

OTC Drug List for Maine Medicaid

*Note: List includes rebatable and non-rebatable NDCs
Most over the counter products are subject to State of Maine Maximum Allowable Cost (SMAC) pricing.
This list is subject to change and will be updated on a regular basis*

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Glucosamine-Chondroitin-Vit C-Manganese Cap***				
	50268037611	Brand	GLUCOSAMINE CAP CHONDROI	PA REQUIRED
	50268037615	Brand	GLUCOSAMINE CAP CHONDROI	PA REQUIRED
	54629008044	Generic	GLUCOSAMINE/ CAP CHONDRTN	PA REQUIRED
	54629011812	Generic	GLUCO/CHONDR CAP COMPLEX	PA REQUIRED
	54629080412	Generic	GLUCOSAMINE/ CAP CHONDRTN	PA REQUIRED
	74312000238	Generic	GLUCO/CHONDR CAP COMPLEX	PA REQUIRED
	79854008041	Generic	GLUCOSAMINE CAP CHONDRTN	PA REQUIRED
	11845012481	Generic	GLUCO/CHONDR CAP COMPLEX	PA REQUIRED
	11845012488	Generic	GLUCO/CHONDR CAP 500 COMP	PA REQUIRED
	11845012639	Generic	GLUCO/CHONDR CAP COMPLEX	PA REQUIRED
	11845013031	Generic	GLUCO/CHONDR CAP 1500 COM	PA REQUIRED
	11845013035	Generic	GLUCOSAMINE CAP 1500 COM	PA REQUIRED
	11845013037	Generic	GLUCOSAMINE CAP 1500 COM	PA REQUIRED
	11845013038	Generic	GLUCO/CHONDR CAP 1500 COM	PA REQUIRED
	11845033701	Generic	GLUCO/CHONDR CAP 1500 COM	PA REQUIRED
*Glucosamine-Chondroitin-Vit C-Manganese Tab***				
	79854001181	Generic	GLUCO/CHONDR TAB COMPLEX	PA REQUIRED
	79854001118	Generic	GLUCO/CHONDR TAB COMPLEX	PA REQUIRED
	94604010009	Generic	GLUCOSAMINE TAB CHONDROI	PA REQUIRED
	94604070362	Generic	EZ FLEX GC TAB	PA REQUIRED
	74312004961	Generic	GLUCOS/CHOND TAB COMPLEX	PA REQUIRED
	74312004962	Generic	GLUCOS/CHOND TAB COMPLEX	PA REQUIRED
	74312004963	Generic	GLUCOS/CHOND TAB COMPLEX	PA REQUIRED

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*Glucosamine-Chondroitin-Vit C-Manganese Tab***				
	74312004964	Generic	GLUCOS/CHOND TAB COMPLEX	PA REQUIRED
	54629111803	Generic	GLUCOS/CHOND TAB COMPLEX	PA REQUIRED
	50428166790	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	50428247303	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	50428451093	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11845013785	Generic	GLUCOS/CHOND TAB	PA REQUIRED
	11845013789	Generic	GLUCOS/CHOND TAB	PA REQUIRED
	49348051339	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
Alpha-Lipoic Acid (Thioctic Acid) Cap 300 MG				
	47469000312	Generic	ALPHA LIPOIC CAP 300MG	PA REQUIRED
	29135061515	Generic	ALPHA LIPOIC CAP 300MG	PA REQUIRED
Alpha-Lipoic Acid (Thioctic Acid) Tab 300 MG				
	35046000340	Generic	ALPHA-LIPOIC TAB 300MG	PA REQUIRED
Alpha-Lipoic Acid (Thioctic Acid) Tab 50 MG				
	35046000266	Generic	ALPHA LIPOIC TAB 50MG	PA REQUIRED
	40985021674	Generic	ALPHA LIPOIC TAB 50MG	PA REQUIRED
	30768001144	Generic	ALPHA LIPOIC TAB 50MG	PA REQUIRED
Coenzyme Q10 Cap 10 MG				
	78835080042	Generic	COENZYME Q10 CAP 10MG	PA REQUIRED
	96974000005	Generic	CO-ENZYME Q1 CAP 10MG	PA REQUIRED
	17204044620	Generic	COENZYME Q10 CAP 10MG	PA REQUIRED
	43292055850	Generic	CO Q 10 CAP 10MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 100 MG				
	96295014062	Generic	COQ-10 CAP 100MG	PA REQUIRED
	80681001000	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	80681008000	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	81131057368	Generic	Q-SORB CO-Q CAP 100MG	PA REQUIRED
	74312051135	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	96295012816	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	96295013865	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	96295013871	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	87701040816	Generic	GNP CO Q10 CAP 100MG	PA REQUIRED
	87701041270	Generic	GNP CO Q-10 CAP 100MG	PA REQUIRED
	74312004886	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	71791000117	Generic	COQ10 CAP 100MG	PA REQUIRED
	50428459954	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	50428035572	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	50428039634	Generic	CVS COQ-10 CAP 100MG	PA REQUIRED
	49614025165	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	54023858702	Generic	Q-GEL MEGA CAP 100MG	PA REQUIRED
	54023858706	Generic	Q-GEL MEGA CAP 100MG	PA REQUIRED
	54023858709	Generic	Q-GEL MEGA CAP 100MG	PA REQUIRED
	54023982702	Generic	H2Q CAP 100MG	PA REQUIRED
	54458032311	Generic	CO Q 10 CAP 100MG	PA REQUIRED
	54458032322	Generic	CO Q 10 CAP 100MG	PA REQUIRED
	52569013396	Generic	HM COQ10 CAP 100MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 100 MG				
	54629797430	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	57896087503	Generic	CO Q 10 CAP 100MG	PA REQUIRED
	41163045732	Generic	EQL COQ10 CAP 100MG	PA REQUIRED
	43292056401	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	47469000286	Generic	COQ-10 CAP 100MG	PA REQUIRED
	47469000288	Generic	COQ-10 CAP 100MG	PA REQUIRED
	49348060544	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	47469004078	Generic	COQ-10 CAP 100MG	PA REQUIRED
	48107002392	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	17204045036	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	17204046320	Generic	COQ10 CAP 100MG	PA REQUIRED
	16571073209	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	29135061012	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	30768003553	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	30768051047	Generic	Q-SORB CAP 100MG	PA REQUIRED
	31604001894	Generic	COQ10 CAP 100MG	PA REQUIRED
	24385050865	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	40985022337	Generic	CO Q10 CAP 100MG	PA REQUIRED
	40985027413	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	40985027434	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	37205055065	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	37205074872	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	35046000432	Generic	COQ10 CAP 100MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 100 MG				
	35515095998	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	36800009332	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	31604002613	Generic	COQ10 CAP 100MG	PA REQUIRED
	11917007909	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11917007910	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11917008579	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11845013195	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11845013198	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11822993240	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	11822370160	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	11822449580	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	11822513610	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	11822853090	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	11917013876	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11917013877	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	11917013878	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	00904588246	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	05388062780	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	05388062840	Generic	Q-SORB CAP 100MG	PA REQUIRED
	07610081007	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	10006070159	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	10939088744	Generic	CO Q-10 CAP 100MG	PA REQUIRED
	10939075133	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 100 MG				
	11822044958	Generic	RA COENZYME CAP 100MG	PA REQUIRED
	11822119580	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
	00005761030	Generic	COQ10 CAP 100MG	PA REQUIRED
	00536193807	Generic	COENZYME Q10 CAP 100MG	PA REQUIRED
Coenzyme Q10 Cap 120 MG				
	74312001856	Generic	CO Q-10 CAP 120MG	PA REQUIRED
Coenzyme Q10 Cap 125 MG				
	13349001055	Brand	NEOQ10 CAP 125MG	PA REQUIRED
Coenzyme Q10 Cap 15 MG				
	54023678102	Brand	Q-GEL CAP 15MG	PA REQUIRED
Coenzyme Q10 Cap 150 MG				
	53191023001	Generic	COQ10 CAP 150MG	PA REQUIRED
	53191023006	Generic	COQ10 CAP 150MG	PA REQUIRED
	74312004887	Generic	CO Q-10 CAP 150MG	PA REQUIRED
	30768001473	Generic	Q-SORB CAP 150MG	PA REQUIRED
	47469004004	Generic	COQ-10 CAP 150MG	PA REQUIRED
	47469004505	Generic	COQ-10 CAP 150MG	PA REQUIRED
	11845013238	Generic	CO Q-10 CAP 150MG	PA REQUIRED
Coenzyme Q10 Cap 200 MG				
	74312002099	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	73489000701	Generic	COQ10 CAP 200MG	PA REQUIRED
	87701040817	Generic	GNP CO Q10 CAP 200MG	PA REQUIRED
	81131092861	Generic	Q-SORB CO Q CAP 200MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 200 MG				
	96295013868	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	96295013918	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	96295013870	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	74312017139	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	78742006331	Generic	Q-SORB CO Q CAP 200MG	PA REQUIRED
	80681015600	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	52569014152	Generic	HM COQ-10 CAP 200MG	PA REQUIRED
	50428038132	Generic	CVS COQ-10 CAP 200MG	PA REQUIRED
	50428710797	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	50428031046	Generic	CVS COQ-10 CAP 200MG	PA REQUIRED
	54629797530	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	11822517520	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	11917008584	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	11917007913	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	11845014628	Generic	COQ10 CAP 200MG	PA REQUIRED
	11917013879	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	11822083090	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	10939088844	Generic	SM CO Q-10 CAP 200MG	PA REQUIRED
	00904588346	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	00536203007	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	00761091010	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED
	41163045715	Generic	EQL COQ10 CAP 200MG	PA REQUIRED
	48107006435	Generic	COENZYME Q10 CAP 200MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 200 MG				
	30768004001	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	31604002616	Generic	COQ10 CAP 200MG	PA REQUIRED
	31604002680	Generic	COQ10 CAP 200MG	PA REQUIRED
	35046000433	Generic	COQ10 CAP 200MG	PA REQUIRED
	37205074970	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	37205055165	Generic	CO Q10 CAP 200MG	PA REQUIRED
	40985027435	Generic	CO Q-10 CAP 200MG	PA REQUIRED
	40985022687	Generic	CO Q10 MS CAP 200MG	PA REQUIRED
Coenzyme Q10 Cap 30 MG				
	50268018611	Generic	CO Q10 CAP 30MG	PA REQUIRED
	50268018615	Generic	CO Q10 CAP 30MG	PA REQUIRED
	53191018201	Generic	COQ10 CAP 30MG	PA REQUIRED
	53191018203	Generic	COQ10 CAP 30MG	PA REQUIRED
	54023695702	Generic	Q-GEL FORTE CAP 30MG	PA REQUIRED
	54023695704	Generic	Q-GEL FORTE CAP 30MG	PA REQUIRED
	54023695709	Generic	Q-GEL FORTE CAP 30MG	PA REQUIRED
	80681010400	Generic	COENZYME Q10 CAP 30MG	PA REQUIRED
	79854014036	Generic	COENZYME Q10 CAP 30MG	PA REQUIRED
	74970004395	Generic	COENZYME Q10 CAP 30MG	PA REQUIRED
	74312007173	Generic	CO Q-10 CAP 30MG	PA REQUIRED
	40985021341	Generic	CO Q10 CAP 30MG	PA REQUIRED
	35046000430	Generic	COQ10 CAP 30MG	PA REQUIRED
	31604001701	Generic	COQ10 CAP 30MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 30 MG				
	30768031155	Generic	Q-SORB CAP 30MG	PA REQUIRED
	27434016805	Generic	MEGA COQ10 CAP 30MG	PA REQUIRED
	27434016854	Generic	MEGA COQ10 CAP 30MG	PA REQUIRED
	17204044736	Generic	COENZYME Q10 CAP 30MG	PA REQUIRED
	47469000280	Generic	COQ-10 CAP 30MG	PA REQUIRED
	47469000282	Generic	COQ-10 CAP 30MG	PA REQUIRED
	00904501546	Generic	COENZYME Q10 CAP 30MG	PA REQUIRED
	11845012328	Generic	CO Q-10 CAP 30MG	PA REQUIRED
Coenzyme Q10 Cap 300 MG				
	11845014108	Generic	CO Q-10 CAP 300MG	PA REQUIRED
	11917007914	Generic	CO Q-10 CAP 300MG	PA REQUIRED
	11917013881	Generic	CO Q-10 CAP 300MG	PA REQUIRED
Coenzyme Q10 Cap 400 MG				
	74312002532	Generic	CO Q-10 CAP 400MG	PA REQUIRED
	81131000224	Generic	CO Q-10 CAP 400MG	PA REQUIRED
	94604010019	Generic	MEGA COQ-10 CAP 400MG	PA REQUIRED
	50428041751	Generic	CVS COQ-10 CAP 400MG	PA REQUIRED
	11917011225	Generic	COQ-10 CAP 400MG	PA REQUIRED
	11845016818	Generic	CO Q-10 CAP 400MG	PA REQUIRED
	11822489750	Generic	COENZYME Q10 CAP 400MG	PA REQUIRED
	41163049149	Generic	EQL COQ10 CAP 400MG	PA REQUIRED
	30768013338	Generic	CO Q-10 CAP 400MG	PA REQUIRED
	35046000434	Generic	COQ10 CAP 400MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 400 MG				
	31604002682	Generic	COQ10 CAP 400MG	PA REQUIRED
Coenzyme Q10 Cap 50 MG				
	50428030765	Generic	CVS COQ-10 CAP 50MG	PA REQUIRED
