Over-the-Counter Drug List

Kentucky Medicaid FFS Program

Effective 06/23/2026

This list applies only to the Kentucky Medicaid Fee-for-Service (FFS) program. For the Managed Care Organizations (MCO) program, please refer to the OTC list on the MedImpact provider portal at: https://kyportal.medimpact.com/provider-documents/drug-information Inclusion in this list does not guarantee coverage. Quantity, cost, and other limits may apply.

ALLERGY, COUGH & COLD

Generic Drug Name	Strength	Dosage Form	Route
BENZOCAINE/MENTHOL	15 MG-3.6 MG	LOZENGE	MUCOUS MEM
CETIRIZINE HCL	1 MG/ML	SOLUTION	ORAL
CETIRIZINE HCL	5 MG	TABLET	ORAL
CETIRIZINE HCL	10 MG	TABLET	ORAL
CHLORPHENIRAMINE MALEATE	4 MG	TABLET	ORAL
CODEINE PHOSPHATE/GUAIFENESIN	10-100 MG/5 ML	LIQUID	ORAL
CROMOLYN SODIUM	5.2 MG	SPRAY/PUMP	NASAL
DEXTROMETHORPHAN POLISTIREX	30 MG/5 ML	SUS ER 12H	ORAL
DIPHENHYDRAMINE HCL	25 MG	CAPSULE	ORAL
DIPHENHYDRAMINE HCL	50 MG	CAPSULE	ORAL
DIPHENHYDRAMINE HCL	12.5 MG/5 ML	LIQUID	ORAL
DIPHENHYDRAMINE HCL	12.5 MG	TAB CHEW	ORAL
DIPHENHYDRAMINE HCL	25 MG	TABLET	ORAL
FEXOFENADINE HCL	30 MG/5 ML	SUSP	ORAL
FEXOFENADINE HCL	60 MG	TABLET	ORAL
FEXOFENADINE HCL	180 MG	TABLET	ORAL
GUAIFENESIN	100 MG/5 ML	LIQUID	ORAL
GUAIFENESIN	200 MG	TABLET	ORAL
GUAIFENESIN	400 MG	TABLET	ORAL
GUAIFENESIN	600 MG	TAB ER 12H	ORAL
GUAIFENESIN	1200 MG	TAB ER 12H	ORAL
GUAIFENESIN/DEXTROMETHORPHAN	100-5 MG/5 ML	LIQUID	ORAL
GUAIFENESIN/DEXTROMETHORPHAN	100 MG-10 MG/5 ML	LIQUID	ORAL
GUAIFENESIN/DEXTROMETHORPHAN	200 MG-10 MG/5 ML	SYRUP	ORAL
GUAIFENESIN/DEXTROMETHORPHAN	600 MG-30 MG	TAB ER 12H	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
GUAIFENESIN/DEXTROMETHORPHAN	1200 MG-60 MG	TAB ER 12H	ORAL
GUAIFENESIN/DEXTROMETHORPHAN	400 MG-20 MG	TABLET	ORAL
GUAIFENESIN/PSEUDOEPHEDRNE HCL	600 MG-60 MG	TAB ER 12H	ORAL
KETOTIFEN FUMARATE	0.025%	DROPS	OPHTHALMIC
LEVOCETIRIZINE DIHYDROCHLORIDE	5 MG	TABLET	ORAL
LORATADINE	5 MG/5 ML	SOLUTION	ORAL
LORATADINE	5 MG	TAB CHEW	ORAL
LORATADINE	10 MG	TAB RAPDIS	ORAL
LORATADINE	10 MG	TABLET	ORAL
LORATADINE/PSEUDOEPHEDRINE	5 MG-120 MG	TAB ER 12H	ORAL
LORATADINE/PSEUDOEPHEDRINE	10 MG-240 MG	TAB ER 24H	ORAL
OXYMETAZOLINE HCL	0.05 %	MIST	NASAL
OXYMETAZOLINE HCL	0.05 %	SPRAY	NASAL
PSEUDOEPHEDRINE HCL	15 MG/5 ML	LIQUID	ORAL
PSEUDOEPHEDRINE HCL	30 MG	TABLET	ORAL
PSEUDOEPHEDRINE HCL	60 MG	TABLET	ORAL
PSEUDOEPHEDRINE HCL	120 MG	TABLET ER	ORAL
SODIUM CHLORIDE	0.65 %	DROPS	NASAL
SODIUM CHLORIDE	0.65 %	SPRAY	NASAL

