/2024	6.57684
MESALAMINE	1.2 G	TABLET DR	ORAL	04/03/2025	1.74691
MESALAMINE	1000 MG	SUPP.RECT	RECTAL	05/08/2025	2.90180
MESALAMINE	4 G/60 ML	ENEMA	RECTAL	04/03/2025	0.29078
MESALAMINE W/CLEANSING WIPES	4 G/60 ML	ENEMA KIT	RECTAL	03/19/2025	65.41038
MESNA	400 MG	TABLET	ORAL	04/01/2025	59.51458
MESNA	100 MG/ML	VIAL	INTRAVEN	06/29/2023	0.88440
METAXALONE	400 MG	TABLET	ORAL	06/29/2023	4.19100
METAXALONE	800 MG	TABLET	ORAL	08/21/2025	0.72816
METFORMIN HCL	1000 MG	TAB ER 24	ORAL	06/11/2024	0.61246
METFORMIN HCL	500 MG	TAB ER 24	ORAL	08/07/2025	0.46654
METFORMIN HCL	500 MG	TABERGR24H	ORAL	04/03/2025	0.80400
METFORMIN HCL	1000 MG	TABERGR24H	ORAL	04/03/2025	1.20228
METFORMIN HCL	500 MG/5ML	SOLUTION	ORAL	02/05/2024	0.87265
METFORMIN HCL	500 MG	TABLET	ORAL	09/04/2025	0.01507
METFORMIN HCL	850 MG	TABLET	ORAL	09/04/2025	0.02412
METFORMIN HCL	1000 MG	TABLET	ORAL	05/27/2025	0.01917
METFORMIN HCL	625 MG	TABLET	ORAL	03/27/2025	19.45685
METFORMIN HCL	500 MG	TAB ER 24H	ORAL	08/12/2025	0.02260

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METFORMIN HCL	750 MG	TAB ER 24H	ORAL	05/01/2025	0.06365
METHADONE HCL	10 MG/5 ML	SOLUTION	ORAL	04/03/2025	0.23624
METHADONE HCL	5 MG/5 ML	SOLUTION	ORAL	05/06/2022	0.21105
METHADONE HCL	10 MG/ML	ORAL CONC	ORAL	04/03/2025	0.11980
METHADONE HCL	10 MG	TABLET	ORAL	04/15/2025	0.16015
METHADONE HCL	5 MG	TABLET	ORAL	04/03/2025	0.21413
METHADONE HCL	40 MG	TABLET SOL	ORAL	05/06/2022	0.32716
METHADONE HCL	10 MG/ML	VIAL	INJECTION	07/17/2025	21.49035
METHAMPHETAMINE HCL	5 MG	TABLET	ORAL	11/10/2022	5.08679
METHAZOLAMIDE	25 MG	TABLET	ORAL	04/03/2025	2.06976
METHAZOLAMIDE	50 MG	TABLET	ORAL	04/24/2025	3.17513
METHENAMINE HIPPURATE	1 G	TABLET	ORAL	08/07/2025	0.81137
METHENAMINE/SODIUM SALICYLATE	162-162.5	TABLET	ORAL	04/01/2025	0.15117
METHIMAZOLE	10 MG	TABLET	ORAL	05/29/2025	0.34331
METHIMAZOLE	5 MG	TABLET	ORAL	05/14/2025	0.17527
METHOCARBAMOL	500 MG	TABLET	ORAL	08/21/2025	0.02278
METHOCARBAMOL	750 MG	TABLET	ORAL	04/22/2025	0.02798
METHOCARBAMOL	100 MG/ML	VIAL	INJECTION	08/21/2025	1.01829
METHOTREXATE SODIUM	2.5 MG	TABLET	ORAL	08/07/2025	0.15544
METHOTREXATE SODIUM	25 MG/ML	VIAL	INJECTION	12/12/2024	2.67300
METHOTREXATE SODIUM/PF	1 G	VIAL	INJECTION	10/06/2022	64.53400

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METHOTREXATE SODIUM/PF	25 MG/ML	VIAL	INJECTION	06/12/2025	0.40290
METHOXY PEG-EPOETIN BETA	200MCG/0.3	SYRINGE	INJECTION	05/06/2022	591.37375
METHSCOPOLAMINE BROMIDE	2.5 MG	TABLET	ORAL	06/05/2025	1.70488
METHSCOPOLAMINE BROMIDE	5 MG	TABLET	ORAL	06/05/2025	2.79906
METHSUXIMIDE	300 MG	CAPSULE	ORAL	05/25/2023	5.10642
METHYL SALICYLATE	10 %	CREAM (G)	TOPICAL	07/24/2025	7.40833
METHYL SALICYLATE	25 %	CREAM (G)	TOPICAL	04/22/2025	2.48179
METHYL SALICYLATE	10 %	ADH. PATCH	TOPICAL	08/28/2025	27.75188
METHYL SALICYLATE		LIQUID	TOPICAL	06/26/2025	0.18896
METHYL SALICYLATE		OIL	MISCELL	05/06/2022	0.50920
METHYL SALICYLATE/MENTH/CAMPH	30%-10%-4%	GEL (GRAM)	TOPICAL	06/26/2025	6.31825
METHYL SALICYLATE/MENTH/CAMPH	10 %-6 %	ADH. PATCH	TOPICAL	06/26/2025	0.90897
METHYL SALICYLATE/MENTH/CAMPH	30%-10%-4%	KIT	TOPICAL	06/30/2022	867.53438
METHYL SALICYLATE/MENTHOL	15%-10%	CREAM (G)	TOPICAL	10/31/2024	0.01497
METHYL SALICYLATE/MENTHOL	15 %-1 %	CREAM (G)	TOPICAL	02/08/2024	0.02778
METHYL SALICYLATE/MENTHOL	10 %-3 %	ADH. PATCH	TOPICAL	06/05/2025	1.70031
METHYLDOPA	250 MG	TABLET	ORAL	06/05/2025	0.27892
METHYLDOPA	500 MG	TABLET	ORAL	06/26/2025	0.49453
METHYLENE BLUE	50 MG/10ML	AMPUL	INTRAVEN	06/24/2025	10.01880
METHYLENE BLUE	50 MG/10ML	VIAL	INTRAVEN	09/04/2025	12.64599
METHYLERGONOVINE MALEATE	0.2 MG	TABLET	ORAL	04/24/2025	17.11012

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METHYLERGONOVINE MALEATE	.2MG/ML(1)	AMPUL	INJECTION	08/28/2024	10.35000
METHYLPHENIDATE	10MG/9HR	PATCH TD24	TRANSDERM	03/27/2025	10.14223
METHYLPHENIDATE	15MG/9HR	PATCH TD24	TRANSDERM	04/03/2025	10.14223
METHYLPHENIDATE	20 MG/9 HR	PATCH TD24	TRANSDERM	04/03/2025	10.14223
METHYLPHENIDATE	30MG/9HR	PATCH TD24	TRANSDERM	04/03/2025	10.14223
METHYLPHENIDATE HCL	10 MG	CPBP 30-70	ORAL	10/01/2024	1.79010
METHYLPHENIDATE HCL	20 MG	CPBP 30-70	ORAL	04/03/2025	2.76223
METHYLPHENIDATE HCL	30 MG	CPBP 30-70	ORAL	08/07/2025	2.67300
METHYLPHENIDATE HCL	40 MG	CPBP 30-70	ORAL	04/03/2025	3.48322
METHYLPHENIDATE HCL	50 MG	CPBP 30-70	ORAL	03/11/2025	1.17398
METHYLPHENIDATE HCL	60 MG	CPBP 30-70	ORAL	10/03/2024	3.51054
METHYLPHENIDATE HCL	20 MG	CPBP 50-50	ORAL	05/28/2024	2.44620
METHYLPHENIDATE HCL	30 MG	CPBP 50-50	ORAL	02/04/2025	2.06631
METHYLPHENIDATE HCL	10 MG	CPBP 50-50	ORAL	08/21/2025	6.08292
METHYLPHENIDATE HCL	10 MG	CSBP 40-60	ORAL	02/22/2024	9.58742
METHYLPHENIDATE HCL	15 MG	CSBP 40-60	ORAL	04/29/2025	1.44950
METHYLPHENIDATE HCL	20 MG	CSBP 40-60	ORAL	02/22/2024	9.58742
METHYLPHENIDATE HCL	30 MG	CSBP 40-60	ORAL	02/20/2024	5.39975
METHYLPHENIDATE HCL	40 MG	CSBP 40-60	ORAL	04/03/2025	5.39975
METHYLPHENIDATE HCL	50 MG	CSBP 40-60	ORAL	02/22/2024	9.58742
METHYLPHENIDATE HCL	60 MG	CSBP 40-60	ORAL	04/03/2025	5.39975

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METHYLPHENIDATE HCL	18 MG	TAB ER 24	ORAL	08/21/2025	1.35863
METHYLPHENIDATE HCL	54 MG	TAB ER 24	ORAL	06/26/2025	1.50361
METHYLPHENIDATE HCL	27 MG	TAB ER 24	ORAL	04/01/2025	0.63331
METHYLPHENIDATE HCL	72 MG	TAB ER 24	ORAL	05/29/2025	24.16750
METHYLPHENIDATE HCL	5 MG/5 ML	SOLUTION	ORAL	04/03/2025	0.25460
METHYLPHENIDATE HCL	10 MG/5 ML	SOLUTION	ORAL	08/28/2025	0.35974
METHYLPHENIDATE HCL	10 MG	TABLET	ORAL	06/26/2025	0.17889
METHYLPHENIDATE HCL	20 MG	TABLET	ORAL	08/26/2025	0.19782
METHYLPHENIDATE HCL	5 MG	TABLET	ORAL	08/26/2025	0.10926
METHYLPHENIDATE HCL	2.5 MG	TAB CHEW	ORAL	04/03/2025	2.74138
METHYLPHENIDATE HCL	5 MG	TAB CHEW	ORAL	01/21/2025	2.55100
METHYLPHENIDATE HCL	10 MG	TAB CHEW	ORAL	04/03/2025	5.12041
METHYLPHENIDATE HCL	20 MG	TABLET ER	ORAL	04/03/2025	1.15521
METHYLPHENIDATE HCL	10 MG	TABLET ER	ORAL	04/03/2025	1.15964
METHYLPREDNISOLONE	16 MG	TABLET	ORAL	04/24/2025	3.45814
METHYLPREDNISOLONE	32 MG	TABLET	ORAL	04/03/2025	3.05237
METHYLPREDNISOLONE	4 MG	TABLET	ORAL	01/09/2025	0.40816
METHYLPREDNISOLONE	8 MG	TABLET	ORAL	06/12/2025	1.74897
METHYLPREDNISOLONE	4 MG	TAB DS PK	ORAL	04/03/2025	0.18569
METHYLPREDNISOLONE ACETATE	40 MG/ML	VIAL	INJECTION	05/30/2024	5.30860
METHYLPREDNISOLONE ACETATE	80 MG/ML	VIAL	INJECTION	06/20/2024	7.57200

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METHYLPREDNISOLONE SOD SUCC	125 MG	VIAL	INJECTION	04/24/2025	5.76529
METHYLPREDNISOLONE SOD SUCC	40 MG	VIAL	INJECTION	10/19/2021	3.64000
METHYLPREDNISOLONE SOD SUCC	1000 MG	VIAL	INTRAVEN	01/18/2024	21.49350
METHYLPREDNISOLONE SOD SUCC	500 MG	VIAL	INTRAVEN	04/03/2025	26.12400
METHYLTESTOSTERONE	10 MG	CAPSULE	ORAL	07/27/2022	63.69176
METHYLTETRAHYDROFOLATE GLUCOSA	1700MCGDFE	CAPSULE	ORAL	03/28/2024	0.50665
METHYLTETRAHYDROFOLATE GLUCOSA	25,500 MCG	TABLET ER	ORAL	07/06/2023	3.88565
METOCLOPRAMIDE HCL	5 MG/5 ML	SOLUTION	ORAL	08/14/2025	0.06769
METOCLOPRAMIDE HCL	10 MG	TABLET	ORAL	05/22/2025	0.07542
METOCLOPRAMIDE HCL	5 MG	TABLET	ORAL	08/21/2025	0.08841
METOCLOPRAMIDE HCL	5 MG/ML	VIAL	INJECTION	09/12/2024	0.58290
METOLAZONE	10 MG	TABLET	ORAL	04/08/2025	0.38002
METOLAZONE	2.5 MG	TABLET	ORAL	04/23/2024	0.48140
METOLAZONE	5 MG	TABLET	ORAL	04/03/2025	0.90437
METOPROLOL SUCCINATE	50 MG	TAB ER 24H	ORAL	07/17/2025	0.04977
METOPROLOL SUCCINATE	100 MG	TAB ER 24H	ORAL	07/03/2025	0.08498
METOPROLOL SUCCINATE	200 MG	TAB ER 24H	ORAL	07/03/2025	0.19015
METOPROLOL SUCCINATE	25 MG	TAB ER 24H	ORAL	07/17/2025	0.05132
METOPROLOL TARTRATE	100 MG	TABLET	ORAL	08/28/2025	0.03183
METOPROLOL TARTRATE	50 MG	TABLET	ORAL	08/28/2025	0.02621
METOPROLOL TARTRATE	25 MG	TABLET	ORAL	08/28/2025	0.01717

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
METOPROLOL TARTRATE	37.5 MG	TABLET	ORAL	09/16/2021	0.07595
METOPROLOL TARTRATE	75 MG	TABLET	ORAL	12/19/2024	0.46525
METOPROLOL TARTRATE	5 MG/5 ML	VIAL	INTRAVEN	05/22/2025	0.16422
METOPROLOL/HYDROCHLOROTHIAZIDE	100MG-25MG	TABLET	ORAL	04/08/2025	1.18758
METOPROLOL/HYDROCHLOROTHIAZIDE	50 MG-25MG	TABLET	ORAL	06/30/2025	0.93901
METOPROLOL/HYDROCHLOROTHIAZIDE	100MG-50MG	TABLET	ORAL	08/01/2022	1.25112
METRONIDAZOLE	375 MG	CAPSULE	ORAL	04/03/2025	9.80789
METRONIDAZOLE	250 MG	TABLET	ORAL	04/03/2025	0.07826
METRONIDAZOLE	500 MG	TABLET	ORAL	07/17/2025	0.09367
METRONIDAZOLE	0.75 %	GEL (GRAM)	TOPICAL	04/03/2025	0.44607
METRONIDAZOLE	1 %	GEL (GRAM)	TOPICAL	05/29/2025	3.24808
METRONIDAZOLE	0.75 %	CREAM (G)	TOPICAL	01/14/2025	0.90584
METRONIDAZOLE	1 %	GEL W/PUMP	TOPICAL	04/18/2024	1.30370
METRONIDAZOLE	0.75 %	LOTION	TOPICAL	02/20/2025	3.20021
METRONIDAZOLE	0.75 %	GEL W/APPL	VAGINAL	08/07/2025	0.28829
METRONIDAZOLE/SODIUM CHLORIDE	500MG/0.1L	PIGGYBACK	INTRAVEN	06/18/2025	0.02303
METYROSINE	250 MG	CAPSULE	ORAL	08/07/2025	248.56250
MEXILETINE HCL	150 MG	CAPSULE	ORAL	06/24/2025	0.22853
MEXILETINE HCL	200 MG	CAPSULE	ORAL	06/24/2025	0.22102
MEXILETINE HCL	250 MG	CAPSULE	ORAL	06/24/2025	0.37994
MICAFUNGIN SODIUM	50 MG	VIAL	INTRAVEN	09/04/2025	19.42500

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MICAFUNGIN SODIUM	100 MG	VIAL	INTRAVEN	09/04/2025	31.36500
MICONAZOLE NITRATE	2 %	CREAM (G)	TOPICAL	04/03/2025	0.06747
MICONAZOLE NITRATE	2 %	OINT. (G)	TOPICAL	05/15/2024	0.15594
MICONAZOLE NITRATE	2 %	POWDER	TOPICAL	05/08/2025	0.03743
MICONAZOLE NITRATE	2 %	TINCTURE	TOPICAL	05/06/2022	0.35663
MICONAZOLE NITRATE	2 %	CREAM/APPL	VAGINAL	04/03/2025	0.20011
MICONAZOLE NITRATE	200 MG-2 %	KIT	VAGINAL	07/08/2025	13.15650
MIDAZOLAM HCL	2 MG/ML	SYRUP	ORAL	07/24/2025	1.62515
MIDAZOLAM HCL	5 MG/ML	VIAL	INJECTION	02/15/2024	0.38190
MIDAZOLAM HCL	2 MG/2 ML	VIAL	INJECTION	10/31/2024	0.19732
MIDAZOLAM HCL	5 MG/5 ML	VIAL	INJECTION	05/06/2022	0.35389
MIDAZOLAM HCL	10 MG/10ML	VIAL	INJECTION	11/07/2024	0.38190
MIDAZOLAM HCL	10 MG/2 ML	VIAL	INJECTION	03/14/2024	4.03161
MIDAZOLAM HCL	5 MG/ML(1)	VIAL	INJECTION	02/01/2022	1.52760
MIDAZOLAM HCL IN 0.9 % NACL/PF	1 MG/ML	PLAST. BAG	INTRAVEN	05/22/2025	0.38177
MIDAZOLAM HCL/PF	2 MG/2 ML	SYRINGE	INJECTION	06/18/2025	1.99861
MIDAZOLAM HCL/PF	10 MG/2 ML	SYRINGE	INJECTION	04/18/2024	2.42507
MIDAZOLAM HCL/PF	5 MG/ML(1)	VIAL	INJECTION	01/04/2024	1.47795
MIDAZOLAM HCL/PF	10 MG/2 ML	VIAL	INJECTION	01/04/2024	0.86309
MIDAZOLAM HCL/PF	2 MG/2 ML	VIAL	INJECTION	02/06/2025	0.75082
MIDAZOLAM HCL/PF	5 MG/5 ML	VIAL	INJECTION	03/28/2024	0.28923

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MIDODRINE HCL	5 MG	TABLET	ORAL	06/03/2024	0.12085
MIDODRINE HCL	2.5 MG	TABLET	ORAL	06/03/2024	0.07885
MIDODRINE HCL	10 MG	TABLET	ORAL	08/28/2025	0.25098
MIFEPRISTONE	200 MG	TABLET	ORAL	05/06/2022	41.00000
MIFEPRISTONE	300 MG	TABLET	ORAL	03/25/2025	334.78280
MIGLITOL	25 MG	TABLET	ORAL	04/03/2025	4.14520
MIGLITOL	50 MG	TABLET	ORAL	12/29/2022	1.52157
MIGLITOL	100 MG	TABLET	ORAL	04/03/2025	4.87146
MIGLUSTAT	100 MG	CAPSULE	ORAL	07/03/2025	146.06307
MILRINONE LACTATE	1 MG/ML	VIAL	INTRAVEN	07/17/2025	0.37252
MILRINONE LACTATE/D5W	20MG/100ML	PIGGYBACK	INTRAVEN	03/19/2025	0.16080
MILRINONE LACTATE/D5W	40MG/200ML	PIGGYBACK	INTRAVEN	02/22/2024	0.13065
MINERAL OIL		OIL	ORAL	04/03/2025	0.00618
MINERAL OIL		ENEMA	RECTAL	07/03/2025	0.01098
MINERAL OIL		OIL	TOPICAL	04/24/2025	0.02644
MINERAL OIL/HYDROPHIL PETROLAT		OINT. (G)	TOPICAL	05/06/2022	0.02137
MINERAL OIL/PETROLATUM,WHITE	15 %-83 %	OINT. (G)	OPHTHALMIC	08/26/2025	1.24237
MINERAL OIL/PETROLATUM,WHITE	20%-80%	OINT. (G)	OPHTHALMIC	05/06/2022	1.44720
MINERAL OIL/PETROLATUM,WHITE	42.5-57.3%	OINT. (G)	OPHTHALMIC	08/07/2025	3.77708
MINOCYCLINE HCL	100 MG	CAPSULE	ORAL	06/18/2025	0.57030
MINOCYCLINE HCL	50 MG	CAPSULE	ORAL	06/12/2025	0.30820

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MINOCYCLINE HCL	75 MG	CAPSULE	ORAL	04/03/2025	0.62203
MINOCYCLINE HCL	100 MG	TABLET	ORAL	07/03/2025	2.55967
MINOCYCLINE HCL	50 MG	TABLET	ORAL	09/05/2023	1.08888
MINOCYCLINE HCL	75 MG	TABLET	ORAL	02/25/2025	1.76920
MINOCYCLINE HCL	90 MG	TAB ER 24H	ORAL	10/26/2021	11.30067
MINOCYCLINE HCL	135 MG	TAB ER 24H	ORAL	02/11/2020	3.73637
MINOCYCLINE HCL	65 MG	TAB ER 24H	ORAL	10/18/2021	8.47680
MINOCYCLINE HCL	115MG	TAB ER 24H	ORAL	10/19/2021	7.68880
MINOCYCLINE HCL	55 MG	TAB ER 24H	ORAL	03/28/2024	23.04102
MINOCYCLINE HCL	80 MG	TAB ER 24H	ORAL	06/27/2024	23.04102
MINOCYCLINE HCL	105 MG	TAB ER 24H	ORAL	06/27/2024	23.04102
MINOXIDIL	10 MG	TABLET	ORAL	06/24/2025	0.22039
MINOXIDIL	2.5 MG	TABLET	ORAL	06/24/2025	0.10006
MINOXIDIL	5 %	FOAM	TOPICAL	03/19/2025	0.25973
MINOXIDIL	5 %	SOLUTION	TOPICAL	09/04/2025	0.57815
MIRABEGRON	25 MG	TAB ER 24H	ORAL	09/17/2024	12.46070
MIRABEGRON	50 MG	TAB ER 24H	ORAL	05/13/2024	9.52826
MIRTAZAPINE	15 MG	TABLET	ORAL	05/27/2025	0.07245
MIRTAZAPINE	30 MG	TABLET	ORAL	06/18/2025	0.10050
MIRTAZAPINE	45 MG	TABLET	ORAL	04/17/2025	0.10050
MIRTAZAPINE	7.5 MG	TABLET	ORAL	05/27/2025	0.35101

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MIRTAZAPINE	15 MG	TAB RAPDIS	ORAL	10/01/2024	0.42570
MIRTAZAPINE	30 MG	TAB RAPDIS	ORAL	04/03/2025	0.92549
MIRTAZAPINE	45 MG	TAB RAPDIS	ORAL	04/03/2025	1.00813
MISOPROSTOL	200 MCG	TABLET	ORAL	02/06/2025	0.51121
MISOPROSTOL	100 MCG	TABLET	ORAL	09/19/2024	0.33757
MITOMYCIN	20 MG	VIAL	INTRAVEN	04/03/2025	82.33825
MITOMYCIN	40 MG	VIAL	INTRAVEN	04/03/2025	188.44625
MITOMYCIN	5 MG	VIAL	INTRAVEN	07/03/2025	76.65975
MODAFINIL	100 MG	TABLET	ORAL	09/04/2025	0.31222
MODAFINIL	200 MG	TABLET	ORAL	09/04/2025	0.38011
MOEXIPRIL HCL	7.5 MG	TABLET	ORAL	03/27/2025	1.85858
MOEXIPRIL HCL	15 MG	TABLET	ORAL	03/27/2025	1.94715
MOMETASONE FUROATE	0.1 %	CREAM (G)	TOPICAL	04/03/2025	0.41510
MOMETASONE FUROATE	0.1 %	OINT. (G)	TOPICAL	04/03/2025	0.24984
MOMETASONE FUROATE	0.1 %	SOLUTION	TOPICAL	06/05/2025	0.54538
MOMETASONE FUROATE	50 MCG	SPRAY/PUMP	NASAL	08/28/2025	1.60485
MOMETASONE FUROATE	50 MCG	SPRAY/PUMP	NASAL	04/08/2025	1.20163
MONTELUKAST SODIUM	4 MG	GRAN PACK	ORAL	06/18/2025	1.38467
MONTELUKAST SODIUM	10 MG	TABLET	ORAL	12/26/2024	0.03305
MONTELUKAST SODIUM	5 MG	TAB CHEW	ORAL	04/03/2025	0.06700
MONTELUKAST SODIUM	4 MG	TAB CHEW	ORAL	04/03/2025	0.11524