	54458032160	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	54458032260	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	54629000848	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	52569013397	Generic	HM COQ10 CAP 50MG	PA REQUIRED
	54629084800	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	54629067333	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	54629067390	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	96295013893	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	96121000234	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	81131000223	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	74312002139	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	74312002386	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	71791000116	Generic	COQ10 CAP 50MG	PA REQUIRED
	35046000431	Generic	COQ10 CAP 50MG	PA REQUIRED
	40093010232	Generic	COQ10 CAP 50MG	PA REQUIRED
	30768000826	Generic	Q-SORB CAP 50MG	PA REQUIRED
	30768051139	Generic	Q-SORB CAP 50MG	PA REQUIRED
	47469000284	Generic	COQ-10 CAP 50MG	PA REQUIRED
	47469000285	Generic	COQ-10 CAP 50MG	PA REQUIRED
	48107002391	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 50 MG				
	47469016109	Generic	COQ-10 CAP 50MG	PA REQUIRED
	11845014608	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	11917010757	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	11917017172	Generic	CO Q-10 CAP 50MG	PA REQUIRED
	00904561646	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
	10939051644	Generic	SM COQ-10 CAP 50MG	PA REQUIRED
	00761051007	Generic	COENZYME Q10 CAP 50MG	PA REQUIRED
Coenzyme Q10 Cap 60 MG				
	94604010011	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	87701040815	Generic	GNP CO Q10 CAP 60MG	PA REQUIRED
	54023766002	Generic	Q-GEL ULTRA CAP 60MG	PA REQUIRED
	54023766006	Generic	Q-GEL ULTRA CAP 60MG	PA REQUIRED
	54023766009	Generic	Q-GEL ULTRA CAP 60MG	PA REQUIRED
	54022207501	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	54022207502	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	54022207503	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	54022207505	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	53191026601	Generic	CO Q 10 CAP 60MG	PA REQUIRED
	43292056108	Generic	COENZYME Q10 CAP 60MG	PA REQUIRED
	17204044920	Generic	CO-ENZY Q-10 CAP 60MG	PA REQUIRED
	37205054972	Generic	CO Q10 CAP 60MG	PA REQUIRED
	40985021800	Generic	CO Q 10 CAP 60MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Cap 75 MG				
	74312005816	Generic	CO Q-10 CAP 75MG	PA REQUIRED
	30768001054	Generic	Q-SORB CAP 75MG	PA REQUIRED
	11845014618	Generic	CO Q-10 CAP 75MG	PA REQUIRED
	11917007908	Generic	CO Q-10 CAP 75MG	PA REQUIRED
Coenzyme Q10 Cap ER 100 MG				
	47469004838	Generic	COQ-10 CAP 100MG TR	PA REQUIRED
Coenzyme Q10 Chew Tab 100 MG				
	74312059388	Generic	CO Q-10 CHW 100MG	PA REQUIRED
	54023915802	Brand	CHEW Q CHW 100MG	PA REQUIRED
Coenzyme Q10 Chew Tab 30 MG				
	54023915702	Brand	CHEW Q CHW 30MG	PA REQUIRED
Coenzyme Q10 Chew Tab 50 MG				
	31604002848	Brand	COQ10 GUMMIE CHW 50MG	PA REQUIRED
Coenzyme Q10 Chew Tab 60 MG				
	54022208501	Generic	COENZYME Q10 CHW 60MG	PA REQUIRED
	54022208502	Generic	COENZYME Q10 CHW 60MG	PA REQUIRED
	54022208503	Generic	COENZYME Q10 CHW 60MG	PA REQUIRED
Coenzyme Q10 Chew Tab 600 MG				
	54023913702	Brand	CHEW Q CHW 600MG	PA REQUIRED
Coenzyme Q10 Chewable Wafer 100 MG				
	71791000329	Brand	COQ10 WAF 100MG	PA REQUIRED
	71791000036	Brand	COQ10 WAF 100MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Chewable Wafer 300 MG				
	71791000227	Brand	COQ10 WAF 300MG	PA REQUIRED
Coenzyme Q10 Chewable Wafer 60 MG				
	71791000041	Brand	COQ10 WAF 60MG	PA REQUIRED
Coenzyme Q10 Liquid 30 MG/5ML				
	96974000004	Generic	COENZYME Q10 LIQ 30MG/5ML	PA REQUIRED
	17204044595	Generic	COENZYME Q10 LIQ 30MG/5ML	PA REQUIRED
Coenzyme Q10 Oral Powder				
	53191025405	Generic	COQ10 POW 50GM	PA REQUIRED
Coenzyme Q10 Oral Powder 200 MG/GM				
	54023015205	Brand	H2Q POW 200MG/GM	PA REQUIRED
Coenzyme Q10 Tab 100 MG				
	58487003660	Generic	COENZYME Q10 TAB 100MG	PA REQUIRED
Coenzyme Q10 Tab 15 MG				
	35046000429	Generic	COENZYME Q10 TAB 15MG	PA REQUIRED
Coenzyme Q10 Tab 200 MG				
	54022800201	Generic	COENZYME Q10 TAB 200MG	PA REQUIRED
	54022800202	Generic	COENZYME Q10 TAB 200MG	PA REQUIRED
	54022800205	Generic	COENZYME Q10 TAB 200MG	PA REQUIRED
	71791000035	Brand	COQ10 TAB 200MG	PA REQUIRED
Coenzyme Q10 Tab 25 MG				
	54022205501	Generic	COENZYME Q10 TAB 25MG	PA REQUIRED
	54022205502	Generic	COENZYME Q10 TAB 25MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10 Tab 50 MG				
	58487003230	Generic	COENZYME Q10 TAB 50MG	PA REQUIRED
	58487003231	Generic	COENZYME Q10 TAB 50MG	PA REQUIRED
Coenzyme Q10 Tab 60 MG				
	54022208001	Generic	COENZYME Q10 TAB 60MG	PA REQUIRED
	54022208002	Generic	COENZYME Q10 TAB 60MG	PA REQUIRED
	54022208101	Generic	COENZYME Q10 TAB 60MG	PA REQUIRED
	71791000039	Brand	COQ10 TAB 60MG	PA REQUIRED
Coenzyme Q10 Tab Disint 50 MG				
	47469006333	Brand	COQ-10 FAST TAB 50MG	PA REQUIRED
Coenzyme Q10-Vitamin E Cap 100-10 MG-Unit				
	69618000203	Generic	COQ10/VIT E CAP 100-10	PA REQUIRED
Coenzyme Q10-Vitamin E Cap 100-100 MG-Unit				
	55571091014	Brand	COQ10 ST-100 CAP 100-100	PA REQUIRED
Coenzyme Q10-Vitamin E Cap 100-150 MG-Unit				
	98440000102	Brand	QUNOL COQ10 CAP 100-150	PA REQUIRED
	98440000116	Brand	QUNOL COQ10 CAP 100-150	PA REQUIRED
	98440000124	Brand	QUNOL COQ10 CAP 100-150	PA REQUIRED
Coenzyme Q10-Vitamin E Cap 200-20 MG-Unit				
	69618000303	Generic	COQ10/VIT E CAP 200-200	PA REQUIRED
Coenzyme Q10-Vitamin E Chew Tab 100-300 MG-Unit				
	63948006103	Brand	SMART Q10 CHW COQ10	PA REQUIRED
Coenzyme Q10-Vitamin E Chewable Wafer 300-300 MG-Unit				
	71791000012	Brand	COQ10/VIT E WAF 300MG	PA REQUIRED

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Coenzyme Q10-Vitamin E Syrup 100-1 MG-Unit/5ML				
	54023929307	Brand	LIQ-10 SYP	PA REQUIRED
Coenzyme Q10-Vitamin E Syrup 50-15 MG-Unit/5ML				
	14654011957	Brand	LIQ-10 SYP 50-15/5	PA REQUIRED
Coenzyme Q10-Vitamin E Wafer 100-300 MG-Unit				
	71791000023	Brand	COQ10/VIT E WAF	PA REQUIRED
	71791000247	Brand	COQ10/VIT E WAF	PA REQUIRED
Coenzyme Q10-Vitamin E Wafer 200-400 MG-Unit				
	54022209101	Generic	CO-ENZYME WAF Q10/E	PA REQUIRED
	54022209105	Generic	CO-ENZYME WAF Q10/E	PA REQUIRED
Glucosamine Sulfate Cap 1000 MG				
	50428797749	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	74312004171	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	74312004173	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	30768003783	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	40093010587	Generic	GLUCOSAMINE CAP 3000MG	PA REQUIRED
	11917009187	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	11917013906	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
	11917013396	Generic	GLUCOSAMINE CAP 1000MG	PA REQUIRED
Glucosamine Sulfate Cap 500 MG				
	74312007710	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	74312007712	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	50268037511	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	50268037515	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine Sulfate Cap 500 MG				
	53191028001	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	53191019901	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	52959069660	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	54629007870	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	54569497701	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	50488070801	Generic	GENICIN CAP 500MG	PA REQUIRED
	63874109002	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	63874109003	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	63874109006	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	63874109009	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	63629451201	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	58119010021	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	58119010029	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	11917009135	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	11917000812	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	11917000813	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	00904529352	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	00761021736	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	40985022564	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33358015901	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33358015960	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33358015990	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33261002300	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine Sulfate Cap 500 MG				
	33261002330	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33261002360	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33261002390	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	33261072530	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	33261072560	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	33261072590	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	27495001190	Generic	SYNOVACIN CAP 500MG	PA REQUIRED
	20555003700	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	43292055857	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
	43292055967	Generic	GLUCOSAMINE CAP 500MG	PA REQUIRED
Glucosamine Sulfate Cap 750 MG				
	96121000241	Generic	GLUCOSAMINE CAP 750MG	PA REQUIRED
	43292056002	Generic	GLUCOSAMINE CAP 750MG	PA REQUIRED
	43292055883	Generic	GLUCOSAMINE CAP 750MG	PA REQUIRED
Glucosamine Sulfate Packet 1500 MG				
	11511000003	Brand	DONA PAK 1500MG	PA REQUIRED
Glucosamine Sulfate Tab 375 MG				
	11511000005	Brand	DONA TAB 375MG	PA REQUIRED
Glucosamine Sulfate Tab 500 MG				
	54569660600	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED
	11845012098	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED
	11845012099	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED
	11822880900	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine Sulfate Tab 500 MG				
	00394025009	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED
	45861000001	Generic	CIDATRINE TAB 500MG	PA REQUIRED
	48107004956	Generic	GLUCOSAMINE TAB 500MG	PA REQUIRED
Glucosamine Sulfate Tab 750 MG				
	13349001024	Generic	OPTIFLEX-G TAB 750MG	PA REQUIRED
	35046014048	Generic	GLUCOSAMINE TAB 750MG	PA REQUIRED
	11917005048	Generic	GLUCOSAMINE TAB 750MG	PA REQUIRED
	11917009137	Generic	GLUCOSAMINE TAB 750MG	PA REQUIRED
	11511000009	Generic	DONA TAB 750MG	PA REQUIRED
Glucosamine Tab 750 MG & Chondroitin Cap 400 MG Therapy Pack				
	13349001043	Brand	OPTIFLEX MIS COMPLETE	PA REQUIRED
Glucosamine-Chondroitin Cap 166.7-133.3 MG				
	11822218830	Brand	RA GLUCOSAMI CAP CHONDROI	PA REQUIRED
	11822218840	Brand	RA GLUCOSAMI CAP CHONDROI	PA REQUIRED
	11822511240	Brand	PA GLUCOSAMI CAP CHONDROI	PA REQUIRED
	11822511250	Brand	RA GLUCOSAMI CAP CHONDROI	PA REQUIRED
	11822517500	Brand	PA GLUCOSAMI CAP CHONDROI	PA REQUIRED
Glucosamine-Chondroitin Cap 250-200 MG				
	11822881240	Generic	GLUCOS/CHOND CAP 250-200	PA REQUIRED
	40985021690	Generic	GLUCOS/CHOND CAP 250-200	PA REQUIRED
	40985021472	Generic	GLUCOS/CHOND CAP 250-200	PA REQUIRED
	40985023023	Generic	GLUCOS/CHOND CAP 250-200	PA REQUIRED
	48107005021	Generic	GLUCOS/CHOND CAP 250-200	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Cap 500-250 MG				
	23513071660	Generic	GLUCOS/CHOND CAP 500-250	PA REQUIRED
	00761021936	Brand	GLUCOS/CHOND CAP 500-250	PA REQUIRED
Glucosamine-Chondroitin Cap 500-400 MG				
	54569525000	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	54458010022	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	54458020022	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	52959080902	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	52959080903	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	52959080930	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	52959080960	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	51862017606	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	51862017612	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	50428416122	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999064701	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999064724	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999064760	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999064790	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999071012	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999071024	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	49999071090	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	50090073600	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	57896085906	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	55970080825	Generic	COSAMIN DS CAP 500-400	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Cap 500-400 MG				