ANALGESICS

Generic Drug Name	Strength	Dosage Form	Route
ACETAMINOPHEN	500 MG	CAPSULE	ORAL
ACETAMINOPHEN	160 MG/5 ML	LIQUID	ORAL
ACETAMINOPHEN	160 MG/5 ML	ORAL SUSP	ORAL
ACETAMINOPHEN	80 MG	TAB CHEW	ORAL
ACETAMINOPHEN	160 MG	TAB CHEW	ORAL
ACETAMINOPHEN	325 MG	TABLET	ORAL
ACETAMINOPHEN	500 MG	TABLET	ORAL
ACETAMINOPHEN	650 MG	TABLET SA	ORAL
ACETAMINOPHEN	80 MG	SUPP.RECT	RECTAL
ACETAMINOPHEN	120 MG	SUPP.RECT	RECTAL
ACETAMINOPHEN	325 MG	SUPP.RECT	RECTAL
ACETAMINOPHEN	650 MG	SUPP.RECT	RECTAL
ACETAMINOPHEN (melt tab)	160 MG	TAB RAPDIS	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
ASPIRIN	81 MG	TAB CHEW	ORAL
ASPIRIN	325 MG	TABLET	ORAL
ASPIRIN	81 MG	TABLET DR	ORAL
ASPIRIN	325 MG	TABLET DR	ORAL
DICLOFENAC SODIUM	1%	GEL	TOPICAL
IBUPROFEN	200 MG	CAPSULE	ORAL
IBUPROFEN	50 MG/1.25 ML	DROPS SUSP	ORAL
IBUPROFEN	100 MG/5 ML	ORAL SUSP	ORAL
IBUPROFEN	100 MG	TAB CHEW	ORAL
IBUPROFEN	200 MG	TABLET	ORAL
NAPROXEN SODIUM	220 MG	TABLET	ORAL

CONTRACEPTION

Generic Drug Name	Strength	Dosage Form	Route
*LEVONORGESTREL	1.5 MG	TABLET	ORAL

DERMATOLOGICAL

Generic Drug Name	Strength	Dosage Form	Route
BACITRACIN ZINC	500 UNIT/GM	OINT. (G)	TOPICAL
BACITRACIN ZINC/POLYMYXIN B	500-10K/GM	OINT. (G)	TOPICAL
BENZOYL PEROXIDE	5 %	CLEANSER	TOPICAL
BENZOYL PEROXIDE	10 %	CLEANSER	TOPICAL
BENZOYL PEROXIDE	10 %	CREAM (G)	TOPICAL
BENZOYL PEROXIDE	2.5 %	GEL (GRAM)	TOPICAL
BENZOYL PEROXIDE	5 %	GEL (GRAM)	TOPICAL
BENZOYL PEROXIDE	10 %	GEL (GRAM)	TOPICAL
BENZOYL PEROXIDE	5 %	LOTION	TOPICAL
BENZOYL PEROXIDE	10 %	LOTION	TOPICAL
CAPSAICIN	0.025 %	CREAM (G)	TOPICAL
CHLORHEXIDINE GLUCONATE	4 %	LIQUID	TOPICAL
CLOTRIMAZOLE	1 %	CREAM (G)	TOPICAL

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Generic Drug Name	Strength	Dosage Form	Route
DOCOSANOL	10 %	CREAM (G)	TOPICAL
HYDROCORTISONE	0.5 %	CREAM (G)	TOPICAL
HYDROCORTISONE	1 %	CREAM (G)	TOPICAL
HYDROCORTISONE	1 %	LOTION (GM)	TOPICAL
HYDROCORTISONE	1 %	LOTION (ML)	TOPICAL
HYDROCORTISONE	1 %	OINT. (G)	TOPICAL
HYDROCORTISONE ACETATE	0.5 %	CREAM (G)	TOPICAL
HYDROCORTISONE ACETATE	1 %	OINT. (G)	TOPICAL
HYDROCORTISONE/ALOE VERA	0.5 %	CREAM (G)	TOPICAL
HYDROCORTISONE/ALOE VERA	1 %	CREAM (G)	TOPICAL
LIDOCAINE	4 %	ADH. PATCH	TOPICAL
LIDOCAINE	4 %	CREAM (G)	TOPICAL
LIDOCAINE GEL (WOUND CARE)	2 %	GEL (ML)	TOPICAL
LIDOCAINE HCL	4 %	CREAM (G)	TOPICAL
MICONAZOLE NITRATE	2 %	AERO POWD	TOPICAL
MICONAZOLE NITRATE	2 %	CREAM (G)	TOPICAL
MICONAZOLE NITRATE	2 %	CREAM(ML)	TOPICAL
MICONAZOLE NITRATE	2 %	SPRAY	TOPICAL
NEOMYCIN/BACITRACIN/POLYMYXINB	3.5-400-5K	OINT PACK	TOPICAL
NEOMYCIN/BACITRACIN/POLYMYXINB	3.5-400-5K	OINT. (G)	TOPICAL
NEOMYCN/BACITRC/POLYMYX/PRAMOX	3.5-10K-10	OINT. (G)	TOPICAL
PERMETHRIN	1 %	LIQUID	TOPICAL
PIPERONYL BUTOXIDE/PYRETHRINS	4%-0.33%	SHAMPOO	TOPICAL
SALICYLIC ACID	17 %	LIQUID	TOPICAL
SELENIUM SULFIDE	1 %	SHAMPOO	TOPICAL
TERBINAFINE HCL	1 %	CREAM (G)	TOPICAL
TOLNAFTATE	1 %	AERO POWD	TOPICAL
TOLNAFTATE	1 %	CREAM(G)	TOPICAL
TOLNAFTATE	1 %	POWDER	TOPICAL
TOLNAFTATE	1 %	SOLUTION	TOPICAL