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MORPHINE SULFATE	10 MG/5 ML	SOLUTION	ORAL	09/04/2025	0.07129
MORPHINE SULFATE	20 MG/5 ML	SOLUTION	ORAL	03/21/2024	0.10057
MORPHINE SULFATE	100 MG/5ML	SOLUTION	ORAL	04/03/2025	0.37172
MORPHINE SULFATE	15 MG	TABLET	ORAL	04/22/2025	0.26597
MORPHINE SULFATE	30 MG	TABLET	ORAL	01/11/2024	0.71020
MORPHINE SULFATE	30 MG	TABLET ER	ORAL	08/26/2025	0.39739
MORPHINE SULFATE	60 MG	TABLET ER	ORAL	08/14/2025	0.85787
MORPHINE SULFATE	100 MG	TABLET ER	ORAL	07/17/2025	1.59782
MORPHINE SULFATE	15 MG	TABLET ER	ORAL	07/17/2025	0.40294
MORPHINE SULFATE	200 MG	TABLET ER	ORAL	04/23/2024	2.81701
MORPHINE SULFATE	2 MG/ML	SYRINGE	INTRAVEN	07/10/2025	8.89680
MORPHINE SULFATE	4 MG/ML	SYRINGE	INTRAVEN	07/10/2025	8.07600
MORPHINE SULFATE	50 MG/ML	VIAL	INTRAVEN	07/10/2025	0.84120
MORPHINE SULFATE	4 MG/ML	VIAL	INTRAVEN	06/30/2022	2.96683
MORPHINE SULFATE/PF	1 MG/ML	AMPUL	INJECTION	08/10/2017	5.47148
MORPHINE SULFATE/PF	0.5 MG/ML	VIAL	INJECTION	07/03/2019	1.34683
MORPHINE SULFATE/PF	1 MG/ML	VIAL	INJECTION	07/03/2019	1.36720
MOXIFLOXACIN HCL	400 MG	TABLET	ORAL	06/12/2025	3.62032
MOXIFLOXACIN HCL	0.5 %	DROPS	OPHTHALMIC	04/03/2025	5.74887
MOXIFLOXACIN-SOD.CHLORIDE(ISO)	400MG/.25L	PIGGYBACK	INTRAVEN	12/20/2023	0.13869
MULTIVIT WITH MINERALS/LUTEIN		TABLET	ORAL	09/04/2025	0.07028

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MULTIVIT,CALC,MINS/IRON/FOLIC	9MG-400MCG	TABLET	ORAL	06/17/2025	0.02671
MULTIVIT,CALC,MINS/IRON/FOLIC	500-18-0.4	TABLET	ORAL	05/06/2022	0.06027
MULTIVIT,STRESS FORMULA/ZINC		TABLET	ORAL	08/07/2025	0.13847
MULTIVIT-MIN/FA/LYCOPEN/LUTEIN	.4-300-250	TABLET	ORAL	08/21/2025	0.05474
MULTIVIT-MIN/FA/LYCOPEN/LUTEIN	500-300MCG	TABLET	ORAL	05/06/2022	0.07136
MULTIVIT-MIN/FA/LYCOPEN/LUTEIN	800-250MCG	TABLET	ORAL	05/06/2022	0.26733
MULTIVIT-MIN/FERROUS GLUCONATE	9 MG/15 ML	LIQUID	ORAL	08/28/2025	0.04592
MULTIVIT-MIN/FERROUS GLUCONATE	9 MG/15 ML	LIQUID	ORAL	08/07/2025	0.23359
MULTIVIT-MIN/FOLIC AC/COLLAGEN	0.2MG-25MG	TAB CHEW	ORAL	03/19/2025	0.10414
MULTIVIT-MIN/FOLIC/VIT K/LYCOP	400-300MCG	TABLET	ORAL	07/24/2025	0.06224
MULTIVIT-MIN/IRON/FOLIC ACID/K	18-400-25	TABLET	ORAL	08/21/2025	0.07689
MULTIVIT-MINERALS/FOLIC ACID	0.4 MG	TABLET	ORAL	04/04/2024	0.09796
MULTIVIT-MINERALS/FOLIC ACID	200 MCG	TAB CHEW	ORAL	12/26/2024	0.11648
MULTIVIT-MINERALS/FOLIC ACID	120 MCG	TAB CHEW	ORAL	04/24/2025	0.18097
MULTIVIT-MINS/IRON/FOLIC/LYCOP	8-200-600	TABLET	ORAL	05/29/2025	0.06694
MULTIVITAMIN		TABLET	ORAL	02/20/2025	0.01349
MULTIVITAMIN		TAB CHEW	ORAL	05/06/2022	0.04965
MULTIVITAMIN WITH FOLIC ACID	400 MCG	TABLET	ORAL	04/30/2025	0.01080
MULTIVITAMIN WITH IRON		TABLET	ORAL	05/06/2022	0.03679
MULTIVITAMIN WITH IRON		TAB CHEW	ORAL	04/06/2023	0.06242
MULTIVITAMIN WITH MINERALS		LIQUID	ORAL	05/06/2022	0.19868

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
MULTIVITAMIN WITH MINERALS		TABLET	ORAL	05/06/2022	0.06059
MULTIVITAMIN,STRESS FORMULA		TABLET	ORAL	04/18/2024	0.13154
MULTIVITAMIN,THERAPEUTIC		TABLET	ORAL	03/19/2025	0.03002
MULTIVITAMIN/IRON/FOLIC ACID	18MG-0.4MG	TABLET	ORAL	08/19/2025	0.01089
MUPIROCIN	2 %	OINT. (G)	TOPICAL	04/22/2025	0.15723
MUPIROCIN CALCIUM	2 %	CREAM (G)	TOPICAL	06/26/2025	1.17920
MV-MIN/FA/VIT K/LUTEIN/ZEAXANT	200MCG-5MG	CAPSULE	ORAL	07/03/2025	0.44903
MV-MIN/FOLIC/K1/LYCOPEN/LUTEIN	300-60 MCG	TABLET	ORAL	08/28/2025	0.06697
MYCOPHENOLATE MOFETIL	250 MG	CAPSULE	ORAL	07/03/2025	0.18010
MYCOPHENOLATE MOFETIL	200 MG/ML	SUSP RECON	ORAL	07/15/2025	1.00186
MYCOPHENOLATE MOFETIL	500 MG	TABLET	ORAL	08/21/2025	0.34157
MYCOPHENOLATE MOFETIL HCL	500 MG	VIAL	INTRAVEN	04/03/2025	29.98125
MYCOPHENOLATE SODIUM	180 MG	TABLET DR	ORAL	06/12/2025	0.31624
MYCOPHENOLATE SODIUM	360 MG	TABLET DR	ORAL	05/08/2025	0.49122
NABUMETONE	500 MG	TABLET	ORAL	08/28/2025	0.32669
NABUMETONE	750 MG	TABLET	ORAL	04/03/2025	0.35403
NADOLOL	20 MG	TABLET	ORAL	05/14/2025	0.30070
NADOLOL	40 MG	TABLET	ORAL	05/14/2025	0.41513
NADOLOL	80 MG	TABLET	ORAL	06/10/2025	0.28006
NAFCILLIN SODIUM	1 G	VIAL	INJECTION	10/26/2021	4.62000
NAFCILLIN SODIUM	10 G	VIAL	INJECTION	07/17/2025	61.60250

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NAFCILLIN SODIUM	2 G	VIAL	INJECTION	06/05/2025	8.40000
NAFTIFINE HCL	2 %	GEL (GRAM)	TOPICAL	05/03/2023	4.57800
NAFTIFINE HCL	1 %	CREAM (G)	TOPICAL	10/26/2021	2.75278
NAFTIFINE HCL	2 %	CREAM (G)	TOPICAL	04/03/2025	3.76493
NALBUPHINE HCL	10 MG/ML	AMPUL	INJECTION	06/12/2025	7.67160
NALBUPHINE HCL	20 MG/ML	AMPUL	INJECTION	03/11/2025	3.02840
NALBUPHINE HCL	10 MG/ML	VIAL	INJECTION	10/01/2024	1.69250
NALBUPHINE HCL	20 MG/ML	VIAL	INJECTION	03/11/2025	1.69322
NALOXONE HCL	1 MG/ML	SYRINGE	INJECTION	09/04/2025	8.97750
NALOXONE HCL	0.4 MG/ML	VIAL	INJECTION	12/26/2024	5.29654
NALOXONE HCL	4 MG	SPRAY	NASAL	04/30/2025	20.00000
NALTREXONE HCL	50 MG	TABLET	ORAL	08/05/2025	1.11140
NAPROXEN	125 MG/5ML	ORAL SUSP	ORAL	08/21/2025	0.46919
NAPROXEN	250 MG	TABLET	ORAL	04/03/2025	0.06499
NAPROXEN	375 MG	TABLET	ORAL	08/14/2025	0.08962
NAPROXEN	500 MG	TABLET	ORAL	07/17/2025	0.08723
NAPROXEN	375 MG	TABLET DR	ORAL	08/21/2025	1.06932
NAPROXEN	500 MG	TABLET DR	ORAL	07/18/2024	1.30550
NAPROXEN SODIUM	220 MG	CAPSULE	ORAL	11/14/2024	0.16750
NAPROXEN SODIUM	275 MG	TABLET	ORAL	04/03/2025	0.29641
NAPROXEN SODIUM	550 MG	TABLET	ORAL	06/12/2025	0.24160

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NAPROXEN SODIUM	220 MG	TABLET	ORAL	06/26/2025	0.04536
NAPROXEN SODIUM	500 MG	TBMP 24HR	ORAL	06/18/2025	11.42255
NAPROXEN SODIUM	375 MG	TBMP 24HR	ORAL	04/03/2025	11.06479
NAPROXEN SODIUM	750 MG	TBMP 24HR	ORAL	12/05/2024	12.94545
NAPROXEN SODIUM/PSEUDOEPHEDRIN	220-120MG	TAB ER 12H	ORAL	05/22/2024	0.53466
NAPROXEN/ESOMEPRAZOLE MAG	500MG-20MG	TAB IR DR	ORAL	01/30/2024	8.36200
NAPROXEN/ESOMEPRAZOLE MAG	375MG-20MG	TAB IR DR	ORAL	08/21/2025	11.01742
NARATRIPTAN HCL	2.5 MG	TABLET	ORAL	04/03/2025	1.19111
NARATRIPTAN HCL	1 MG	TABLET	ORAL	06/12/2025	6.52780
NATEGLINIDE	120 MG	TABLET	ORAL	08/14/2025	0.37431
NATEGLINIDE	60 MG	TABLET	ORAL	07/10/2025	0.37282
NEBIVOLOL HCL	5 MG	TABLET	ORAL	08/21/2025	0.18760
NEBIVOLOL HCL	2.5 MG	TABLET	ORAL	08/21/2025	0.29490
NEBIVOLOL HCL	10 MG	TABLET	ORAL	08/21/2025	0.28140
NEBIVOLOL HCL	20 MG	TABLET	ORAL	08/21/2025	0.29490
NEEDLELESS DISPENSING PIN		EACH	MISCELL	03/19/2025	1.87131
NEEDLES, BLOOD COLLECTION	20GX1"	DIS NEEDLE	MISCELL	05/06/2022	0.07437
NEEDLES, BLOOD COLLECTION	21 G X 1"	DIS NEEDLE	MISCELL	05/06/2022	0.07437
NEEDLES, BLOOD COLLECTION	22GX1"	DIS NEEDLE	MISCELL	05/06/2022	0.07437
NEEDLES, DISPOSABLE	16 G X 1"	DIS NEEDLE	MISCELL	12/08/2022	0.09484
NEEDLES, DISPOSABLE	16GX1.5"	DIS NEEDLE	MISCELL	06/05/2025	0.16174

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NEEDLES, DISPOSABLE	18GX1"	DIS NEEDLE	MISCELL	06/05/2025	0.06807
NEEDLES, DISPOSABLE	18GX1 1/2"	DIS NEEDLE	MISCELL	09/07/2023	0.02285
NEEDLES, DISPOSABLE	19GX1"	DIS NEEDLE	MISCELL	02/02/2023	0.08784
NEEDLES, DISPOSABLE	19GX1 1/2"	DIS NEEDLE	MISCELL	08/17/2023	0.08784
NEEDLES, DISPOSABLE	20GX1"	DIS NEEDLE	MISCELL	03/27/2025	0.08784
NEEDLES, DISPOSABLE	20GX1 1/2"	DIS NEEDLE	MISCELL	08/17/2023	0.04683
NEEDLES, DISPOSABLE	21 G X 1"	DIS NEEDLE	MISCELL	06/05/2025	0.08784
NEEDLES, DISPOSABLE	21GX1 1/2"	DIS NEEDLE	MISCELL	12/08/2022	0.08784
NEEDLES, DISPOSABLE	21GX2"	DIS NEEDLE	MISCELL	02/02/2023	0.13574
NEEDLES, DISPOSABLE	22GX1"	DIS NEEDLE	MISCELL	05/06/2022	0.02285
NEEDLES, DISPOSABLE	22GX1 1/2"	DIS NEEDLE	MISCELL	03/06/2025	0.06807
NEEDLES, DISPOSABLE	23GX3/4"	DIS NEEDLE	MISCELL	02/02/2023	0.05762
NEEDLES, DISPOSABLE	23GX1"	DIS NEEDLE	MISCELL	09/07/2023	0.02285
NEEDLES, DISPOSABLE	23GX1.25"	DIS NEEDLE	MISCELL	05/06/2022	0.03343
NEEDLES, DISPOSABLE	23GX1 1/2"	DIS NEEDLE	MISCELL	05/06/2022	0.02285
NEEDLES, DISPOSABLE	25GX5/8"	DIS NEEDLE	MISCELL	05/06/2022	0.02285
NEEDLES, DISPOSABLE	25GX1"	DIS NEEDLE	MISCELL	08/31/2023	0.02285
NEEDLES, DISPOSABLE	25GX1 1/2"	DIS NEEDLE	MISCELL	05/06/2022	0.02285
NEEDLES, DISPOSABLE	26GX3/8"	DIS NEEDLE	MISCELL	05/25/2023	0.08707
NEEDLES, DISPOSABLE	26GX1/2"	DIS NEEDLE	MISCELL	02/02/2023	0.05762
NEEDLES, DISPOSABLE	26 G X5/8"	DIS NEEDLE	MISCELL	05/06/2022	0.03343

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NEEDLES, DISPOSABLE	26GX1.5"	DIS NEEDLE	MISCELL	05/06/2022	0.09715
NEEDLES, DISPOSABLE	27GX1/2"	DIS NEEDLE	MISCELL	08/28/2025	0.06807
NEEDLES, DISPOSABLE	27GX1.25"	DIS NEEDLE	MISCELL	05/06/2022	0.03343
NEEDLES, DISPOSABLE	27GX1.5"	DIS NEEDLE	MISCELL	05/06/2022	0.05069
NEEDLES, DISPOSABLE	30 G X1/2"	DIS NEEDLE	MISCELL	05/19/2022	0.04683
NEEDLES, DISPOSABLE	30GX3/4"	DIS NEEDLE	MISCELL	05/06/2022	0.07185
NEEDLES, DISPOSABLE	30GX1"	DIS NEEDLE	MISCELL	06/05/2025	0.29400
NEEDLES, FILTER	18GX1 1/2"	DIS NEEDLE	MISCELL	05/06/2022	0.31698
NEEDLES, SAFETY	25GX5/8"	DIS NEEDLE	MISCELL	02/02/2023	0.14445
NEEDLES, SAFETY	23GX1"	DIS NEEDLE	MISCELL	06/05/2025	0.16357
NEEDLES, SAFETY	27GX1/2"	DIS NEEDLE	MISCELL	05/19/2022	0.17407
NEEDLES, SAFETY	26GX1/2"	DIS NEEDLE	MISCELL	08/10/2023	0.09903
NEEDLES, SAFETY	25GX1"	DIS NEEDLE	MISCELL	09/02/2025	0.31972
NEEDLES, SAFETY	25GX1 1/2"	DIS NEEDLE	MISCELL	09/28/2023	0.17447
NEEDLES, SAFETY	18GX1"	DIS NEEDLE	MISCELL	06/16/2022	0.70752
NEEDLES, SAFETY	18GX1 1/2"	DIS NEEDLE	MISCELL	06/05/2025	0.17407
NEEDLES, SAFETY	19GX1"	DIS NEEDLE	MISCELL	05/06/2022	0.09903
NEEDLES, SAFETY	19GX1 1/2"	DIS NEEDLE	MISCELL	05/06/2022	0.09903
NEEDLES, SAFETY	20GX1"	DIS NEEDLE	MISCELL	06/16/2022	0.70752
NEEDLES, SAFETY	20GX1 1/2"	DIS NEEDLE	MISCELL	06/16/2022	0.70752
NEEDLES, SAFETY	21 G X 1"	DIS NEEDLE	MISCELL	05/06/2022	0.15464

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NEEDLES, SAFETY	21GX1 1/2"	DIS NEEDLE	MISCELL	06/16/2022	0.70752
NEEDLES, SAFETY	22GX1"	DIS NEEDLE	MISCELL	06/16/2022	0.70752
NEEDLES, SAFETY	22GX1 1/2"	DIS NEEDLE	MISCELL	01/04/2024	0.70752
NEEDLES, SAFETY	23GX1 1/2"	DIS NEEDLE	MISCELL	10/10/2024	0.17407
NEEDLES, SAFETY	30 G X1/2"	DIS NEEDLE	MISCELL	03/16/2023	0.17407
NEEDLES, SAFETY	23GX5/8"	DIS NEEDLE	MISCELL	05/19/2022	0.17407
NELARABINE	250MG/50ML	VIAL	INTRAVEN	09/04/2025	6.27304
NEOMYCIN SULFATE	500 MG	TABLET	ORAL	05/01/2025	1.13632
NEOMYCIN/BACIT/P-MYX/HYDROCORT	3.5-10K-1	OINT. (G)	OPHTHALMIC	01/04/2018	3.36600
NEOMYCIN/BACITRACIN/POLYMYXINB	3.5-400-5K	OINT PACK	TOPICAL	04/24/2025	0.04071
NEOMYCIN/BACITRACIN/POLYMYXINB	3.5-400-5K	OINT. (G)	TOPICAL	08/07/2025	0.17976
NEOMYCIN/BACITRACIN/POLYMYXINB	3.5MG-400	OINT. (G)	OPHTHALMIC	04/08/2025	4.50000
NEOMYCIN/POLYMYXIN B/DEXAMETHA	3.5-10K-.1	OINT. (G)	OPHTHALMIC	01/23/2024	4.37428
NEOMYCIN/POLYMYXIN B/DEXAMETHA	0.1 %	DROPS SUSP	OPHTHALMIC	10/26/2021	2.66124
NEOMYCIN/POLYMYXIN B/HYDROCORT	3.5-10K-1	DROPS SUSP	OTIC (EAR)	05/27/2025	4.50177
NEOMYCN/BACITRC/POLYMYX/PRAMOX	3.5-10K-10	OINT. (G)	TOPICAL	12/05/2024	0.42076
NEOSTIGMINE METHYLSULFATE	5 MG/5 ML	SYRINGE	INTRAVEN	08/21/2025	1.98320
NEOSTIGMINE METHYLSULFATE	3 MG/3 ML	SYRINGE	INTRAVEN	06/12/2025	6.39233
NEOSTIGMINE METHYLSULFATE	0.5 MG/ML	VIAL	INTRAVEN	06/18/2025	0.35805
NEOSTIGMINE METHYLSULFATE	1 MG/ML	VIAL	INTRAVEN	03/19/2025	0.28006
NEVIRAPINE	200 MG	TABLET	ORAL	08/28/2025	0.17197

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NEVIRAPINE	400 MG	TAB ER 24H	ORAL	04/03/2025	9.42962
NIACIN	250 MG	CAPSULE ER	ORAL	05/06/2022	0.06164
NIACIN	100 MG	TABLET	ORAL	02/02/2023	0.01461
NIACIN	250 MG	TABLET	ORAL	09/04/2025	0.06559
NIACIN	500 MG	TABLET	ORAL	04/03/2025	0.01974
NIACIN	500 MG	TAB ER 24H	ORAL	04/03/2025	0.24656
NIACIN	750 MG	TAB ER 24H	ORAL	04/08/2025	0.26129
NIACIN	1000 MG	TAB ER 24H	ORAL	04/03/2025	0.49401
NIACIN	250 MG	TABLET ER	ORAL	05/06/2022	0.03209
NIACIN	500 MG	TABLET ER	ORAL	04/03/2025	0.02814
NIACIN	750 MG	TABLET ER	ORAL	04/11/2024	0.09846
NIACIN (INOSITOL NIACINATE)	400(500MG)	CAPSULE	ORAL	11/14/2024	0.06700
NIACINAMIDE	500 MG	TABLET	ORAL	05/22/2024	0.02673
NIACINAMIDE	500 MG	TABLET ER	ORAL	01/09/2025	0.08673
NICARDIPINE HCL	20 MG	CAPSULE	ORAL	05/08/2025	2.23259
NICARDIPINE HCL	30 MG	CAPSULE	ORAL	04/03/2025	2.08980
NICARDIPINE HCL	25 MG/10ML	AMPUL	INTRAVEN	05/06/2022	2.22775
NICARDIPINE HCL	25 MG/10ML	VIAL	INTRAVEN	04/03/2025	1.79989
NICARDIPINE IN NACL, ISO-OSM	20MG/200ML	PIGGYBACK	INTRAVEN	07/24/2025	0.45560
NICARDIPINE IN NACL, ISO-OSM	40MG/200ML	PIGGYBACK	INTRAVEN	07/24/2025	0.72915
NICOTINE	7MG/24HR	PATCH TD24	TRANSDERM	06/18/2025	1.43523

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NICOTINE	14MG/24HR	PATCH TD24	TRANSDERM	03/13/2025	1.53095
NICOTINE	21 MG/24HR	PATCH TD24	TRANSDERM	06/18/2025	1.43523
NICOTINE POLACRILEX	4 MG	LOZNG MINI	BUCCAL	08/14/2025	0.48845
NICOTINE POLACRILEX	2 MG	LOZNG MINI	BUCCAL	08/21/2025	0.48845
NICOTINE POLACRILEX	2 MG	GUM	BUCCAL	07/24/2025	0.10148
NICOTINE POLACRILEX	4 MG	GUM	BUCCAL	07/31/2025	0.38519
NICOTINE POLACRILEX	4 MG	LOZENGE	BUCCAL	07/08/2022	0.34871
NICOTINE POLACRILEX	2 MG	LOZENGE	BUCCAL	06/18/2025	0.49275
NIFEDIPINE	10 MG	CAPSULE	ORAL	04/03/2025	0.71047
NIFEDIPINE	20 MG	CAPSULE	ORAL	04/03/2025	1.86622
NIFEDIPINE	30 MG	TAB ER 24	ORAL	04/03/2025	0.14494
NIFEDIPINE	60 MG	TAB ER 24	ORAL	04/03/2025	0.19010
NIFEDIPINE	90 MG	TAB ER 24	ORAL	07/17/2025	0.32951
NIFEDIPINE	30 MG	TABLET ER	ORAL	03/19/2025	0.33125
NIFEDIPINE	60 MG	TABLET ER	ORAL	04/03/2025	0.26800
NIFEDIPINE	90 MG	TABLET ER	ORAL	04/03/2025	0.46900
NILUTAMIDE	150 MG	TABLET	ORAL	10/18/2021	115.43686
NIMODIPINE	30 MG	CAPSULE	ORAL	01/02/2025	2.67828
NISOLDIPINE	8.5 MG	TAB ER 24H	ORAL	04/03/2025	7.72188
NISOLDIPINE	17 MG	TAB ER 24H	ORAL	10/12/2023	6.56146
NISOLDIPINE	34 MG	TAB ER 24H	ORAL	05/06/2022	6.80314

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NITAZOXANIDE	500 MG	TABLET	ORAL	03/13/2025	78.65953
NITISINONE	2 MG	CAPSULE	ORAL	04/24/2025	60.50319
NITISINONE	5 MG	CAPSULE	ORAL	04/24/2025	151.25840
NITISINONE	10 MG	CAPSULE	ORAL	04/24/2025	302.51713
NITISINONE	20 MG	CAPSULE	ORAL	01/18/2024	502.69331
NITROFURANTOIN	25 MG/5 ML	ORAL SUSP	ORAL	05/01/2025	2.12769
NITROFURANTOIN MACROCRYSTAL	100 MG	CAPSULE	ORAL	07/17/2025	0.48548
NITROFURANTOIN MACROCRYSTAL	25 MG	CAPSULE	ORAL	08/28/2025	2.87272
NITROFURANTOIN MACROCRYSTAL	50 MG	CAPSULE	ORAL	08/21/2025	0.25420
NITROFURANTOIN MONOHYD/M-CRYST	100 MG	CAPSULE	ORAL	05/06/2025	0.23132
NITROGLYCERIN	0.4% (W/W)	OINT. (G)	RECTAL	02/11/2025	12.68520
NITROGLYCERIN	400MCG/SPR	SPRAY	TRANSLING	06/18/2025	21.04550
NITROGLYCERIN	0.3 MG	TAB SUBL	SUBLINGUAL	02/27/2025	0.13333
NITROGLYCERIN	0.4 MG	TAB SUBL	SUBLINGUAL	04/15/2025	0.09245
NITROGLYCERIN	0.6 MG	TAB SUBL	SUBLINGUAL	02/27/2025	0.13333
NITROGLYCERIN	0.4MG/HR	PATCH TD24	TRANSDERM	04/03/2025	1.03919
NITROGLYCERIN	0.6MG/HR	PATCH TD24	TRANSDERM	04/03/2025	1.66964
NITROGLYCERIN	0.1MG/HR	PATCH TD24	TRANSDERM	08/01/2022	16.75000
NITROGLYCERIN	0.2MG/HR	PATCH TD24	TRANSDERM	07/14/2022	0.89916
NITROPRUSSIDE IN 0.9% NACL	50MG/100ML	VIAL	INTRAVEN	04/24/2025	0.67817
NITROPRUSSIDE IN 0.9% NACL	20MG/100ML	VIAL	INTRAVEN	04/24/2025	0.52876