	55970080841	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	55970080850	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	55970080860	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	55970080872	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	63874110702	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874110703	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874110706	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874110709	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087104	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087120	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087130	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087160	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087180	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	63874087190	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	96295013718	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	80681011700	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	80681011701	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	70186090180	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	66267100808	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	67216170501	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	00904548118	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	00904548152	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917005199	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Cap 500-400 MG				
	11917000814	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917000815	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917001271	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917003170	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917009127	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917009128	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917009129	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917009130	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	11917017686	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	09492021103	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	10006070025	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	40985022314	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	40985022787	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	40985022291	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	40985022301	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	33358009560	Generic	COSAMIN DS CAP 500-400	PA REQUIRED
	33261005290	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
	48107005022	Generic	GLUCOS/CHOND CAP 500-400	PA REQUIRED
Glucosamine-Chondroitin Chew Tab 500-400 MG				
	81131074906	Generic	GLUC CHONDR CHW 500-400	PA REQUIRED
Glucosamine-Chondroitin Chew Tab 750-600 MG				
	50428932066	Generic	GLUCOS/CHOND CHW 750-600	PA REQUIRED
	11917014245	Generic	GLUCOS/CHOND CHW 750-600	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Liq 1500-1200 MG/30ML				
	54629001222	Generic	GLUCOS/CHOND LIQ MAX-STR	PA REQUIRED
	40985022720	Generic	GLUCOS/CHOND LIQ TRIP ST	PA REQUIRED
Glucosamine-Chondroitin Tab 250-200 MG				
	87701006682	Generic	GLUCOS/CHOND TAB 250-200	PA REQUIRED
	30768003134	Generic	OSTEO BI-FLX TAB 250-200	PA REQUIRED
	30768003136	Generic	OSTEO BI-FLX TAB 250-200	PA REQUIRED
Glucosamine-Chondroitin Tab 500-400 MG				
	81131074940	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	87701040762	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	96295012849	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	66267101106	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	68071031360	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	68071031391	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	71791000135	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	52959076802	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	52959076830	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	52959076860	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	52959062690	Generic	CIDAFLEX TAB 500-400	PA REQUIRED
	50436559202	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	50428843326	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	50428843532	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	50428145514	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	50268037711	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Tab 500-400 MG				
	50268037713	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63874106202	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63874106203	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63874106206	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63874106209	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63187017190	Generic	CIDAFLEX TAB 500-400	PA REQUIRED
	63629314301	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63629314302	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63629314303	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63629314304	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63629314305	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	63629314306	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	55970080720	Generic	COSAMIN DS TAB 500-400	PA REQUIRED
	55970080760	Generic	COSAMIN DS TAB 500-400	PA REQUIRED
	27434009209	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	40985022639	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	37205056048	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	37205071475	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	33261073490	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	35046000400	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	35046000401	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	48107004955	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	45861000000	Generic	CIDAFLEX TAB 500-400	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Tab 500-400 MG				
	43292056003	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	43292056004	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	41415017577	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	41415033577	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	11917009911	Generic	GLU/CHOND PM TAB 500-400	PA REQUIRED
	11822881250	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	11822829580	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	10006070027	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	11822388830	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	11822388960	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	00904559252	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
	00904559293	Generic	GLUCOS/CHOND TAB 500-400	PA REQUIRED
Glucosamine-Chondroitin Tab 750-600 MG				
	81131002530	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	78742009317	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	78742009318	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	78742009319	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	00904559492	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	00179804612	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	00179844312	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11822590010	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11822686090	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11822489900	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glucosamine-Chondroitin Tab 750-600 MG				
	11822388700	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917004280	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917004785	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917007702	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917009131	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917009132	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917011522	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917011523	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917011524	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917011525	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917013900	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917013901	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917013902	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917013903	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	41163026669	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	48107001024	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	40985022476	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	40985022481	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917020441	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
	11917018870	Generic	GLUCOS/CHOND TAB 750-600	PA REQUIRED
Glucosamine-Chondroitin Tab ER 500-200 MG				
	29135018002	Brand	ENDUR-FLEX TAB 500-200	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Cap 1 MG				
	53191022601	Generic	MELATONIN CAP 1MG	
Melatonin Cap 10 MG				
	50428030894	Generic	MELATONIN CAP 10MG	
	50428030412	Generic	MELATONIN CAP 10MG	
	50428054474	Generic	MELATONIN CAP 10MG	
	50428042135	Generic	CVS QUALITY CAP SLEEP	
	50428042388	Generic	MELATONIN CAP 10MG	
	74312019491	Generic	MELATONIN CAP 10MG	
	96295013820	Generic	MELATONIN CAP 10MG	
	30768019484	Generic	MELATONIN CAP 10MG	
	40093011543	Generic	MELATONIN CAP 10MG	
Melatonin Cap 3 MG				
	53191022701	Generic	MELATONIN CAP 3MG	
	27434000511	Generic	MELATONIN CAP 3MG	
Melatonin Cap 5 MG				
	53191021401	Generic	MELATONIN CAP 5MG	
	50428034400	Generic	MELATONIN CAP 5MG	
	74312015745	Generic	MELATONIN CAP 5MG	
Melatonin Chew Tab 1 MG				
	57973000852	Brand	SLEEP CHILD/ CHW MELATONI	
	58438000558	Brand	SLEEP CHILD/ CHW MELATONI	
	11917020817	Generic	MELATONIN CHW 1MG CHLD	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Chew Tab 2.5 MG				
	50428054198	Generic	MELATONIN CHW 2.5MG	
	50428028011	Generic	MELATONIN CHW 2.5MG	
	81131005691	Generic	MELATONIN CHW 2.5MG	
	79854009305	Generic	MELATONIN CHW 2.5MG	
	87701042777	Generic	MELATONIN CHW 2.5MG	
	30768053503	Generic	MELATONIN CHW 2.5MG	
	31604004135	Generic	MELATONIN CHW 2.5MG	
	31604004216	Generic	MELATONIN CHW 2.5MG	
	47469006398	Generic	MELATONIN CHW 2.5MG	
	40985027770	Generic	VITAJoy GUMM CHW 2.5MG	
Melatonin Chew Tab 5 MG				
	50428030278	Brand	MELATONIN CHW 5MG	
	50428059017	Brand	MELATONIN CHW 5MG	
	50428059700	Brand	MELATONIN CHW 5MG	
	50428037438	Brand	MELATONIN CHW 5MG	
	47469007331	Generic	MELATONIN CHW 5MG	
	47469007332	Generic	MELATONIN CHW 5MG	
	40093011371	Brand	MELATONIN CHW	
Melatonin Liquid 1 MG/4ML (2.5 MG/10ML)				
	47469007402	Generic	MELATONIN LIQ 1MG/4ML	
	47469004408	Generic	MELATONIN LIQ 2.5MG	
	47469000457	Generic	MELATONIN LIQ 1MG/4ML	

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Liquid 1 MG/ML				
	58438000571	Generic	SLEEP CHILD/ LIQ MELATONI	
	81131015112	Generic	MELATONIN LIQ 1MG/ML	
	30768016836	Generic	MELATONIN LIQ 1MG/ML	
	11917018468	Generic	MELATONIN LIQ 1MG/ML	
Melatonin Liquid 10 MG/ML				
	40093011213	Brand	MELATONIN LIQ 10MG/ML	
	40093011221	Brand	MELATONIN LIQ 10MG/ML	
Melatonin Liquid 3 MG/0.9ML				
	33739003261	Generic	MELATONIN LIQ 3MG/0.9	
Melatonin Liquid 3.5 MG/2ML (1.75 MG/ML)				
	35046006732	Brand	SLEEP SOUNDL LIQ 3.5/2ML	
Melatonin Liquid 5 MG/15ML				
	50428053791	Generic	MELATONIN LIQ 5MG/15ML	
	50428802565	Generic	MELATONIN LIQ 5MG/15ML	
	11917014142	Generic	MELATONIN LIQ 5MG/15ML	
Melatonin Liquid 5 MG/ML				
	47469007149	Generic	MELATIONIN DRO 5MG/ML	
Melatonin SL Tab 1 MG				
	11822363290	Brand	RA MELATONIN SUB 1MG	
Melatonin SL Tab 10 MG				
	50428030129	Generic	MELATONIN SUB QUIK DIS	
	52569014167	Generic	HM MELATONIN SUB 10MG	
	54629092910	Generic	MELATONIN SUB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin SL Tab 10 MG				
	74312052802	Generic	MELATONIN SUB 10MG	
	87701042634	Generic	MELATONIN SUB 10MG	
	40985027503	Generic	MELATONIN SUB 10MG	
	37205098452	Generic	MELATONIN SUB 10MG	
	11917019726	Generic	MELATONIN SUB 10MG	
	11917020312	Generic	MELATONIN SUB 10MG	
Melatonin SL Tab 3 MG				
	74312007901	Generic	MELATONIN SUB 3MG	
	74312007903	Generic	MELATONIN SUB 3MG	
Melatonin SL Tab 5 MG				
	76635090740	Generic	MELATONIN SUB 5MG	
	54629061500	Generic	MELATONIN SUB 5MG	
	50428051108	Generic	MELATONIN SUB 5MG	
	11917019901	Generic	MELATONIN SUB 5MG	
Melatonin Sublingual Lozenge 5 MG				
	30768052816	Generic	MELATONIN LOZ 5MG	
Melatonin Tab 1 MG				
	57896088406	Generic	MELATONIN TAB 1MG	