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DIABETES

Insulin and Diabetic supplies

Please refer to the Preferred Drug List (PDL) for insulin coverage at https://kyportal.medimpact.com/provider-documents/drug-information.

Please refer to the Diabetic Supplies Preferred Product list at https://kyportal.medimpact.com/provider-documents/drug-information.

Drug Name	Strength	Dosage Form	Route
DEXTROSE	4 G	TAB CHEW	ORAL

EMOLLIENTS

The following represents an NDC listing of emollient formulations. Inclusion on this list does not guarantee coverage. Quantity, cost, and other limits may be applied when a claim is adjudicated.

Label name	NDC
AMMONIUM LACTATE 12% CREAM	45802-0513-77
AMMONIUM LACTATE 12% CREAM	63044-0404-20
AMMONIUM LACTATE 12% CREAM	71399-0494-04
AMMONIUM LACTATE 12% LOTION	45802-0525-26
AMMONIUM LACTATE 12% LOTION	45802-0525-55
AMMONIUM LACTATE 12% LOTION	00904-5984-26
AMMONIUM LACTATE 12% LOTION	63044-0484-09
AMMONIUM LACTATE 12% LOTION	71399-0140-08
AMMONIUM LACTATE 12% LOTION	00904-5984-63
AMMONIUM LACTATE 12% LOTION	71399-0140-04
ZINC OXIDE 20% OINTMENT	46122-0676-46
ZINC OXIDE 20% OINTMENT	87701-0411-33
ZINC OXIDE 20% OINTMENT	00536-1316-25
ZINC OXIDE 20% OINTMENT	00536-1316-28
ZINC OXIDE 20% OINTMENT	00536-1316-98
ZINC OXIDE 20% OINTMENT	46122-0118-46
ZINC OXIDE 20% OINTMENT	51824-0032-03
ZINC OXIDE 20% OINTMENT	51824-0032-04

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Label name	NDC
ZINC OXIDE 20% OINTMENT	51824-0032-15
ZINC OXIDE 20% OINTMENT	68001-0532-45
ZINC OXIDE 20% OINTMENT	68001-0532-46
ZINC OXIDE 20% OINTMENT	68001-0533-50
ZINC OXIDE 20% OINTMENT	70000-0334-01
ZINC OXIDE 20% OINTMENT	70512-0103-30
ZINC OXIDE 20% OINTMENT	71399-0245-02
ZINC OXIDE 20% OINTMENT	71399-0245-03
ZINC OXIDE 20% OINTMENT	71399-0245-06
ZINC OXIDE 20% OINTMENT	75834-0170-01
ZINC OXIDE 20% OINTMENT	75834-0170-02
ZINC OXIDE 20% OINTMENT	75834-0170-15
CVS ZINC OXIDE 20% OINTMENT	50428-0320-05
AQUAPHOR BABY DIAPER RASH 40%	72140-0026-61
BOUDREAUXS BUTT PASTE	62103-0001-94
BOUDREAUXS BUTT PASTE	62103-0323-02
BOUDREAUXS BUTT PASTE	62103-0323-04
CVS DIAPER RASH 40% OINTMENT	50428-0375-69
CVS DIAPER RASH 40% OINTMENT	50428-0385-50
DIAPER RASH 40% OINTMENT	11527-0058-41
DIAPER RASH 40% OINTMENT	11917-0132-35
DIAPER RASH 40% OINTMENT	32953-0210-20
DIAPER RASH 40% OINTMENT	70000-0469-01
EQL DIAPER RASH 40% OINTMENT	41163-0020-26
GS DIAPER RASH 40% PASTE	50804-0079-01
KRO DIAPER RASH 40% OINTMENT	30142-0020-26
TRIPLE PASTE 40% OINTMENT	16864-0000-93
ZINC OXIDE 40% OINTMENT	00363-6771-57
ZINC OXIDE 40% OINTMENT	00363-7142-01
ZINC OXIDE 40% OINTMENT	11917-0101-08
ZINC OXIDE 40% OINTMENT	11917-0167-71