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NITROPRUSSIDE SODIUM	25 MG/ML	VIAL	INTRAVEN	09/12/2023	7.08000
NIZATIDINE	150 MG	CAPSULE	ORAL	04/03/2025	1.79404
NORELGESTROMIN/ETHIN.ESTRADIOL	150-35/24H	PATCH TDWK	TRANSDERM	02/22/2024	41.46125
NOREPINEPHRINE BIT/0.9 % NACL	4MG/250ML	PLAST. BAG	INTRAVEN	09/26/2024	0.18760
NOREPINEPHRINE BIT/0.9 % NACL	8 MG/250ML	PLAST. BAG	INTRAVEN	09/26/2024	0.24120
NOREPINEPHRINE BIT/0.9 % NACL	16MG/250ML	PLAST. BAG	INTRAVEN	07/18/2024	0.33098
NOREPINEPHRINE BITARTRATE	1 MG/ML	VIAL	INTRAVEN	07/31/2025	0.92293
NORETH-ETHINYL ESTRADIOL/IRON	0.4-35(21)	TAB CHEW	ORAL	05/08/2025	1.55344
NORETH-ETHINYL ESTRADIOL/IRON	0.8-25(24)	TAB CHEW	ORAL	01/07/2025	2.22217
NORETHINDRONE	0.35 MG	TABLET	ORAL	06/17/2025	0.07339
NORETHINDRONE AC/ETH ESTRADIOL	1.5-0.03MG	TABLET	ORAL	05/29/2025	0.59768
NORETHINDRONE AC/ETH ESTRADIOL	1MG-20MCG	TABLET	ORAL	04/03/2025	0.46623
NORETHINDRONE AC/ETH ESTRADIOL	1MG-5MCG	TABLET	ORAL	05/06/2022	1.43678
NORETHINDRONE AC/ETH ESTRADIOL	0.5MG-2.5	TABLET	ORAL	08/21/2025	2.80139
NORETHINDRONE ACETATE	5 MG	TABLET	ORAL	04/15/2025	0.22548
NORETHINDRONE-E.ESTRADIOL-IRON	1MG-20(24)	CAPSULE	ORAL	04/03/2025	1.57019
NORETHINDRONE-E.ESTRADIOL-IRON	1.5-30(21)	TABLET	ORAL	08/21/2025	0.13560
NORETHINDRONE-E.ESTRADIOL-IRON	1MG-20(21)	TABLET	ORAL	02/27/2025	0.13623
NORETHINDRONE-E.ESTRADIOL-IRON	5-7-9-7	TABLET	ORAL	04/03/2025	1.92785
NORETHINDRONE-E.ESTRADIOL-IRON	1MG-20(24)	TABLET	ORAL	08/21/2025	0.42226
NORETHINDRONE-E.ESTRADIOL-IRON	1MG-20(24)	TAB CHEW	ORAL	08/28/2025	1.16373

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New Hampshire Medicaid Program
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NORETHINDRONE-ETHIN. ESTRADIOL	0.4-0.035	TABLET	ORAL	04/03/2025	0.24662
NORETHINDRONE-ETHIN. ESTRADIOL	0.5-0.035	TABLET	ORAL	04/03/2025	1.32628
NORETHINDRONE-ETHIN. ESTRADIOL	1 MG-35MCG	TABLET	ORAL	08/21/2025	0.52723
NORETHINDRONE-ETHIN. ESTRADIOL	7 DAYS X 3	TABLET	ORAL	04/03/2025	0.78430
NORETHINDRONE-ETHIN. ESTRADIOL	7-9-5	TABLET	ORAL	05/31/2023	1.74918
NORETHINDRONE-ETHIN. ESTRADIOL	1 MG-35MCG	TABLET	ORAL	07/26/2018	0.52164
NORGESTIMATE-ETHINYL ESTRADIOL	0.25-0.035	TABLET	ORAL	04/03/2025	0.14580
NORGESTIMATE-ETHINYL ESTRADIOL	7DAYSX3 28	TABLET	ORAL	08/15/2024	0.14676
NORGESTIMATE-ETHINYL ESTRADIOL	7DAYSX3 LO	TABLET	ORAL	08/07/2025	0.48001
NORGESTREL-ETHINYL ESTRADIOL	0.3-0.03MG	TABLET	ORAL	11/22/2023	0.57891
NORTRIPTYLINE HCL	10 MG	CAPSULE	ORAL	04/03/2025	0.08583
NORTRIPTYLINE HCL	25 MG	CAPSULE	ORAL	08/28/2025	0.11725
NORTRIPTYLINE HCL	50 MG	CAPSULE	ORAL	04/03/2025	0.14360
NORTRIPTYLINE HCL	75 MG	CAPSULE	ORAL	04/03/2025	0.19891
NORTRIPTYLINE HCL	10 MG/5 ML	SOLUTION	ORAL	07/23/2024	0.30180
NUT.TX FOR PKU WITH IRON NO.30	63.2 G-297	PACK ER GR	ORAL	05/30/2024	30.85250
NUT.TX FOR PKU WITH IRON NO.30	62.2 G-294	PACK ER GR	ORAL	05/30/2024	23.70375
NUTRITIONAL TX FOR PKU NO.56	10G-170/60	BAR	ORAL	12/03/2024	15.80250
NUTRITIONAL TX FOR PKU NO.56	10G-177/60	BAR	ORAL	05/30/2024	15.80250
NYSTATIN	100000/ML	ORAL SUSP	ORAL	04/30/2025	0.05791
NYSTATIN	500K UNIT	TABLET	ORAL	04/03/2025	0.60474

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
NYSTATIN	100000/G	CREAM (G)	TOPICAL	04/22/2025	0.12947
NYSTATIN	100000/G	OINT. (G)	TOPICAL	04/03/2025	0.29123
NYSTATIN	100000/G	POWDER	TOPICAL	08/28/2025	0.22869
NYSTATIN/TRIAMCINOLONE ACET	100000-0.1	CREAM (G)	TOPICAL	06/26/2025	0.21105
NYSTATIN/TRIAMCINOLONE ACET	100000-0.1	OINT. (G)	TOPICAL	07/03/2024	0.18983
OCTREOTIDE ACETATE	50 MCG/ML	AMPUL	INJECTION	10/17/2024	14.08071
OCTREOTIDE ACETATE	500 MCG/ML	AMPUL	INJECTION	01/12/2023	135.36970
OCTREOTIDE ACETATE	200 MCG/ML	VIAL	INJECTION	04/18/2024	8.31360
OCTREOTIDE ACETATE	1000MCG/ML	VIAL	INJECTION	03/21/2023	28.70000
OCTREOTIDE ACETATE	50 MCG/ML	VIAL	INJECTION	04/24/2025	4.83252
OCTREOTIDE ACETATE	500 MCG/ML	VIAL	INJECTION	06/03/2024	11.79420
OCTREOTIDE ACETATE	100 MCG/ML	VIAL	INJECTION	04/03/2025	3.80160
OCTREOTIDE ACETATE,MI-SPHERES	10 MG	VIAL	INTRAMUSC	08/19/2025	216.44300
OCTREOTIDE ACETATE,MI-SPHERES	20 MG	VIAL	INTRAMUSC	01/23/2025	4495.12213
OCTREOTIDE ACETATE,MI-SPHERES	30 MG	VIAL	INTRAMUSC	10/10/2024	6731.10530
OFLOXACIN	0.3 %	DROPS	OPHTHALMIC	08/28/2025	1.67634
OFLOXACIN	0.3 %	DROPS	OTIC (EAR)	08/21/2025	1.22476
OLANZAPINE	7.5 MG	TABLET	ORAL	04/03/2025	0.10338
OLANZAPINE	10 MG	TABLET	ORAL	04/03/2025	0.11862
OLANZAPINE	5 MG	TABLET	ORAL	05/13/2025	0.05076
OLANZAPINE	2.5 MG	TABLET	ORAL	05/13/2025	0.05826

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OLANZAPINE	15 MG	TABLET	ORAL	04/24/2025	0.13277
OLANZAPINE	20 MG	TABLET	ORAL	04/03/2025	0.19564
OLANZAPINE	5 MG	TAB RAPDIS	ORAL	04/03/2025	0.32205
OLANZAPINE	10 MG	TAB RAPDIS	ORAL	04/03/2025	0.53198
OLANZAPINE	15 MG	TAB RAPDIS	ORAL	04/03/2025	0.92013
OLANZAPINE	20 MG	TAB RAPDIS	ORAL	04/03/2025	0.99651
OLANZAPINE	10 MG	VIAL	INTRAMUSC	09/04/2025	15.93900
OLANZAPINE/FLUOXETINE HCL	6MG-25MG	CAPSULE	ORAL	04/03/2025	11.86643
OLANZAPINE/FLUOXETINE HCL	6MG-50MG	CAPSULE	ORAL	05/30/2024	14.08015
OLANZAPINE/FLUOXETINE HCL	12MG-25MG	CAPSULE	ORAL	04/20/2023	22.91800
OLANZAPINE/FLUOXETINE HCL	12MG-50MG	CAPSULE	ORAL	03/11/2024	9.99200
OLANZAPINE/FLUOXETINE HCL	3 MG-25 MG	CAPSULE	ORAL	04/20/2023	6.50790
OLIVE OIL		OIL	MISCELL	11/26/2024	0.02363
OLMESARTAN MEDOXOMIL	5 MG	TABLET	ORAL	08/28/2025	0.14159
OLMESARTAN MEDOXOMIL	20 MG	TABLET	ORAL	06/12/2025	0.16795
OLMESARTAN MEDOXOMIL	40 MG	TABLET	ORAL	05/22/2025	0.17063
OLMESARTAN/AMLODIPIN/HCTHIAZID	20-5-12.5	TABLET	ORAL	04/03/2025	2.33190
OLMESARTAN/AMLODIPIN/HCTHIAZID	40-5-12.5	TABLET	ORAL	04/03/2025	2.17750
OLMESARTAN/AMLODIPIN/HCTHIAZID	40-5-25 MG	TABLET	ORAL	12/14/2023	1.92781
OLMESARTAN/AMLODIPIN/HCTHIAZID	40-10-12.5	TABLET	ORAL	08/21/2025	1.94479
OLMESARTAN/AMLODIPIN/HCTHIAZID	40-10-25MG	TABLET	ORAL	08/21/2025	2.20698

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OLMESARTAN/HYDROCHLOROTHIAZIDE	20-12.5 MG	TABLET	ORAL	05/27/2025	0.10836
OLMESARTAN/HYDROCHLOROTHIAZIDE	40-12.5 MG	TABLET	ORAL	07/10/2025	0.25639
OLMESARTAN/HYDROCHLOROTHIAZIDE	40 MG-25MG	TABLET	ORAL	07/10/2025	0.25639
OLOPATADINE HCL	0.1 %	DROPS	OPHTHALMIC	01/28/2025	1.00776
OLOPATADINE HCL	0.6 %	SPRAY/PUMP	NASAL	04/03/2025	1.32902
OMEGA-3 ACID ETHYL ESTERS	1 G	CAPSULE	ORAL	02/11/2025	0.14416
OMEGA-3 FATTY ACIDS	1000 MG	CAPSULE	ORAL	09/03/2024	0.12308
OMEGA-3 FATTY ACIDS/FISH OIL	300-1000MG	CAPSULE	ORAL	06/17/2025	0.03601
OMEGA-3 FATTY ACIDS/FISH OIL	360-1200MG	CAPSULE	ORAL	12/14/2023	0.03733
OMEGA-3/DHA/EPA/FISH OIL	300-1000MG	CAPSULE	ORAL	09/04/2025	0.06187
OMEGA-3/DHA/EPA/FISH OIL	1200 MG	CAPSULE	ORAL	08/03/2023	0.12831
OMEGA-3/DHA/EPA/FISH OIL	1000 MG	CAPSULE	ORAL	07/17/2025	0.04040
OMEGA-3/DHA/EPA/FISH OIL	60 MG-90MG	CAPSULE	ORAL	01/09/2025	0.02834
OMEGA-3/DHA/EPA/FISH OIL	200-300 MG	CAPSULE	ORAL	07/18/2024	0.08275
OMEGA-3/DHA/EPA/FISH OIL	300-1000MG	CAPSULE	ORAL	07/03/2024	0.11556
OMEGA-3/DHA/EPA/FISH OIL	300-1000MG	CAPSULE DR	ORAL	02/20/2025	0.13052
OMEGA-3S/DHA/EPA/FISH OIL/D3	360MG-1000	CAPSULE	ORAL	09/26/2024	0.10563
OMEPRAZOLE	20 MG	CAPSULE DR	ORAL	05/27/2025	0.02879
OMEPRAZOLE	10 MG	CAPSULE DR	ORAL	05/08/2025	0.10363
OMEPRAZOLE	40 MG	CAPSULE DR	ORAL	08/21/2025	0.06788
OMEPRAZOLE	20 MG	TABLET DR	ORAL	04/03/2025	0.48080

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OMEPRAZOLE MAGNESIUM	20 MG	CAPSULE DR	ORAL	02/06/2025	0.41380
OMEPRAZOLE MAGNESIUM	20 MG	TABLET DR	ORAL	04/03/2025	1.10295
OMEPRAZOLE/SODIUM BICARBONATE	20MG-1.1G	CAPSULE	ORAL	06/03/2024	0.53525
OMEPRAZOLE/SODIUM BICARBONATE	40MG-1.1G	CAPSULE	ORAL	04/03/2025	0.99115
OMEPRAZOLE/SODIUM BICARBONATE	20-1680MG	PACKET	ORAL	06/03/2025	10.60920
OMEPRAZOLE/SODIUM BICARBONATE	40-1680MG	PACKET	ORAL	08/19/2025	13.77777
ONDANSETRON	4 MG	TAB RAPDIS	ORAL	05/27/2025	0.14634
ONDANSETRON	8 MG	TAB RAPDIS	ORAL	08/21/2025	0.27470
ONDANSETRON HCL	4 MG/5 ML	SOLUTION	ORAL	12/26/2023	0.28488
ONDANSETRON HCL	4 MG	TABLET	ORAL	08/21/2025	0.06253
ONDANSETRON HCL	8 MG	TABLET	ORAL	08/21/2025	0.09380
ONDANSETRON HCL	2 MG/ML	VIAL	INTRAVEN	04/10/2025	0.12060
ONDANSETRON HCL/PF	4 MG/2 ML	VIAL	INJECTION	04/10/2025	0.30150
ORANGE OIL		OIL	MISCELL	05/06/2022	0.48240
ORPHENADRINE CITRATE	100 MG	TABLET ER	ORAL	04/03/2025	0.63127
ORPHENADRINE CITRATE	30 MG/ML	VIAL	INJECTION	08/22/2024	8.89200
ORPHENADRINE/ASPIRIN/CAFFEINE	50-770-60	TABLET	ORAL	05/06/2022	20.47500
OSELTAMIVIR PHOSPHATE	75 MG	CAPSULE	ORAL	08/21/2025	1.36948
OSELTAMIVIR PHOSPHATE	30 MG	CAPSULE	ORAL	08/21/2025	1.29042
OSELTAMIVIR PHOSPHATE	45 MG	CAPSULE	ORAL	08/21/2025	1.29042
OSELTAMIVIR PHOSPHATE	6 MG/ML	SUSP RECON	ORAL	08/21/2025	0.21931

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OSTOMY SUPPLY		LIQUID	TOPICAL	07/27/2022	0.04561
OVULATION, PREGNANCY TEST KIT		COMBO. PKG	MISCELL	07/16/2024	1.37360
OXACILLIN SODIUM	1 G	VIAL	INJECTION	04/03/2025	9.03960
OXACILLIN SODIUM	10 G	VIAL	INJECTION	05/31/2023	47.15000
OXACILLIN SODIUM	2 G	VIAL	INJECTION	04/03/2025	9.83250
OXALIPLATIN	50 MG	VIAL	INTRAVEN	04/01/2025	578.40750
OXALIPLATIN	50 MG/10ML	VIAL	INTRAVEN	09/04/2025	1.07200
OXALIPLATIN	100MG/20ML	VIAL	INTRAVEN	03/19/2025	0.78608
OXAPROZIN	600 MG	TABLET	ORAL	04/03/2025	1.19367
OXAZEPAM	10 MG	CAPSULE	ORAL	06/17/2025	0.77177
OXAZEPAM	15 MG	CAPSULE	ORAL	09/04/2025	0.97452
OXAZEPAM	30 MG	CAPSULE	ORAL	08/07/2025	1.40961
OXCARBAZEPINE	300 MG/5ML	ORAL SUSP	ORAL	05/13/2025	0.20406
OXCARBAZEPINE	300 MG	TABLET	ORAL	04/01/2025	0.11308
OXCARBAZEPINE	600 MG	TABLET	ORAL	09/04/2025	0.34224
OXCARBAZEPINE	150 MG	TABLET	ORAL	08/14/2025	0.06713
OXCARBAZEPINE	150 MG	TAB ER 24H	ORAL	08/28/2025	7.09308
OXCARBAZEPINE	300 MG	TAB ER 24H	ORAL	08/28/2025	9.31092
OXCARBAZEPINE	600 MG	TAB ER 24H	ORAL	08/28/2025	14.91651
OXICONAZOLE NITRATE	1 %	CREAM (G)	TOPICAL	04/03/2025	5.18520
OXYBUTYNIN	3.9MG/24HR	PATCH TD 4	TRANSDERM	05/06/2022	3.11149

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OXYBUTYNIN CHLORIDE	5 MG	TAB ER 24	ORAL	06/12/2025	0.15783
OXYBUTYNIN CHLORIDE	10 MG	TAB ER 24	ORAL	04/03/2025	0.19819
OXYBUTYNIN CHLORIDE	15 MG	TAB ER 24	ORAL	04/03/2025	0.28127
OXYBUTYNIN CHLORIDE	5 MG/5 ML	SYRUP	ORAL	04/08/2025	0.02494
OXYBUTYNIN CHLORIDE	5 MG	TABLET	ORAL	09/04/2025	0.08399
OXYCODONE HCL	5 MG	CAPSULE	ORAL	04/03/2025	1.10014
OXYCODONE HCL	5 MG	TABLET ORL	ORAL	02/13/2025	16.16087
OXYCODONE HCL	30 MG	TABLET ORL	ORAL	10/17/2024	24.44085
OXYCODONE HCL	5 MG/5 ML	SOLUTION	ORAL	08/26/2025	0.04100
OXYCODONE HCL	20 MG/ML	ORAL CONC	ORAL	04/03/2025	5.54186
OXYCODONE HCL	5 MG	TABLET	ORAL	04/22/2025	0.07693
OXYCODONE HCL	10 MG	TABLET	ORAL	09/04/2025	0.20073
OXYCODONE HCL	20 MG	TABLET	ORAL	07/17/2025	0.40380
OXYCODONE HCL	15 MG	TABLET	ORAL	09/04/2025	0.06612
OXYCODONE HCL	30 MG	TABLET	ORAL	04/24/2025	0.10017
OXYCODONE HCL/ACETAMINOPHEN	10-300MG/5	SOLUTION	ORAL	03/28/2024	8.19000
OXYCODONE HCL/ACETAMINOPHEN	5 MG-325MG	TABLET	ORAL	08/21/2025	0.05012
OXYCODONE HCL/ACETAMINOPHEN	2.5-325 MG	TABLET	ORAL	10/13/2022	0.72729
OXYCODONE HCL/ACETAMINOPHEN	7.5-325 MG	TABLET	ORAL	08/26/2025	0.16953
OXYCODONE HCL/ACETAMINOPHEN	10MG-325MG	TABLET	ORAL	04/01/2025	0.24460
OXYMETAZOLINE HCL	0.05 %	MIST	NASAL	06/26/2025	0.31167

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
OXYMETAZOLINE HCL	0.05 %	SPRAY	NASAL	08/28/2025	0.12819
OXYMORPHONE HCL	5 MG	TABLET	ORAL	04/03/2025	0.52952
OXYMORPHONE HCL	10 MG	TABLET	ORAL	08/05/2025	0.65415
OXYTOCIN	10 UNIT/ML	VIAL	INJECTION	06/13/2024	0.81472
PACLITAXEL	6 MG/ML	VIAL	INTRAVEN	04/17/2025	0.63087
PACLITAXEL PROTEIN-BOUND	100 MG	VIAL	INTRAVEN	08/21/2025	1348.26450
PALIPERIDONE	3 MG	TAB ER 24	ORAL	09/26/2023	1.65240
PALIPERIDONE	6 MG	TAB ER 24	ORAL	05/28/2024	1.74436
PALIPERIDONE	9 MG	TAB ER 24	ORAL	06/18/2025	2.85428
PALIPERIDONE	1.5 MG	TAB ER 24	ORAL	04/03/2025	2.73240
PALIPERIDONE PALMITATE	39MG/0.25	SYRINGE	INTRAMUSC	07/10/2025	2437.49100
PALIPERIDONE PALMITATE	78MG/0.5ML	SYRINGE	INTRAMUSC	07/10/2025	2437.63450
PALIPERIDONE PALMITATE	117MG/0.75	SYRINGE	INTRAMUSC	07/10/2025	2437.66867
PALIPERIDONE PALMITATE	156 MG/ML	SYRINGE	INTRAMUSC	07/10/2025	2437.75750
PALIPERIDONE PALMITATE	234MG/1.5	SYRINGE	INTRAMUSC	07/17/2025	2437.70283
PALONOSETRON HCL	0.25MG/5ML	SYRINGE	INTRAVEN	12/08/2022	10.92500
PALONOSETRON HCL	0.25MG/5ML	VIAL	INTRAVEN	08/07/2025	1.04788
PAMIDRONATE DISODIUM	30MG/10ML	VIAL	INTRAVEN	04/11/2024	3.56268
PAMIDRONATE DISODIUM	90 MG/10ML	VIAL	INTRAVEN	03/21/2024	5.24040
PANTOPRAZOLE SODIUM	40 MG	GRANPKT DR	ORAL	05/22/2025	8.76000
PANTOPRAZOLE SODIUM	40 MG	TABLET DR	ORAL	05/13/2025	0.02692

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PANTOPRAZOLE SODIUM	20 MG	TABLET DR	ORAL	04/01/2025	0.03461
PANTOPRAZOLE SODIUM	40 MG	VIAL	INTRAVEN	08/14/2025	2.41200
PAPAVERINE HCL	30 MG/ML	VIAL	INJECTION	01/30/2025	12.37500
PAPAYA		TABLET	ORAL	07/27/2022	0.07625
PARAFFIN		WAX	MISCELL	05/06/2022	0.16574
PARICALCITOL	1 MCG	CAPSULE	ORAL	04/03/2025	1.78443
PARICALCITOL	2 MCG	CAPSULE	ORAL	06/06/2023	4.50384
PARICALCITOL	4 MCG	CAPSULE	ORAL	05/06/2022	23.28953
PARICALCITOL	5 MCG/ML	VIAL	INTRAVEN	04/04/2024	3.26726
PARICALCITOL	2 MCG/ML	VIAL	INTRAVEN	04/20/2023	5.01600
PAROXETINE HCL	10 MG/5 ML	ORAL SUSP	ORAL	03/24/2025	1.24782
PAROXETINE HCL	10 MG	TABLET	ORAL	05/27/2025	0.03675
PAROXETINE HCL	20 MG	TABLET	ORAL	04/03/2025	0.07519
PAROXETINE HCL	30 MG	TABLET	ORAL	05/04/2023	0.09399
PAROXETINE HCL	40 MG	TABLET	ORAL	05/27/2025	0.06961
PAROXETINE HCL	25 MG	TAB ER 24H	ORAL	04/03/2025	0.75085
PAROXETINE HCL	12.5 MG	TAB ER 24H	ORAL	12/26/2024	0.86296
PAROXETINE HCL	37.5 MG	TAB ER 24H	ORAL	04/03/2025	0.97597
PAROXETINE MESYLATE	7.5 MG	CAPSULE	ORAL	08/01/2022	4.35102
PAZOPANIB HCL	200 MG	TABLET	ORAL	08/05/2025	68.25287
PEANUT OIL		OIL	MISCELL	05/06/2022	0.06045

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PECTIN	2.8 MG	LOZENGE	MUCOUS MEM	12/20/2023	0.05539
PED MVIT A,C,D3 NO.21/FLUORIDE	0.25 MG/ML	DROPS	ORAL	04/24/2025	0.26733
PEDI MULTIVIT NO.25/FOLIC ACID	300 MCG	TAB CHEW	ORAL	05/06/2022	0.03209
PEDI MV NO.207/FERROUS SULFATE	11 MG/ML	DROPS	ORAL	04/03/2025	0.28274
PEDIATRIC MULTIVITAMIN NO.17		TAB CHEW	ORAL	04/03/2025	0.04221
PEDIATRIC MULTIVITAMIN NO.192	250-50/ML	DROPS	ORAL	04/03/2025	0.34545
PEG3350/SOD SUL/NACL/KCL/ASB/C	7.5-2.691G	POWD PACK	ORAL	10/26/2021	65.45650
PEG3350/SOD SULF,BICARB,CL/KCL	236-22.74G	SOLN RECON	ORAL	04/03/2025	0.00991
PEMETREXED DISODIUM	500 MG	VIAL	INTRAVEN	05/22/2025	51.23873
PEMETREXED DISODIUM	100 MG	VIAL	INTRAVEN	05/22/2025	13.18900
PEMETREXED DISODIUM	1000 MG	VIAL	INTRAVEN	10/10/2024	153.39125
PEMETREXED DISODIUM	750 MG	VIAL	INTRAVEN	08/03/2023	3290.85475
PEMETREXED DISODIUM	25 MG/ML	VIAL	INTRAVEN	05/22/2025	4.20905
PEN NEEDLE, DIABETIC	29 G X1/2"	DIS NEEDLE	MISCELL	03/19/2025	0.12770
PEN NEEDLE, DIABETIC	30 GX5/16"	DIS NEEDLE	MISCELL	03/23/2023	0.07283
PEN NEEDLE, DIABETIC	31 GX5/16"	DIS NEEDLE	MISCELL	05/08/2025	0.05293
PEN NEEDLE, DIABETIC	31 G X1/4"	DIS NEEDLE	MISCELL	03/19/2025	0.12770
PEN NEEDLE, DIABETIC	31 GX3/16"	DIS NEEDLE	MISCELL	06/05/2025	0.05293
PEN NEEDLE, DIABETIC	32 GX 1/4"	DIS NEEDLE	MISCELL	07/03/2025	0.16871
PEN NEEDLE, DIABETIC	32 GX5/16"	DIS NEEDLE	MISCELL	01/21/2025	0.15544
PEN NEEDLE, DIABETIC	32GX 5/32"	DIS NEEDLE	MISCELL	08/21/2025	0.05199