	57896088409	Generic	MELATONIN TAB 1MG	
	57896088418	Generic	MELATONIN TAB 1MG	
	78742045610	Generic	MELATONIN TAB 1MG	
	80681004100	Generic	MELATONIN TAB 1MG	
	94604010075	Generic	MELATONIN TAB 1MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 1 MG				
	74312002832	Generic	MELATONIN TAB 1MG	
	40093010609	Generic	MELATONIN TAB 1MG	
	35046000391	Generic	MELATONIN TAB 1MG	
	43292056329	Generic	MELATONIN TAB 1MG	
	10006073051	Generic	MELATONIN TAB 1MG	
	11917017180	Generic	MELATONIN TAB 1MG	
	00536111411	Generic	MELATONIN TAB 1MG	
Melatonin Tab 10 MG				
	96295013917	Generic	MELATONIN TAB 10MG	
	00761015724	Generic	MELATONIN TAB 10MG	
	11917017023	Generic	MELATONIN TAB 10MG	
	11822517570	Generic	RA MELATONIN TAB 10MG	
	11822054311	Generic	RA MELATONIN TAB 10MG	
	31604003223	Generic	MELATONIN TAB MAX STR	
	31604001190	Generic	MELATONIN TAB EX STR	
Melatonin Tab 12 MG				
	96295013590	Generic	MELATONIN TAB 12MG	
Melatonin Tab 200 MCG				
	74312007900	Generic	MELATONIN TAB 200MCG	
Melatonin Tab 3 MG				
	77333051610	Generic	MELATONIN TAB 3MG	
	77333051625	Generic	MELATONIN TAB 3MG	
	80681008500	Generic	MELATONIN TAB 3MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 3 MG				
	80681008600	Generic	MELATONIN TAB 3MG	
	81131031250	Generic	MELATONIN TAB 3MG	
	80681014800	Generic	MELATONIN TAB 3MG	
	96295013723	Generic	MELATONIN TAB 3MG	
	96295012827	Generic	MELATONIN TAB 3MG	
	94604010078	Generic	MELATONIN TAB 3MG	
	87701040813	Generic	MELATONIN TAB 3MG	
	68094011059	Generic	MELATONIN TAB 3MG	
	68094011061	Generic	MELATONIN TAB 3MG	
	57896086406	Generic	MELATONIN TAB 3MG	
	54629060900	Generic	MELATONIN TAB 3MG	
	50428035025	Generic	MELATONIN TAB 3MG	
	50428034138	Generic	MELATONIN TAB 3MG	
	50428062110	Generic	MELATONIN TAB 3MG	
	50428300263	Generic	MELATONIN TAB 3MG	
	50428031818	Generic	MELATONIN TAB 3MG	
	50268052411	Generic	MELATONIN TAB 3MG	
	50268052415	Generic	MELATONIN TAB 3MG	
	49348089810	Generic	SM MELATONIN TAB 3MG	
	54569912300	Generic	MELATONIN TAB 3MG	
	54458021360	Generic	MELATONIN TAB 3MG	
	51991001406	Generic	MELATONIN TAB 3MG	
	51645078806	Generic	MELATONIN TAB 3MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 3 MG				
	30768048678	Generic	MELATONIN TAB 3MG	
	30768048680	Generic	MELATONIN TAB 3MG	
	30768004005	Generic	MELATONIN TAB 3MG	
	20555003600	Generic	MELATONIN TAB 3MG	
	20555003601	Generic	MELATONIN TAB 3MG	
	31604004080	Generic	MELATONIN TAB 3MG	
	31604002741	Generic	MELATONIN TAB 3MG	
	31604002742	Generic	MELATONIN TAB 3MG	
	35046000390	Generic	MELATONIN TAB 3MG	
	40985022721	Generic	MELATONIN TAB 3MG	
	40985021240	Generic	MELATONIN TAB 3MG	
	37205050478	Generic	MELATONIN TAB 3MG	
	43292056298	Generic	MELATONIN TAB 3MG	
	43292056366	Generic	MELATONIN TAB 3MG	
	47469000511	Generic	MELATONIN TAB 3MG	
	47469005105	Generic	MELATONIN TAB 3MG	
	47469016068	Generic	MELATONIN TAB 3MG	
	11822228090	Generic	RA MELATONIN TAB 3MG	
	10939089544	Generic	SM MELATONIN TAB 3MG	
	07610022640	Generic	MELATONIN TAB 3MG	
	10006070050	Generic	MELATONIN TAB 3MG	
	10006073044	Generic	MELATONIN TAB 3MG	
	10006070029	Generic	MELATONIN TAB 3MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 3 MG				
	10006070030	Generic	MELATONIN TAB 3MG	
	10006070031	Generic	MELATONIN TAB 3MG	
	05388062808	Generic	MELATONIN TAB 3MG	
	11917005642	Generic	MELATONIN TAB 3MG	
	11917007508	Generic	MELATONIN TAB 3MG	
	11917018855	Generic	MELATONIN TAB 3MG	
	11917013961	Generic	MELATONIN TAB 3MG	
	00536641208	Generic	MELATONIN TAB 3MG	
	00536641268	Generic	MELATONIN TAB 3MG	
	00904518206	Generic	MELATONIN TAB 3MG	
	00904518252	Generic	MELATONIN TAB 3MG	
	00904518261	Generic	MELATONIN TAB 3MG	
	00179842712	Generic	KP MELATONIN TAB 3MG	
Melatonin Tab 300 MCG				
	30768003560	Generic	MELATONIN TAB 300MCG	
	30768000541	Generic	MELATONIN TAB 300MCG	
Melatonin Tab 5 MG				
	50268053311	Generic	MELATONIN TAB MAX ST	
	50268053315	Generic	MELATONIN TAB MAX ST	
	50428026927	Generic	MELATONIN TAB 5MG	
	50428027684	Generic	MELATONIN TAB 5MG	
	50428038771	Generic	MELATONIN TAB 5MG	
	57896083409	Generic	MELATONIN TAB 5MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 5 MG				
	87701040814	Generic	MELATONIN TAB 5MG	
	94604010079	Generic	MELATONIN TAB 5MG	
	96295012828	Generic	MELATONIN TAB 5MG	
	96295013572	Generic	MELATONIN TAB 5MG	
	81131005673	Generic	SV MELATONIN TAB 5MG	
	80681004000	Generic	MELATONIN TAB 5MG	
	80681004001	Generic	MELATONIN TAB 5MG	
	80681004002	Generic	MELATONIN TAB 5MG	
	77333052010	Generic	MELATONIN TAB 5MG	
	77333052025	Generic	MELATONIN TAB 5MG	
	75450031287	Generic	MELATONIN TAB 5MG	
	30768015745	Generic	MELATONIN TAB 5MG	
	20555003900	Generic	MELATONIN TAB 5MG	
	20555003901	Generic	MELATONIN TAB 5MG	
	11917020311	Generic	MELATONIN TAB 5MG	
	37205054278	Generic	MELATONIN TAB 5MG	
	40985027087	Generic	MELATONIN TAB MAX ST	
	35046000393	Generic	MELATONIN TAB 5MG	
	35515095982	Generic	QC MELATONIN TAB 5MG	
	31604002743	Generic	MELATONIN TAB 5MG	
	43292056414	Generic	MELATONIN TAB 5MG	
	00536109808	Generic	MELATONIN TAB 5MG	
	00536109811	Generic	MELATONIN TAB 5MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tab 5 MG				
	11822489740	Generic	PA MELATONIN TAB 5MG	
	11822511120	Generic	RA MELATONIN TAB 5MG	
	05388062809	Generic	MELATONIN TAB 5MG	
	07610015540	Generic	MELATONIN TAB 5MG	
	10006073039	Generic	MELATONIN TAB 5MG	
	10006073040	Generic	MELATONIN TAB 5MG	
	10006070166	Generic	MELATONIN TAB 5MG	
Melatonin Tab ER 1 MG				
	54629898360	Brand	MELATONIN TR TAB 1MG	
Melatonin Tab ER 10 MG				
	52569014356	Generic	HM MELATONIN TAB 10MG	
	78742009463	Generic	MM MELATONIN TAB 10MG TR	
	87701043334	Generic	MELATONIN TAB 10MG	
	47469005964	Generic	MELATONIN TAB 10MG CR	
	35046000392	Generic	MELATONIN TAB 10MG CR	
	40985028028	Generic	MELATONIN TAB 10MG	
Melatonin Tab ER 3 MG				
	54629050260	Generic	MELATONIN TAB 3MG CR	
	64038042303	Brand	MELADOX TAB 3MG CR	
Melatonin Tab ER 5 MG				
	74312053098	Generic	MELATONIN TAB 5MG	
Melatonin Tablet Disintegrating 10 MG				
	81131007403	Generic	MELATONIN TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tablet Disintegrating 10 MG				
	52569013913	Generic	MELATONIN CHW 10MG	
	50428051072	Generic	MELATONIN CHW QUIK DIS	
	47469006211	Generic	MELATONIN TAB 10MG	
	11917017659	Generic	MELATONIN TAB 10MG	
Melatonin Tablet Disintegrating 12 MG				
	50428042669	Generic	MELATONIN TAB 12MG	
	40093010234	Generic	MELATONIN TAB 12MG	
	40093010210	Generic	MELATONIN TAB 12MG	
Melatonin Tablet Disintegrating 3 MG				
	81131008747	Generic	SV MELATONIN TAB 3MG	
	40093010242	Generic	MELATONIN TAB 3MG	
	40093010197	Generic	MELATONIN TAB 3MG	
	47469006076	Generic	MELATONIN TAB 3MG	
	11917017106	Generic	MELATONIN TAB 3MG	
	11917015664	Generic	MELATONIN TAB 3MG	
	11917016681	Generic	MELATONIN TAB 3MG	
	11917014868	Generic	MELATONIN TAB 3MG	
Melatonin Tablet Disintegrating 5 MG				
	11917017248	Generic	MELATONIN CHW 5MG	
	11917014057	Generic	MELATONIN TAB 5MG	
	10939081044	Generic	SM MELATONIN TAB 5MG	
	47469005865	Generic	MELATONIN TAB 5MG	
	40093010305	Generic	MELATONIN TAB 5MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Melatonin Tablet Disintegrating 5 MG				
	40093010164	Generic	MELATONIN TAB 5MG	
Melatonin Tablet Disintegrating 500 MCG				
	11845016565	Brand	MELATONIN TAB 500MCG	
Ubiquinol Cap 100 MG				
	74312036015	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
	78742009382	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
	98440000128	Generic	QUNOL COQ10 CAP UBIQUINO	PA REQUIRED
	71791000388	Generic	UBQH CAP 100MG	PA REQUIRED
	71791000389	Generic	UBQH CAP 100MG	PA REQUIRED
	11845017498	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
	11917014218	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
	31604002850	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
	30768050353	Generic	UBIQUINOL CAP 100MG	PA REQUIRED
Acetaminophen Cap 500 MG				
	00904198760	Generic	MAPAP CAP 500MG	
Acetaminophen Chew Tab 160 MG				
	70000030901	Generic	ACETAMIN JR CHW 160MG	
	70000031001	Generic	ACETAMINOPHE CHW 160MG	
	62011033901	Generic	ACETAMINOPHE CHW 160MG	
	00904664524	Generic	MAPAP CHW 160MG	
	46122042462	Generic	PAIN RELIEF CHW 160MG	
Acetaminophen Chew Tab 80 MG				
	00904579146	Generic	MAPAP CHILD CHW 80MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Liquid 160 MG/5ML				
	54838014440	Generic	CHLD SILAPAP LIQ 160/5ML	
	54838014470	Generic	CHLD SILAPAP LIQ 160/5ML	
	54838014480	Generic	CHLD SILAPAP LIQ 160/5ML	
	58657052504	Generic	M-PAP LIQ 160/5ML	
	58657052516	Generic	M-PAP LIQ 160/5ML	
	69367032304	Generic	ACETAMIN LIQ 160/5ML	
	69367032316	Generic	ACETAMIN LIQ 160/5ML	
	00485005708	Generic	ED-APAP LIQ 80MG/2.5	
Acetaminophen Soln 160 MG/5ML				
	66689005401	Generic	ACETAMIN SOL 160/5ML	
	66689005499	Generic	ACETAMIN SOL 160/5ML	
	66689005501	Generic	ACETAMIN SOL 325MG	
	66689005599	Generic	ACETAMIN SOL 325MG	
	66689005601	Generic	ACETAMIN SOL 650/20.3	
	66689005699	Generic	ACETAMIN SOL 650/20.3	
	60687057137	Generic	ACETAMIN SOL 650MG	
	60687057156	Generic	ACETAMIN SOL 325MG	
	00121197100	Generic	ACETAMIN SOL 650/20.3	
	00121197121	Generic	ACETAMIN SOL 650/20.3	
	00121065700	Generic	ACETAMIN SOL 160/5ML	
	00121065705	Generic	ACETAMIN SOL 160/5ML	
	00121131400	Generic	ACETAMIN SOL 325MG	
	00121131411	Generic	ACETAMIN SOL 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Soln 160 MG/5ML				
	00904673870	Generic	ACETAMINOPHE SOL 160/5ML	
	00904673971	Generic	ACETAMINOPHE SOL 325MG	
	00904682076	Generic	ACETAMINOPHE SOL 650/20.3	
	00904701416	Generic	ACETAMIN SOL 160/5ML	
	00904701420	Generic	ACETAMIN SOL 160/5ML	
Acetaminophen Suppos 120 MG				
	51672211502	Generic	FEVERALL SUP 120MG	
	51672211504	Generic	FEVERALL SUP 120MG	
	45802073200	Generic	ACETAMIN SUP 120MG	
	45802073230	Generic	ACETAMIN SUP 120MG	
	45802073233	Generic	ACETAMIN SUP 120MG	
Acetaminophen Suppos 325 MG				
	51672211602	Brand	FEVERALL SUP 325MG	
	51672211604	Brand	FEVERALL SUP 325MG	
Acetaminophen Suppos 650 MG				
	51672211704	Generic	FEVERALL SUP 650MG	
	45802073030	Generic	ACETAMIN SUP 650MG	
	45802073032	Generic	ACETAMIN SUP 650MG	
	45802073033	Generic	ACETAMIN SUP 650MG	
Acetaminophen Suppos 80 MG				
	51672211402	Brand	FEVERALL INF SUP 80MG	
	51672211404	Brand	FEVERALL INF SUP 80MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Susp 160 MG/5ML				
	62011000101	Generic	PAIN & FEVER SUS 160/5ML	
	62011018301	Generic	PAIN & FEVER SUS 160/5ML	
	62011024601	Generic	PAIN & FEVER SUS 160/5ML	
	62011024701	Generic	PAIN & FEVER SUS 160/5ML	
	62011046001	Generic	PAIN RELIEVE SUS 160/5ML	
	62011046101	Generic	PAIN RELIEVE SUS 160/5ML	
	62011046201	Generic	PAIN RELIEVE SUS 160/5ML	
	63868017418	Generic	PAIN RELIEF SUS 160/5ML	
	63868017526	Generic	NON-ASPIRIN SUS 160/5ML	
	63868017626	Generic	NON-ASPIRIN SUS 160/5ML	
	68094003059	Generic	ACETAMINOPHN SUS 160/5ML	
	68094003062	Generic	ACETAMINOPHN SUS 160/5ML	
	68094023159	Generic	ACETAMINOPHN SUS 160/5ML	
	68094023161	Generic	ACETAMINOPHN SUS 160/5ML	
	68094023162	Generic	ACETAMINOPHN SUS 160/5ML	
	68094033059	Generic	ACETAMINOPHN SUS 325MG	
	68094033061	Generic	ACETAMINOPHN SUS 325MG	
	68094033062	Generic	ACETAMINOPHN SUS 325MG	
	68094058658	Generic	ACETAMINOPHN SUS 160/5ML	
	68094058758	Generic	ACETAMINOPHN SUS 160/5ML	
	68094001559	Generic	ACETAMINOPHN SUS 160/5ML	
	68094001561	Generic	ACETAMINOPHN SUS 160/5ML	
	68094001562	Generic	ACETAMINOPHN SUS 160/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Susp 160 MG/5ML				
	70000002801	Generic	PAIN & FEVER SUS 160/5ML	
	70000049601	Generic	PAIN & FEVER SUS 160/5ML	
	70000047201	Generic	PAIN & FEVER SUS 160/5ML	
	70000048101	Generic	PAIN/FEVER SUS 160/5ML	
	70677011601	Generic	PAIN RELIEVE SUS 160/5ML	
	70677011801	Generic	PAIN RELIEVE SUS 160/5ML	
	46122004203	Generic	PAIN & FEVER SUS 160/5ML	
	46122005603	Generic	PAIN & FEVER SUS 160/5ML	
	46122020926	Generic	PAIN & FEVER SUS 160/5ML	
	46122021026	Generic	PAIN & FEVER SUS 160/5ML	
	46122021126	Generic	PAIN & FEVER SUS 160/5ML	
	46122021226	Generic	PAIN & FEVER SUS 160/5ML	
	46122032226	Generic	PAIN & FEVER SUS 160/5ML	
	45802020126	Generic	ACETAMINOPHN SUS 160/5ML	
	45802020326	Generic	ACETAMINOPHN SUS 160/5ML	
	49348009334	Generic	PAIN & FEVER SUS 160/5ML	
	49348011934	Generic	PAIN & FEVER SUS 160/5ML	
	49348012334	Generic	PAIN & FEVER SUS 160/5ML	
	49348032534	Generic	PAIN & FEVER SUS 160/5ML	
	49348043030	Generic	PAIN & FEVER SUS 160/5ML	
	00904676620	Generic	ACETAMINOPHN SUS 160/5ML	
	00121093900	Generic	APAP CHILD SUS 160/5ML	
	00121093905	Generic	APAP CHILD SUS 160/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Susp 160 MG/5ML				