GASTROINTESTINAL

Generic Drug Name	Strength	Dosage Form	Route
BISACODYL	5 MG	TABLET DR	ORAL
BISACODYL	10 MG	SUPP.RECT	RECTAL

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Generic Drug Name	Strength	Dosage Form	Route
BISMUTH SUBSALICYLATE	262 MG/15 ML	ORAL SUSP	ORAL
BISMUTH SUBSALICYLATE	525 MG/15 ML	ORAL SUSP	ORAL
BISMUTH SUBSALICYLATE	262 MG	TAB CHEW	ORAL
BISMUTH SUBSALICYLATE	262 MG	TABLET	ORAL
CALCIUM CARBONATE	200(500) MG	TAB CHEW	ORAL
CALCIUM CARBONATE	300(750) MG	TAB CHEW	ORAL
CALCIUM CARBONATE	400(1000) MG	TAB CHEW	ORAL
CALCIUM POLYCARBOPHIL	625 MG	TABLET	ORAL
DOCUSATE CALCIUM	240 MG	CAPSULE	ORAL
DOCUSATE SODIUM	100 MG	CAPSULE	ORAL
DOCUSATE SODIUM	250 MG	CAPSULE	ORAL
DOCUSATE SODIUM	50 MG/5 ML	LIQUID	ORAL
DOCUSATE SODIUM	50 MG/15 ML	SYRUP	ORAL
DOCUSATE SODIUM	60 MG/15 ML	SYRUP	ORAL
DOCUSATE SODIUM	100 MG	TABLET	ORAL
FAMOTIDINE	10 MG	TABLET	ORAL
GLYCERIN	ADULT	SUPP.RECT	RECTAL
GLYCERIN	PEDIATRIC	SUPP.RECT	RECTAL
L. RHAMNOSUS GG/INULIN	10B-200 MG	CAP SPRINK	ORAL
L. RHAMNOSUS GG/INULIN	10B-200 MG	CAPSULE	ORAL
L. RHAMNOSUS GG/INULIN	20B-200 MG	CAPSULE	ORAL
LACTOBACILLUS RHAMNOSUS GG	15B CELL	CAP SPRINK	ORAL
LOPERAMIDE HCL	1 MG/7.5 ML	LIQUID	ORAL
LOPERAMIDE HCL	2 MG	TABLET	ORAL
MAG CARB/ALUMINUM HYDROX/ALGIN	358-95 MG/15 ML	ORAL SUSP	ORAL
MAG HYDROX/ALUMINUM HYD/SIMETH	200-200-20 MG	ORAL SUSP	ORAL
MAG HYDROX/ALUMINUM HYD/SIMETH	400-400-40 MG	ORAL SUSP	ORAL
MAG HYDROX/ALUMINUM HYD/SIMETH	200-200-25 MG	TAB CHEW	ORAL
MAGNESIUM CARB/ALUMINUM HYDROX	105-160 MG	TAB CHEW	ORAL
MAGNESIUM CITRATE		SOLUTION	ORAL
MAGNESIUM HYDROXIDE	400 MG/5 ML	ORAL SUSP	ORAL
MAGNESIUM OXIDE	400 MG	TABLET	ORAL
METHYLCELLULOSE		POWDER	ORAL
METHYLCELLULOSE	500 MG	TABLET	ORAL
METHYLCELLULOSE (WITH SUGAR)	2 GM/19 GM	POWDER	ORAL
MINERAL OIL		OIL	ORAL
MINERAL OIL		ENEMA	RECTAL
POLYETHYLENE GLYCOL 3350	17 GM/DOSE	POWDER	ORAL
PSYLLIUM HUSK	0.52 GM	CAPSULE	ORAL
PSYLLIUM HUSK (WITH SUGAR)	3 GM/7 GM	POWDER	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
PSYLLIUM HUSK (WITH SUGAR)	3.4 GM/7 GM	POWDER	ORAL
PSYLLIUM HUSK (WITH SUGAR)	3.4 GM/12 GM	POWDER	ORAL
PSYLLIUM HUSK/ASPARTAME	3.4 GM/5.8 GM	POWDER	ORAL
SENNOSIDES	8.8 MG/5 ML	SYRUP	ORAL
SENNOSIDES	8.6 MG	TABLET	ORAL
SENNOSIDES/DOCUSATE SODIUM	8.6 MG-50 MG	TABLET	ORAL
SIMETHICONE	125 MG	CAPSULE	ORAL
SIMETHICONE	180 MG	CAPSULE	ORAL
SIMETHICONE	40 MG/0.6 ML	DROPS SUSP	ORAL
SIMETHICONE	80 MG	TAB CHEW	ORAL
SIMETHICONE	125 MG	TAB CHEW	ORAL
SODIUM BICARBONATE	325 MG	TABLET	ORAL
SODIUM BICARBONATE	650 MG	TABLET	ORAL
SODIUM PHOSPHATE,MONO-DIBASIC	9.5-3.5 GM/59 ML	ENEMA	RECTAL
SODIUM PHOSPHATE,MONO-DIBASIC	19-7 GM/118 ML	ENEMA	RECTAL