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PEN NEEDLE, DIABETIC	32 GX3/16"	DIS NEEDLE	MISCELL	03/19/2025	0.12770
PEN NEEDLE, DIABETIC	33 GX5/32"	DIS NEEDLE	MISCELL	07/17/2025	0.27323
PEN NEEDLE, DIABETIC	33 GX3/16"	DIS NEEDLE	MISCELL	04/24/2025	0.39188
PEN NEEDLE, DIABETIC	33 G X1/4"	DIS NEEDLE	MISCELL	11/26/2024	0.39188
PEN NEEDLE, DIABETIC	30 GX3/16"	DIS NEEDLE	MISCELL	03/09/2023	0.07283
PEN NEEDLE, DIABETIC	31G X5/32"	DIS NEEDLE	MISCELL	02/29/2024	0.83676
PEN NEEDLE, DIABETIC, SAFETY	29GX 5/16"	DIS NEEDLE	MISCELL	09/22/2022	0.62143
PEN NEEDLE, DIABETIC, SAFETY	29G X3/16"	DIS NEEDLE	MISCELL	09/22/2022	0.62143
PEN NEEDLE, DIABETIC, SAFETY	31 GX3/16"	DIS NEEDLE	MISCELL	05/05/2025	0.05293
PEN NEEDLE, DIABETIC, SAFETY	30 GX3/16"	DIS NEEDLE	MISCELL	06/26/2025	0.40146
PEN NEEDLE, DIABETIC, SAFETY	30 GX5/16"	DIS NEEDLE	MISCELL	06/26/2025	0.40146
PEN NEEDLE, DIABETIC, SAFETY	31 GX5/16"	DIS NEEDLE	MISCELL	05/01/2025	0.66357
PEN NEEDLE, DIABETIC, SAFETY	31 G X1/4"	DIS NEEDLE	MISCELL	05/01/2025	0.56950
PEN NEEDLE, DIABETIC, SAFETY	32GX 5/32"	DIS NEEDLE	MISCELL	06/26/2025	0.78330
PEN NEEDLE, DIABETIC, SAFETY	31G X5/32"	DIS NEEDLE	MISCELL	08/24/2023	1.00379
PEN NEEDLE, DIABETIC,DISP UNIT	32GX 5/32"	DIS NEEDLE	MISCELL	07/16/2024	0.05431
PENCICLOVIR	1 %	CREAM (G)	TOPICAL	05/14/2025	90.76375
PENICILLAMINE	250 MG	CAPSULE	ORAL	04/01/2025	4.18112
PENICILLAMINE	250 MG	TABLET	ORAL	09/05/2024	40.11563
PENICILLIN G POTASSIUM	20MM UNIT	VIAL	INJECTION	05/29/2025	25.81411
PENICILLIN G POTASSIUM	5MM UNIT	VIAL	INJECTION	10/26/2021	3.16800

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PENICILLIN V POTASSIUM	250 MG	TABLET	ORAL	05/14/2025	0.08174
PENICILLIN V POTASSIUM	500 MG	TABLET	ORAL	04/30/2025	0.08230
PENTAMIDINE ISETHIONATE	300 MG	VIAL	INJECTION	04/03/2025	137.07940
PENTAMIDINE ISETHIONATE	300 MG	VIAL-NEB	INHALATION	04/03/2025	139.06175
PENTAZOCINE HCL/NALOXONE HCL	50MG-0.5MG	TABLET	ORAL	04/03/2025	3.77414
PENTOBARBITAL SODIUM	50 MG/ML	VIAL	INJECTION	05/06/2022	43.95508
PENTOXIFYLLINE	400 MG	TABLET ER	ORAL	09/04/2025	0.49057
PEPPERMINT OIL		OIL	MISCELL	07/27/2022	0.88172
PERINDOPRIL ERBUMINE	4 MG	TABLET	ORAL	05/06/2022	1.48251
PERINDOPRIL ERBUMINE	2 MG	TABLET	ORAL	05/06/2022	1.27146
PERIT. DIALYSIS NO.6-DEX 1.5 %	2.5MEQ(CA)	IP SOLN	INTRAPERIT	12/05/2024	0.00395
PERITON.DIALYSIS 7-DEXTR 2.5 %	2.5MEQ(CA)	IP SOLN	INTRAPERIT	01/30/2025	0.00416
PERITON.DIALYSIS 8-DEXT 4.25 %	2.5MEQ(CA)	IP SOLN	INTRAPERIT	04/10/2025	0.00426
PERMETHRIN	5 %	CREAM (G)	TOPICAL	04/03/2025	0.39932
PERMETHRIN	1 %	LIQUID	TOPICAL	10/24/2024	0.09436
PERPHENAZINE	16 MG	TABLET	ORAL	04/03/2025	0.99736
PERPHENAZINE	2 MG	TABLET	ORAL	08/28/2025	0.52032
PERPHENAZINE	4 MG	TABLET	ORAL	07/17/2025	0.42733
PERPHENAZINE	8 MG	TABLET	ORAL	04/03/2025	0.53587
PETROLATUM, YELLOW	100 %	JELLY (G)	MISCELL	07/30/2024	0.05806
PETROLATUM,WHITE		JELLY (G)	TOPICAL	06/20/2024	0.00468

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PETROLATUM,WHITE		OINT PACK	TOPICAL	10/05/2023	0.00855
PETROLATUM,WHITE		OINT. (G)	TOPICAL	02/02/2023	0.00446
PETROLATUM,WHITE	41 %	OINT. (G)	TOPICAL	02/29/2024	0.02174
PETROLATUM,WHITE	44 %	OINT. (G)	TOPICAL	05/06/2022	0.02212
PETROLATUM,WHITE	42 %	OINT. (G)	TOPICAL	04/03/2025	0.03385
PHARMACY COMPOUNDING ACCESSORY		EACH	MISCELL	05/06/2022	1.18590
PHENAZOPYRIDINE HCL	200 MG	TABLET	ORAL	03/04/2025	0.16779
PHENAZOPYRIDINE HCL	95 MG	TABLET	ORAL	09/05/2024	0.06811
PHENAZOPYRIDINE HCL	99.5 MG	TABLET	ORAL	07/17/2025	0.20524
PHENDIMETRAZINE TARTRATE	35 MG	TABLET	ORAL	07/17/2025	0.17180
PHENELZINE SULFATE	15 MG	TABLET	ORAL	06/17/2025	0.70900
PHENOL	1.4 %	SPRAY	MUCOUS MEM	07/24/2025	0.02627
PHENOL	1.5 %	LIQUID	TOPICAL	04/22/2025	0.55172
PHENOXYBENZAMINE HCL	10 MG	CAPSULE	ORAL	12/05/2024	19.95000
PHENTERMINE HCL	15 MG	CAPSULE	ORAL	08/20/2024	0.10783
PHENTERMINE HCL	30 MG	CAPSULE	ORAL	07/17/2025	0.13601
PHENTERMINE HCL	37.5 MG	CAPSULE	ORAL	06/12/2025	0.32301
PHENTERMINE HCL	37.5 MG	TABLET	ORAL	08/14/2025	0.06700
PHENTOLAMINE MESYLATE	5 MG	VIAL	INJECTION	10/19/2021	351.66000
PHENYLEPH/MINERAL OIL/PETROLAT	0.25 %-14%	OINT/APPL	RECTAL	04/03/2025	0.05313
PHENYLEPHRINE HCL	10 MG	TABLET	ORAL	07/31/2025	0.07572

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PHENYLEPHRINE HCL	10 MG/ML	VIAL	INJECTION	07/03/2025	0.61962
PHENYLEPHRINE HCL	10 %	DROPS	OPHTHALMIC	08/07/2025	6.65480
PHENYLEPHRINE HCL	2.5 %	DROPS	OPHTHALMIC	07/17/2025	5.27981
PHENYLEPHRINE HCL	1 %	SPRAY	NASAL	01/30/2025	0.43327
PHENYLEPHRINE HCL	0.1 MG/ML	VIAL	INTRAVEN	07/17/2025	1.73664
PHENYLEPHRINE HCL/ACETAMINOPHN	5 MG-325MG	TABLET	ORAL	06/05/2025	0.32885
PHENYLEPHRINE HCL/ACETAMINOPHN	5 MG-500MG	TABLET	ORAL	11/26/2024	0.07602
PHENYLEPHRINE HCL/COCOA BUTTER	0.25-88.44	SUPP.RECT	RECTAL	08/14/2025	0.17866
PHENYLEPHRINE HCL/WITCH HAZEL	0.25%-50%	GEL (GRAM)	TOPICAL	09/19/2024	0.16737
PHENYLEPHRINE/ACETAMINOPHN/CPM	5-325-2MG	TABLET	ORAL	08/07/2025	0.10493
PHENYLEPHRINE/DIPHENHYDRAMINE	5-12.5MG/5	SOLUTION	ORAL	10/17/2024	0.08256
PHENYLEPHRINE/DIPHENHYDRAMINE	2.5-6.25/5	LIQUID	ORAL	07/31/2025	0.06064
PHENYLEPHRINE/DM/ACETAMINOP/GG	5-325MG/15	LIQUID	ORAL	02/06/2025	0.03092
PHENYLEPHRINE/DM/ACETAMINOP/GG	10-650/20	LIQUID	ORAL	05/01/2025	0.02824
PHENYLEPHRINE/DM/ACETAMINOP/GG	5-325-200	TABLET	ORAL	08/07/2025	0.30552
PHENYLEPHRINE/DM/ACETAMINOP/GG	5-10-325MG	TABLET	ORAL	02/08/2024	0.31758
PHENYTOIN	125 MG/5ML	ORAL SUSP	ORAL	08/14/2025	0.14616
PHENYTOIN	50 MG	TAB CHEW	ORAL	06/26/2025	0.42826
PHENYTOIN SODIUM	50 MG/ML	VIAL	INTRAVEN	10/26/2023	0.41754
PHENYTOIN SODIUM EXTENDED	100 MG	CAPSULE	ORAL	11/05/2024	0.15060
PHENYTOIN SODIUM EXTENDED	30 MG	CAPSULE	ORAL	08/26/2025	0.82181

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PHENYTOIN SODIUM EXTENDED	300 MG	CAPSULE	ORAL	05/02/2024	2.88332
PHENYTOIN SODIUM EXTENDED	200 MG	CAPSULE	ORAL	05/02/2024	1.95417
PHOSPHORATED CARBO(DEXT-FRUCT)		SOLUTION	ORAL	06/26/2025	0.06938
PHYSIOLOGICAL IRRIG SOLN NO.1	140-5-3-98	IRRIG SOLN	IRRIGATION	09/04/2025	0.01168
PHYTONADIONE (VIT K1)	5 MG	TABLET	ORAL	04/17/2025	35.47822
PHYTONADIONE (VIT K1)	100 MCG	TABLET	ORAL	05/06/2022	0.02245
PHYTONADIONE (VIT K1)	10 MG/ML	AMPUL	INJECTION	01/21/2025	26.30150
PHYTONADIONE (VIT K1)	1 MG/0.5ML	SYRINGE	INJECTION	04/03/2025	44.55675
PHYTONADIONE (VIT K1)	10 MG/ML	VIAL	INJECTION	07/10/2025	23.62500
PILOCARPINE HCL	5 MG	TABLET	ORAL	07/31/2025	0.51965
PILOCARPINE HCL	7.5 MG	TABLET	ORAL	08/01/2024	1.17344
PILOCARPINE HCL	1 %	DROPS	OPHTHALMIC	04/03/2025	5.16912
PILOCARPINE HCL	2 %	DROPS	OPHTHALMIC	08/28/2024	4.72384
PILOCARPINE HCL	4 %	DROPS	OPHTHALMIC	11/14/2024	4.67984
PIMECROLIMUS	1 %	CREAM (G)	TOPICAL	08/21/2025	3.96396
PINDOLOL	10 MG	TABLET	ORAL	04/03/2025	1.56030
PINDOLOL	5 MG	TABLET	ORAL	04/03/2025	1.27394
PIOGLITAZONE HCL	15 MG	TABLET	ORAL	05/27/2025	0.04527
PIOGLITAZONE HCL	30 MG	TABLET	ORAL	10/03/2024	0.10777
PIOGLITAZONE HCL	45 MG	TABLET	ORAL	10/03/2024	0.11190
PIOGLITAZONE HCL/GLIMEPIRIDE	30 MG-4 MG	TABLET	ORAL	06/04/2019	9.36503

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PIOGLITAZONE HCL/GLIMEPIRIDE	30 MG-2 MG	TABLET	ORAL	07/22/2025	10.47140
PIOGLITAZONE HCL/METFORMIN HCL	15MG-500MG	TABLET	ORAL	06/05/2025	0.68787
PIOGLITAZONE HCL/METFORMIN HCL	15MG-850MG	TABLET	ORAL	08/21/2025	0.61193
PIPERACILLIN SODIUM/TAZOBACTAM	2.25 G	VIAL	INTRAVEN	06/18/2025	3.94680
PIPERACILLIN SODIUM/TAZOBACTAM	3.375 G	VIAL	INTRAVEN	06/18/2025	3.76200
PIPERACILLIN SODIUM/TAZOBACTAM	4.5 G	VIAL	INTRAVEN	07/10/2025	6.76847
PIPERACILLIN SODIUM/TAZOBACTAM	40.5 G	VIAL	INTRAVEN	07/10/2025	45.27938
PIPERACILLIN SODIUM/TAZOBACTAM	13.5 G	VIAL	INTRAVEN	05/19/2025	14.49000
PIPERONYL BUTOXIDE/PYRETHRINS	4%-0.33%	SHAMPOO	TOPICAL	04/01/2025	0.04916
PIRFENIDONE	267 MG	CAPSULE	ORAL	04/24/2025	3.18091
PIRFENIDONE	267 MG	TABLET	ORAL	08/21/2025	5.27756
PIRFENIDONE	801 MG	TABLET	ORAL	08/21/2025	9.45249
PIROXICAM	10 MG	CAPSULE	ORAL	04/03/2025	0.72360
PIROXICAM	20 MG	CAPSULE	ORAL	04/03/2025	0.76809
PITAVASTATIN CALCIUM	1 MG	TABLET	ORAL	08/26/2025	1.25583
PITAVASTATIN CALCIUM	2 MG	TABLET	ORAL	08/26/2025	1.31665
PITAVASTATIN CALCIUM	4 MG	TABLET	ORAL	08/26/2025	1.28646
PLERIXAFOR	24MG/1.2ML	VIAL	SUBCUT	04/03/2025	521.04167
PNV 119/IRON FUM/FOLIC ACID	29 MG-1 MG	TABLET	ORAL	07/03/2024	0.56267
PNV NO.95/FERROUS FUM/FOLIC AC	28MG-0.8MG	TABLET	ORAL	09/04/2025	0.04178
PNV,CALCIUM 72/IRON/FOLIC ACID	27 MG-1 MG	TABLET	ORAL	04/30/2025	0.07000

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PODOFILOX	0.5 %	GEL (GRAM)	TOPICAL	08/21/2025	198.93493
POLAPREZINC (ZINC CARNOSINE)	16 MG	TAB CHEW	ORAL	05/06/2022	0.96323
POLYDIMETHYLSILOXANES/SILICON		GEL (GRAM)	TOPICAL	04/25/2023	1.22822
POLYETHYLENE GLYCOL 3350	17 G	POWD PACK	ORAL	05/27/2025	1.29349
POLYETHYLENE GLYCOL 3350	17 G/DOSE	POWDER	ORAL	08/07/2025	0.03032
POLYMYXIN B SULF/TRIMETHOPRIM	10000-1/ML	DROPS	OPHTHALMIC	04/03/2025	0.82946
POLYMYXIN B SULFATE	500K UNIT	VIAL	INJECTION	04/03/2025	8.79600
POLYSORBATE 80		SOLUTION	MISCELL	09/08/2022	0.03739
POLYVINYL ALCOHOL	1.4 %	DROPS	OPHTHALMIC	03/11/2025	0.34368
POSACONAZOLE	200 MG/5ML	ORAL SUSP	ORAL	04/06/2023	9.37765
POSACONAZOLE	100 MG	TABLET DR	ORAL	08/21/2025	7.04660
POSACONAZOLE	300MG/16.7	VIAL	INTRAVEN	07/31/2025	7.54491
POTASSIUM ACETATE	2 MEQ/ML	VIAL	INTRAVEN	07/10/2025	0.20100
POTASSIUM CHLORIDE	10 MEQ	CAPSULE ER	ORAL	04/03/2025	0.12154
POTASSIUM CHLORIDE	8 MEQ	CAPSULE ER	ORAL	07/17/2025	0.27792
POTASSIUM CHLORIDE	20 MEQ	PACKET	ORAL	08/28/2025	1.20600
POTASSIUM CHLORIDE	20MEQ/15ML	LIQUID	ORAL	08/19/2025	0.02712
POTASSIUM CHLORIDE	40MEQ/15ML	LIQUID	ORAL	07/17/2025	0.09505
POTASSIUM CHLORIDE	10 MEQ	TAB ER PRT	ORAL	04/03/2025	0.10063
POTASSIUM CHLORIDE	20 MEQ	TAB ER PRT	ORAL	08/14/2025	0.17271
POTASSIUM CHLORIDE	15 MEQ	TAB ER PRT	ORAL	11/02/2023	0.08837

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
POTASSIUM CHLORIDE	10 MEQ	TABLET ER	ORAL	09/04/2025	0.11537
POTASSIUM CHLORIDE	20 MEQ	TABLET ER	ORAL	08/19/2025	0.14790
POTASSIUM CHLORIDE	8 MEQ	TABLET ER	ORAL	03/19/2025	0.12006
POTASSIUM CHLORIDE	2 MEQ/ML	VIAL	INTRAVEN	02/13/2025	0.29152
POTASSIUM CHLORIDE IN 0.9%NACL	20 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01482
POTASSIUM CHLORIDE IN 0.9%NACL	40 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01853
POTASSIUM CHLORIDE IN D5W	20 MEQ/L	IV SOLN	INTRAVEN	04/10/2025	0.01302
POTASSIUM CHLORIDE IN LR-D5	20 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.02355
POTASSIUM CHLORIDE IN WATER	10MEQ/0.1L	PIGGYBACK	INTRAVEN	04/03/2025	0.70253
POTASSIUM CHLORIDE IN WATER	20MEQ/0.1L	PIGGYBACK	INTRAVEN	08/23/2022	0.06520
POTASSIUM CHLORIDE IN WATER	40MEQ/0.1L	PIGGYBACK	INTRAVEN	08/23/2022	0.07979
POTASSIUM CHLORIDE IN WATER	10MEQ/50ML	PIGGYBACK	INTRAVEN	08/23/2022	0.14947
POTASSIUM CHLORIDE IN WATER	20MEQ/50ML	PIGGYBACK	INTRAVEN	06/18/2024	0.12016
POTASSIUM CHLORIDE-0.45% NACL	20 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01438
POTASSIUM CHLORIDE/D5-0.2%NACL	20 MEQ/L	IV SOLN	INTRAVEN	04/10/2025	0.01258
POTASSIUM CHLORIDE/D5-0.45NACL	10 MEQ/L	IV SOLN	INTRAVEN	04/10/2025	0.01416
POTASSIUM CHLORIDE/D5-0.45NACL	20 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01174
POTASSIUM CHLORIDE/D5-0.45NACL	30 MEQ/L	IV SOLN	INTRAVEN	08/01/2024	0.01209
POTASSIUM CHLORIDE/D5-0.45NACL	40 MEQ/L	IV SOLN	INTRAVEN	06/12/2025	0.01499
POTASSIUM CHLORIDE/D5-0.9%NACL	20 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01535
POTASSIUM CHLORIDE/D5-0.9%NACL	40 MEQ/L	IV SOLN	INTRAVEN	04/03/2025	0.01724

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POTASSIUM CITRATE	5 MEQ	TABLET ER	ORAL	05/14/2025	0.26787
POTASSIUM CITRATE	10 MEQ	TABLET ER	ORAL	05/14/2025	0.21949
POTASSIUM CITRATE	15 MEQ	TABLET ER	ORAL	08/07/2025	0.31316
POTASSIUM CITRATE/CITRIC ACID	1100-334/5	SOLUTION	ORAL	10/21/2024	0.04410
POTASSIUM GLUCONATE	595(99)MG	TABLET	ORAL	09/26/2024	0.06191
POTASSIUM GLUCONATE	550(90)MG	TABLET	ORAL	11/10/2022	0.02807
POTASSIUM IODIDE	65 MG	TABLET	ORAL	02/22/2024	1.31789
POTASSIUM PHOS,M-BASIC-D-BASIC	3MMOL/ML	VIAL	INTRAVEN	10/24/2023	1.25510
POVIDONE-IODINE	10 %	MED. SWAB	TOPICAL	08/21/2025	0.07119
POVIDONE-IODINE	10 %	MED. PAD	TOPICAL	03/07/2024	0.03725
POVIDONE-IODINE	10 %	OINT. (G)	TOPICAL	05/19/2022	0.15792
POVIDONE-IODINE	10 %	SOLUTION	TOPICAL	03/27/2025	0.00481
POVIDONE-IODINE	7.5 %	SOLUTION	TOPICAL	05/06/2022	0.00510
PRALATREXATE	20MG/ML(1)	VIAL	INTRAVEN	04/10/2025	7595.03475
PRALATREXATE	40 MG/2 ML	VIAL	INTRAVEN	04/10/2025	7595.03475
PRAMIPEXOLE DI-HCL	1 MG	TABLET	ORAL	04/03/2025	0.10005
PRAMIPEXOLE DI-HCL	1.5 MG	TABLET	ORAL	04/03/2025	0.13996
PRAMIPEXOLE DI-HCL	0.125 MG	TABLET	ORAL	04/03/2025	0.03648
PRAMIPEXOLE DI-HCL	0.25 MG	TABLET	ORAL	04/03/2025	0.03648
PRAMIPEXOLE DI-HCL	0.5 MG	TABLET	ORAL	04/03/2025	0.04243
PRAMIPEXOLE DI-HCL	0.75 MG	TABLET	ORAL	07/03/2025	0.14948

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PRAMIPEXOLE DI-HCL	0.75 MG	TAB ER 24H	ORAL	04/24/2025	3.27888
PRAMIPEXOLE DI-HCL	0.375 MG	TAB ER 24H	ORAL	04/24/2025	3.27888
PRAMIPEXOLE DI-HCL	1.5 MG	TAB ER 24H	ORAL	04/24/2025	5.50164
PRAMIPEXOLE DI-HCL	3 MG	TAB ER 24H	ORAL	04/24/2025	4.76564
PRAMIPEXOLE DI-HCL	4.5 MG	TAB ER 24H	ORAL	04/24/2025	4.76564
PRAMIPEXOLE DI-HCL	2.25 MG	TAB ER 24H	ORAL	04/03/2025	5.02040
PRAMIPEXOLE DI-HCL	3.75 MG	TAB ER 24H	ORAL	04/03/2025	5.36617
PRAMOXINE HCL	1 %	FOAM	TOPICAL	10/26/2021	4.28472
PRAMOXINE HCL	1 %	LOTION	TOPICAL	06/17/2025	0.02942
PRAMOXINE HCL	1 %	TOWELETTE	TOPICAL	05/06/2022	0.52260
PRASTERONE (DHEA)	25 MG	CAPSULE	ORAL	12/20/2023	0.05572
PRASTERONE (DHEA)	25 MG	TABLET	ORAL	11/22/2022	0.07522
PRASUGREL HCL	5 MG	TABLET	ORAL	05/08/2025	0.86921
PRASUGREL HCL	10 MG	TABLET	ORAL	03/13/2025	0.59183
PRAVASTATIN SODIUM	10 MG	TABLET	ORAL	05/08/2025	0.05464
PRAVASTATIN SODIUM	20 MG	TABLET	ORAL	06/12/2025	0.07107
PRAVASTATIN SODIUM	40 MG	TABLET	ORAL	08/07/2025	0.10005
PRAVASTATIN SODIUM	80 MG	TABLET	ORAL	06/12/2025	0.18446
PRAZIQUANTEL	600 MG	TABLET	ORAL	05/11/2023	61.27666
PRAZOSIN HCL	1 MG	CAPSULE	ORAL	07/17/2025	0.07475
PRAZOSIN HCL	2 MG	CAPSULE	ORAL	04/15/2025	0.05424