	00113895926	Generic	PAIN & FEVER SUS 160/5ML	
	00113060826	Generic	PAIN & FEVER SUS 160/5ML	
	00113059010	Generic	PAIN & FEVER SUS 160/5ML	
	00113094610	Generic	PAIN & FEVER SUS 160/5ML	
	00121178100	Generic	ACETAMINOPHN SUS 160/5ML	
	00121178105	Generic	ACETAMINOPHN SUS 160/5ML	
	00113002026	Generic	PAIN & FEVER SUS 160/5ML	
	00113016110	Generic	PAIN & FEVER SUS 160/5ML	
	00113021226	Generic	PAIN & FEVER SUS 160/5ML	
	00113039726	Generic	PAIN & FEVER SUS 160/5ML	
	00536132197	Generic	ACETAMINOPHN SUS 160/5ML	
	00536121277	Generic	ACETAMINOPHN SUS 160/5ML	
Acetaminophen Tab 325 MG				
	71335041701	Generic	ACETAMINOPHN TAB 325MG	
	71335041702	Generic	ACETAMINOPHN TAB 325MG	
	71335041703	Generic	ACETAMINOPHN TAB 325MG	
	71335041704	Generic	ACETAMINOPHN TAB 325MG	
	71335041705	Generic	ACETAMINOPHN TAB 325MG	
	71335041706	Generic	ACETAMINOPHN TAB 325MG	
	71335041707	Generic	ACETAMINOPHN TAB 325MG	
	71335041708	Generic	ACETAMINOPHN TAB 325MG	
	71335041709	Generic	ACETAMINOPHN TAB 325MG	
	72189019730	Generic	ACETAMIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	72189024730	Generic	ACETAMINOPHE TAB 325MG	
	71610023865	Generic	ACETAMIN TAB 325MG	
	71399802401	Generic	ACETAMINOPHE TAB 325MG	
	71399802402	Generic	ACETAMINOPHE TAB 325MG	
	71399802501	Generic	ACETAMINOPHE TAB 325MG	
	71399802502	Generic	ACETAMINOPHE TAB 325MG	
	71335067402	Generic	ACETAMIN TAB 325MG	
	71335067403	Generic	ACETAMIN TAB 325MG	
	71335080400	Generic	ACETAMIN TAB 325MG	
	71335080402	Generic	ACETAMIN TAB 325MG	
	71205045600	Generic	ACETAMIN TAB 325MG	
	70000037401	Generic	ACETAMINOPHE TAB 325MG	
	70000009201	Generic	ACETAMINOPHN TAB 325MG	
	70000015201	Generic	ACETAMINOPHN TAB 325MG	
	70000015202	Generic	ACETAMINOPHN TAB 325MG	
	70000015203	Generic	ACETAMINOPHN TAB 325MG	
	70000015204	Generic	ACETAMINOPHN TAB 325MG	
	69618001001	Generic	ACETAMIN TAB 325MG	
	69618001010	Generic	ACETAMIN TAB 325MG	
	69842087651	Generic	CVS ACETAMIN TAB 325MG	
	68788724501	Generic	ACETAMIN TAB 325MG	
	68788724503	Generic	ACETAMIN TAB 325MG	
	68788724506	Generic	ACETAMIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	68788724509	Generic	ACETAMIN TAB 325MG	
	66116067020	Generic	MAPAP TAB 325MG	
	66267000330	Generic	ACETAMIN TAB 325MG	
	66267000340	Generic	ACETAMIN TAB 325MG	
	66267099900	Generic	ACETAMIN TAB 325MG	
	67544048022	Generic	ACETAMIN TAB 325MG	
	67544048032	Generic	ACETAMIN TAB 325MG	
	67544048065	Generic	ACETAMIN TAB 325MG	
	67544048090	Generic	ACETAMIN TAB 325MG	
	76420037215	Generic	APHEN TAB 325MG	
	75450029544	Generic	PAIN RELIEF TAB 325MG	
	79903005210	Generic	PAIN RELIEVE TAB 325MG	
	63868008210	Generic	PAIN RELIEF TAB 325MG	
	63868031410	Generic	NON-ASPIRIN TAB 325MG	
	63739008702	Generic	ACETAMINOPHE TAB 325MG	
	63739044001	Generic	ACETAMIN TAB 325MG	
	63739044004	Generic	ACETAMIN TAB 325MG	
	65155010201	Generic	ACETAMINOPHE TAB 325MG	
	65504010505	Generic	ACETAMIN TAB 325MG	
	65504023095	Generic	NON-ASPIRIN TAB 325MG	
	63874000201	Generic	ACETAMIN TAB 325MG	
	63874000202	Generic	ACETAMIN TAB 325MG	
	63874000215	Generic	ACETAMIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	63874000216	Generic	ACETAMIN TAB 325MG	
	63874000220	Generic	ACETAMIN TAB 325MG	
	63874000224	Generic	ACETAMIN TAB 325MG	
	63874000225	Generic	ACETAMIN TAB 325MG	
	63874000230	Generic	ACETAMIN TAB 325MG	
	63874000240	Generic	ACETAMIN TAB 325MG	
	63874000250	Generic	ACETAMIN TAB 325MG	
	63874000260	Generic	ACETAMIN TAB 325MG	
	63187052800	Generic	ACETAMIN TAB 325MG	
	63629151801	Generic	ACETAMIN TAB 325MG	
	63629151802	Generic	ACETAMIN TAB 325MG	
	63629151803	Generic	ACETAMIN TAB 325MG	
	63629151804	Generic	ACETAMIN TAB 325MG	
	62107005201	Generic	TACTINAL TAB 325MG	
	62107005210	Generic	TACTINAL TAB 325MG	
	61919085771	Generic	MAPAP TAB 325MG	
	62011003201	Generic	PAIN RELIEVE TAB 325MG	
	62011003202	Generic	PAIN RELIEVE TAB 325MG	
	60760009750	Generic	NON-ASPIRIN TAB 325MG	
	60760044950	Generic	MAPAP TAB 325MG	
	60760045350	Generic	ACETAMINOPHE TAB 325MG	
	60760049150	Generic	TACTINAL TAB 325MG	
	60760093550	Generic	MAPAP TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	58864000256	Generic	ACETAMIN TAB 325MG	
	59606003020	Generic	PAIN RELIEF TAB 325MG	
	59779076678	Generic	PAIN RELIEF TAB 325MG	
	60242010101	Generic	MAXAPAP RS TAB 325MG	
	60242010110	Generic	MAXAPAP RS TAB 325MG	
	55289056301	Generic	ACETAMIN TAB 325MG	
	55289056306	Generic	ACETAMIN TAB 325MG	
	55289056309	Generic	ACETAMIN TAB 325MG	
	55289056312	Generic	ACETAMIN TAB 325MG	
	55289056320	Generic	ACETAMIN TAB 325MG	
	55289056324	Generic	ACETAMIN TAB 325MG	
	55289056330	Generic	ACETAMIN TAB 325MG	
	55289056350	Generic	ACETAMIN TAB 325MG	
	55289056360	Generic	ACETAMIN TAB 325MG	
	54738054801	Generic	ACETAMIN TAB 325MG	
	54738054803	Generic	ACETAMIN TAB 325MG	
	54738054850	Generic	ACETAMIN TAB 325MG	
	57896010010	Generic	ACETAMIN TAB 325MG	
	57896010101	Generic	NON-ASPIRIN TAB 325MG	
	57896010105	Generic	NON-ASPIRIN TAB 325MG	
	57896010110	Generic	NON-ASPIRIN TAB 325MG	
	57896010201	Generic	ACETAMINOPHE TAB 325MG	
	57896010205	Generic	ACETAMINOPHE TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	57896010210	Generic	ACETAMINOPHE TAB 325MG	
	57896010220	Generic	ACETAMINOPHE TAB 325MG	
	57896010410	Generic	ACETAMINOPHE TAB 325MG	
	57896010420	Generic	ACETAMINOPHE TAB 325MG	
	51824006101	Generic	NON-ASPIRIN TAB 325MG	
	51469030301	Generic	AMINOFEN TAB 325MG	
	52959030200	Generic	ACETAMIN TAB 325MG	
	52959030212	Generic	ACETAMIN TAB 325MG	
	52959030220	Generic	ACETAMIN TAB 325MG	
	52959030224	Generic	ACETAMIN TAB 325MG	
	52959030230	Generic	ACETAMIN TAB 325MG	
	52959030240	Generic	ACETAMIN TAB 325MG	
	52959030260	Generic	ACETAMIN TAB 325MG	
	52959030295	Generic	ACETAMIN TAB 325MG	
	53002046030	Generic	ACETAMIN TAB 325MG	
	53329064230	Generic	ACETAMIN TAB 325MG	
	53329064298	Generic	ACETAMIN TAB 325MG	
	54569903200	Generic	PHARBETOL TAB 325MG	
	54569510101	Generic	ACETAMIN TAB 325MG	
	54569153301	Generic	ACETAMIN TAB 325MG	
	54569153302	Generic	ACETAMIN TAB 325MG	
	54569153303	Generic	ACETAMIN TAB 325MG	
	54569153304	Generic	ACETAMIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	54348051012	Generic	ACETAMIN TAB 325MG	
	54348051020	Generic	ACETAMIN TAB 325MG	
	54348051030	Generic	ACETAMIN TAB 325MG	
	49348097310	Generic	PAIN RELIEVE TAB 325MG	
	49348097316	Generic	PAIN RELIEVE TAB 325MG	
	49781010451	Generic	PAIN RELIEVR TAB 325MG	
	49999013130	Generic	MAPAP TAB 325MG	
	50090026702	Generic	ACETAMINOPHE TAB 325MG	
	50090026703	Generic	ACETAMINOPHE TAB 325MG	
	50090026704	Generic	ACETAMINOPHE TAB 325MG	
	50090278300	Generic	ACETAMIN TAB 325MG	
	50090290700	Generic	ACETAMIN TAB 325MG	
	49483034001	Generic	ACETAMIN TAB 325MG	
	49483034010	Generic	ACETAMIN TAB 325MG	
	00536132701	Generic	ACETAMINOPHE TAB 325MG	
	00536132706	Generic	ACETAMINOPHE TAB 325MG	
	00536132710	Generic	ACETAMINOPHE TAB 325MG	
	00536116401	Generic	ACETAMIN TAB 325MG	
	00904198251	Generic	MAPAP TAB 325MG	
	00904198259	Generic	MAPAP TAB 325MG	
	00904198260	Generic	MAPAP TAB 325MG	
	00904198261	Generic	MAPAP TAB 325MG	
	00904198280	Generic	MAPAP TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	00536322201	Generic	PAIN & FEVER TAB 325MG	
	00536322210	Generic	PAIN & FEVER TAB 325MG	
	00615059138	Generic	ACETAMIN TAB 325MG	
	00113040378	Generic	PAIN RELIEF TAB 325MG	
	00440701001	Generic	ACETAMIN TAB 325MG	
	00440701006	Generic	ACETAMIN TAB 325MG	
	00440701010	Generic	ACETAMIN TAB 325MG	
	00440701020	Generic	ACETAMIN TAB 325MG	
	00440701024	Generic	ACETAMIN TAB 325MG	
	00440701030	Generic	ACETAMIN TAB 325MG	
	00440701040	Generic	ACETAMIN TAB 325MG	
	00440701050	Generic	ACETAMIN TAB 325MG	
	00363010412	Generic	PAIN RELIEVR TAB 325MG	
	00904677361	Generic	ACETAMINOPHE TAB 325MG	
	00904671950	Generic	ACETAMINOPHE TAB 325MG	
	00904671960	Generic	ACETAMINOPHE TAB 325MG	
	00904671980	Generic	ACETAMINOPHE TAB 325MG	
	11822046713	Generic	PAIN RELIEF TAB 325MG	
	11822317640	Generic	RA ACETAMIN TAB 325MG	
	10135016313	Generic	ACETAMIN TAB 325MG	
	10135016314	Generic	ACETAMIN TAB 325MG	
	10135012305	Generic	ACETAMIN TAB 325MG	
	10135012310	Generic	ACETAMIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	10135012324	Generic	ACETAMIN TAB 325MG	
	10135012330	Generic	ACETAMIN TAB 325MG	
	10135012350	Generic	ACETAMIN TAB 325MG	
	10135012360	Generic	ACETAMIN TAB 325MG	
	10135012362	Generic	ACETAMIN TAB 325MG	
	10135012365	Generic	ACETAMIN TAB 325MG	
	10135012370	Generic	ACETAMIN TAB 325MG	
	10135012390	Generic	ACETAMIN TAB 325MG	
	49035049101	Generic	PAIN RELIEVE TAB 325MG	
	49035052378	Generic	ACETAMINOPHN TAB 325MG	
	47682014513	Generic	ACETAMINOPHN TAB 325MG	
	47682014536	Generic	ACETAMINOPHN TAB 325MG	
	47682014548	Generic	ACETAMINOPHN TAB 325MG	
	47682014564	Generic	ACETAMINOPHN TAB 325MG	
	47682080313	Generic	NON-ASPIRIN TAB 325MG	
	47682080333	Generic	NON-ASPIRIN TAB 325MG	
	47682080348	Generic	NON-ASPIRIN TAB 325MG	
	43353043390	Generic	ACETAMIN TAB 325MG	
	43292055591	Generic	ACETAMIN TAB 325MG	
	41163051402	Generic	EQL ACETAMIN TAB 325MG	
	41250051055	Generic	ASPIRIN FREE TAB 325MG	
	46122024778	Generic	PAIN RELIEF TAB 325MG	
	46122039078	Generic	PAIN RELIEF TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 325 MG				
	46122043078	Generic	GNP ACETAMIN TAB 325MG	
	16103035307	Generic	PHARBETOL TAB 325MG	
	16103035308	Generic	PHARBETOL TAB 325MG	
	16103035311	Generic	PHARBETOL TAB 325MG	
	16103035399	Generic	PHARBETOL TAB 325MG	
	15127007208	Generic	NON-ASPIRIN TAB 325MG	
	15127007224	Generic	NON-ASPIRIN TAB 325MG	
	33261014200	Generic	ACETAMIN TAB 325MG	
	33261014230	Generic	ACETAMIN TAB 325MG	
	33261014290	Generic	ACETAMIN TAB 325MG	
	33261014299	Generic	ACETAMIN TAB 325MG	
	33358000620	Generic	ACETAMIN TAB 325MG	
	33358000630	Generic	ACETAMIN TAB 325MG	
	33358000660	Generic	ACETAMIN TAB 325MG	
	36800090002	Generic	PAIN RELIEF TAB 325MG	
	37864000101	Generic	ACETAMIN TAB 325MG	
	37864000102	Generic	ACETAMIN TAB 325MG	
	37864007039	Generic	ACETAMIN TAB 325MG	
Acetaminophen Tab 500 MG				
	49483034101	Generic	ACETAMINOPHN TAB 500MG	
	49483034110	Generic	ACETAMINOPHN TAB 500MG	
	49483034150	Generic	ACETAMINOPHN TAB 500MG	
	49348099810	Generic	PAIN RELIEVE TAB 500MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 500 MG				
	62011002701	Generic	PAIN RELIEF TAB 500MG	
	62011002301	Generic	PAIN RELIEF TAB 500MG	
	62011002302	Generic	PAIN RELIEF TAB 500MG	
	62011002303	Generic	PAIN RELIEF TAB 500MG	
	62011043401	Generic	PAIN RELIEF TAB 500MG	
	62011004901	Generic	PAIN RELIEF TAB 500MG	
	63868098710	Generic	NON-ASPIRIN TAB 500MG/RR	
	63868098750	Generic	NON-ASPIRIN TAB 500MG/RR	
	63868050350	Generic	NON-ASPIRIN TAB 500MG	
	63868050701	Generic	NON-ASPIRIN TAB 500MG	
	63868008360	Generic	PAIN RELIEF TAB 500MG	
	63868008405	Generic	PAIN RELIEF TAB 500MG	
	63868008410	Generic	PAIN RELIEF TAB 500MG	
	63868008424	Generic	PAIN RELIEF TAB 500MG	
	63868008450	Generic	PAIN RELIEF TAB 500MG	
	70000003601	Generic	ACETAMIN TAB 500MG	
	70000041001	Generic	ACETAMIN TAB 500MG	
	70000041002	Generic	ACETAMIN TAB 500MG	
	70000037301	Generic	ACETAMINOPHN TAB 500MG	
	70000037302	Generic	ACETAMINOPHN TAB 500MG	
	70000037303	Generic	ACETAMINOPHN TAB 500MG	
	70000037305	Generic	ACETAMINOPHN TAB 500MG	
	70000031201	Generic	ACETAMIN TAB 500MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 500 MG				
	70000031202	Generic	ACETAMIN TAB 500MG	
	24385048447	Generic	PAIN RELIEF TAB 500MG	
	24385048471	Generic	PAIN RELIEF TAB 500MG	
	24385048490	Generic	PAIN RELIEF TAB 500MG	
	24385014571	Generic	PAIN RELIEF TAB 500MG	
	46122054382	Generic	PAIN RELIEF TAB 500MG	
	46122064971	Generic	ACETAMINOPHN TAB 500MG	
	46122031278	Generic	PAIN RELIEF TAB 500MG	
	49348004209	Generic	PAIN RELIEVE TAB 500MG	
	49348004210	Generic	PAIN RELIEVE TAB 500MG	
	49348004214	Generic	PAIN RELIEVE TAB 500MG	
	49348011610	Generic	SM PAIN REL TAB 500MG	
	49348073010	Generic	PAIN RELIEVE TAB 500MG	
	00904672024	Generic	ACETAMIN TAB 500MG	
	00904672040	Generic	ACETAMIN TAB 500MG	
	00904672051	Generic	ACETAMIN TAB 500MG	
	00904672059	Generic	ACETAMIN TAB 500MG	
	00904672060	Generic	ACETAMIN TAB 500MG	
	00904672080	Generic	ACETAMIN TAB 500MG	
	00904673059	Generic	ACETAMIN TAB 500MG	
	00904673060	Generic	ACETAMIN TAB 500MG	
	00904673061	Generic	ACETAMIN TAB 500MG	
	00904673080	Generic	ACETAMIN TAB 500MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab 500 MG				
	00904674959	Generic	ACETAMINOPHN TAB 500MG	
	00113048452	Generic	PAIN RELIEF TAB 500MG	
	00113048462	Generic	PAIN RELIEF TAB 500MG	
	00113048471	Generic	PAIN RELIEF TAB 500MG	
	00113048478	Generic	PAIN RELIEF TAB 500MG	
	00113048490	Generic	PAIN RELIEF TAB 500MG	