HIGH CHOLESTEROL

Generic Drug Name	Strength	Dosage Form	Route
NIACIN	250 MG	CAPSULE ER	ORAL
NIACIN	500 MG	CAPSULE ER	ORAL
NIACIN	100 MG	TABLET	ORAL
NIACIN	500 MG	TABLET	ORAL
NIACIN	500 MG	TABLET ER	ORAL
NIACIN	750MG	TABLET SA	ORAL
NIACIN (INOSITOL NIACINATE)	400(500MG)	CAPSULE	ORAL
NIACINAMIDE	500 MG	TABLET	ORAL
OMEGA-3 FATTY ACIDS	1000 MG	CAPSULE	ORAL
OMEGA-3 FATTY ACIDS/FISH OIL	300-1000MG	CAPSULE	ORAL
OMEGA-3 FATTY ACIDS/FISH OIL	340-1000MG	CAPSULE	ORAL
OMEGA-3 FATTY ACIDS/FISH OIL	360-1200MG	CAPSULE	ORAL
OMEGA-3/DHA/EPA/FISH OIL	1000 MG	CAPSULE	ORAL
OMEGA-3/DHA/EPA/FISH OIL	1200 MG	CAPSULE	ORAL
OMEGA-3/DHA/EPA/FISH OIL	300-1000MG	CAPSULE DR	ORAL
OMEGA-3/DHA/EPA/FISH OIL	300-1000MG	CAPSULE	ORAL
OMEGA-3/DHA/EPA/FISH OIL	60 MG-90MG	CAPSULE DR	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
OMEGA-3/DHA/EPA/FISH OIL	60 MG-90MG	CAPSULE	ORAL
OMEGA-3S/DHA/EPA/FISH OIL	300-1000MG	CAPSULE DR	ORAL
OMEGA-3S/DHA/EPA/FISH OIL	600-1000MG	CAPSULE	ORAL

MEDICAL SUPPLIES

Generic Drug Name	Strength	Dosage Form	Route
NEEDLES, DISPOSABLE	18GX1”	DIS NEEDLE	MISCELL.
PEAK FLOW METER		EACH	MISCELL.

MICELLANEOUS

Generic Drug Name	Strength	Dosage Form	Route
CARBAMIDE PEROXIDE	6.5 %	DROPS	OTIC
COVID-19 ANTIGEN TEST		KIT	MISCELL.
DOXYLAMINE SUCCINATE	25 MG	TABLET	ORAL
ELECTROLYTES/DEXTROSE		SOLUTION	ORAL
MECLIZINE HCL	25 MG	TAB CHEW	ORAL
MECLIZINE HCL	12.5 MG	TABLET	ORAL
MELATONIN	3 MG	TABLET	ORAL
MELATONIN	5 MG	TABLET	ORAL
NALOXONE HCL	4 MG	SPRAY	NASAL
PHENAZOPYRIDINE HCL	95 MG	TABLET	ORAL
SODIUM CHLORIDE	1000 MG	TABLET, SOLUBLE	ORAL

OPHTHALMIC

The following represents an NDC listing of Ophthalmic formulations. Inclusion on this list does not guarantee coverage. Quantity, cost, and other limits may be applied when a claim is adjudicated.