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PRAZOSIN HCL	5 MG	CAPSULE	ORAL	04/10/2025	0.14512
PREDNISOLONE	15 MG/5 ML	SOLUTION	ORAL	04/01/2025	0.49266
PREDNISOLONE	5 MG	TABLET	ORAL	10/28/2024	11.61620
PREDNISOLONE ACETATE	1 %	DROPS SUSP	OPHTHALMIC	03/19/2024	4.82400
PREDNISOLONE SODIUM PHOSPHATE	5 MG/5 ML	SOLUTION	ORAL	07/16/2024	0.54800
PREDNISOLONE SODIUM PHOSPHATE	25 MG/5 ML	SOLUTION	ORAL	04/03/2025	1.40926
PREDNISOLONE SODIUM PHOSPHATE	15 MG/5 ML	SOLUTION	ORAL	06/05/2025	0.35507
PREDNISOLONE SODIUM PHOSPHATE	10 MG/5 ML	SOLUTION	ORAL	09/19/2024	4.10904
PREDNISOLONE SODIUM PHOSPHATE	20 MG/5 ML	SOLUTION	ORAL	10/26/2021	2.80104
PREDNISOLONE SODIUM PHOSPHATE	15 MG/5 ML	SOLUTION	ORAL	04/04/2024	1.89079
PREDNISOLONE SODIUM PHOSPHATE	10 MG	TAB RAPDIS	ORAL	05/06/2022	8.63037
PREDNISOLONE SODIUM PHOSPHATE	15 MG	TAB RAPDIS	ORAL	11/12/2024	16.23000
PREDNISOLONE SODIUM PHOSPHATE	30 MG	TAB RAPDIS	ORAL	05/01/2025	40.31667
PREDNISONE	1 MG	TABLET	ORAL	01/09/2025	0.16308
PREDNISONE	10 MG	TABLET	ORAL	04/22/2025	0.03930
PREDNISONE	2.5 MG	TABLET	ORAL	04/03/2025	0.12717
PREDNISONE	20 MG	TABLET	ORAL	09/04/2025	0.10315
PREDNISONE	5 MG	TABLET	ORAL	09/04/2025	0.04476
PREDNISONE	50 MG	TABLET	ORAL	06/07/2022	0.27000
PREDNISONE	5 MG	TAB DS PK	ORAL	08/21/2025	0.62059
PREDNISONE	10 MG	TAB DS PK	ORAL	04/24/2025	0.80400

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PREGABALIN	25 MG	CAPSULE	ORAL	08/28/2025	0.04318
PREGABALIN	50 MG	CAPSULE	ORAL	08/28/2025	0.05956
PREGABALIN	75 MG	CAPSULE	ORAL	03/18/2025	0.05021
PREGABALIN	100 MG	CAPSULE	ORAL	08/28/2025	0.08338
PREGABALIN	150 MG	CAPSULE	ORAL	06/12/2025	0.09052
PREGABALIN	200 MG	CAPSULE	ORAL	07/31/2025	0.11921
PREGABALIN	300 MG	CAPSULE	ORAL	07/31/2025	0.14142
PREGABALIN	225 MG	CAPSULE	ORAL	05/22/2025	0.13022
PREGABALIN	20 MG/ML	SOLUTION	ORAL	04/03/2025	0.31735
PREGABALIN	82.5 MG	TAB ER 24H	ORAL	04/03/2025	6.40461
PREGABALIN	165 MG	TAB ER 24H	ORAL	04/03/2025	8.04920
PREGABALIN	330 MG	TAB ER 24H	ORAL	04/03/2025	3.41704
PRENATAL VIT NO.130/IRON/FOLIC	27MG-0.8MG	TABLET	ORAL	05/06/2022	0.04013
PRIMAQUINE PHOSPHATE	26.3 MG	TABLET	ORAL	05/06/2022	1.20533
PRIMIDONE	250 MG	TABLET	ORAL	06/05/2025	0.30619
PRIMIDONE	50 MG	TABLET	ORAL	08/26/2025	0.09095
PROBENECID	500 MG	TABLET	ORAL	04/30/2025	0.26748
PROBENECID/COLCHICINE	500-0.5 MG	TABLET	ORAL	09/20/2022	0.91220
PROCAINAMIDE HCL	100 MG/ML	VIAL	INJECTION	10/18/2021	9.48430
PROCAINAMIDE HCL	500 MG/ML	VIAL	INJECTION	04/15/2025	243.43750
PROCHLORPERAZINE	25 MG	SUPP.RECT	RECTAL	04/25/2023	6.90500

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PROCHLORPERAZINE EDISYLATE	10 MG/2 ML	VIAL	INJECTION	04/03/2025	2.24685
PROCHLORPERAZINE MALEATE	10 MG	TABLET	ORAL	04/15/2025	0.19116
PROCHLORPERAZINE MALEATE	5 MG	TABLET	ORAL	08/26/2025	0.14638
PROGESTERONE	50 MG/ML	VIAL	INTRAMUSC	04/15/2025	0.74214
PROGESTERONE, MICRONIZED	100 MG	CAPSULE	ORAL	07/17/2025	0.31450
PROGESTERONE, MICRONIZED	200 MG	CAPSULE	ORAL	05/27/2025	0.36000
PROMETHAZINE HCL	6.25MG/5ML	SYRUP	ORAL	08/28/2025	0.06422
PROMETHAZINE HCL	12.5 MG	TABLET	ORAL	04/03/2025	0.12475
PROMETHAZINE HCL	25 MG	TABLET	ORAL	07/17/2025	0.07933
PROMETHAZINE HCL	50 MG	TABLET	ORAL	06/12/2025	0.22834
PROMETHAZINE HCL	25 MG/ML	AMPUL	INJECTION	02/01/2024	2.22440
PROMETHAZINE HCL	50 MG/ML	AMPUL	INJECTION	03/06/2025	3.15456
PROMETHAZINE HCL	25 MG/ML	VIAL	INJECTION	12/21/2017	1.09478
PROMETHAZINE HCL	50 MG/ML	VIAL	INJECTION	07/01/2014	2.35505
PROMETHAZINE HCL	12.5 MG	SUPP.RECT	RECTAL	04/03/2025	6.77333
PROMETHAZINE HCL	25 MG	SUPP.RECT	RECTAL	08/28/2025	5.35834
PROMETHAZINE HCL	50 MG	SUPP.RECT	RECTAL	04/25/2023	25.90000
PROMETHAZINE HCL/CODEINE	6.25-10/5	SYRUP	ORAL	02/29/2024	0.05462
PROMETHAZINE/DEXTROMETHORPHAN	6.25-15/5	SYRUP	ORAL	08/28/2025	0.06197
PROPAFENONE HCL	225 MG	CAP ER 12H	ORAL	06/26/2025	0.37944
PROPAFENONE HCL	325 MG	CAP ER 12H	ORAL	04/03/2025	1.26243

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PROPAFENONE HCL	425 MG	CAP ER 12H	ORAL	08/28/2024	1.13889
PROPAFENONE HCL	150 MG	TABLET	ORAL	06/18/2025	0.25741
PROPAFENONE HCL	300 MG	TABLET	ORAL	05/29/2025	0.83549
PROPAFENONE HCL	225 MG	TABLET	ORAL	06/12/2025	0.39865
PROPARACAINE HCL	0.5 %	DROPS	OPHTHALMIC	06/26/2025	2.65141
PROPRANOLOL HCL	120 MG	CAP SA 24H	ORAL	09/26/2024	0.97190
PROPRANOLOL HCL	160 MG	CAP SA 24H	ORAL	09/26/2024	1.25062
PROPRANOLOL HCL	60 MG	CAP SA 24H	ORAL	06/12/2025	0.65928
PROPRANOLOL HCL	80 MG	CAP SA 24H	ORAL	10/24/2024	0.76983
PROPRANOLOL HCL	10 MG	TABLET	ORAL	07/24/2025	0.07611
PROPRANOLOL HCL	20 MG	TABLET	ORAL	08/21/2025	0.07584
PROPRANOLOL HCL	40 MG	TABLET	ORAL	08/21/2025	0.11068
PROPRANOLOL HCL	60 MG	TABLET	ORAL	04/03/2025	0.33835
PROPRANOLOL HCL	80 MG	TABLET	ORAL	04/03/2025	0.22606
PROPRANOLOL HCL	1 MG/ML	VIAL	INTRAVEN	07/20/2023	2.83800
PROPYLENE GLYCOL	0.6 %	DROPS	OPHTHALMIC	08/19/2025	0.15950
PROPYLENE GLYCOL	0.7 %	DROPS	OPHTHALMIC	10/24/2024	2.27264
PROPYLENE GLYCOL/PEG 400	0.3 %-0.4%	DROPS	OPHTHALMIC	03/06/2025	0.71779
PROPYLTHIOURACIL	50 MG	TABLET	ORAL	08/28/2025	0.57714
PROTECTIVES, O.U.		MED. SWAB	TOPICAL	05/06/2022	1.77011
PROTRIPTYLINE HCL	10 MG	TABLET	ORAL	05/13/2025	3.15000

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PROTRIPTYLINE HCL	5 MG	TABLET	ORAL	05/14/2025	7.32000
PSEUDOEPHEDRINE HCL	30 MG	TABLET	ORAL	05/31/2023	0.24734
PSEUDOEPHEDRINE HCL	30 MG	TABLET	ORAL	04/24/2025	0.01332
PSEUDOEPHEDRINE HCL	120 MG	TABLET ER	ORAL	10/03/2024	0.16884
PSYLLIUM HUSK	0.4 G	CAPSULE	ORAL	05/05/2025	0.03000
PSYLLIUM HUSK	6 G	POWD PACK	ORAL	04/25/2024	0.54314
PSYLLIUM HUSK	3 G/5.8 G	POWDER	ORAL	08/21/2025	0.03394
PSYLLIUM HUSK (WITH SUGAR)	3.4 G	POWD PACK	ORAL	05/06/2022	0.54103
PSYLLIUM HUSK (WITH SUGAR)	3.4 G/12 G	POWDER	ORAL	02/22/2024	0.01939
PSYLLIUM HUSK (WITH SUGAR)	3 G/7 G	POWDER	ORAL	04/25/2024	0.02482
PSYLLIUM HUSK (WITH SUGAR)	3 G/12 G	POWDER	ORAL	08/21/2025	0.02071
PYRAZINAMIDE	500 MG	TABLET	ORAL	08/21/2025	5.24935
PYRIDOSTIGMINE BROMIDE	60 MG/5 ML	SOLUTION	ORAL	04/24/2025	2.60102
PYRIDOSTIGMINE BROMIDE	60 MG	TABLET	ORAL	04/03/2025	0.45332
PYRIDOSTIGMINE BROMIDE	180 MG	TABLET ER	ORAL	06/12/2025	8.35640
PYRIDOXINE HCL (VITAMIN B6)	100 MG	TABLET	ORAL	07/17/2025	0.02667
PYRIDOXINE HCL (VITAMIN B6)	25 MG	TABLET	ORAL	09/05/2024	0.01474
PYRIDOXINE HCL (VITAMIN B6)	250 MG	TABLET	ORAL	01/12/2023	0.08576
PYRIDOXINE HCL (VITAMIN B6)	50 MG	TABLET	ORAL	09/05/2024	0.01863
PYRILAMINE/DEXTROMETHORPHAN HB	7.5-7.5/5	LIQUID	ORAL	08/22/2024	0.04391
PYRIMETHAMINE	25 MG	TABLET	ORAL	05/29/2025	268.03289

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
PYRITHIONE ZINC	0.25 %	SPRAY	TOPICAL	04/04/2024	0.20893
PYRITHIONE ZINC	2 %	BAR	TOPICAL	08/10/2023	3.26700
PYRITHIONE ZINC	2 %	SHAMPOO	TOPICAL	07/24/2025	0.04726
QUETIAPINE FUMARATE	25 MG	TABLET	ORAL	06/12/2025	0.02271
QUETIAPINE FUMARATE	100 MG	TABLET	ORAL	05/27/2025	0.03931
QUETIAPINE FUMARATE	200 MG	TABLET	ORAL	06/12/2025	0.12770
QUETIAPINE FUMARATE	300 MG	TABLET	ORAL	04/03/2025	0.15432
QUETIAPINE FUMARATE	50 MG	TABLET	ORAL	05/27/2025	0.03370
QUETIAPINE FUMARATE	400 MG	TABLET	ORAL	04/03/2025	0.23195
QUETIAPINE FUMARATE	200 MG	TAB ER 24H	ORAL	06/18/2025	0.80020
QUETIAPINE FUMARATE	300 MG	TAB ER 24H	ORAL	04/03/2025	0.57240
QUETIAPINE FUMARATE	400 MG	TAB ER 24H	ORAL	07/17/2025	0.64320
QUETIAPINE FUMARATE	50 MG	TAB ER 24H	ORAL	08/28/2025	0.39954
QUETIAPINE FUMARATE	150 MG	TAB ER 24H	ORAL	04/03/2025	0.86854
QUINAPRIL HCL	20 MG	TABLET	ORAL	04/25/2024	0.81941
QUINAPRIL HCL	5 MG	TABLET	ORAL	04/25/2024	0.81941
QUINAPRIL/HYDROCHLOROTHIAZIDE	10-12.5 MG	TABLET	ORAL	04/06/2020	0.56468
QUINAPRIL/HYDROCHLOROTHIAZIDE	20-12.5 MG	TABLET	ORAL	12/20/2023	0.81963
QUINAPRIL/HYDROCHLOROTHIAZIDE	20 MG-25MG	TABLET	ORAL	12/20/2023	0.81941
QUINIDINE GLUCONATE	324 MG	TABLET ER	ORAL	08/11/2025	6.46734
QUININE SULFATE	324 MG	CAPSULE	ORAL	08/28/2025	2.44639

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
RABEPRAZOLE SODIUM	20 MG	TABLET DR	ORAL	08/21/2025	0.40200
RALOXIFENE HCL	60 MG	TABLET	ORAL	04/03/2025	0.33009
RAMELTEON	8 MG	TABLET	ORAL	09/22/2022	1.33670
RAMIPRIL	1.25 MG	CAPSULE	ORAL	04/24/2025	0.12971
RAMIPRIL	2.5 MG	CAPSULE	ORAL	07/31/2025	0.06164
RAMIPRIL	5 MG	CAPSULE	ORAL	07/31/2025	0.04007
RAMIPRIL	10 MG	CAPSULE	ORAL	07/31/2025	0.07653
RANOLAZINE	500 MG	TAB ER 12H	ORAL	06/18/2025	0.26309
RANOLAZINE	1000 MG	TAB ER 12H	ORAL	05/08/2025	0.51970
RASAGILINE MESYLATE	1 MG	TABLET	ORAL	08/07/2025	1.31052
RASAGILINE MESYLATE	0.5 MG	TABLET	ORAL	08/07/2025	1.39092
RASPBERRY FLAVOR		SYRUP	ORAL	05/06/2022	0.08534
RED YEAST RICE	600 MG	CAPSULE	ORAL	07/27/2022	0.05572
REGADENOSON	0.4 MG/5ML	SYRINGE	INTRAVEN	02/13/2025	2.14400
REMIFENTANIL HCL	5 MG	VIAL	INTRAVEN	12/26/2024	253.17500
REMIFENTANIL HCL	2 MG	VIAL	INTRAVEN	02/04/2020	79.28000
REMIFENTANIL HCL	1 MG	VIAL	INTRAVEN	06/27/2024	59.68211
REPAGLINIDE	0.5 MG	TABLET	ORAL	07/10/2025	0.17085
REPAGLINIDE	1 MG	TABLET	ORAL	07/10/2025	0.17085
REPAGLINIDE	2 MG	TABLET	ORAL	07/10/2025	0.17085
RIBAVIRIN	6 G	VIAL-NEB	INHALATION	03/27/2025	19475.00000

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
RIBOFLAVIN (VITAMIN B2)	100 MG	CAPSULE	ORAL	06/05/2025	0.06646
RIBOFLAVIN (VITAMIN B2)	100 MG	TABLET	ORAL	08/19/2025	0.03938
RIBOFLAVIN (VITAMIN B2)	25 MG	TABLET	ORAL	09/26/2024	0.04951
RIBOFLAVIN (VITAMIN B2)	50 MG	TABLET	ORAL	12/14/2023	0.05219
RIFABUTIN	150 MG	CAPSULE	ORAL	12/30/2024	7.37000
RIFAMPIN	150 MG	CAPSULE	ORAL	09/18/2023	2.09130
RIFAMPIN	300 MG	CAPSULE	ORAL	05/01/2025	0.96882
RIFAMPIN	600 MG	VIAL	INTRAVEN	10/26/2021	69.18750
RILUZOLE	50 MG	TABLET	ORAL	04/03/2025	1.66696
RIMANTADINE HCL	100 MG	TABLET	ORAL	05/06/2022	1.75781
RINGER'S SOLUTION		IV SOLN	INTRAVEN	07/03/2025	0.01453
RINGER'S SOLUTION,LACTATED		IV SOLN	INTRAVEN	11/26/2024	0.00431
RINGER'S SOLUTION,LACTATED		IRRIG SOLN	IRRIGATION	04/03/2025	0.00778
RISEDRONATE SODIUM	5 MG	TABLET	ORAL	05/06/2022	6.63914
RISEDRONATE SODIUM	35 MG	TABLET	ORAL	08/21/2025	3.71910
RISEDRONATE SODIUM	150 MG	TABLET	ORAL	04/03/2025	24.21300
RISEDRONATE SODIUM	35 MG	TABLET DR	ORAL	05/06/2022	28.44375
RISPERIDONE	1 MG/ML	SOLUTION	ORAL	02/04/2025	0.69546
RISPERIDONE	1 MG	TABLET	ORAL	05/06/2025	0.02668
RISPERIDONE	2 MG	TABLET	ORAL	06/18/2025	0.07418
RISPERIDONE	3 MG	TABLET	ORAL	05/06/2025	0.03521

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
RISPERIDONE	4 MG	TABLET	ORAL	05/06/2025	0.06360
RISPERIDONE	0.25 MG	TABLET	ORAL	04/03/2025	0.07147
RISPERIDONE	0.5 MG	TABLET	ORAL	04/03/2025	0.07118
RISPERIDONE	1 MG	TAB RAPDIS	ORAL	04/03/2025	0.82554
RISPERIDONE	2 MG	TAB RAPDIS	ORAL	04/03/2025	1.73243
RISPERIDONE	0.5 MG	TAB RAPDIS	ORAL	04/24/2025	1.13543
RISPERIDONE	3 MG	TAB RAPDIS	ORAL	04/24/2025	2.25024
RISPERIDONE	4 MG	TAB RAPDIS	ORAL	04/03/2025	2.74937
RISPERIDONE	0.25 MG	TAB RAPDIS	ORAL	06/19/2017	3.16823
RISPERIDONE MICROSPHERES	25 MG/2 ML	VIAL	INTRAMUSC	04/01/2025	455.49291
RISPERIDONE MICROSPHERES	37.5MG/2ML	VIAL	INTRAMUSC	08/26/2025	726.79470
RISPERIDONE MICROSPHERES	50 MG/2 ML	VIAL	INTRAMUSC	04/01/2025	901.60435
RISPERIDONE MICROSPHERES	12.5MG/2ML	VIAL	INTRAMUSC	11/19/2024	273.77750
RITONAVIR	100 MG	TABLET	ORAL	03/01/2021	2.85087
RIVASTIGMINE	4.6MG/24HR	PATCH TD24	TRANSDERM	04/03/2025	2.16410
RIVASTIGMINE	9.5MG/24HR	PATCH TD24	TRANSDERM	04/03/2025	2.67432
RIVASTIGMINE	13.3MG/24H	PATCH TD24	TRANSDERM	04/03/2025	2.53126
RIVASTIGMINE TARTRATE	1.5 MG	CAPSULE	ORAL	04/03/2025	0.31311
RIVASTIGMINE TARTRATE	3 MG	CAPSULE	ORAL	04/03/2025	0.35682
RIVASTIGMINE TARTRATE	4.5 MG	CAPSULE	ORAL	04/03/2025	0.35845
RIVASTIGMINE TARTRATE	6 MG	CAPSULE	ORAL	06/18/2025	0.56950

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
RIZATRIPTAN BENZOATE	5 MG	TABLET	ORAL	08/14/2025	0.47905
RIZATRIPTAN BENZOATE	10 MG	TABLET	ORAL	08/14/2025	0.34505
RIZATRIPTAN BENZOATE	5 MG	TAB RAPDIS	ORAL	04/03/2025	1.52909
RIZATRIPTAN BENZOATE	10 MG	TAB RAPDIS	ORAL	04/03/2025	1.70552
ROCURONIUM BROMIDE	10 MG/ML	VIAL	INTRAVEN	07/24/2025	0.47637
ROFLUMILAST	500 MCG	TABLET	ORAL	04/24/2025	0.72792
ROFLUMILAST	250 MCG	TABLET	ORAL	03/19/2024	3.25268
ROMIDEPSIN	10 MG/2 ML	VIAL	INTRAVEN	11/08/2023	3085.47294
ROPINIROLE HCL	0.25 MG	TABLET	ORAL	07/24/2025	0.06660
ROPINIROLE HCL	1 MG	TABLET	ORAL	04/03/2025	0.07437
ROPINIROLE HCL	2 MG	TABLET	ORAL	04/03/2025	0.13427
ROPINIROLE HCL	5 MG	TABLET	ORAL	04/03/2025	0.22968
ROPINIROLE HCL	0.5 MG	TABLET	ORAL	04/03/2025	0.06687
ROPINIROLE HCL	3 MG	TABLET	ORAL	04/03/2025	0.22780
ROPINIROLE HCL	4 MG	TABLET	ORAL	04/03/2025	0.15624
ROPINIROLE HCL	2 MG	TAB ER 24H	ORAL	08/21/2025	0.91924
ROPINIROLE HCL	4 MG	TAB ER 24H	ORAL	04/03/2025	1.21672
ROPINIROLE HCL	8 MG	TAB ER 24H	ORAL	06/12/2025	2.07179
ROPINIROLE HCL	12 MG	TAB ER 24H	ORAL	04/03/2025	4.73264
ROPINIROLE HCL	6 MG	TAB ER 24H	ORAL	06/12/2025	2.04439
ROPIVACAINE HCL/PF	2 MG/ML	INFUS. BTL	INJECTION	04/03/2025	0.52461

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ROPIVACAINE HCL/PF	2 MG/ML	VIAL	INJECTION	09/26/2023	0.25125
ROPIVACAINE HCL/PF	5 MG/ML	VIAL	INJECTION	10/17/2024	0.17688
ROPIVACAINE HCL/PF	10 MG/ML	VIAL	INJECTION	07/17/2025	0.37107
ROPIVACAINE HCL/PF	7.5 MG/ML	VIAL	INJECTION	04/03/2025	0.56741
ROPIVACAINE HCL/PF	2 MG/ML	PLAST. BAG	INJECTION	09/04/2025	0.14472
ROPIVACAINE HCL/PF	5 MG/ML	PLAST. BAG	INJECTION	04/03/2025	0.70015
ROSUVASTATIN CALCIUM	10 MG	TABLET	ORAL	04/03/2025	0.04154
ROSUVASTATIN CALCIUM	20 MG	TABLET	ORAL	05/27/2025	0.05428
ROSUVASTATIN CALCIUM	40 MG	TABLET	ORAL	05/27/2025	0.06793
ROSUVASTATIN CALCIUM	5 MG	TABLET	ORAL	05/27/2025	0.03560
RUFINAMIDE	40 MG/ML	ORAL SUSP	ORAL	06/26/2025	1.03777
RUFINAMIDE	200 MG	TABLET	ORAL	04/03/2025	2.83503
RUFINAMIDE	400 MG	TABLET	ORAL	08/21/2025	4.03458
SACCHARIN		POWDER	MISCELL	07/27/2023	0.59839
SACCHAROMYCES BOULARDII	250 MG	CAPSULE	ORAL	02/20/2025	0.62390
SALICYLIC ACID	2 %	MED. PAD	TOPICAL	07/25/2024	0.14449
SALICYLIC ACID	10 %	CREAM (G)	TOPICAL	05/06/2022	0.22682
SALICYLIC ACID	6 %	CREAM (G)	TOPICAL	04/08/2025	10.03728
SALICYLIC ACID	2 %	CLEANSER	TOPICAL	02/13/2025	0.04636
SALICYLIC ACID	40 %	ADH. PATCH	TOPICAL	07/03/2025	0.51192
SALICYLIC ACID	17 %	LIQUID	TOPICAL	06/05/2025	0.84420