	00113022771	Generic	PAIN RELIEF TAB 500MG	
	00113002562	Generic	PAIN RELIEF TAB 500MG	
	00113002571	Generic	PAIN RELIEF TAB 500MG	
	00113002578	Generic	PAIN RELIEF TAB 500MG	
	00536117201	Generic	ACETAMIN TAB 500MG	
	00536117210	Generic	ACETAMIN TAB 500MG	
	00536129229	Generic	ACETAMIN TAB 500MG	
Acetaminophen Tab ER 650 MG				
	70000030601	Generic	8 HOUR PAIN TAB 650MG	
	70677001701	Generic	SM PAIN RLVR TAB 650MG	
	70677001801	Generic	ARTHRTS PAIN TAB 650MG	
	70000018002	Generic	8 HOUR PAIN TAB 650MG	
	70000018003	Generic	8 HOUR PAIN TAB 650MG	
	70000018005	Generic	8 HOUR PAIN TAB 650MG	
	68084077725	Generic	ACETAMINOPHE TAB 650MG ER	PA REQUIRED
	68084077795	Generic	ACETAMINOPHE TAB 650MG ER	
	68001049500	Generic	ACETAMINOPHE TAB 650MG ER	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Acetaminophen Tab ER 650 MG				
	62011033701	Generic	ARTHRTS PAIN TAB 650MG	
	49483069901	Generic	ACETAMIN TAB 650MG	
	49483069905	Generic	ACETAMIN TAB 650MG	
	50268005211	Generic	ACETAMINOPHE TAB 650MG	
	50268005215	Generic	ACETAMINOPHE TAB 650MG	PA REQUIRED
	51660033301	Generic	ARTHRTS PAIN TAB 650MG	
	51660033350	Generic	ARTHRTS PAIN TAB 650MG	
	00113054462	Generic	ARTHRTS PAIN TAB 650MG	
	00113054471	Generic	ARTHRTS PAIN TAB 650MG	
	00113054478	Generic	ARTHRTS PAIN TAB 650MG	
	00904688365	Generic	ACETAMINOPHE TAB 650MG ER	
	00904576960	Generic	ARTHRTS PAIN TAB 650MG	
	46122006271	Generic	8HR PAIN REL TAB 650MG	
	46122017081	Generic	ARTHRTS PAIN TAB 650MG	
	46122062978	Generic	8 HR ARTHRTS TAB 650MG	
	46122062981	Generic	8 HR ARTHRTS TAB 650MG	
	46122063078	Generic	8HR PAIN REL TAB 650MG	
Aspirin Buffered (Ca Carb-Mg Carb-Mg Ox) Tab 325 MG				
	70000014701	Generic	TRI-BUFF ASA TAB 325MG	
	00904201559	Generic	TRI-BUFF ASA TAB 325MG	
Aspirin Chew Tab 81 MG				
	70000041901	Generic	ASPIRIN CHW 81MG	
	70000042001	Generic	ASPIRIN CHW 81MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Aspirin Chew Tab 81 MG				
	70677007001	Generic	SM ASPIRIN CHW 81MG	
	49483033463	Generic	ASPIRIN LOW CHW 81MG	
	49348075707	Generic	SM ASPIRIN CHW 81MG	
	62011021201	Generic	HM ASPIRIN CHW 81MG	
	62011040401	Generic	HM ASPIRIN CHW 81MG	
	63868024036	Generic	ASPIRIN LOW CHW 81MG	
	63739043402	Generic	ASPIRIN CHW 81MG	
	63868002936	Generic	ASPIRIN LOW CHW 81MG	
	62011002801	Generic	HM ASPIRIN CHW 81MG	
	00904404073	Generic	ASPIRIN CHW 81MG	
	00536100836	Generic	ASPIRIN CHW 81MG	
	00113046708	Generic	ASPIRIN CHW 81MG	
	00113046768	Generic	ASPIRIN CHW 81MG	
	00113025968	Generic	ASPIRIN CHW 81MG	
	00113027468	Generic	ASPIRIN CHW 81MG	
	00904679480	Generic	ASPIRIN LOW CHW 81MG	
	00904679489	Generic	ASPIRIN LOW CHW 81MG	
	24385027868	Generic	GNP ASPIRIN CHW 81MG	
	24385002868	Generic	GNP ASPIRIN CHW 81MG	
Aspirin Tab 325 MG				
	63868035203	Generic	QC ASPIRIN TAB 325MG	
	63868035210	Generic	QC ASPIRIN TAB 325MG	
	62011043201	Generic	HM ASPIRIN TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Aspirin Tab 325 MG				
	62011002001	Generic	HM ASPIRIN TAB 325MG	
	62011002003	Generic	HM ASPIRIN TAB 325MG	
	49483001110	Generic	ASPIRIN TAB 325MG	
	70677009202	Generic	SM ASPIRIN TAB 325MG	
	70000025302	Generic	ASPIRIN TAB 325MG	
	70000025304	Generic	ASPIRIN TAB 325MG	
	49348000110	Generic	SM ASPIRIN TAB 325MG	
	00904680940	Generic	ASPIRIN TAB 325MG	
	00904674460	Generic	ASPIRIN TAB 325MG	
	00113041678	Generic	ASPIRIN TAB 325MG	
	00113041690	Generic	ASPIRIN TAB 325MG	
	00113191978	Generic	ASPIRIN TAB 325MG	
	00113191990	Generic	ASPIRIN TAB 325MG	
	00536105405	Generic	ASPIRIN TAB 325MG	
	00536105429	Generic	ASPIRIN TAB 325MG	
Aspirin Tab Delayed Release 325 MG				
	70677007101	Generic	SM ASPIRIN TAB 325MG EC	
	70000003501	Generic	ASPIRIN TAB 325MG	
	70000001401	Generic	ASPIRIN TAB 325MG EC	
	49483033101	Generic	ASPIRIN TAB 325MG EC	
	49483033110	Generic	ASPIRIN TAB 325MG EC	
	50844022712	Generic	EQ ASPIRIN TAB 325MG EC	
	62011040501	Generic	HM ASPIRIN TAB 325MG EC	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Aspirin Tab Delayed Release 325 MG				
	63739052301	Generic	ASPIRIN TAB 325MG EC	
	63868089810	Generic	ENTERIC ASA TAB 325MG EC	
	00536123201	Generic	ASPIRIN TAB 325MG EC	
	00904678480	Generic	ASPIRIN TAB 325MG EC	
Aspirin Tab Delayed Release 81 MG				
	63868037305	Generic	ASPIRIN LOW TAB 81MG EC	
	63739052210	Generic	ASPIRIN TAB 81MG EC	
	63739021202	Generic	ASPIRIN LOW TAB 81MG EC	
	63868036320	Generic	ASPIRIN LOW TAB 81MG EC	
	63868036336	Generic	ASPIRIN LOW TAB 81MG EC	
	62011001901	Generic	ASPIRIN LOW TAB 81MG EC	
	62011001902	Generic	ASPIRIN LOW TAB 81MG EC	
	62011000301	Generic	ASPIRIN LOW TAB 81MG EC	
	49348098015	Generic	SM ASPIRIN TAB 81MG EC	
	49348098023	Generic	SM ASPIRIN TAB 81MG EC	
	49348098053	Generic	SM ASPIRIN TAB 81MG EC	
	49348098115	Generic	SM ASPIRIN TAB 81MG EC	
	49483038710	Generic	ASPIRIN LOW TAB 81MG EC	
	49483038712	Generic	ASPIRIN LOW TAB 81MG EC	
	49483048110	Generic	ASPIRIN LOW TAB 81MG EC	
	49483048112	Generic	ASPIRIN LOW TAB 81MG EC	
	70000017801	Generic	ASPIRIN TAB 81MG EC	
	70000017802	Generic	ASPIRIN TAB 81MG EC	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Aspirin Tab Delayed Release 81 MG				
	70000017803	Generic	ASPIRIN TAB 81MG EC	
	70000021801	Generic	ASPIRIN LOW TAB 81MG EC	
	70000021802	Generic	ASPIRIN LOW TAB 81MG EC	
	00904675180	Generic	ASPIRIN LOW TAB 81MG EC	
	00904678370	Generic	ASPIRIN LOW TAB 81MG EC	
	00904671318	Generic	ASPIRIN LOW TAB 81MG EC	
	00536123441	Generic	ASPIRIN LOW TAB 81MG EC	
	00536114941	Generic	ASPIRIN TAB 81MG EC	
	46122059848	Generic	ASPIRIN LOW TAB 81MG EC	
	46122059887	Generic	ASPIRIN LOW TAB 81MG EC	
	46122061576	Generic	GNP ASPIRIN TAB 81MG EC	
	46122061587	Generic	GNP ASPIRIN TAB 81MG EC	
	46122018076	Generic	ASPIRIN LOW TAB 81MG EC	
	46122018087	Generic	ASPIRIN LOW TAB 81MG EC	
Aspirin-Acetaminophen-Caffeine Tab 250-250-65 MG				
	70000024701	Generic	MIGRAINE TAB RELIEF	
	70000024702	Generic	MIGRAINE TAB RELIEF	
	70677011901	Generic	SM MIGRAINE TAB RELIEF	
	70000014601	Generic	HEADACHE TAB RELIEF	
	70000006601	Generic	HEADACHE TAB RELIEF	
	63868048501	Generic	QC HEADACHE TAB RELIEF	
	63868048524	Generic	QC HEADACHE TAB RELIEF	
	62011024301	Generic	HM MIGRAINE TAB FORMULA	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Aspirin-Acetaminophen-Caffeine Tab 250-250-65 MG				
	46122038278	Generic	GNP HEADACHE TAB EXTRA ST	
	46122069078	Generic	GNP HEADACH TAB RELIEF	
	49348050610	Generic	SM MIGRAINE TAB RELIEF	
	24385036571	Generic	GNP MIGRAINE TAB RELIEF	
	24385036578	Generic	GNP MIGRAINE TAB RELIEF	
	00536132601	Generic	PAIN RELIEVR TAB PLUS	
	00904513559	Generic	PAIN RELIEVR TAB PLUS	
	00113037462	Generic	MIGRAINE TAB FORMULA	
	00113037478	Generic	MIGRAINE TAB FORMULA	
Cromolyn Sodium Nasal Aerosol Soln 5.2 MG/ACT (4%)				
	57782039726	Generic	CROMOLYN SOD SPR 5.2/ACT	
Meclizine HCl Chew Tab 25 MG				
	63868016316	Generic	TRAVEL EASE CHW 25MG	
	49483033301	Generic	MOTION-TIME CHW 25MG	
	49483033310	Generic	MOTION-TIME CHW 25MG	
	51645099401	Generic	MECLIZINE CHW 25MG	
	51645099410	Generic	MECLIZINE CHW 25MG	
	00536129901	Generic	MECLIZINE CHW 25MG	
	00536129910	Generic	MECLIZINE CHW 25MG	
	00536101801	Generic	TRAVEL SICK CHW 25MG	
	00536101810	Generic	TRAVEL SICK CHW 25MG	
Meclizine HCl Tab 12.5 MG				
	00536117801	Generic	MECLIZINE TAB 12.5MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Meclizine HCl Tab 12.5 MG				
	00536117810	Generic	MECLIZINE TAB 12.5MG	
	00536129701	Generic	MECLIZINE TAB 12.5MG	
	00536129710	Generic	MECLIZINE TAB 12.5MG	
Meclizine HCl Tab 25 MG				
	62011034501	Generic	MOTION RELF TAB 25MG	
	70000009701	Generic	MOTION SICKN TAB 25 MG	
	70677002601	Generic	MOTION SICK TAB 25MG	
	46122053551	Generic	MOTION SICK TAB 25MG	
Cetirizine HCl Oral Soln 1 MG/ML (5 MG/5ML)				
	70677001401	Generic	ALL DAY ALLG SOL 5MG/5ML	
	70000021401	Generic	ALL DAY ALLG SOL 5MG/5ML	
	70000021501	Generic	ALL DAY ALLG SOL 1MG/ML	
	70000018601	Generic	ALL DAY ALLG SOL 5MG/5ML	
	69230031611	Generic	ALLERGY RELF SOL 1MG/ML	
	68094000459	Generic	CETIRIZINE SOL 1MG/ML	
	68094000462	Generic	CETIRIZINE SOL 1MG/ML	
	62011032201	Generic	ALL DAY ALLG SOL 5MG/5ML	
	62011032301	Generic	ALL DAY ALLG SOL 5MG/5ML	
	62011028501	Generic	ALL DAY ALLG SOL 5MG/5ML	
	63868043004	Generic	CHILD ALLRGY SOL 5MG/5ML	
	54838055240	Generic	CETIRIZINE SOL 5MG/5ML	
	51672210208	Generic	CETIRIZINE SOL 5MG/5ML	
	49348093434	Generic	ALL DAY ALLG SOL 5MG/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cetirizine HCl Oral Soln 1 MG/ML (5 MG/5ML)				
	46122020326	Generic	ALL DAY ALLG SOL 1MG/ML	
	46122010126	Generic	ALL DAY ALLG SOL 5MG/5ML	
	45802097426	Generic	CETIRIZINE SOL 1MG/ML	
	46122002026	Generic	ALL DAY ALLG SOL 1MG/ML	
	49348032634	Generic	ALL DAY ALLG SOL 5MG/5ML	
	49348007834	Generic	ALL DAY ALLG SOL 5MG/5ML	
	00113050326	Generic	ALL DAY ALLG SOL 1MG/ML	
	00113018926	Generic	ALL DAY ALLG SOL 1MG/ML	
	00904676520	Generic	CETIRIZINE SOL 1MG/ML	
Cetirizine HCl Tab 10 MG				
	51079059701	Generic	CETIRIZINE TAB 10MG	
	51079059720	Generic	CETIRIZINE TAB 10MG	
	51660093901	Generic	CETIRIZINE TAB 10MG	
	51660093930	Generic	CETIRIZINE TAB 10MG	
	51660093954	Generic	CETIRIZINE TAB 10MG	
	51660093990	Generic	CETIRIZINE TAB 10MG	
	55111069990	Generic	CETIRIZINE TAB 10MG	
	60505263301	Generic	CETIRIZINE TAB 10MG	
	60505263308	Generic	CETIRIZINE TAB 10MG	
	63868066514	Generic	ALLGY RELIEF TAB 10MG	
	63868066590	Generic	ALLGY RELIEF TAB 10MG	
	62011030701	Generic	CETIRIZINE TAB 10MG	
	62011041401	Generic	ALLERGY RELF TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cetirizine HCl Tab 10 MG				
	62011038401	Generic	ALL DAY ALLG TAB 10MG	
	68001043604	Generic	CETIRIZINE TAB 10MG	
	68001043696	Generic	CETIRIZINE TAB 10MG	
	68001043697	Generic	CETIRIZINE TAB 10MG	
	69230030401	Generic	ALLERGY RELI TAB 10MG	
	69230030405	Generic	ALLERGY RELI TAB 10MG	
	69230030430	Generic	ALLERGY RELI TAB 10MG	
	70000004701	Generic	ALL DAY ALLG TAB 10MG	
	70000038001	Generic	ALL DAY ALLG TAB 10MG	
	70000038002	Generic	ALL DAY ALLG TAB 10MG	
	70000038004	Generic	ALL DAY ALLG TAB 10MG	
	70677007502	Generic	SM ALL DAY TAB 10MG	
	70677005701	Generic	SM ALL DAY TAB 10MG	
	00904671740	Generic	CETIRIZINE TAB 10MG	
	00904671741	Generic	CETIRIZINE TAB 10MG	
	00904671743	Generic	CETIRIZINE TAB 10MG	
	00904671746	Generic	CETIRIZINE TAB 10MG	
	00904671760	Generic	CETIRIZINE TAB 10MG	
	00904671761	Generic	CETIRIZINE TAB 10MG	
	00904671772	Generic	CETIRIZINE TAB 10MG	
	00904671786	Generic	CETIRIZINE TAB 10MG	
	00113945813	Generic	ALL DAY ALLG TAB 10MG	
	00113945839	Generic	ALL DAY ALLG TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cetirizine HCl Tab 10 MG				
	00113945866	Generic	ALL DAY ALLG TAB 10MG	
	00113945895	Generic	ALL DAY ALLG TAB 10MG	
	00378363701	Generic	CETIRIZINE TAB 10MG	
	00378363705	Generic	CETIRIZINE TAB 10MG	
	45802091939	Generic	CETIRIZINE TAB 10MG	
	45802091987	Generic	CETIRIZINE TAB 10MG	
	43598081112	Generic	CETIRIZINE TAB 10MG	
	43598081115	Generic	CETIRIZINE TAB 10MG	
	24385099865	Generic	GNP ALL DAY TAB ALLERGY	
	24385099874	Generic	GNP ALL DAY TAB ALLERGY	
	24385099875	Generic	GNP ALL DAY TAB ALLERGY	
	16571040210	Generic	CETIRIZINE TAB 10MG	
	16571040250	Generic	CETIRIZINE TAB 10MG	
	16714079901	Generic	CETIRIZINE TAB 10MG	
	16714079902	Generic	CETIRIZINE TAB 10MG	
	16714079903	Generic	CETIRIZINE TAB 10MG	
	16714079904	Generic	CETIRIZINE TAB 10MG	
Cetirizine HCl Tab 5 MG				
	60505263201	Generic	CETIRIZINE TAB 5MG	
	16571040110	Generic	CETIRIZINE TAB 5MG	
	00378363501	Generic	CETIRIZINE TAB 5MG	
Fexofenadine HCl Tab 180 MG				
	55111078401	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Fexofenadine HCl Tab 180 MG				
	55111078430	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	62011040902	Generic	HM ALLERGY TAB 180MG	PA REQUIRED
	62011023301	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	63868066730	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	63824092605	Generic	MUCINEX ALLR TAB 180MG	PA REQUIRED
	63824092610	Generic	MUCINEX ALLR TAB 180MG	PA REQUIRED
	63824092630	Generic	MUCINEX ALLR TAB 180MG	PA REQUIRED
	63824092640	Generic	MUCINEX ALLR TAB 180MG	PA REQUIRED
	51079054801	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	51079054820	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	49348096856	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	70677007402	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	70000036101	Generic	24HR ALLERGY TAB 180MG	PA REQUIRED
	70000036102	Generic	24HR ALLERGY TAB 180MG	PA REQUIRED
	70000036103	Generic	24HR ALLERGY TAB 180MG	PA REQUIRED
	70000036104	Generic	24HR ALLERGY TAB 180MG	PA REQUIRED
	70000036105	Generic	24HR ALLERGY TAB 180MG	PA REQUIRED