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Label name	NDC
CARBOXYMETHYLCELL 0.5% EYE DRP	00536-1386-35
CARBOXYMETHYLCELL 0.5% EYE DRP	00536-1386-94
CARBOXYMETHYLCELL 0.5% EYE DRP	50268-0068-15
ULTRA FRESH 0.5% EYE DROP	59390-0185-13
ULTRA FRESH 0.5% EYE DROP	59390-0185-13
ULTRA FRESH 0.5% EYE DROP	59390-0185-18
ULTRA FRESH 0.5% EYE DROP	59390-0185-18
LUBRICANT 0.5% EYE DROP	70000-0090-01
LUBRICANT 0.5% EYE DROP	70000-0090-02
GS LUBRICAT PLUS 0.5% EYE DRPS	00113-0323-65
LUBRICANT 0.5% EYE DROP	00536-1387-92
LUBRICANT 0.5% EYE DROP	00536-1387-93
LUBRICATING PLUS 0.5% EYE DRPS	00904-6329-46
LUBRICATING PLUS 0.5% EYE DRPS	00904-6329-51
LUBRICATING PLUS 0.5% EYE DRPS	46122-0195-65
GNP LUBRICANT 0.5% EYE DROP	46122-0756-56
SM LUBRICAT PLUS 0.5% EYE DRPS	49348-0329-44
CARBOXYMETHYLCELL 0.5% EYE DRP	50268-0067-30
CARBOXYMETHYLCELL 0.5% EYE DRP	50268-0067-50
CARBOXYMETHYLCELL 0.5% EYE DRP	50268-0067-70
HM LUBRICAT PLUS 0.5% EYE DRPS	62011-0203-01
LUBRICANT 0.5% EYE DROPS	70000-0012-01
LUBRICANT 0.5% EYE DROPS	70000-0012-02
GENTEAL TEARS 0.1%-0.2%-0.3%	00065-0426-36
GENTEAL TEARS 0.1%-0.2%-0.3%	00065-0426-37
ARTIFICIAL TEARS 0.1-0.2-0.3%	50268-0043-15
LUBRICATING EYE DROP	00536-1219-94
SM LUBRICATING TEARS EYE DROPS	49348-0149-29
SM LUBRICANT EYE DROPS	49348-0947-29
LUBRICANT 0.3%-0.4% EYE DROPS	50268-0126-15
HM LUBRICATING TEARS EYE DROPS	62011-0254-01
LUBRICANT EYE DROPS	70000-0455-01
ULTRA LUBRICANT EYE DROPS	70000-0457-01
ULTRA LUBRICANT EYE DROPS	70000-0457-02
LUBRICATING TEARS 0.1-0.3% DRP	00536-1282-94
BION TEARS EYE DROP	00065-0419-18
BION TEARS EYE DROP	00065-0419-28

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Label name	NDC
GENTEAL TEARS 0.1%-0.3% DROP	00065-8063-01
BION TEARS 0.1%-0.3% DROP	00065-9305-01

SMOKING CESSATION

Please refer to the Preferred Drug List (PDL) for smoking cessation coverage at https://kyportal.medimpact.com/provider-documents/drug-information

VAGINAL

Generic Drug Name	Strength	Dosage Form	Route
CLOTRIMAZOLE	1 %	CREAM/APPL	VAGINAL
CLOTRIMAZOLE	2 %	CREAM/APPL	VAGINAL
MICONAZOLE NITRATE	2 %	CREAM/APPL	VAGINAL
MICONAZOLE NITRATE	100 MG	SUPP.VAG	VAGINAL
MICONAZOLE NITRATE	200 MG-2 %	KIT	VAGINAL
MICONAZOLE NITRATE	4 %	CRM/PF APP	VAGINAL
MICONAZOLE NITRATE	1200MG-2%	KIT	VAGINAL
MICONAZOLE NITRATE	200 MG-2 %	CMB PF CRM	VAGINAL
MICONAZOLE/CLEANSER 17 ON WIPE	200 MG-2 %	KIT	VAGINAL