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SALICYLIC ACID	2 %	SHAMPOO	TOPICAL	08/04/2022	0.05322
SALICYLIC ACID	3 %	SHAMPOO	TOPICAL	08/28/2024	0.02640
SALICYLIC ACID	17 %	KIT	TOPICAL	06/05/2025	7.71600
SALSALATE	750 MG	TABLET	ORAL	10/03/2023	0.58282
SAPROPTERIN DIHYDROCHLORIDE	100 MG	POWD PACK	ORAL	06/12/2025	37.64893
SAPROPTERIN DIHYDROCHLORIDE	500 MG	POWD PACK	ORAL	04/03/2025	188.20298
SAPROPTERIN DIHYDROCHLORIDE	100 MG	TABLET SOL	ORAL	08/27/2024	26.84501
SAW PALMETTO	500 MG	CAPSULE	ORAL	07/27/2022	0.08107
SAW PALMETTO	160 MG	CAPSULE	ORAL	07/27/2022	0.19720
SAXAGLIPTIN HCL	2.5 MG	TABLET	ORAL	09/04/2025	3.02192
SAXAGLIPTIN HCL	5 MG	TABLET	ORAL	09/04/2025	3.02192
SAXAGLIPTIN HCL/METFORMIN HCL	5 MG-500MG	TBMP 24HR	ORAL	11/25/2024	12.63901
SAXAGLIPTIN HCL/METFORMIN HCL	5MG-1000MG	TBMP 24HR	ORAL	03/21/2024	12.63900
SAXAGLIPTIN HCL/METFORMIN HCL	2.5-1000MG	TBMP 24HR	ORAL	03/21/2024	7.29615
SCOPOLAMINE	1 MG/3 DAY	PATCH TD 3	TRANSDERM	08/14/2025	7.49300
SELEGILINE HCL	5 MG	CAPSULE	ORAL	06/02/2022	0.68939
SELEGILINE HCL	5 MG	TABLET	ORAL	04/03/2025	1.72458
SELENIUM	200 MCG	TABLET	ORAL	04/16/2024	0.04344
SELENIUM	50 MCG	TABLET	ORAL	02/15/2024	0.02982
SELENIUM SULFIDE	1 %	SHAMPOO	TOPICAL	03/06/2025	0.02994
SENNA LEAF EXTRACT	176MG/5ML	SYRUP	ORAL	04/03/2025	0.06457

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SENNOSIDES	8.8MG/5ML	SYRUP	ORAL	04/15/2025	0.03605
SENNOSIDES	8.6 MG	TABLET	ORAL	06/26/2025	0.02191
SENNOSIDES/DOCUSATE SODIUM	8.6MG-50MG	TABLET	ORAL	08/07/2025	0.01540
SERTRALINE HCL	20 MG/ML	ORAL CONC	ORAL	04/03/2025	0.84465
SERTRALINE HCL	100 MG	TABLET	ORAL	05/27/2025	0.05103
SESAME OIL		OIL	MISCELL	09/08/2022	0.03618
SEVELAMER CARBONATE	0.8 G	POWD PACK	ORAL	06/26/2025	2.13179
SEVELAMER CARBONATE	2.4 G	POWD PACK	ORAL	06/26/2025	2.27115
SEVELAMER CARBONATE	800 MG	TABLET	ORAL	07/03/2025	0.23404
SEVELAMER HCL	400 MG	TABLET	ORAL	06/05/2025	3.54614
SEVELAMER HCL	800 MG	TABLET	ORAL	05/05/2025	1.70247
SILDENAFIL CITRATE	10 MG/ML	SUSP RECON	ORAL	04/30/2025	0.29020
SILDENAFIL CITRATE	25 MG	TABLET	ORAL	07/24/2025	0.11202
SILDENAFIL CITRATE	50 MG	TABLET	ORAL	08/14/2025	0.09103
SILDENAFIL CITRATE	100 MG	TABLET	ORAL	07/17/2025	0.11372
SILDENAFIL CITRATE	20 MG	TABLET	ORAL	07/10/2025	0.10943
SILDENAFIL CITRATE	10 MG/12.5	VIAL	INTRAVEN	10/18/2021	10.58000
SILODOSIN	4 MG	CAPSULE	ORAL	03/18/2025	0.40155
SILODOSIN	8 MG	CAPSULE	ORAL	03/18/2025	0.38190
SILVER SULFADIAZINE	1 %	CREAM (G)	TOPICAL	07/17/2025	0.14972
SIMETHICONE	125 MG	CAPSULE	ORAL	04/03/2025	0.06075

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SIMETHICONE	180 MG	CAPSULE	ORAL	10/25/2021	0.03406
SIMETHICONE	40MG/0.6ML	DROPS SUSP	ORAL	03/06/2025	0.11202
SIMETHICONE	125 MG	TAB CHEW	ORAL	08/07/2025	0.03629
SIMETHICONE	80 MG	TAB CHEW	ORAL	12/20/2023	0.03042
SIMPLE SYRUP		SYRUP	ORAL	07/31/2025	0.01968
SIMVASTATIN	5 MG	TABLET	ORAL	05/17/2023	0.02602
SIMVASTATIN	10 MG	TABLET	ORAL	07/03/2025	0.02338
SIMVASTATIN	20 MG	TABLET	ORAL	07/03/2025	0.03903
SIMVASTATIN	40 MG	TABLET	ORAL	07/03/2025	0.04965
SIMVASTATIN	80 MG	TABLET	ORAL	07/03/2025	0.06845
SINCALIDE	5 MCG	VIAL	INJECTION	07/02/2024	124.13000
SIROLIMUS	1 MG/ML	SOLUTION	ORAL	05/05/2025	5.03100
SIROLIMUS	1 MG	TABLET	ORAL	05/14/2025	1.06369
SIROLIMUS	2 MG	TABLET	ORAL	05/14/2025	3.35306
SIROLIMUS	0.5 MG	TABLET	ORAL	04/24/2025	1.79305
SKIN CLEANSER		CLEANSER	TOPICAL	04/06/2023	0.00366
SKIN CLEANSER COMB NO.31		SPRAY	TOPICAL	09/04/2025	0.04471
SOAP		BAR	TOPICAL	10/12/2023	2.69610
SOD BORATE/BORIC AC/WATER/NACL		IRRIG SOLN	OPHTHALMIC	04/03/2025	0.03841
SOD CHLOR,BICARB/SQUEEZ BOTTLE		PACK W/DEV	NASAL	07/03/2024	0.17593
SOD CHLOR,SOD BICARB/NETI POT		PACK W/DEV	NASAL	05/06/2022	0.30257

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SOD PHOS DI, MONO/K PHOS MONO	250 MG	TABLET	ORAL	02/26/2025	0.26020
SOD PHOSPHATE,MONOBASIC-DIBAS	3MMOL/ML	VIAL	INTRAVEN	09/04/2025	3.44474
SOD/POT/K CIT/SOD CIT/CIT ACID	500-550/5	SOLUTION	ORAL	05/05/2025	0.03328
SODIUM ACETATE	2 MEQ/ML	VIAL	INTRAVEN	04/03/2025	0.37734
SODIUM ACETATE	4 MEQ/ML	VIAL	INTRAVEN	01/09/2025	0.27561
SODIUM BENZOATE/SOD PHENYLACET	10 %-10 %	VIAL	INTRAVEN	08/19/2025	66.03125
SODIUM BICARBONATE	325 MG	TABLET	ORAL	04/01/2025	0.01138
SODIUM BICARBONATE	650 MG	TABLET	ORAL	08/19/2025	0.01260
SODIUM BICARBONATE	1 MEQ/ML	SYRINGE	INTRAVEN	06/12/2025	0.77854
SODIUM BICARBONATE	0.5MEQ/ML	VIAL	INTRAVEN	08/14/2025	1.12279
SODIUM BICARBONATE	1 MEQ/ML	VIAL	INTRAVEN	08/28/2025	0.16091
SODIUM BISULFITE	100 %	POWDER	MISCELL	07/25/2024	0.14070
SODIUM CHLORIDE	234 MG/ML	SOLUTION	ORAL	05/22/2025	0.09030
SODIUM CHLORIDE	5 %	OINT. (G)	OPHTHALMIC	07/07/2022	2.39094
SODIUM CHLORIDE	5 %	DROPS	OPHTHALMIC	03/02/2023	0.87370
SODIUM CHLORIDE	0.65 %	SPRAY	NASAL	06/12/2025	0.03692
SODIUM CHLORIDE	2.5 MEQ/ML	VIAL	INTRAVEN	05/06/2022	0.17599
SODIUM CHLORIDE	4 MEQ/ML	VIAL	INTRAVEN	06/05/2025	0.26106
SODIUM CHLORIDE	1000 MG	TABLET SOL	MISCELL	04/10/2025	0.08027
SODIUM CHLORIDE 0.45 %	0.45 %	IV SOLN	INTRAVEN	11/21/2024	0.00495
SODIUM CHLORIDE 0.9 % (FLUSH)	0.9 %	SYRINGE	INJECTION	01/21/2025	0.05280

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SODIUM CHLORIDE 3 %	3 %	IV SOLN	INTRAVEN	02/06/2025	0.01576
SODIUM CHLORIDE 5 %	5 %	IV SOLN	INTRAVEN	05/22/2025	0.02389
SODIUM CHLORIDE FOR INHALATION	0.9 %	VIAL-NEB	INHALATION	08/01/2024	0.03216
SODIUM CHLORIDE FOR INHALATION	3 %	VIAL-NEB	INHALATION	08/19/2025	0.08968
SODIUM CHLORIDE IRRIG SOLUTION	0.9 %	IRRIG SOLN	IRRIGATION	04/03/2025	0.00729
SODIUM CHLORIDE/ALOE VERA		SPRAY	NASAL	08/11/2022	0.28871
SODIUM CHLORIDE/NAHCO3/KCL/PEG	420G	SOLN RECON	ORAL	04/03/2025	0.01076
SODIUM CHLORIDE/SODIUM BICARB		PACKET	NASAL	07/03/2024	0.09140
SODIUM CITRATE	230 MG	TAB CHEW	ORAL	06/26/2025	0.17994
SODIUM FERRIC GLUCONAT/SUCROSE	62.5MG/5ML	VIAL	INTRAVEN	07/14/2022	2.22440
SODIUM HYPOCHLORITE	0.25 %	SOLUTION	MISCELL	04/03/2025	0.04771
SODIUM HYPOCHLORITE	0.5 %	SOLUTION	MISCELL	08/14/2025	0.04414
SODIUM HYPOCHLORITE	0.125 %	SOLUTION	MISCELL	04/17/2025	0.04938
SODIUM PHENYLBUTYRATE	0.94 G/G	POWDER	ORAL	03/30/2023	11.60278
SODIUM PHENYLBUTYRATE	500 MG	TABLET	ORAL	04/03/2025	15.65970
SODIUM PHOSPHATE,MONO-DIBASIC	19G-7G/118	ENEMA	RECTAL	07/24/2025	0.01058
SODIUM POLYSTYRENE SULFON/SORB	15 G/60 ML	ORAL SUSP	ORAL	06/03/2024	0.38850
SODIUM POLYSTYRENE SULFONATE	15 G	POWDER	ORAL	05/29/2025	0.23981
SODIUM TETRADECYL SULFATE	3 %	VIAL	INTRAVEN	03/08/2022	32.80000
SODIUM, POTASSIUM,MAG SULFATES	17.5-3.13G	SOLN RECON	ORAL	08/28/2025	0.31368
SODIUM,POTASSIUM PHOSPHATES	280-250MG	POWD PACK	ORAL	04/03/2025	0.48079

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SOFT LENS RINSE,STORE SOLUTION		SOLUTION	MISCELL	07/27/2022	0.05193
SOLIFENACIN SUCCINATE	5 MG	TABLET	ORAL	08/14/2025	0.20859
SOLIFENACIN SUCCINATE	10 MG	TABLET	ORAL	04/03/2025	0.22616
SORAFENIB TOSYLATE	200 MG	TABLET	ORAL	08/07/2025	108.96263
SORBITOL		POWDER	MISCELL	05/06/2022	0.09357
SORBITOL SOLUTION	70 %	SOLUTION	MISCELL	12/20/2023	0.01146
SOTALOL HCL	160 MG	TABLET	ORAL	04/03/2025	0.34961
SOTALOL HCL	240 MG	TABLET	ORAL	04/24/2025	0.35001
SOTALOL HCL	80 MG	TABLET	ORAL	06/26/2025	0.15383
SOTALOL HCL	120 MG	TABLET	ORAL	06/18/2025	0.22244
SPEARMINT OIL		OIL	MISCELL	05/06/2022	1.50750
SPINOSAD	0.9 %	SUSPENSION	TOPICAL	09/18/2024	1.95883
SPIRONOLACT/HYDROCHLOROTHIAZID	25 MG-25MG	TABLET	ORAL	08/28/2025	0.83211
SPIRONOLACTONE	25 MG/5 ML	ORAL SUSP	ORAL	08/26/2025	1.73639
SPIRONOLACTONE	100 MG	TABLET	ORAL	04/22/2025	0.13297
SPIRONOLACTONE	25 MG	TABLET	ORAL	08/07/2025	0.04820
SPIRONOLACTONE	50 MG	TABLET	ORAL	08/07/2025	0.11229
ST. JOHN'S WORT	300 MG	CAPSULE	ORAL	12/05/2024	0.06979
STARCH		POWD PACK	ORAL	03/28/2024	0.41272
STARCH		POWDER	ORAL	04/13/2023	0.02680
STEARIC ACID		POWDER	MISCELL	05/06/2022	0.04100

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
STEARYL ALCOHOL		FLAKES	MISCELL	05/06/2022	0.07316
SUCCINYLCHOLINE CHLORIDE	20 MG/ML	VIAL	INJECTION	04/03/2025	0.26800
SUCCINYLCHOLINE/SOD CL,ISO/PF	100 MG/5ML	SYRINGE	INTRAVEN	07/10/2025	2.29140
SUCRALFATE	1 G/10 ML	ORAL SUSP	ORAL	08/28/2025	0.23555
SUCRALFATE	1 G	TABLET	ORAL	04/03/2025	0.28971
SULFACETAMIDE SODIUM	10 %	SUSPENSION	TOPICAL	07/26/2022	0.59351
SULFACETAMIDE SODIUM	10 %	DROPS	OPHTHALMIC	02/09/2023	4.95000
SULFACETAMIDE SODIUM/SULFUR	10 %-4 %	MED. PAD	TOPICAL	05/06/2022	3.76156
SULFACETAMIDE SODIUM/SULFUR	9 %-4 %	CLEANSER	TOPICAL	01/18/2024	0.33228
SULFACETAMIDE SODIUM/SULFUR	9 %-4.5 %	CLEANSER	TOPICAL	03/07/2024	2.59744
SULFACETAMIDE SODIUM/SULFUR	8 %-4 %	SUSPENSION	TOPICAL	02/13/2025	0.22158
SULFADIAZINE	500 MG	TABLET	ORAL	10/10/2024	15.14765
SULFAMETHOXAZOLE/TRIMETHOPRIM	200-40MG/5	ORAL SUSP	ORAL	04/03/2025	0.12003
SULFAMETHOXAZOLE/TRIMETHOPRIM	800-160/20	ORAL SUSP	ORAL	10/14/2024	0.67870
SULFAMETHOXAZOLE/TRIMETHOPRIM	400MG-80MG	TABLET	ORAL	08/14/2025	0.09206
SULFAMETHOXAZOLE/TRIMETHOPRIM	800-160 MG	TABLET	ORAL	04/30/2025	0.03886
SULFAMETHOXAZOLE/TRIMETHOPRIM	80-16MG/ML	VIAL	INTRAVEN	04/03/2025	1.59660
SULFASALAZINE	500 MG	TABLET	ORAL	06/12/2025	0.35139
SULFASALAZINE	500 MG	TABLET DR	ORAL	04/24/2025	0.44475
SULFUR	3 %	BAR	TOPICAL	05/06/2022	4.58700
SULINDAC	150 MG	TABLET	ORAL	05/14/2025	0.25343

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SULINDAC	200 MG	TABLET	ORAL	04/03/2025	0.32160
SUMATRIPTAN	5 MG	SPRAY	NASAL	06/12/2025	23.86825
SUMATRIPTAN	20 MG	SPRAY	NASAL	06/12/2025	20.15825
SUMATRIPTAN SUCC/NAPROXEN SOD	85MG-500MG	TABLET	ORAL	05/06/2022	51.28189
SUMATRIPTAN SUCCINATE	100 MG	TABLET	ORAL	08/28/2025	0.64320
SUMATRIPTAN SUCCINATE	50 MG	TABLET	ORAL	08/28/2025	0.45113
SUMATRIPTAN SUCCINATE	25 MG	TABLET	ORAL	08/28/2025	0.30076
SUMATRIPTAN SUCCINATE	6 MG/0.5ML	CARTRIDGE	SUBCUT	10/03/2022	94.53575
SUMATRIPTAN SUCCINATE	4 MG/0.5ML	CARTRIDGE	SUBCUT	05/06/2022	104.22713
SUMATRIPTAN SUCCINATE	6 MG/0.5ML	VIAL	SUBCUT	02/07/2023	8.04000
SUMATRIPTAN SUCCINATE	6 MG/0.5ML	PEN INJCTR	SUBCUT	11/26/2024	94.50500
SUMATRIPTAN SUCCINATE	4 MG/0.5ML	PEN INJCTR	SUBCUT	05/13/2025	132.43820
SUNITINIB MALATE	12.5 MG	CAPSULE	ORAL	07/31/2025	46.87764
SUNITINIB MALATE	25 MG	CAPSULE	ORAL	07/31/2025	131.41671
SUNITINIB MALATE	50 MG	CAPSULE	ORAL	07/31/2025	236.91081
SUNITINIB MALATE	37.5 MG	CAPSULE	ORAL	07/31/2025	183.37177
SYRGE-NDL,INS 0.3 ML HALF MARK	31 GX5/16"	DISP SYRIN	MISCELL	03/19/2025	0.15008
SYRGE-NDL,INS 0.3 ML HALF MARK	31GX15/64"	DISP SYRIN	MISCELL	07/17/2025	0.29453
SYRGE-NDL,INS 0.3 ML HALF MARK	31 G X1/4"	DISP SYRIN	MISCELL	08/07/2025	0.23571
SYRGE-NDL,INS 0.5 ML HALF MARK	30 G X1/2"	DISP SYRIN	MISCELL	02/29/2024	0.25983
SYRGE-NDL,INS 0.5 ML HALF MARK	31GX15/64"	DISP SYRIN	MISCELL	02/29/2024	0.25983

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SYRGE-NDL,INS 0.5 ML HALF MARK	31 GX5/16"	DISP SYRIN	MISCELL	02/29/2024	0.25983
SYRING-NEEDL,DISP,INSUL,0.3 ML	29 G X1/2"	DISP SYRIN	MISCELL	10/10/2024	0.17380
SYRING-NEEDL,DISP,INSUL,0.3 ML	30 GX5/16"	DISP SYRIN	MISCELL	04/03/2025	0.16321
SYRING-NEEDL,DISP,INSUL,0.3 ML	30 G X1/2"	DISP SYRIN	MISCELL	02/27/2025	0.19149
SYRING-NEEDL,DISP,INSUL,0.3 ML	31 GX5/16"	DISP SYRIN	MISCELL	03/06/2025	0.16321
SYRING-NEEDL,DISP,INSUL,0.3 ML	31GX15/64"	DISP SYRIN	MISCELL	07/17/2025	0.29453
SYRING-NEEDL,DISP,INSUL,0.3 ML	31 G X1/4"	DISP SYRIN	MISCELL	03/06/2025	0.33467
SYRINGE ACCESSORY		EACH	MISCELL	10/17/2024	0.03769
SYRINGE AND NEEDLE,INSULIN,1ML	28GX1/2"	DISP SYRIN	MISCELL	03/11/2025	0.07432
SYRINGE AND NEEDLE,INSULIN,1ML		DISP SYRIN	MISCELL	05/06/2022	0.11776
SYRINGE AND NEEDLE,INSULIN,1ML	30 GX5/16"	DISP SYRIN	MISCELL	03/13/2025	0.08120
SYRINGE AND NEEDLE,INSULIN,1ML	27GX1/2"	DISP SYRIN	MISCELL	03/11/2025	0.07598
SYRINGE AND NEEDLE,INSULIN,1ML	27GX5/8"	DISP SYRIN	MISCELL	09/04/2025	0.19209
SYRINGE AND NEEDLE,INSULIN,1ML	29GX 5/16"	DISP SYRIN	MISCELL	03/27/2025	0.72735
SYRINGE AND NEEDLE,INSULIN,1ML	29 G X1/2"	DISP SYRIN	MISCELL	03/19/2025	0.07651
SYRINGE AND NEEDLE,INSULIN,1ML	30 G X1/2"	DISP SYRIN	MISCELL	03/19/2025	0.17380
SYRINGE AND NEEDLE,INSULIN,1ML	31 GX5/16"	DISP SYRIN	MISCELL	07/28/2025	0.08169
SYRINGE AND NEEDLE,INSULIN,1ML	31GX15/64"	DISP SYRIN	MISCELL	02/27/2025	0.25983
SYRINGE AND NEEDLE,INSULIN,1ML	31 G X1/4"	DISP SYRIN	MISCELL	08/07/2025	0.23571
SYRINGE DISPOSABLE IRRIGATION		DISP SYRIN	MISCELL	05/06/2022	0.05427
SYRINGE FILTER	25 MM-0.22	EACH	MISCELL	05/06/2022	11.19690

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SYRINGE W-NEEDLE,DISPOSAB,3 ML	20GX1"	DISP SYRIN	MISCELL	02/02/2023	0.08898
SYRINGE W-NEEDLE,DISPOSAB,3 ML	20GX1 1/2"	DISP SYRIN	MISCELL	11/03/2022	0.14130
SYRINGE W-NEEDLE,DISPOSAB,3 ML	21 G X 1"	DISP SYRIN	MISCELL	04/01/2025	0.08424
SYRINGE W-NEEDLE,DISPOSAB,3 ML	21GX1 1/2"	DISP SYRIN	MISCELL	02/02/2023	0.08424
SYRINGE W-NEEDLE,DISPOSAB,3 ML	22GX1"	DISP SYRIN	MISCELL	05/11/2023	0.07605
SYRINGE W-NEEDLE,DISPOSAB,3 ML	22GX1 1/2"	DISP SYRIN	MISCELL	02/02/2023	0.07605
SYRINGE W-NEEDLE,DISPOSAB,3 ML	23GX1"	DISP SYRIN	MISCELL	02/20/2025	0.07605
SYRINGE W-NEEDLE,DISPOSAB,3 ML	23GX1 1/2"	DISP SYRIN	MISCELL	06/09/2022	0.06271
SYRINGE W-NEEDLE,DISPOSAB,3 ML	25GX5/8"	DISP SYRIN	MISCELL	06/09/2022	0.06479
SYRINGE W-NEEDLE,DISPOSAB,3 ML	25GX1"	DISP SYRIN	MISCELL	06/09/2022	0.06546
SYRINGE W-NEEDLE,DISPOSAB,3 ML	25GX1 1/2"	DISP SYRIN	MISCELL	06/05/2025	0.17541
SYRINGE W-NEEDLE,DISPOSAB,3 ML	27GX1.25"	DISP SYRIN	MISCELL	05/06/2022	0.08208
SYRINGE WITH NEEDLE, 1 ML	25GX5/8"	DISP SYRIN	MISCELL	02/02/2023	0.05558
SYRINGE WITH NEEDLE, 1 ML	25GX1"	DISP SYRIN	MISCELL	05/06/2022	0.21768
SYRINGE WITH NEEDLE, 1 ML	26GX3/8"	DISP SYRIN	MISCELL	02/02/2023	0.12127
SYRINGE WITH NEEDLE, 1 ML	27GX0.375"	DISP SYRIN	MISCELL	11/21/2024	0.11390
SYRINGE WITH NEEDLE, 1 ML	27GX1/2"	DISP SYRIN	MISCELL	12/08/2022	0.19866
SYRINGE WITH NEEDLE, 1 ML	28GX1/2"	DISP SYRIN	MISCELL	05/06/2022	0.12655
SYRINGE WITH NEEDLE, 10 ML	20GX1"	DISP SYRIN	MISCELL	05/01/2025	0.22110
SYRINGE WITH NEEDLE, 12 ML	18GX1"	DISP SYRIN	MISCELL	05/06/2022	3.40214
SYRINGE WITH NEEDLE, 5 ML	20GX1"	DISP SYRIN	MISCELL	02/02/2023	0.28924

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SYRINGE WITH NEEDLE, 5 ML	20GX1 1/2"	DISP SYRIN	MISCELL	02/02/2023	0.20750
SYRINGE WITH NEEDLE, 5 ML	21 G X 1"	DISP SYRIN	MISCELL	06/05/2025	0.28127
SYRINGE WITH NEEDLE, 5 ML	21GX1 1/2"	DISP SYRIN	MISCELL	02/02/2023	0.25480
SYRINGE WITH NEEDLE, 5 ML	22GX1 1/2"	DISP SYRIN	MISCELL	01/04/2024	0.81472
SYRINGE WITH NEEDLE, 6 ML	20GX1 1/2"	DISP SYRIN	MISCELL	05/06/2022	0.18425
SYRINGE WITH NEEDLE, 6 ML	21 G X 1"	DISP SYRIN	MISCELL	05/06/2022	0.18425
SYRINGE WITH NEEDLE, 6 ML	21GX1 1/2"	DISP SYRIN	MISCELL	05/06/2022	0.18425
SYRINGE, DISPOSABLE, 1 ML		DISP SYRIN	MISCELL	06/05/2025	0.16450
SYRINGE, DISPOSABLE, 10 ML		DISP SYRIN	MISCELL	05/01/2025	0.19541
SYRINGE, DISPOSABLE, 12 ML		DISP SYRIN	MISCELL	05/06/2022	0.11521
SYRINGE, DISPOSABLE, 20 ML		DISP SYRIN	MISCELL	03/27/2025	0.44360
SYRINGE, DISPOSABLE, 3 ML		DISP SYRIN	MISCELL	06/05/2025	0.09561
SYRINGE, DISPOSABLE, 30 ML		DISP SYRIN	MISCELL	02/29/2024	0.30364
SYRINGE, DISPOSABLE, 35 ML		DISP SYRIN	MISCELL	05/06/2022	0.32767
SYRINGE, DISPOSABLE, 5 ML		DISP SYRIN	MISCELL	04/01/2025	0.10800
SYRINGE, DISPOSABLE, 50 ML		DISP SYRIN	MISCELL	06/05/2025	1.03817
SYRINGE, DISPOSABLE, 6 ML		DISP SYRIN	MISCELL	02/16/2023	0.11474
SYRINGE, DISPOSABLE, 60 ML		DISP SYRIN	MISCELL	03/13/2025	0.89311
SYRINGE,ENFIT 1 ML,NON-STERILE		DISP SYRIN	MISCELL	02/20/2025	0.32061
SYRINGE,ENFIT 12ML,NON-STERILE		DISP SYRIN	MISCELL	02/20/2025	0.50506
SYRINGE,ENFIT 3 ML,NON-STERILE		DISP SYRIN	MISCELL	03/19/2025	0.32061