	69230020201	Generic	ALLERGY TAB 180MG	PA REQUIRED
	69230020230	Generic	ALLERGY TAB 180MG	PA REQUIRED
	69230020260	Generic	ALLERGY 24HR TAB 180MG	PA REQUIRED
	69230030001	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	69230030005	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	69230030030	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Fexofenadine HCl Tab 180 MG				
	68001044000	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	68001044004	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00378078205	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00378078293	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00113057122	Generic	ALLER-EASE TAB 180MG	PA REQUIRED
	00113057139	Generic	ALLER-EASE TAB 180MG	PA REQUIRED
	00113057195	Generic	ALLER-EASE TAB 180MG	PA REQUIRED
	00904671110	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00904671146	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00904705040	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	00904705060	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	16714089901	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	16714089902	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	45802057178	Generic	FEXOFENADINE TAB 180MG	PA REQUIRED
	46122046222	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	46122046261	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	46122046265	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
	46122046275	Generic	ALLERGY RELF TAB 180MG	PA REQUIRED
Fexofenadine HCl Tab 60 MG				
	69230020105	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	68001043900	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	70677012801	Generic	SM ALLERGY TAB 60MG	PA REQUIRED
	51079054701	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Fexofenadine HCl Tab 60 MG				
	51079054720	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	62011041301	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	62011047601	Generic	HM ALLERGY TAB 60MG	PA REQUIRED
	55111078301	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	45802042578	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00904697940	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00904697960	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00904719240	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00904719260	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00113042553	Generic	ALLER-EASE TAB 60MG	PA REQUIRED
	00378078105	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
	00378078191	Generic	FEXOFENADINE TAB 60MG	PA REQUIRED
Loratadine Rapidly-Disintegrating Tab 10 MG				
	46122053952	Generic	LORATADINE TAB 10MG	PA REQUIRED
Loratadine Syrup 5 MG/5ML				
	00121084910	Generic	LORATADINE SOL 10/10ML	
Loratadine Tab 10 MG				
	60505014701	Generic	LORATADINE TAB 10MG	
	60505014708	Generic	LORATADINE TAB 10MG	
	62011024802	Generic	LORATADINE TAB 10MG	
	62011024803	Generic	LORATADINE TAB 10MG	
	62011024804	Generic	LORATADINE TAB 10MG	
	62011024805	Generic	LORATADINE TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Loratadine Tab 10 MG				
	51079024601	Generic	LORATADINE TAB 10MG	
	51079024620	Generic	LORATADINE TAB 10MG	
	51660052601	Generic	ALLERGY RELF TAB 10MG	
	51660052605	Generic	ALLERGY RELF TAB 10MG	
	51660052611	Generic	ALLERGY RELF TAB 10MG	
	51660052631	Generic	ALLERGY RELF TAB 10MG	
	51660052653	Generic	ALLERGY RELF TAB 10MG	
	49348081801	Generic	SM LORATADIN TAB 10MG	
	49348081813	Generic	SM LORATADIN TAB 10MG	
	49348081845	Generic	SM LORATADIN TAB 10MG	
	49348081856	Generic	SM LORATADIN TAB 10MG	
	50268048915	Generic	LORATADINE TAB 10MG	
	70000021301	Generic	ALLERGY RELF TAB 10MG	
	70000021302	Generic	ALLERGY RELF TAB 10MG	
	70000021303	Generic	ALLERGY RELF TAB 10MG	
	70000021304	Generic	ALLERGY RELF TAB 10MG	
	70000021306	Generic	ALLERGY RELF TAB 10MG	
	70010016201	Generic	LORATADINE TAB 10MG	
	69230031201	Generic	ALLERGY RELF TAB 10MG	
	69230031203	Generic	ALLERGY RELF TAB 10MG	
	69230031230	Generic	ALLERGY RELF TAB 10MG	
	69230031701	Generic	ALLERGY RELF TAB 10MG	
	69230031703	Generic	ALLERGY RELF TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Loratadine Tab 10 MG				
	68084024801	Generic	LORATADINE TAB 10MG	
	68084024811	Generic	LORATADINE TAB 10MG	
	68001043800	Generic	LORATADINE TAB 10MG	
	68001043804	Generic	LORATADINE TAB 10MG	
	68001043896	Generic	LORATADINE TAB 10MG	
	68001043897	Generic	LORATADINE TAB 10MG	
	00113061239	Generic	ALLERGY RELF TAB 10MG	
	00113061246	Generic	ALLERGY RELF TAB 10MG	
	00113061260	Generic	ALLERGY RELF TAB 10MG	
	00113061265	Generic	ALLERGY RELF TAB 10MG	
	00113061275	Generic	ALLERGY RELF TAB 10MG	
	00904685207	Generic	LORATADINE TAB 10MG	
	00904685260	Generic	LORATADINE TAB 10MG	
	00904685261	Generic	LORATADINE TAB 10MG	
	00904685272	Generic	LORATADINE TAB 10MG	
	00904685289	Generic	LORATADINE TAB 10MG	
	45802065065	Generic	LORATADINE TAB 10MG	
	45802065078	Generic	LORATADINE TAB 10MG	
	45802065087	Generic	LORATADINE TAB 10MG	
	49348011201	Generic	LORATADINE TAB 10MG	
	16714089801	Generic	LORATADINE TAB 10MG	
	16714089802	Generic	LORATADINE TAB 10MG	
	16714089803	Generic	LORATADINE TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Loratadine Tab 10 MG				
	24385047199	Generic	LORATADINE TAB 10MG	
Chlorpheniramine Maleate Syrup 2 MG/5ML				
	00485009816	Generic	ED CHLORPED SYP JR	
Chlorpheniramine Maleate Tab 4 MG				
	70000016001	Generic	ALLERGY TAB 4MG	
	70000016002	Generic	ALLERGY TAB 4MG	
	70677000401	Generic	SM ALLERGY TAB 4MG	
	49483024201	Generic	ALLERGY-TIME TAB 4MG	
	49483024210	Generic	ALLERGY-TIME TAB 4MG	
	62011031101	Generic	ALLERGY RELF TAB 4MG	
	63868083324	Generic	ALLERGY RELI TAB 4MG	
	00536100601	Generic	ALLER-CHLOR TAB 4MG	
	00536100610	Generic	ALLER-CHLOR TAB 4MG	
	00904001224	Generic	ALLERGY TAB 4MG	
	00904001259	Generic	ALLERGY TAB 4MG	
	00904001280	Generic	ALLERGY TAB 4MG	
	46122061862	Generic	GNP ALLERGY TAB 4MG	
	46122061878	Generic	GNP ALLERGY TAB 4MG	
Diphenhydramine HCl Cap 25 MG				
	63868008701	Generic	COMP ALLERGY CAP 25MG	
	63868008724	Generic	COMP ALLERGY CAP 25MG	
	62011030901	Generic	HM ALLERGY CAP 25MG	
	70000020701	Generic	ALLERGY RELF CAP 25MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Diphenhydramine HCl Cap 25 MG				
	70000020702	Generic	ALLERGY RELF CAP 25MG	
	70000014401	Generic	ALLERGY RELF CAP 25MG	
	70000008501	Generic	ALLERGY RELF CAP 25MG	
	46122044062	Generic	GNP ALLERGY CAP 25MG	
	46122044078	Generic	GNP ALLERGY CAP 25MG	
	46122042762	Generic	GNP ALLERGY CAP 25MG	
	42806064801	Generic	DIPHENHYDRAM CAP 25MG	
	42806064810	Generic	DIPHENHYDRAM CAP 25MG	
	00904530624	Generic	BANOPHEN CAP 25MG	
	00904530660	Generic	BANOPHEN CAP 25MG	
	00904530661	Generic	DIPHENHYDRAM CAP 25MG	
	00904530680	Generic	BANOPHEN CAP 25MG	
	00536101001	Generic	DIPHENHIST CAP 25MG	
	00113046262	Generic	ALLERGY RELF CAP 25MG	
Diphenhydramine HCl Cap 50 MG				
	00904530760	Generic	BANOPHEN CAP 50MG	
	00904530780	Generic	BANOPHEN CAP 50MG	
	00904205661	Generic	DIPHENHYDRAM CAP 50MG	
	42806064901	Generic	DIPHENHYDRAM CAP 50MG	
	42806064910	Generic	DIPHENHYDRAM CAP 50MG	
Diphenhydramine HCl Liquid 12.5 MG/5ML				
	69339015117	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	69339015119	Generic	DIPHENHYDRAM LIQ 12.5/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Diphenhydramine HCl Liquid 12.5 MG/5ML				
	69339015217	Generic	DIPHENHYDRAM LIQ 25/10ML	
	69339015219	Generic	DIPHENHYDRAM LIQ 25/10ML	
	68094002259	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	68094002262	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	68094002459	Generic	DIPHENHYDRAM LIQ 25/10ML	
	68094002462	Generic	DIPHENHYDRAM LIQ 25/10ML	
	70000049201	Generic	ALLERGY RELF LIQ 12.5/5ML	
	70000047401	Generic	ALLERGY RELF LIQ 12.5/5ML	
	70000047402	Generic	ALLERGY RELF LIQ 12.5/5ML	
	62011028401	Generic	ALLERGY RELF LIQ 12.5/5ML	
	63868037004	Generic	ALLERGY CHLD LIQ 12.5/5ML	
	63868082354	Generic	ALLERGY CHLD LIQ 12.5/5ML	
	58657052804	Generic	M-DRYL LIQ 12.5/5ML	
	58657052816	Generic	M-DRYL LIQ 12.5/5ML	
	60687026742	Generic	DIPHENHYDRAM LIQ 25/10ML	
	60687026756	Generic	DIPHENHYDRAM LIQ 25/10ML	
	54838013540	Generic	SILADRYL ALR LIQ 12.5/5ML	
	54838013570	Generic	SILADRYL ALR LIQ 12.5/5ML	
	54838013580	Generic	SILADRYL ALR LIQ 12.5/5ML	
	46122035626	Generic	GNP ALLERGY LIQ 50/20ML	
	46122036126	Generic	ALLERGY CHLD LIQ 12.5/5ML	
	46122067426	Generic	GNP ALLERGY LIQ CHILDREN	
	46122068526	Generic	ALLERGY RLF LIQ 50/20ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Diphenhydramine HCl Liquid 12.5 MG/5ML				
	49348004534	Generic	ALLERGY RELF LIQ 12.5/5ML	
	49348004537	Generic	ALLERGY RELF LIQ 12.5/5ML	
	24385037926	Generic	CHLD ALLERGY LIQ 12.5/5ML	
	00121173000	Generic	DIPHENHYDRAM LIQ 25/10ML	
	00121173030	Generic	DIPHENHYDRAM LIQ 25/10ML	
	00121086500	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	00121086530	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	00113037926	Generic	ALLERGY RELF LIQ 12.5/5ML	
	00904698516	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	00904698520	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	00904674070	Generic	DIPHENHYDRAM LIQ 12.5/5ML	
	00904674172	Generic	DIPHENHYDRAM LIQ 25/10ML	
Diphenhydramine HCl Tab 25 MG				
	63868049210	Generic	QC ALLERGY TAB 25MG	
	63868049224	Generic	QC ALLERGY TAB 25MG	
	62011031001	Generic	ALLERGY RELF TAB 25MG	
	49483006101	Generic	DIPHENHYDRAM TAB 25MG	
	49483006110	Generic	DIPHENHYDRAM TAB 25MG	
	70677000301	Generic	SM ALLERGY TAB 25MG	
	68094001859	Generic	DIPHENHYDRAM TAB 25MG	
	68094001861	Generic	DIPHENHYDRAM TAB 25MG	
	70000013601	Generic	ALLERGY RELF TAB 25MG	
	70000013602	Generic	ALLERGY RELF TAB 25MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Diphenhydramine HCl Tab 25 MG				
	70000013603	Generic	ALLERGY RELF TAB 25MG	
	00113047962	Generic	ALLERGY RELF TAB 25MG	
	00113047978	Generic	ALLERGY RELF TAB 25MG	
	00113047979	Generic	ALLERGY RELF TAB 25MG	
	00904555124	Generic	BANOPHEN TAB 25MG	
	00904555159	Generic	BANOPHEN TAB 25MG	
	00536121429	Generic	DIPHENHYDRAM TAB 25MG	
	24385047978	Generic	GNP ALLERGY TAB 25MG	
Loratadine Syrup 5 MG/5ML				
	70000012501	Generic	ALLERGY CHLD SYP 5MG/5ML	
	69230032212	Generic	LORATADINE SOL 5MG/5ML	
	69230032224	Generic	LORATADINE SOL 5MG/5ML	
	68001044998	Generic	LORATADINE SOL 5MG/5ML	
	70677002901	Generic	SM ALLERGY SYP 5MG/5ML	
	70000047301	Generic	ALLERGY RELF SOL 5MG/5ML	
	70000025201	Generic	ALLERGY CHLD SOL 5MG/5ML	
	51672207308	Generic	LORATADINE SYP 5MG/5ML	
	51672208508	Generic	LORATADINE SYP 5MG/5ML	
	51672209208	Generic	LORATADINE SOL 5MG/5ML	
	51672213108	Generic	LORATADINE SOL 5MG/5ML	
	62011034801	Generic	LORATADINE SYP 5MG/5ML	
	54838055440	Generic	LORATADINE SOL 5MG/5ML	
	54838055840	Generic	LORATADINE SOL 5MG/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Loratadine Syrup 5 MG/5ML				
	24385053126	Generic	LORATADINE SYP 5MG/5ML	
	49348063634	Generic	LORATADINE SYP 5MG/5ML	
	46122042326	Generic	LORATADINE SOL 5MG/5ML	
	00121084940	Generic	LORATADINE SOL 10/10ML	
	00904676720	Generic	LORATADINE SOL 5MG/5ML	
Dextromethorphan-Guaifenesin Syrup 10-100 MG/5ML				
	54838020940	Generic	SILTUSSIN-DM SYP ALC FREE	
	54838020970	Generic	SILTUSSIN-DM SYP ALC FREE	
	54838020980	Generic	SILTUSSIN-DM SYP ALC FREE	
	58657050508	Generic	GG/DM SYP 100-10/5	
	49348086134	Generic	SM TUSSIN SYP DM	
	49348086137	Generic	SM TUSSIN SYP DM	
	69339014905	Generic	GUAIF/DM HBR SYP 100-10/5	
	69339014919	Generic	GUAIF/DM HBR SYP 100-10/5	
	69339015001	Generic	GUAIF/DM HBR SYP 100-10/5	
	69339015019	Generic	GUAIF/DM HBR SYP 100-10/5	
	00121063800	Generic	GUAIFENESIN SYP DM	
	00121063805	Generic	GUAIFENESIN SYP DM	
	00121127600	Generic	GUAIFENESIN SYP DM	
	00121127610	Generic	GUAIFENESIN SYP DM	
	00113035926	Generic	TUSSIN DM SYP 100-10/5	
	00113035934	Generic	TUSSIN DM SYP 100-10/5	
	00536131385	Generic	CHEST CONGES SYP REL DM	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Dextromethorphan-Guaifenesin Syrup 10-100 MG/5ML				
	00536118497	Generic	COUGH/CHEST SYP DM	
	49348001734	Generic	SM TUSSIN DM SYP 100-10/5	
	49348001737	Generic	SM TUSSIN DM SYP 100-10/5	
	49348001739	Generic	SM TUSSIN DM SYP 100-10/5	
Guaifenesin Syrup 100 MG/5ML				
	54838011740	Generic	SILTUSSIN SA SYP 100/5ML	
	54838011770	Generic	SILTUSSIN SA SYP 100/5ML	
	54838011780	Generic	SILTUSSIN SA SYP 100/5ML	
	00536131485	Generic	CHEST CONGES SYP 100/5ML	
	00113006126	Generic	TUSSIN CHEST SYP 100/5ML	
	00113006134	Generic	TUSSIN CHEST SYP 100/5ML	
	00904676316	Generic	ROBAFEN SYP 100/5ML	
Pseudoephedrine HCl Tab 30 MG				
	62011031201	Generic	NASAL DECONG TAB 30MG	