VITAMINS

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Generic Drug Name	Strength	Dosage Form	Route
ASCORBIC ACID	1000 MG	TABLET	ORAL
ASCORBIC ACID	250 MG	TABLET	ORAL
ASCORBIC ACID	250 MG	TAB CHEW	ORAL
ASCORBIC ACID	500 MG	TABLET	ORAL
ASCORBIC ACID	500 MG	TAB CHEW	ORAL
CALCIUM CARBONATE	500 MG/5ML	SUSPENSION, ORAL	ORAL
CALCIUM CARBONATE	500(1250)	TABLET	ORAL
CALCIUM CARBONATE	500(1250)	TAB CHEW	ORAL
CALCIUM CARBONATE	600 MG	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	1000 MG-20	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	250-3.125	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	500 MG-10	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	500 MG-10	TAB CHEW	ORAL
CALCIUM CARBONATE/VITAMIN D3	500 MG-2.5	TAB CHEW	ORAL
CALCIUM CARBONATE/VITAMIN D3	500-15 MCG	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	500MG-5MCG	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	600 MG-10	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	600 MG-20	TABLET	ORAL
CALCIUM CARBONATE/VITAMIN D3	600MG-5MCG	TABLET	ORAL
CALCIUM CITRATE	200(950)MG	TABLET	ORAL
CALCIUM CITRATE/VITAMIN D3	315MG-5MCG	TABLET	ORAL
CALCIUM CITRATE/VITAMIN D3	315MG-6.25	TABLET	ORAL
CHOLECALCIFEROL (VITAMIN D3)	10 MCG	TAB CHEW	ORAL
CHOLECALCIFEROL (VITAMIN D3)	10 MCG	TABLET	ORAL
CHOLECALCIFEROL (VITAMIN D3)	10(400)/ML	DROPS	ORAL
CHOLECALCIFEROL (VITAMIN D3)	125 MCG	CAPSULE	ORAL
CHOLECALCIFEROL (VITAMIN D3)	125 MCG	TABLET	ORAL
CHOLECALCIFEROL (VITAMIN D3)	1250 MCG	CAPSULE	ORAL
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	CAPSULE	ORAL
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	TAB CHEW	ORAL
CHOLECALCIFEROL (VITAMIN D3)	25 MCG	TABLET	ORAL
CHOLECALCIFEROL (VITAMIN D3)	250 MCG	CAPSULE	ORAL
CHOLECALCIFEROL (VITAMIN D3)	50 MCG	CAPSULE	ORAL
CHOLECALCIFEROL (VITAMIN D3)	50 MCG	TABLET	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	100 MCG	TABLET	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TABLET	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TABLET ER	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	1000 MCG	TAB SUBL	SUBLINGUAL
CYANOCOBALAMIN (VITAMIN B-12)	250 MCG	TABLET	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
CYANOCOBALAMIN (VITAMIN B-12)	2500 MCG	TAB SUBL	SUBLINGUAL
CYANOCOBALAMIN (VITAMIN B-12)	500 MCG	TABLET	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	5000 MCG	TAB SUBL	ORAL
CYANOCOBALAMIN (VITAMIN B-12)	5000 MCG	CAPSULE	ORAL
ERGOCALCIFEROL (VITAMIN D2)	200 MCG/ML	DROPS	ORAL
FERROUS FUMARATE	324(106)MG	TABLET	ORAL
FERROUS GLUCONATE	240(27)MG	TABLET	ORAL
FERROUS GLUCONATE	324(37.5)	TABLET	ORAL
FERROUS GLUCONATE	324(38)MG	TABLET	ORAL
FERROUS SULFATE	15 MG/ML	DROPS	ORAL
FERROUS SULFATE	220 (44)/5	ELIXIR	ORAL
FERROUS SULFATE	220 (44)/5	SOLUTION	ORAL
FERROUS SULFATE	324(65)MG	TABLET DR	ORAL
FERROUS SULFATE	325(65) MG	TABLET DR	ORAL
FERROUS SULFATE, DRIED	160(50) MG	TABLET ER	ORAL
FOLIC ACID	0.4 MG	TABLET	ORAL
FOLIC ACID	0.8 MG	CAPSULE	ORAL
FOLIC ACID	0.8 MG	TABLET	ORAL
FOLIC ACID	1 MG	TABLET	ORAL
IRON POLYSACCHARIDE COMPLEX	125 MG/5ML	LIQUID	ORAL
IRON POLYSACCHARIDE COMPLEX	15 MG/ML	DROPS	ORAL
IRON POLYSACCHARIDE COMPLEX	150 MG	CAPSULE	ORAL
IRON POLYSACCHARIDE COMPLEX	50 MG	CAPSULE	ORAL
MAGNESIUM	200 MG	TABLET	ORAL
MAGNESIUM CHLORIDE	64 MG	TABLET DR	ORAL
MAGNESIUM CITRATE	100 MG	TABLET	ORAL
MAGNESIUM CITRATE	125 MG	CAPSULE	ORAL
MAGNESIUM GLUCONATE	27 MG(500)	TABLET	ORAL
MAGNESIUM GLUCONATE	27.5 (500)	TABLET	ORAL
MAGNESIUM OXIDE	250 MG	TABLET	ORAL
MAGNESIUM OXIDE	400 MG	CAPSULE	ORAL
MAGNESIUM OXIDE	400 MG	TABLET	ORAL
MAGNESIUM OXIDE	500 MG	CAPSULE	ORAL
MAGNESIUM OXIDE	500 MG	TABLET	ORAL
PNV 119/IRON FUM/FOLIC ACID	29 MG-1 MG	TABLET	ORAL
PNV NO.133/FERROUS FUM/FOLIC	28MG-0.8MG	TABLET	ORAL
PNV NO.95/FERROUS FUM/FOLIC AC	28MG-0.8MG	TABLET	ORAL
PNV,CALCIUM 72/IRON/FOLIC ACID	27 MG-1 MG	TABLET	ORAL
PNV151/IRON/FA/O3/DHA/EPA/FISH	27-800-260	CAPSULE	ORAL
PRENATAL 95/IRON FUM/FOLIC/DHA	28-800-200	COMBO. PKG	ORAL