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SYRINGE,ENFIT 35ML,NON-STERILE		DISP SYRIN	MISCELL	03/27/2025	1.13517
SYRINGE,ENFIT 6 ML,NON-STERILE		DISP SYRIN	MISCELL	06/18/2025	0.32061
SYRINGE,ENFIT 60ML,NON-STERILE		DISP SYRIN	MISCELL	09/02/2025	1.69411
SYRINGE,NEEDLE,INSULN,SAFE,1ML	30 GX5/16"	DISP SYRIN	MISCELL	08/28/2024	0.20093
SYRINGE,NEEDLE,INSULN,SAFE,1ML	29 G X1/2"	DISP SYRIN	MISCELL	08/21/2025	0.20093
SYRINGE,NEEDLE,INSULN,SAFE,1ML	30 G X1/2"	DISP SYRIN	MISCELL	08/28/2024	0.20093
SYRINGE,NEEDLE,INSULN,SAFE,1ML	31 GX5/16"	DISP SYRIN	MISCELL	08/28/2024	0.20093
SYRINGE,NEEDLE,INSULN,SF 0.5ML	30 GX5/16"	DISP SYRIN	MISCELL	07/17/2025	0.44796
SYRINGE,NEEDLE,INSULN,SF 0.5ML	29 G X1/2"	DISP SYRIN	MISCELL	04/17/2025	0.21143
SYRINGE,NEEDLE,INSULN,SF,0.3ML	29 G X1/2"	DISP SYRIN	MISCELL	02/22/2024	0.41192
SYRINGE,SAFETY NEEDLE,10 ML	21GX1 1/2"	DISP SYRIN	MISCELL	05/31/2023	0.20087
SYRINGE,SAFETY NEEDLE,10 ML	20GX1"	DISP SYRIN	MISCELL	08/10/2023	0.20087
SYRINGE,SAFETY NEEDLE,10 ML	20GX1 1/2"	DISP SYRIN	MISCELL	08/10/2023	0.20087
SYRINGE,SAFETY WITH NEEDLE,1ML	25GX1"	SYRINGE	MISCELL	09/28/2023	0.20093
SYRINGE,SAFETY WITH NEEDLE,1ML	25GX5/8"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,1ML	27GX1/2"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,1ML	28GX1/2"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,1ML	26GX3/8"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	21GX1 1/2"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	22GX1"	DISP SYRIN	MISCELL	06/07/2023	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	22GX1 1/2"	DISP SYRIN	MISCELL	01/04/2024	0.20093

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
SYRINGE,SAFETY WITH NEEDLE,3ML	23GX1"	DISP SYRIN	MISCELL	09/28/2023	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	25GX5/8"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	25GX1"	DISP SYRIN	MISCELL	07/17/2025	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	21 G X 1"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	20GX1"	DISP SYRIN	MISCELL	05/06/2022	0.20093
SYRINGE,SAFETY WITH NEEDLE,3ML	20GX1 1/2"	DISP SYRIN	MISCELL	05/06/2022	0.24288
SYRINGE,SAFETY WITH NEEDLE,3ML	23GX1 1/2"	DISP SYRIN	MISCELL	06/18/2025	0.20743
SYRINGE,SAFETY WITH NEEDLE,5ML	21GX1 1/2"	DISP SYRIN	MISCELL	08/10/2023	0.20087
SYRINGE,SAFETY WITH NEEDLE,5ML	20GX1 1/2"	DISP SYRIN	MISCELL	05/06/2022	0.20087
SYRINGE,SAFETY WITH NEEDLE,5ML	20GX1"	DISP SYRIN	MISCELL	08/10/2023	0.20087
SYRINGE-NEEDLE,INSULIN,0.5 ML	28GX1/2"	DISP SYRIN	MISCELL	02/27/2025	0.08462
SYRINGE-NEEDLE,INSULIN,0.5 ML	27GX1/2"	DISP SYRIN	MISCELL	12/05/2024	0.21501
SYRINGE-NEEDLE,INSULIN,0.5 ML	29 G X1/2"	DISP SYRIN	MISCELL	05/08/2025	0.07930
SYRINGE-NEEDLE,INSULIN,0.5 ML	30 GX5/16"	DISP SYRIN	MISCELL	03/13/2025	0.08120
SYRINGE-NEEDLE,INSULIN,0.5 ML	30 G X1/2"	DISP SYRIN	MISCELL	03/19/2025	0.17380
SYRINGE-NEEDLE,INSULIN,0.5 ML	31 GX5/16"	DISP SYRIN	MISCELL	07/28/2025	0.08169
SYRINGE-NEEDLE,INSULIN,0.5 ML	31GX15/64"	DISP SYRIN	MISCELL	07/24/2025	0.26934
SYRINGE-NEEDLE,INSULIN,0.5 ML	31 G X1/4"	DISP SYRIN	MISCELL	08/07/2025	0.23571
TACROLIMUS	1 MG	CAPSULE	ORAL	06/05/2025	0.30900
TACROLIMUS	5 MG	CAPSULE	ORAL	06/05/2025	1.45082
TACROLIMUS	0.5 MG	CAPSULE	ORAL	08/14/2025	0.19283

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TACROLIMUS	0.03 %	OINT. (G)	TOPICAL	08/21/2025	1.90950
TACROLIMUS	0.1 %	OINT. (G)	TOPICAL	04/03/2025	1.10505
TADALAFIL	10 MG	TABLET	ORAL	08/21/2025	0.18581
TADALAFIL	20 MG	TABLET	ORAL	08/21/2025	0.25371
TADALAFIL	5 MG	TABLET	ORAL	08/21/2025	0.16705
TADALAFIL	2.5 MG	TABLET	ORAL	08/21/2025	0.18313
TADALAFIL	20 MG	TABLET	ORAL	04/01/2025	0.24879
TAFLUPROST/PF	0.0015 %	DROPERETTE	OPHTHALMIC	08/28/2025	6.04308
TAMOXIFEN CITRATE	10 MG	TABLET	ORAL	07/17/2025	0.49491
TAMOXIFEN CITRATE	20 MG	TABLET	ORAL	09/20/2022	0.43789
TAMSULOSIN HCL	0.4 MG	CAPSULE	ORAL	05/13/2025	0.03245
TASIMELTEON	20 MG	CAPSULE	ORAL	02/25/2025	463.67993
TAURINE	1000 MG	CAPSULE	ORAL	09/22/2022	0.11082
TAVABOROLE	5 %	SOL W/APPL	TOPICAL	04/03/2025	5.97662
TAZAROTENE	0.05 %	GEL (GRAM)	TOPICAL	09/12/2023	6.15188
TAZAROTENE	0.1 %	GEL (GRAM)	TOPICAL	08/22/2023	6.64422
TAZAROTENE	0.05 %	CREAM (G)	TOPICAL	04/03/2025	16.05345
TAZAROTENE	0.1 %	CREAM (G)	TOPICAL	07/17/2025	3.15568
TEA TREE OIL	100 %	OIL	TOPICAL	08/10/2023	0.15990
TECOVIRIMAT	200 MG	CAPSULE	ORAL	08/25/2022	0.01000
TELMISARTAN	40 MG	TABLET	ORAL	04/03/2025	0.29748

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TELMISARTAN	80 MG	TABLET	ORAL	08/21/2025	0.31267
TELMISARTAN	20 MG	TABLET	ORAL	06/12/2025	0.29167
TELMISARTAN/HYDROCHLOROTHIAZID	80-12.5MG	TABLET	ORAL	03/27/2025	0.54181
TELMISARTAN/HYDROCHLOROTHIAZID	40-12.5 MG	TABLET	ORAL	04/24/2025	0.88485
TELMISARTAN/HYDROCHLOROTHIAZID	80 MG-25MG	TABLET	ORAL	04/03/2025	0.75531
TEMAZEPAM	15 MG	CAPSULE	ORAL	04/17/2025	0.06660
TEMAZEPAM	30 MG	CAPSULE	ORAL	07/22/2025	0.08000
TEMAZEPAM	7.5 MG	CAPSULE	ORAL	07/17/2025	3.96990
TEMAZEPAM	22.5 MG	CAPSULE	ORAL	07/17/2025	6.43297
TEMOZOLOMIDE	5 MG	CAPSULE	ORAL	04/03/2025	2.41679
TEMOZOLOMIDE	20 MG	CAPSULE	ORAL	05/27/2025	3.42803
TEMOZOLOMIDE	100 MG	CAPSULE	ORAL	03/01/2021	12.67350
TEMOZOLOMIDE	250 MG	CAPSULE	ORAL	04/03/2025	28.37610
TEMOZOLOMIDE	140 MG	CAPSULE	ORAL	08/21/2025	25.59150
TEMOZOLOMIDE	180 MG	CAPSULE	ORAL	06/12/2025	22.47525
TEMSIROLIMUS	FDN 30MG/3	VIAL	INTRAVEN	04/03/2025	1029.16150
TENOFOVIR DISOPROXIL FUMARATE	300 MG	TABLET	ORAL	06/12/2025	0.86564
TERAZOSIN HCL	1 MG	CAPSULE	ORAL	04/03/2025	0.22056
TERAZOSIN HCL	2 MG	CAPSULE	ORAL	05/13/2025	0.08311
TERAZOSIN HCL	5 MG	CAPSULE	ORAL	08/01/2022	0.13615
TERAZOSIN HCL	10 MG	CAPSULE	ORAL	10/01/2019	0.13216

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TERBINAFINE HCL	250 MG	TABLET	ORAL	06/26/2025	0.20055
TERBINAFINE HCL	1 %	CREAM (G)	TOPICAL	04/03/2025	0.64409
TERBUTALINE SULFATE	2.5 MG	TABLET	ORAL	04/03/2025	5.18986
TERBUTALINE SULFATE	5 MG	TABLET	ORAL	04/03/2025	6.18046
TERBUTALINE SULFATE	1 MG/ML	VIAL	SUBCUT	01/16/2025	2.29140
TERCONAZOLE	0.4 %	CREAM/APPL	VAGINAL	04/03/2025	0.98684
TERCONAZOLE	0.8 %	CREAM/APPL	VAGINAL	06/26/2025	1.61202
TERCONAZOLE	80 MG	SUPP.VAG	VAGINAL	04/03/2025	34.72017
TERIFLUNOMIDE	7 MG	TABLET	ORAL	04/24/2025	1.77282
TERIFLUNOMIDE	14 MG	TABLET	ORAL	06/18/2025	2.03144
TERIPARATIDE	20MCG/DOSE	PEN INJCTR	SUBCUT	04/30/2025	434.17080
TESTOSTERONE	30MG/1.5ML	SOL MD PMP	TRANSDERM	04/03/2025	2.11646
TESTOSTERONE	50 MG (1%)	GEL (GRAM)	TRANSDERM	04/03/2025	1.36885
TESTOSTERONE	25MG(1%)	GEL PACKET	TRANSDERM	06/26/2025	3.18648
TESTOSTERONE	50 MG (1%)	GEL PACKET	TRANSDERM	05/29/2025	1.31168
TESTOSTERONE	1.25G-1.62	GEL PACKET	TRANSDERM	06/26/2025	7.52348
TESTOSTERONE	2.5G-1.62%	GEL PACKET	TRANSDERM	08/28/2025	3.40331
TESTOSTERONE	12.5/1.25G	GEL MD PMP	TRANSDERM	08/19/2025	0.69024
TESTOSTERONE	20.25/1.25	GEL MD PMP	TRANSDERM	08/21/2025	0.60909
TESTOSTERONE CYPIONATE	100 MG/ML	VIAL	INTRAMUSC	02/11/2025	3.84384
TESTOSTERONE CYPIONATE	200 MG/ML	VIAL	INTRAMUSC	07/24/2025	2.73900

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TESTOSTERONE ENANTHATE	200 MG/ML	VIAL	INTRAMUSC	04/15/2025	6.80913
TETRABENAZINE	25 MG	TABLET	ORAL	04/24/2025	6.58926
TETRABENAZINE	12.5 MG	TABLET	ORAL	08/12/2025	0.84265
TETRACAINE HCL	0.5 %	DROPS	OPHTHALMIC	02/11/2025	4.75200
TETRACYCLINE HCL	250 MG	CAPSULE	ORAL	01/10/2025	0.44047
TETRACYCLINE HCL	500 MG	CAPSULE	ORAL	01/10/2025	0.44047
TETRAHYDROZOLINE HCL	0.05 %	DROPS	OPHTHALMIC	08/07/2025	0.17241
THEOPHYLLINE ANHYDROUS	80 MG/15ML	SOLUTION	ORAL	06/24/2025	0.09469
THEOPHYLLINE ANHYDROUS	400 MG	TAB ER 24H	ORAL	06/24/2025	0.47581
THEOPHYLLINE ANHYDROUS	300 MG	TAB ER 12H	ORAL	08/19/2025	0.39442
THEOPHYLLINE ANHYDROUS	450 MG	TAB ER 12H	ORAL	06/24/2025	0.11671
THIAMINE HCL	100 MG	TABLET	ORAL	06/12/2025	0.04191
THIAMINE HCL	250 MG	TABLET	ORAL	06/06/2024	0.06358
THIAMINE HCL	50 MG	TABLET	ORAL	05/06/2022	0.05293
THIAMINE HCL	100 MG/ML	VIAL	INJECTION	08/14/2025	2.73293
THIAMINE MONONITRATE (VIT B1)	100 MG	TABLET	ORAL	09/05/2024	0.02446
THIORIDAZINE HCL	10 MG	TABLET	ORAL	03/06/2025	0.36301
THIORIDAZINE HCL	100 MG	TABLET	ORAL	03/06/2025	0.72729
THIORIDAZINE HCL	25 MG	TABLET	ORAL	04/03/2025	0.51067
THIORIDAZINE HCL	50 MG	TABLET	ORAL	04/03/2025	1.17049
THIOTEPA	15 MG	VIAL	INJECTION	08/21/2025	112.99600

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
THIOTEPA	100 MG	VIAL	INJECTION	09/04/2025	819.56950
THIOTHIXENE	1 MG	CAPSULE	ORAL	04/03/2025	1.94488
THIOTHIXENE	10 MG	CAPSULE	ORAL	04/24/2025	2.24946
THIOTHIXENE	2 MG	CAPSULE	ORAL	04/03/2025	1.05217
THIOTHIXENE	5 MG	CAPSULE	ORAL	04/03/2025	1.59561
TIAGABINE HCL	4 MG	TABLET	ORAL	07/17/2025	3.39944
TIAGABINE HCL	12 MG	TABLET	ORAL	04/24/2025	10.19743
TIAGABINE HCL	16 MG	TABLET	ORAL	05/06/2022	10.73410
TIAGABINE HCL	2 MG	TABLET	ORAL	07/17/2025	3.57940
TIGECYCLINE	50 MG	VIAL	INTRAVEN	07/17/2025	31.64893
TIMOLOL	0.5 %	DROPS	OPHTHALMIC	04/03/2025	28.40275
TIMOLOL MALEATE	10 MG	TABLET	ORAL	04/03/2025	2.27170
TIMOLOL MALEATE	20 MG	TABLET	ORAL	02/20/2025	3.15205
TIMOLOL MALEATE	5 MG	TABLET	ORAL	03/27/2025	1.40195
TIMOLOL MALEATE	0.25 %	SOL-GEL	OPHTHALMIC	08/21/2025	30.48617
TIMOLOL MALEATE	0.5 %	SOL-GEL	OPHTHALMIC	11/19/2024	8.19000
TIMOLOL MALEATE	0.5 %	DROP DAILY	OPHTHALMIC	02/13/2025	10.92500
TIMOLOL MALEATE	0.25 %	DROPS	OPHTHALMIC	04/03/2025	0.75755
TIMOLOL MALEATE	0.5 %	DROPS	OPHTHALMIC	04/03/2025	1.07647
TIMOLOL MALEATE/PF	0.25 %	DROPERETTE	OPHTHALMIC	09/24/2024	10.19193
TIMOLOL MALEATE/PF	0.5 %	DROPERETTE	OPHTHALMIC	04/24/2025	4.68072

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TINIDAZOLE	500 MG	TABLET	ORAL	12/26/2024	1.60599
TINIDAZOLE	250 MG	TABLET	ORAL	04/03/2025	3.26502
TIOPRONIN	100 MG	TABLET	ORAL	04/03/2025	27.50034
TIOPRONIN	100 MG	TABLET DR	ORAL	03/25/2025	21.93623
TIOPRONIN	300 MG	TABLET DR	ORAL	03/25/2025	37.23610
TIOTROPIUM BROMIDE	18 MCG	CAP W/DEV	INHALATION	08/24/2023	10.59898
TIROFIBAN-0.9% SODIUM CHLORIDE	12.5MG/250	PLAST. BAG	INTRAVEN	08/07/2025	0.74772
TIROFIBAN-0.9% SODIUM CHLORIDE	5 MG/100ML	PLAST. BAG	INTRAVEN	04/03/2025	1.48673
TIZANIDINE HCL	2 MG	CAPSULE	ORAL	08/28/2025	0.19171
TIZANIDINE HCL	4 MG	CAPSULE	ORAL	06/05/2025	0.20020
TIZANIDINE HCL	6 MG	CAPSULE	ORAL	09/04/2025	0.27273
TIZANIDINE HCL	2 MG	TABLET	ORAL	08/21/2025	0.03895
TIZANIDINE HCL	4 MG	TABLET	ORAL	08/21/2025	0.03548
TOBRAMYCIN	0.3 %	DROPS	OPHTHALMIC	04/03/2025	2.27800
TOBRAMYCIN	300 MG/4ML	AMPUL-NEB	INHALATION	07/24/2025	18.39548
TOBRAMYCIN IN 0.225% SOD CHLOR	300 MG/5ML	AMPUL-NEB	INHALATION	08/21/2025	1.53143
TOBRAMYCIN SULFATE	1.2 G	VIAL	INJECTION	09/04/2025	81.63271
TOBRAMYCIN SULFATE	40 MG/ML	VIAL	INJECTION	05/08/2025	0.59273
TOBRAMYCIN/DEXAMETHASONE	0.3 %-0.1%	DROPS SUSP	OPHTHALMIC	04/03/2025	6.64464
TOBRAMYCIN/NEBULIZER	300 MG/5ML	AMPUL-NEB	INHALATION	04/03/2025	9.69725
TOLCAPONE	100 MG	TABLET	ORAL	08/28/2024	115.42691

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TOLNAFTATE	1 %	AERO POWD	TOPICAL	07/03/2025	0.04756
TOLNAFTATE	1 %	CREAM (G)	TOPICAL	04/17/2025	0.05328
TOLNAFTATE	1 %	POWDER	TOPICAL	02/15/2024	0.05315
TOLNAFTATE	1 %	SOLUTION	TOPICAL	07/02/2024	0.23949
TOLTERODINE TARTRATE	4 MG	CAP ER 24H	ORAL	06/05/2025	0.38681
TOLTERODINE TARTRATE	2 MG	CAP ER 24H	ORAL	06/05/2025	0.38681
TOLTERODINE TARTRATE	1 MG	TABLET	ORAL	08/21/2025	0.32383
TOLTERODINE TARTRATE	2 MG	TABLET	ORAL	04/03/2025	0.32607
TOLVAPTAN	15 MG	TABLET	ORAL	08/12/2025	46.58789
TOLVAPTAN	30 MG	TABLET	ORAL	08/12/2025	55.88300
TOPIRAMATE	25 MG	CAP ER 24H	ORAL	08/21/2025	9.51920
TOPIRAMATE	50 MG	CAP ER 24H	ORAL	04/03/2025	14.23569
TOPIRAMATE	100 MG	CAP ER 24H	ORAL	08/21/2025	22.74580
TOPIRAMATE	200 MG	CAP ER 24H	ORAL	04/30/2024	26.58560
TOPIRAMATE	15 MG	CAP SPRINK	ORAL	03/11/2024	0.49424
TOPIRAMATE	25 MG	CAP SPRINK	ORAL	03/11/2024	0.56133
TOPIRAMATE	25 MG	CAP SPR 24	ORAL	05/08/2025	5.87163
TOPIRAMATE	50 MG	CAP SPR 24	ORAL	05/29/2025	7.35880
TOPIRAMATE	100 MG	CAP SPR 24	ORAL	05/29/2025	12.61715
TOPIRAMATE	150 MG	CAP SPR 24	ORAL	05/29/2025	13.20000
TOPIRAMATE	200 MG	CAP SPR 24	ORAL	05/29/2025	13.95940

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TOPIRAMATE	25 MG/ML	SOLUTION	ORAL	07/17/2025	2.93667
TOPIRAMATE	50 MG	TABLET	ORAL	07/24/2025	0.05438
TOPIRAMATE	100 MG	TABLET	ORAL	07/24/2025	0.06186
TOPIRAMATE	200 MG	TABLET	ORAL	07/24/2025	0.10162
TOPIRAMATE	25 MG	TABLET	ORAL	09/04/2025	0.02659
TOPOTECAN HCL	4 MG	VIAL	INTRAVEN	05/06/2022	86.10000
TOPOTECAN HCL	4 MG/4 ML	VIAL	INTRAVEN	10/19/2021	11.25563
TOREMIFENE CITRATE	60 MG	TABLET	ORAL	10/26/2021	24.06040
TORSEMIDE	5 MG	TABLET	ORAL	08/21/2025	0.12449
TORSEMIDE	10 MG	TABLET	ORAL	06/12/2025	0.10398
TORSEMIDE	20 MG	TABLET	ORAL	07/17/2025	0.11578
TORSEMIDE	100 MG	TABLET	ORAL	04/03/2025	0.43081
TRAMADOL HCL	50 MG	TABLET	ORAL	05/13/2025	0.02417
TRAMADOL HCL	100 MG	TABLET	ORAL	03/11/2025	1.11070
TRAMADOL HCL	200 MG	TAB ER 24H	ORAL	11/30/2023	3.97100
TRAMADOL HCL	300 MG	TAB ER 24H	ORAL	11/28/2023	3.08660
TRAMADOL HCL	100 MG	TAB ER 24H	ORAL	11/28/2023	1.62006
TRAMADOL HCL/ACETAMINOPHEN	37.5-325MG	TABLET	ORAL	07/03/2025	0.24696
TRANDOLAPRIL	1 MG	TABLET	ORAL	06/18/2025	0.42451
TRANDOLAPRIL	2 MG	TABLET	ORAL	04/03/2025	0.34827
TRANDOLAPRIL	4 MG	TABLET	ORAL	04/03/2025	0.38485

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TRANDOLAPRIL/VERAPAMIL HCL	1MG-240 MG	TAB BP 24H	ORAL	05/06/2022	3.49160
TRANEXAMIC ACID	650 MG	TABLET	ORAL	05/29/2025	2.29899
TRANEXAMIC ACID	1000 MG/10	AMPUL	INTRAVEN	07/17/2025	0.69372
TRANEXAMIC ACID	1000 MG/10	VIAL	INTRAVEN	07/10/2025	0.43202
TRANEXAMIC ACID IN NACL,ISO-OS	1000MG/100	PIGGYBACK	INTRAVEN	09/04/2025	0.13445
TRANYLCYPROMINE SULFATE	10 MG	TABLET	ORAL	04/03/2025	0.69365
TRAVOPROST	0.004 %	DROPS	OPHTHALMIC	08/14/2025	7.80000
TRAZODONE HCL	50 MG	TABLET	ORAL	05/27/2025	0.02856
TRAZODONE HCL	100 MG	TABLET	ORAL	05/27/2025	0.04242
TRAZODONE HCL	150 MG	TABLET	ORAL	05/27/2025	0.06972
TRAZODONE HCL	300 MG	TABLET	ORAL	09/04/2025	1.09290
TREPROSTINIL SODIUM	1 MG/ML	VIAL	INJECTION	04/03/2025	68.91331
TREPROSTINIL SODIUM	2.5 MG/ML	VIAL	INJECTION	04/03/2025	176.55420
TREPROSTINIL SODIUM	5 MG/ML	VIAL	INJECTION	04/03/2025	346.95071
TREPROSTINIL SODIUM	10 MG/ML	VIAL	INJECTION	04/03/2025	700.53933
TRETINOIN	10 MG	CAPSULE	ORAL	04/03/2025	11.24850
TRETINOIN	0.01 %	GEL (GRAM)	TOPICAL	08/28/2025	1.33851
TRETINOIN	0.025 %	GEL (GRAM)	TOPICAL	08/28/2025	1.33851
TRETINOIN	0.05 %	GEL (GRAM)	TOPICAL	08/03/2021	5.22111
TRETINOIN	0.025 %	CREAM (G)	TOPICAL	08/28/2025	1.07200
TRETINOIN	0.05 %	CREAM (G)	TOPICAL	08/28/2025	1.10297

