

Montana Medicaid CY 2014 Top 25 & HEP C Drugs

Label	Payment Amount	Prescriptions Filled	Paid Drug Quantity	Days of Supply	Unique Recipients	Current WAC ¹
1 ADVATE 2,401-3,600 UNITS VI	\$4,328,811	30	1,294,066	844	3	\$1.49
2 SOVALDI 400 MG TABLET	\$3,721,163	132	3,668	3,668	39	\$1,000.00
3 ABILIFY 5 MG TABLET	\$2,183,158	3,694	86,625	97,593	872	\$29.73 *
4 FIRAZYR 30 MG/3 ML SYRINGE	\$2,057,679	21	756	588	2	\$3,025.89
5 ABILIFY 10 MG TABLET	\$1,642,337	2,534	65,065	69,566	611	\$29.73 *
6 LANTUS 100 UNITS/ML VIAL	\$1,435,248	4,126	67,443	106,535	653	\$24.85
7 PULMOZYME 1 MG/ML AMPUL	\$1,283,397	363	38535	10584	55	\$37.54
8 ABILIFY 15 MG TABLET	\$1,236,851	2,128	49,139	59,418	437	\$29.73 *
9 PROAIR HFA 90 MCG INHALER	\$1,222,179	21,623	200,696	468,627	9,250	\$5.88 *
10 ABILIFY 20 MG TABLET	\$1,212,283	1,248	33,663	35,273	235	\$42.05 *
11 CYMBALTA 60 MG CAPSULE	\$1,134,793	4,502	152,981	132,776	943	\$7.27 *
12 INVEGA SUSTENNA 234 MG PREF	\$1,068,070	577	867	14629	91	\$1,339.68
13 COPAXONE 20 MG/ML SYRINGE	\$1,043,355	201	1,331	5,983	36	\$203.68
14 HUMIRA 40 MG/0.8 ML PEN	\$994,899	320	784	8,927	62	\$1,727.53
15 METHYLPHENIDATE ER 36 MG TA	\$956,937	5,222	185,139	152,955	1,004	\$6.09 *
16 NASONEX 50 MCG NASAL SPRAY	\$943,666	5,717	97,623	170,242	2,617	\$12.70
17 NOVOLOG 100 UNITS/ML FLEXPE	\$791,031	2,026	34,209	53,388	436	\$28.77
18 NOVOLOG 100 UNIT/ML VIAL	\$790,818	2,336	44,855	62,391	421	\$22.35
19 ADVAIR 250-50 DISKUS	\$746,642	2,591	155,372	77,402	679	\$5.16
20 ABILIFY 30 MG TABLET	\$709,035	769	19579	21030	118	\$42.05
21 SYNAGIS 100 MG/1 ML VIAL	\$661,170	255	269	1,399	103	\$2,629.14
22 ABILIFY 2 MG TABLET	\$639,954	1075	26579	27385	286	\$29.73
23 ENBREL 50 MG/ML SURECLICK S	\$599,077	216	870	6,055	47	\$881.55
24 SPIRIVA 18 MCG CP-HANDIHALE	\$584,145	1,989	59,974	59,640	394	\$10.53 *
25 METHYLPHENIDATE ER 54 MG TA	\$551,152	3252	95859	94803	569	\$6.60 *
59 HARVONI 90-400 MG TABLET	\$321,285	10	5	280	280	\$1,125.00
641 OLYSIO 150 MG CAPSULE	\$22,561	1	1	28	28	\$790.00

- 2,930 total unduplicated members with claims containing Hep C related diagnosis codes (070.41-070.49) with eligibility in June and July 2015.
- 167,621 total medicaid members for CY 2014
- The Hepatitis C category was added to the Preferred Drug List in May 2006.
- Supplemental rebates were made available to Montana through the National Medicaid Pooling Initiative starting the 2nd quarter of 2014, for Sovaldi.
- Montana has not collected supplemental rebates for Harvoni or Sovaldi because the Department has not agreed to the conditions set forth by the manufacturer.

¹For drugs with Multiple NDC (noted by "*"), WAC is aggregated with a weighted average based on number of claims.