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Generic Drug Name	Strength	Dosage Form	Route
PRENATAL NO.116/IRON/FOLIC/DHA	28-800-200	COMBO. PKG	ORAL
PRENATAL NO.137/IRON/FOLIC ACD	27MG-0.8MG	TABLET	ORAL
PRENATAL NO115/IRON/FOLIC ACID	29 MG-1 MG	TAB CHEW	ORAL
PRENATAL NO122/IRON/FOLIC ACID	27MG-0.8MG	TABLET	ORAL
PRENATAL VIT 93/IRON FUM/FOLIC	9MG-267MCG	TABLET	ORAL
PRENATAL VIT NO.124/IRON/FOLIC	27MG-0.8MG	TABLET	ORAL
PRENATAL VIT NO.126/IRON/FOLIC	28MG-0.8MG	TABLET	ORAL
PRENATAL VIT NO.129/IRON/FOLIC	27MG-0.8MG	TABLET	ORAL
PRENATAL VIT NO.130/IRON/FOLIC	27MG-0.8MG	TABLET	ORAL
PRENATAL VIT NO.179/IRON/FOLIC	28MG-0.8MG	TABLET	ORAL
PRENATAL VIT,CAL 73/IRON/FOLIC	28 MG-1 MG	TABLET	ORAL
PRENATAL VIT,CALC76/IRON/FOLIC	29 MG-1 MG	TABLET	ORAL
PRENATAL VIT,CALC78/IRON/FOLIC	29 MG-1 MG	TABLET	ORAL
PRENATAL VIT/IRON FUM/FOLIC AC	28MG-0.8MG	TABLET	ORAL
PRENATAL VIT116/IRON/FOLIC/DHA	28-800-200	CAPSULE	ORAL
PRENATAL72/IRON FUM/FA/OM3/DHA	27-1-250MG	COMBO. PKG	ORAL
PYRIDOXINE HCL (VITAMIN B6)	100 MG	TABLET	ORAL
PYRIDOXINE HCL (VITAMIN B6)	25 MG	TABLET	ORAL
PYRIDOXINE HCL (VITAMIN B6)	50 MG	TABLET	ORAL

Over-the-Counter Limits

Claims over $100 will deny. A smaller quantity may lower the cost. If the pharmacy cannot fix the issue, then they can call the Pharmacy Call Center at 877-403-6034 for help.

Diabetic supply limits can be found on the Kentucky Medicaid Diabetic supplies Preferred Product List located at https://kyportal.medimpact.com/provider-documents/drug-information

Product Name	Limit
COVID TESTS	4 PER MEMBER PER ROLLING 90 DAYS
LEVONORGESTREOL 1.5MG	1 PER 30 DAYS, 8 PER YEAR
NALOXONE HCL	4 PER 30 DAYS
VITAMIN & MINERAL SUPPLEMENTS (EXCEPT PRENATAL VITAMINS)	4 CLAIMS PER MEMBER PER 28 DAYS. EXCEPTION: THIS LIMIT DOES NOT APPLY TO LONG TERM CARE FACILITIES.

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