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TRETINOIN	0.1 %	CREAM (G)	TOPICAL	07/31/2025	1.33851
TRETINOIN MICROSPHERES	0.1 %	GEL (GRAM)	TOPICAL	10/17/2024	7.22786
TRETINOIN MICROSPHERES	0.04 %	GEL (GRAM)	TOPICAL	10/26/2021	7.22786
TRETINOIN MICROSPHERES	0.04 %	GEL W/PUMP	TOPICAL	05/06/2022	7.55940
TRETINOIN MICROSPHERES	0.1 %	GEL W/PUMP	TOPICAL	05/06/2022	7.55940
TRETINOIN MICROSPHERES	0.08 %	GEL W/PUMP	TOPICAL	10/17/2024	11.30611
TRIAMCINOLONE ACETONIDE	40 MG/ML	VIAL	INJECTION	04/24/2025	2.72712
TRIAMCINOLONE ACETONIDE	0.147MG/G	AEROSOL	TOPICAL	07/17/2025	2.95561
TRIAMCINOLONE ACETONIDE	0.025 %	CREAM (G)	TOPICAL	05/29/2025	0.05513
TRIAMCINOLONE ACETONIDE	0.1 %	CREAM (G)	TOPICAL	08/14/2025	0.03760
TRIAMCINOLONE ACETONIDE	0.5 %	CREAM (G)	TOPICAL	08/14/2025	0.21797
TRIAMCINOLONE ACETONIDE	0.025 %	OINT. (G)	TOPICAL	04/03/2025	0.08813
TRIAMCINOLONE ACETONIDE	0.1 %	OINT. (G)	TOPICAL	08/07/2025	0.04959
TRIAMCINOLONE ACETONIDE	0.5 %	OINT. (G)	TOPICAL	04/03/2025	0.42880
TRIAMCINOLONE ACETONIDE	0.05 %	OINT. (G)	TOPICAL	04/03/2025	0.77097
TRIAMCINOLONE ACETONIDE	0.025 %	LOTION	TOPICAL	09/21/2023	0.42199
TRIAMCINOLONE ACETONIDE	0.1 %	LOTION	TOPICAL	04/03/2025	0.47659
TRIAMCINOLONE ACETONIDE	55 MCG	SPRAY	NASAL	08/14/2025	0.66802
TRIAMCINOLONE ACETONIDE	0.1 %	PASTE (G)	DENTAL	06/26/2025	5.18160
TRIAMTERENE	100 MG	CAPSULE	ORAL	04/30/2025	5.36406
TRIAMTERENE	50 MG	CAPSULE	ORAL	04/03/2025	7.57301

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TRIAMTERENE/HYDROCHLOROTHIAZID	37.5-25 MG	CAPSULE	ORAL	04/03/2025	0.15011
TRIAMTERENE/HYDROCHLOROTHIAZID	37.5-25 MG	TABLET	ORAL	07/10/2025	0.05215
TRIAMTERENE/HYDROCHLOROTHIAZID	75 MG-50MG	TABLET	ORAL	04/24/2025	0.13901
TRIAZOLAM	0.125 MG	TABLET	ORAL	04/03/2025	1.55815
TRIAZOLAM	0.25 MG	TABLET	ORAL	04/03/2025	1.25585
TRIENTINE HCL	250 MG	CAPSULE	ORAL	11/21/2024	7.11200
TRIFLUOPERAZINE HCL	1 MG	TABLET	ORAL	04/03/2025	1.19917
TRIFLUOPERAZINE HCL	10 MG	TABLET	ORAL	04/03/2025	2.56369
TRIFLUOPERAZINE HCL	2 MG	TABLET	ORAL	04/03/2025	1.89851
TRIFLUOPERAZINE HCL	5 MG	TABLET	ORAL	04/03/2025	1.42563
TRIFLURIDINE	1 %	DROPS	OPHTHALMIC	05/06/2022	13.07386
TRIHEXYPHENIDYL HCL	2 MG	TABLET	ORAL	04/03/2025	0.05816
TRIHEXYPHENIDYL HCL	5 MG	TABLET	ORAL	04/03/2025	0.12368
TRIMETHOBENZAMIDE HCL	300 MG	CAPSULE	ORAL	04/08/2025	0.40608
TRIMETHOPRIM	100 MG	TABLET	ORAL	05/22/2024	1.56030
TRIMIPRAMINE MALEATE	100 MG	CAPSULE	ORAL	04/03/2025	9.32630
TRIMIPRAMINE MALEATE	25 MG	CAPSULE	ORAL	04/03/2025	4.63892
TRIMIPRAMINE MALEATE	50 MG	CAPSULE	ORAL	04/03/2025	7.43860
TRIPROLIDINE HCL	0.625MG/ML	DROPS	ORAL	02/08/2024	0.51242
TRIPROLIDINE HCL	0.938MG/ML	DROPS	ORAL	09/19/2024	0.35733
TRIPROLIDINE HCL	2.5 MG	TABLET	ORAL	06/26/2025	0.42043

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
TRIPROLIDINE/PHENYLEPHRINE/DM	2.5-10-20	LIQUID	ORAL	05/06/2022	0.05841
TROLAMINE SALICYLATE	10 %	CREAM (G)	TOPICAL	03/06/2025	0.07910
TROPICAMIDE	0.5 %	DROPS	OPHTHALMIC	07/09/2019	0.68689
TROPICAMIDE	1 %	DROPS	OPHTHALMIC	08/07/2025	1.28551
TROSPIUM CHLORIDE	60 MG	CAP ER 24H	ORAL	04/03/2025	5.11133
TROSPIUM CHLORIDE	20 MG	TABLET	ORAL	08/21/2025	0.52729
TRYPTOPHAN	500 MG	CAPSULE	ORAL	09/04/2025	0.24678
TURMERIC/TURMERIC ROOT EXTRACT	450MG-50MG	CAPSULE	ORAL	07/27/2022	0.13221
TURPENTINE		LIQUID	MISCELL	04/01/2025	0.03576
TYROSINE	500 MG	CAPSULE	ORAL	08/25/2022	0.08308
UBIDECARENONE	400 MG	CAPSULE	ORAL	06/03/2025	0.81047
UBIDECARENONE		POWDER	MISCELL	11/21/2018	26.71663
UBIQUINOL	100 MG	CAPSULE	ORAL	10/10/2023	0.42863
UMECLIDINIUM BRM/VILANTEROL TR	62.5-25MCG	BLST W/DEV	INHALATION	06/12/2025	8.86840
UNDECYLENIC ACID	25 %	SOLUTION	TOPICAL	02/22/2024	2.96779
UREA	45 %	GEL/PF APP	TOPICAL	05/06/2022	5.08299
UREA	45 %	GEL (ML)	TOPICAL	05/06/2022	5.12445
UREA	10 %	CREAM (G)	TOPICAL	06/18/2025	0.16774
UREA	20 %	CREAM (G)	TOPICAL	03/14/2024	0.06700
UREA	45 %	CREAM (G)	TOPICAL	05/06/2022	0.61729
UREA	10 %	LOTION	TOPICAL	01/26/2023	0.01965

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
URINARY TRACT INFECTION TEST		STICK (EA)	MISCELL	05/06/2022	5.49910
URINE ALBUMIN TEST		STRIP	MISCELL	05/06/2022	3.16580
URSODIOL	300 MG	CAPSULE	ORAL	08/19/2025	0.35875
URSODIOL	250 MG	TABLET	ORAL	04/03/2025	0.66464
URSODIOL	500 MG	TABLET	ORAL	04/03/2025	1.08540
VALACYCLOVIR HCL	500 MG	TABLET	ORAL	07/31/2025	0.24187
VALACYCLOVIR HCL	1000 MG	TABLET	ORAL	05/27/2025	0.37405
VALERIAN ROOT	500 MG	CAPSULE	ORAL	07/27/2022	0.11033
VALGANCICLOVIR HCL	50 MG/ML	SOLN RECON	ORAL	03/04/2025	2.26092
VALGANCICLOVIR HCL	450 MG	TABLET	ORAL	03/26/2024	2.49530
VALPROIC ACID	250 MG	CAPSULE	ORAL	08/05/2025	0.27439
VALPROIC ACID (AS SODIUM SALT)	250 MG/5ML	SOLUTION	ORAL	08/26/2025	0.03228
VALPROIC ACID (AS SODIUM SALT)	250 MG/5ML	SOLUTION	ORAL	05/20/2025	0.13346
VALPROIC ACID (AS SODIUM SALT)	500 MG/5ML	VIAL	INTRAVEN	12/19/2024	0.62835
VALRUBICIN	40 MG/ML	VIAL	INTRAVESIC	07/22/2025	262.50000
VALSARTAN	4 MG/ML	SOLUTION	ORAL	07/10/2025	1.87321
VALSARTAN	320 MG	TABLET	ORAL	04/03/2025	0.23063
VALSARTAN	160 MG	TABLET	ORAL	06/12/2025	0.13430
VALSARTAN	80 MG	TABLET	ORAL	04/03/2025	0.10071
VALSARTAN	40 MG	TABLET	ORAL	04/03/2025	0.18849
VALSARTAN/HYDROCHLOROTHIAZIDE	80-12.5MG	TABLET	ORAL	07/03/2025	0.19931

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
VALSARTAN/HYDROCHLOROTHIAZIDE	160-12.5MG	TABLET	ORAL	07/17/2025	0.20794
VALSARTAN/HYDROCHLOROTHIAZIDE	160MG-25MG	TABLET	ORAL	07/17/2025	0.26034
VALSARTAN/HYDROCHLOROTHIAZIDE	320MG-25MG	TABLET	ORAL	06/18/2025	0.29772
VALSARTAN/HYDROCHLOROTHIAZIDE	320-12.5MG	TABLET	ORAL	07/03/2025	0.34001
VANCOMYCIN HCL	125 MG	CAPSULE	ORAL	04/03/2025	1.63614
VANCOMYCIN HCL	250 MG	CAPSULE	ORAL	05/22/2024	2.27130
VANCOMYCIN HCL	50 MG/ML	SOLN RECON	ORAL	04/18/2024	1.06128
VANCOMYCIN HCL	25 MG/ML	SOLN RECON	ORAL	04/03/2025	1.19832
VANCOMYCIN HCL	1 G	VIAL	INTRAVEN	06/20/2024	2.66640
VANCOMYCIN HCL	10 G	VIAL	INTRAVEN	09/07/2023	26.75250
VANCOMYCIN HCL	5 G	VIAL	INTRAVEN	09/21/2023	17.85000
VANCOMYCIN HCL	500 MG	VIAL	INTRAVEN	07/03/2025	2.54600
VANCOMYCIN HCL	750 MG	VIAL	INTRAVEN	06/26/2025	6.75640
VANCOMYCIN HCL	1.25 G	VIAL	INTRAVEN	08/29/2023	12.66300
VANCOMYCIN HCL	1.5 G	VIAL	INTRAVEN	08/15/2023	12.78970
VARDENAFIL HCL	5 MG	TABLET	ORAL	11/21/2024	18.76840
VARDENAFIL HCL	10 MG	TABLET	ORAL	04/24/2025	23.52980
VARDENAFIL HCL	20 MG	TABLET	ORAL	04/03/2025	4.50164
VARDENAFIL HCL	2.5 MG	TABLET	ORAL	11/21/2024	16.34605
VARDENAFIL HCL	10 MG	TAB RAPDIS	ORAL	05/06/2022	18.99581
VARENICLINE TARTRATE	0.5 MG	TABLET	ORAL	09/04/2025	0.64368

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
VARENICLINE TARTRATE	1 MG	TABLET	ORAL	09/04/2025	1.62308
VARENICLINE TARTRATE	0.5 (11)-1	TAB DS PK	ORAL	04/24/2025	1.38930
VASOPRESSIN	20 UNIT/ML	VIAL	INTRAVEN	07/02/2024	11.58600
VECURONIUM BROMIDE	10 MG	VIAL	INTRAVEN	04/11/2023	3.13632
VECURONIUM BROMIDE	20 MG	VIAL	INTRAVEN	08/08/2024	6.17220
VENLAFAXINE HCL	37.5 MG	CAP ER 24H	ORAL	06/05/2025	0.08263
VENLAFAXINE HCL	75 MG	CAP ER 24H	ORAL	04/17/2025	0.10735
VENLAFAXINE HCL	150 MG	CAP ER 24H	ORAL	05/27/2025	0.11750
VENLAFAXINE HCL	37.5 MG	TAB ER 24	ORAL	08/28/2025	0.91418
VENLAFAXINE HCL	75 MG	TAB ER 24	ORAL	04/16/2024	0.62444
VENLAFAXINE HCL	150 MG	TAB ER 24	ORAL	06/26/2025	0.44653
VENLAFAXINE HCL	225 MG	TAB ER 24	ORAL	06/26/2025	1.02689
VENLAFAXINE HCL	25 MG	TABLET	ORAL	04/03/2025	0.12864
VENLAFAXINE HCL	37.5 MG	TABLET	ORAL	05/29/2025	0.12944
VENLAFAXINE HCL	50 MG	TABLET	ORAL	04/03/2025	0.13628
VENLAFAXINE HCL	75 MG	TABLET	ORAL	04/24/2025	0.11578
VENLAFAXINE HCL	100 MG	TABLET	ORAL	04/11/2024	0.17098
VERAPAMIL HCL	100 MG	CAP24H PCT	ORAL	12/19/2024	6.34958
VERAPAMIL HCL	120 MG	CAP24H PEL	ORAL	03/11/2025	0.70868
VERAPAMIL HCL	240 MG	CAP24H PEL	ORAL	04/03/2025	2.91799
VERAPAMIL HCL	180 MG	CAP24H PEL	ORAL	06/17/2025	1.71949

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
VERAPAMIL HCL	120 MG	TABLET	ORAL	05/01/2025	0.08742
VERAPAMIL HCL	40 MG	TABLET	ORAL	08/19/2025	0.08059
VERAPAMIL HCL	80 MG	TABLET	ORAL	05/01/2025	0.05789
VERAPAMIL HCL	240 MG	TABLET ER	ORAL	08/21/2025	0.18811
VERAPAMIL HCL	180 MG	TABLET ER	ORAL	08/21/2025	0.21569
VERAPAMIL HCL	120 MG	TABLET ER	ORAL	04/03/2025	0.24053
VERAPAMIL HCL	2.5 MG/ML	AMPUL	INTRAVEN	02/01/2024	12.70830
VERAPAMIL HCL	2.5 MG/ML	VIAL	INTRAVEN	07/08/2025	1.34000
VIGABATRIN	500 MG	POWD PACK	ORAL	05/06/2025	51.46785
VIGABATRIN	500 MG	TABLET	ORAL	05/06/2025	26.47141
VILAZODONE HCL	10 MG	TABLET	ORAL	11/14/2023	1.53430
VILAZODONE HCL	20 MG	TABLET	ORAL	08/21/2025	1.86037
VILAZODONE HCL	40 MG	TABLET	ORAL	08/21/2025	1.84205
VINCRISTINE SULFATE	1 MG/ML	VIAL	INTRAVEN	05/06/2022	8.14800
VINCRISTINE SULFATE	2 MG/2 ML	VIAL	INTRAVEN	05/06/2022	6.88975
VINORELBINE TARTRATE	10 MG/ML	VIAL	INTRAVEN	12/20/2023	11.88000
VINORELBINE TARTRATE	50 MG/5 ML	VIAL	INTRAVEN	12/20/2023	11.88000
VIT A PALMITATE/VIT C/VIT D3	750-35/ML	DROPS	ORAL	08/24/2023	0.23544
VIT A PALMITATE/VIT C/VIT D3	250-50/ML	DROPS	ORAL	02/06/2025	0.12851
VIT A/VIT C/VIT E/ZINC/COPPER	2148-113	TABLET	ORAL	01/30/2025	0.11504
VIT B COMP/M-TETRAHYDROFOLATE	680MCG DFE	CAPSULE	ORAL	07/18/2024	0.52164

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New Hampshire Medicaid Program
Monthly Maximum Allowable Cost (MAC) Listing

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
VIT B12/LEVOMEFOLATE/VIT B6/B2	1-6-50-5MG	TABLET	ORAL	04/07/2020	2.28669
VITAMIN A	3000 MCG	CAPSULE	ORAL	05/27/2025	0.03544
VITAMIN A PALMITATE	3000 MCG	CAPSULE	ORAL	06/17/2025	0.02164
VITAMIN A PALMITATE	7500 MCG	CAPSULE	ORAL	07/18/2024	0.42858
VITAMIN A/VIT C/ZINC/PROPOLIS	15 MG	LOZENGE	ORAL	05/06/2022	0.02673
VITAMIN B COMPLEX		CAPSULE	ORAL	11/02/2023	0.07192
VITAMIN B COMPLEX		TABLET	ORAL	08/21/2025	0.03605
VITAMIN B COMPLEX/FOLIC ACID	0.4 MG	TABLET	ORAL	08/28/2025	0.08281
VITAMIN B COMPLEX/FOLIC ACID	0.4 MG	TABLET ER	ORAL	01/09/2025	0.07812
VITAMIN E	268 MG	CAPSULE	ORAL	12/17/2024	0.09038
VITAMIN E (DL,TOCOPHERYL ACET)	450 MG	CAPSULE	ORAL	04/29/2025	0.10439
VITAMIN E (DL,TOCOPHERYL ACET)	180 MG	CAPSULE	ORAL	10/17/2024	0.02734
VITAMIN E (DL,TOCOPHERYL ACET)	90 MG	CAPSULE	ORAL	01/25/2024	0.02192
VITAMIN E (DL,TOCOPHERYL ACET)	45 MG	CAPSULE	ORAL	04/03/2025	0.02948
VITAMINS A AND D		OINT. (G)	TOPICAL	05/09/2024	0.00998
VITAMINS B1,B2,B3,B5,AND B6	100-2MG/ML	VIAL	INJECTION	10/26/2021	4.87564
VITB,C/CHOLINE/INOSITOL/BIOFLV	500 MG	TABLET	ORAL	04/29/2025	0.23450
VITS A AND D/WHITE PET/LANOLIN		OINT. (G)	TOPICAL	08/21/2025	0.00430
VITS A,C,E/LUTEIN/MINERALS	300MCG-200	TABLET	ORAL	04/24/2025	0.09938
VORICONAZOLE	200 MG/5ML	SUSP RECON	ORAL	04/03/2025	8.21584
VORICONAZOLE	50 MG	TABLET	ORAL	02/09/2023	1.69197

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New Hampshire Medicaid Program
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Generic Name	Strength	Form	Route	Effective Date	MAC Price
VORICONAZOLE	200 MG	TABLET	ORAL	05/29/2025	2.77332
VORICONAZOLE	200 MG	VIAL	INTRAVEN	05/22/2025	15.06225
WARFARIN SODIUM	10 MG	TABLET	ORAL	04/03/2025	0.12033
WARFARIN SODIUM	2.5 MG	TABLET	ORAL	04/03/2025	0.10157
WARFARIN SODIUM	2 MG	TABLET	ORAL	04/03/2025	0.07986
WARFARIN SODIUM	5 MG	TABLET	ORAL	04/22/2025	0.07596
WARFARIN SODIUM	7.5 MG	TABLET	ORAL	04/03/2025	0.14244
WARFARIN SODIUM	1 MG	TABLET	ORAL	04/03/2025	0.09407
WARFARIN SODIUM	3 MG	TABLET	ORAL	04/03/2025	0.10082
WARFARIN SODIUM	4 MG	TABLET	ORAL	04/03/2025	0.09219
WARFARIN SODIUM	6 MG	TABLET	ORAL	04/03/2025	0.12033
WATER		LIQUID	ORAL	11/07/2024	0.02934
WATER FOR INJECTION,STERILE		SYRINGE	INJECTION	04/24/2025	0.30003
WATER FOR INJECTION,STERILE		VIAL	INJECTION	08/21/2025	0.08040
WATER FOR INJECTION,STERILE		IV SOLN	INTRAVEN	04/03/2025	0.00552
WATER FOR IRRIGATION,STERILE		IRRIG SOLN	IRRIGATION	03/06/2025	0.00650
WHEAT DEXTRIN	3 G/4 G	POWDER	ORAL	08/21/2025	0.05841
WITCH HAZEL	50 %	MED. PAD	TOPICAL	05/22/2025	0.05909
ZAFIRLUKAST	20 MG	TABLET	ORAL	06/11/2024	0.81405
ZAFIRLUKAST	10 MG	TABLET	ORAL	06/12/2025	1.42665
ZALEPLON	5 MG	CAPSULE	ORAL	04/03/2025	0.33674

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Generic Name	Strength	Form	Route	Effective Date	MAC Price
ZALEPLON	10 MG	CAPSULE	ORAL	04/03/2025	0.47356
ZIDOVUDINE	100 MG	CAPSULE	ORAL	05/06/2022	2.02608
ZIDOVUDINE	10 MG/ML	SYRUP	ORAL	07/22/2025	0.14836
ZIDOVUDINE	300 MG	TABLET	ORAL	08/21/2025	0.91388
ZILEUTON	600 MG	TBMP 12HR	ORAL	04/03/2025	11.07316
ZINC AMINO ACID CHELATE	50 MG	TABLET	ORAL	09/26/2024	0.06298
ZINC CHLORIDE	1 MG/ML	VIAL	INTRAVEN	04/03/2025	3.95372
ZINC GLUCONATE	30 MG	TABLET	ORAL	05/06/2022	0.05253
ZINC GLUCONATE	50 MG	TABLET	ORAL	07/17/2025	0.02814
ZINC GLUCONATE	100 MG	TABLET	ORAL	07/17/2025	0.05755
ZINC OXIDE	22 %	CREAM (G)	TOPICAL	08/03/2023	0.28478
ZINC OXIDE	20 %	OINT. (G)	TOPICAL	04/10/2025	0.00789
ZINC OXIDE	40 %	OINT. (G)	TOPICAL	03/02/2023	0.01735
ZINC OXIDE	10 %	OINT. (G)	TOPICAL	02/29/2024	0.04492
ZINC SULFATE	50(220)MG	CAPSULE	ORAL	08/18/2022	0.04443
ZINC SULFATE	50(220)MG	TABLET	ORAL	03/19/2025	0.01988
ZINC SULFATE	1 MG/ML	VIAL	INTRAVEN	04/03/2025	1.95983
ZINC SULFATE	5 MG/ML	VIAL	INTRAVEN	06/12/2025	7.38896
ZINC SULFATE	3 MG/ML	VIAL	INTRAVEN	04/24/2025	5.17068
ZIPRASIDONE HCL	20 MG	CAPSULE	ORAL	04/24/2025	0.53980
ZIPRASIDONE HCL	40 MG	CAPSULE	ORAL	06/18/2025	0.41093

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ZIPRASIDONE HCL	60 MG	CAPSULE	ORAL	04/03/2025	0.57776
ZIPRASIDONE HCL	80 MG	CAPSULE	ORAL	04/03/2025	0.43796
ZIPRASIDONE MESYLATE	FNL 20MG/1	VIAL	INTRAMUSC	08/01/2024	19.86023
ZOLEDRONIC ACID	4 MG/5 ML	VIAL	INTRAVEN	06/26/2025	1.87600
ZOLEDRONIC ACID/MANNITOL-WATER	5 MG/100ML	PIGGYBACK	INTRAVEN	05/22/2025	1.29819
ZOLEDRONIC ACID/MANNITOL-WATER	5 MG/100ML	PGGYBK BTL	INTRAVEN	04/03/2025	1.29913
ZOLMITRIPTAN	2.5 MG	TABLET	ORAL	04/03/2025	2.64427
ZOLMITRIPTAN	5 MG	TABLET	ORAL	04/03/2025	2.21100
ZOLMITRIPTAN	2.5 MG	TAB RAPDIS	ORAL	05/22/2024	5.57530
ZOLMITRIPTAN	5 MG	TAB RAPDIS	ORAL	04/03/2025	5.99440
ZOLMITRIPTAN	5 MG	SPRAY	NASAL	12/03/2024	77.86670
ZOLMITRIPTAN	2.5 MG	SPRAY	NASAL	04/01/2025	108.12213
ZOLPIDEM TARTRATE	5 MG	TABLET	ORAL	08/21/2025	0.03819
ZOLPIDEM TARTRATE	10 MG	TABLET	ORAL	07/17/2025	0.04422
ZOLPIDEM TARTRATE	6.25 MG	TAB MPHASE	ORAL	08/28/2025	0.51992
ZOLPIDEM TARTRATE	12.5 MG	TAB MPHASE	ORAL	07/17/2025	0.48803
ZOLPIDEM TARTRATE	1.75 MG	TAB SUBL	SUBLINGUAL	08/19/2021	6.37434
ZOLPIDEM TARTRATE	3.5 MG	TAB SUBL	SUBLINGUAL	05/06/2022	6.37434
ZONISAMIDE	100 MG	CAPSULE	ORAL	04/03/2025	0.16643
ZONISAMIDE	25 MG	CAPSULE	ORAL	06/05/2025	0.17555
ZONISAMIDE	50 MG	CAPSULE	ORAL	04/03/2025	0.20584

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