	62011031202	Generic	NASAL DECONG TAB 30MG	
	62011031203	Generic	NASAL DECONG TAB 30MG	
	70000000201	Generic	NASAL DECONG TAB 30MG	
	70000000202	Generic	NASAL DECONG TAB 30MG	
	70677000501	Generic	NASAL DECONG TAB 30MG	
	70677000502	Generic	NASAL DECONG TAB 30MG	
	70677000503	Generic	NASAL DECONG TAB 30MG	
	00904672760	Generic	SUDOGEST TAB 30MG	
	00904699061	Generic	PSEUDOEPHEDR TAB 30MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pseudoephedrine HCl Tab 30 MG				
	00904633724	Generic	SUDOGEST MAX TAB 30MG	
	00113043262	Generic	NASAL DECONG TAB 30MG	
	00113200880	Generic	SINUS CNGST TAB 30MG	
	00904505359	Generic	SUDOGEST TAB 30MG	
	00536360735	Generic	NASAL DECONG TAB 30MG	
	46122042862	Generic	GNP DECONGE TAB 30MG	
	45802043262	Generic	PSEUDOEPHEDR TAB 30MG	
	24385043262	Generic	NASAL DECONG TAB 30MG	
	24385043280	Generic	NASAL DECONG TAB 30MG	
Pseudoephedrine HCl Tab 60 MG				
	00904672846	Generic	SUDOGEST TAB 60MG	
	00904672852	Generic	SUDOGEST TAB 60MG	
	00904690706	Generic	PSEUDOEPHEDR TAB 60MG	
Carbamide Peroxide 6.5% Otic Soln				
	70000049001	Generic	EARWAX SOL REMOVAL	
	70000049002	Generic	EARWAX SOL REMOVAL	
	63868002615	Generic	EARWAX REMVL DRO 6.5% OT	
	63868002616	Generic	EARWAX REMVL DRO 6.5% OT	
	00904662735	Generic	EAR DROPS DRO 6.5%	
*Amino Acids Oral Liquid***				
	49735012524	Brand	PERIFLEX LQ LIQ PKU	PA REQUIRED
	49735012551	Brand	PERIFLEX LQ LIQ PKU	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Amino Acids Oral Powder***				
	49735010124	Brand	COMPL AMINO POW ACID MIX	PA REQUIRED
	49735011490	Brand	ESSENT AMINO POW ACID MIX	PA REQUIRED
	49735013341	Brand	COMPL AMINO POW ACID MIX	PA REQUIRED
	49735013342	Brand	ESSENT AMINO POW ACID MIX	PA REQUIRED
	49735018323	Brand	XPHE MAXAMUM POW	PA REQUIRED
	49735018324	Brand	XPHE MAXAMUM POW	PA REQUIRED
	55198000101	Brand	DECUBAMINE POW	PA REQUIRED
	12622000601	Brand	NUTRASENTIAL POW ORANGE	PA REQUIRED
	12622000602	Brand	NUTRASENTIAL POW LEMONADE	PA REQUIRED
	12622000603	Brand	NUTRASENTIAL POW	PA REQUIRED
	12622000605	Brand	NUTRASENTIAL POW CHERRY	PA REQUIRED
	12622000606	Brand	NUTRASENTIAL POW GRAPE	PA REQUIRED
	12622000607	Brand	NUTRASENTIAL POW BANANA	PA REQUIRED
	12622000608	Brand	NUTRASENTIAL POW MANGO	PA REQUIRED
	12622000609	Brand	NUTRASENTIAL POW	PA REQUIRED
	00847007500	Brand	GLUTARADE POW AMINO	PA REQUIRED
	00847007510	Brand	GLUTARADE POW JUNIOR	PA REQUIRED
	00847059000	Brand	COMPLEX MSUD POW	PA REQUIRED
	00847059102	Brand	COMPLEX MSD POW JUNIOR	PA REQUIRED
	00847059722	Brand	COMPLEX MSD POW VANILLA	PA REQUIRED
	00847075000	Brand	GLUTARADE POW AMINO	PA REQUIRED
	00847075002	Brand	GLUTARADE POW AMINO	PA REQUIRED
	00847075102	Brand	GLUTARADE JR POW GA-1	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Amino Acids Oral Powder***				
	00847075422	Brand	GLUTARADE POW ESSENTIA	PA REQUIRED
	00847095000	Brand	PHENYLADE POW	PA REQUIRED
	00847095504	Brand	PHENYLADE POW PHEBLOC	PA REQUIRED
	00847095960	Brand	PHENYLADE POW MTE	PA REQUIRED
*Amino Acids Pack***				
	49735002311	Brand	XPHE MAXAMUM POW UNFLAVOR	PA REQUIRED
	49735002312	Brand	XPHE MAXAMUM POW ORANGE	PA REQUIRED
	49735012641	Brand	ADD-INS PAK COMPLETE	PA REQUIRED
	49735012311	Brand	XPHE MAXAMUM POW UNFLAVOR	PA REQUIRED
	49735012312	Brand	XPHE MAXAMUM POW ORANGE	PA REQUIRED
	50600055279	Brand	SOLVIL POW	PA REQUIRED
	94688001201	Brand	ARGIMENT PAK	PA REQUIRED
	94688001220	Brand	ARGIMENT AT PAK	PA REQUIRED
	94688002334	Brand	HEPAMENT POW	PA REQUIRED
	00847095964	Brand	PHENYLADE PAK AMINO	PA REQUIRED
	00847095004	Brand	PHENYLADE PAK AMINO	PA REQUIRED
	00847095404	Brand	PHENYLADE40 POW UNFLAVOR	PA REQUIRED
	00847095414	Brand	PHENYLADE40 POW CITRUS	PA REQUIRED
*Medium Chain Triglycerides Oral Emulsion**				
	49735011957	Brand	LIQUIGEN EMU	PA REQUIRED
	49735019573	Brand	LIQUIGEN EMU	PA REQUIRED
*Omega-3 Fatty Acids Cap 1000 MG**				
	74312003830	Generic	EPA CAP 1000MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Omega-3 Fatty Acids Cap 1000 MG**				
	00536718706	Generic	SEA-OMEGA 50 CAP 1000MG	
*Protein Oral Pack***				
	43900028430	Brand	BENEPROTEIN POW	PA REQUIRED
*Protein Oral Powder***				
	43900028410	Brand	BENEPROTEIN POW UNFLAVOR	PA REQUIRED
Acetylcysteine (Nutrient) Tab 600 MG				
	40093010084	Brand	NAC TAB 600MG	PA REQUIRED
Acetylcysteine Cap 500 MG				
	11845017105	Brand	NAC CAP 500MG	PA REQUIRED
Acetylcysteine Cap 600 MG				
	71791000174	Generic	NAC CAP 600MG	PA REQUIRED
	66298000189	Generic	NAC CAP 600MG	PA REQUIRED
	96295014038	Generic	NAC CAP 600MG	PA REQUIRED
	54629409760	Generic	NAC CAP 600MG	PA REQUIRED
	27434000211	Generic	NAC 600 CAP	PA REQUIRED
	48107003150	Generic	NAC 600 CAP	PA REQUIRED
Acetylcysteine Tab ER 600 MG				
	90011007001	Brand	N-A-C SUST TAB 600MG	PA REQUIRED
Arginine Powder Packet 2000 MG				
	50600050267	Brand	ARGININE2000 PAK 2000MG	PA REQUIRED
Arginine Powder Packet 500 MG				
	50600054692	Generic	ARGININE PAK 500MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Creatine Monohydrate Liquid 1.5 GM/15ML				
	57771000191	Brand	CYTOTINE LIQ	PA REQUIRED
Glucose Polymers Liqd				
	70074000431	Brand	POLYCOSE LIQ UNFLAVOR	PA REQUIRED
	70074080431	Brand	POLYCOSE LIQ UNFLAVOR	PA REQUIRED
Glucose Polymers Powder 94%				
	70074000746	Brand	POLYCOSE POW UNFLAVOR	PA REQUIRED
Polyethylene Glycol 3350 Oral Packet 17 GM				
	69784018001	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	69784018010	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	69784018014	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	69784018030	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	60687043192	Generic	HEALTHYLAX POW	PA REQUIRED
	60687043198	Generic	HEALTHYLAX POW	PA REQUIRED
	60687043199	Generic	HEALTHYLAX POW	PA REQUIRED
	63739019861	Generic	PEG 3350 POW	PA REQUIRED
	63739019862	Generic	PEG 3350 POW	PA REQUIRED
	62559015710	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	62559015730	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	51079030601	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	51079030630	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	45802086800	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	45802086866	Generic	POLYETH GLYC POW 3350 NF	PA REQUIRED
	46122001452	Generic	GNP CLEARLAX PAK 3350 NF	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Packet 17 GM				
	00904642213	Generic	PEG 3350 POW	PA REQUIRED
	00904642286	Generic	PEG 3350 POW	PA REQUIRED
	00904693126	Generic	PEG 3350 POW	PA REQUIRED
	00904693176	Generic	PEG 3350 POW	PA REQUIRED
	00904693181	Generic	PEG 3350 POW	PA REQUIRED
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	51991096158	Generic	POLYETH GLYC POW 3350 NF	
	51991096257	Generic	POLYETH GLYC POW 3350 NF	
	54569652400	Generic	POLYETH GLYC POW 3350 NF	
	49781001961	Generic	CLEARLAX POW	
	50090243000	Generic	POLYETH GLYC POW 3350 NF	
	50090252600	Generic	PEG3350 POW	
	50090312700	Generic	SM CLEARLAX POW	
	49348089350	Generic	SM CLEARLAX POW	
	49348089370	Generic	SM CLEARLAX POW	
	49348089392	Generic	SM CLEARLAX POW	
	50428037702	Generic	CVS PURELAX POW	
	50428885431	Generic	CVS PURELAX POW	
	50428713635	Generic	CVS PURELAX POW	
	50428713638	Generic	CVS PURELAX POW	
	62175019007	Generic	GLYCOLAX POW 3350 NF	
	62175019015	Generic	GLYCOLAX POW 3350 NF	
	62175019031	Generic	GLYCOLAX POW 3350 NF	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	62175019507	Generic	POLYETH GLYC POW 3350 NF	
	62175019515	Generic	POLYETH GLYC POW 3350 NF	
	62175019531	Generic	POLYETH GLYC POW 3350 NF	
	62011028701	Generic	HM CLEARLAX POW	
	62011028702	Generic	HM CLEARLAX POW	
	62011015301	Generic	HM CLEARLAX POW	
	62011015302	Generic	HM CLEARLAX POW	
	62011015304	Generic	HM CLEARLAX POW	
	62011015305	Generic	HM CLEARLAX POW	
	63629854101	Generic	POLYETH GLYC POW 3350 NF	
	63868000214	Generic	NATURA-LAX POW 3350 NF	
	63868000230	Generic	NATURA-LAX POW 3350 NF	
	63981030604	Generic	LAXACLEAR POW	
	63981030607	Generic	LAXACLEAR POW	
	61919054251	Generic	GAVILAX POW	
	61919087951	Generic	POLYETH GLYC POW 3350 NF	
	59779030601	Generic	CVS PURELAX POW	
	59779030602	Generic	CVS PURELAX POW	
	59779030603	Generic	CVS PURELAX POW	
	59779030604	Generic	CVS PURELAX POW	
	57896048914	Generic	POLYETH GLYC POW 3350 NF	
	57896048930	Generic	POLYETH GLYC POW 3350 NF	
	68196030607	Generic	MM CLEARLAX POW	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	69230032434	Generic	POLYETH GLYC POW 3350	
	68001050555	Generic	POLYETH GLYC POW 3350 NF	
	68001050569	Generic	POLYETH GLYC POW 3350 NF	
	70000041501	Generic	CLEARLAX POW	
	70000041502	Generic	CLEARLAX POW	
	70000041503	Generic	CLEARLAX POW	
	00904602576	Generic	PEG 3350 POW	
	10135068304	Generic	POLYETH GLYC POW 3350 NF	
	10135068308	Generic	POLYETH GLYC POW 3350 NF	
	10135068312	Generic	POLYETH GLYC POW 3350 NF	
	11523723402	Brand	MIRALAX POW 3350 NF	
	11523723403	Brand	MIRALAX POW 3350 NF	
	11523723404	Brand	MIRALAX POW 3350 NF	
	11523723409	Brand	MIRALAX POW 3350 NF	
	11523726802	Brand	MIRALAX POW 3350 NF	PA REQUIRED
	11523726804	Brand	MIRALAX POW 3350 NF	PA REQUIRED
	11523726805	Brand	MIRALAX POW 3350 NF	
	11534018019	Generic	POLYETH GLYC POW 3350 NF	
	11534018028	Generic	POLYETH GLYC POW 3350 NF	
	11534018050	Generic	POLYETH GLYC POW 3350 NF	
	11673030602	Generic	POWDERLAX POW	
	11673030603	Generic	POWDERLAX POW	
	11673030609	Generic	POWDERLAX POW	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	11822353540	Generic	RA LAXATIVE POW	
	11822393550	Generic	RA LAXATIVE POW	
	11822393560	Generic	RA LAXATIVE POW	
	11917017321	Generic	SMOOTH LAX POW	
	11917018065	Generic	SMOOTH LAX POW 3350	
	00722711601	Generic	POLYETH GLYC POW 3350 NF	
	00722711602	Generic	POLYETH GLYC POW 3350 NF	
	00722711603	Generic	POLYETH GLYC POW 3350 NF	
	00536105224	Generic	PEG3350 POW	
	00536105227	Generic	PEG3350 POW	
	00536105284	Generic	PEG3350 POW	
	00363030602	Generic	SMOOTH LAX POW	
	00363030603	Generic	SMOOTH LAX POW	
	00363030604	Generic	SMOOTH LAX POW	
	00113030601	Generic	CLEARLAX POW	
	00113030602	Generic	CLEARLAX POW	
	00113030603	Generic	CLEARLAX POW	
	00113030617	Generic	CLEARLAX POW	
	00113030619	Generic	CLEARLAX POW	
	46122001471	Generic	GNP CLEARLAX POW	
	46122001431	Generic	GNP CLEARLAX POW	
	46122001433	Generic	GNP CLEARLAX POW	
	46122001438	Generic	GNP CLEARLAX POW	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	45802086801	Generic	POLYETH GLYC POW 3350 NF	
	45802086802	Generic	POLYETH GLYC POW 3350 NF	
	45802086803	Generic	POLYETH GLYC POW 3350 NF	
	43386031208	Generic	GAVILAX POW	
	43386031214	Generic	GAVILAX POW	
	41520031947	Generic	CLEARLAX POW	
	41520031948	Generic	CLEARLAX POW	
	49035030601	Generic	EQ CLEARLAX POW	
	49035030602	Generic	EQ CLEARLAX POW	
	49035030603	Generic	EQ CLEARLAX POW	
	49035031207	Generic	EQ CLEARLAX POW	
	49348014370	Generic	SM CLEARLAX POW	
	49348014392	Generic	SM CLEARLAX POW	
	30142030601	Generic	GENTLELAX POW	
	30142030602	Generic	GENTLELAX POW	
	30142030603	Generic	GENTLELAX POW	
	15127002246	Generic	POLYETH GLYC POW 3350 NF	
	15127002247	Generic	POLYETH GLYC POW 3350 NF	
	15127002248	Generic	POLYETH GLYC POW 3350 NF	
	37205061271	Generic	CLEARLAX POW	
	37205061272	Generic	CLEARLAX POW	
	37205061273	Generic	CLEARLAX POW	
	41100056454	Brand	MIRALAX POW	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polyethylene Glycol 3350 Oral Powder 17 GM/SCOOP				
	41100080650	Brand	MIRALAX POW 3350 NF	
	41100080770	Brand	MIRALAX POW 3350 NF	
	41100081076	Brand	MIRALAX POW 3350 NF	PA REQUIRED
	41100082071	Brand	MIRALAX POW 3350 NF	
	41100082073	Brand	MIRALAX POW 3350 NF	
	41100082076	Brand	MIRALAX POW 3350 NF	
	41163030601	Generic	EQL CLEARLAX POW	
	41163030602	Generic	EQL CLEARLAX POW	
	41163030603	Generic	EQL CLEARLAX POW	
	36800030601	Generic	CLEARLAX POW	
	36800030602	Generic	CLEARLAX POW	
	36800030603	Generic	CLEARLAX POW	
	35356054401	Generic	POLYETH GLYC POW 3350 NF	
	35356054425	Generic	POLYETH GLYC POW 3350 NF	
	33261063601	Generic	POLYETH GLYC POW 3350 NF	
Simethicone Chew Tab 125 MG				
	62011018901	Generic	HM GAS RELF CHW 125MG	
	49348086348	Generic	SM GAS REL CHW 125MG	
	24385030789	Generic	GNP GAS RELF CHW 125MG	
	00536122308	Generic	GAS RELIEF CHW 125MG	
Simethicone Chew Tab 80 MG				
	62011029101	Generic	HM GAS RELF CHW 80MG	
	70000043401	Generic	GAS RELIEF CHW 80MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Simethicone Chew Tab 80 MG				
	00536120704	Generic	GAS RELIEF CHW 80MG	
	00904506860	Generic	MI-ACID GAS CHW 80MG	
	24385011878	Generic	GNP GAS RELF CHW 80MG	
	49348014707	Generic	SM GAS RELIE CHW 80MG	
	49348018810	Generic	SM GAS RELF CHW 80MG	
Simethicone Susp 40 MG/0.6ML				
	70000005101	Generic	GAS RELIEF DRO INFANTS	
	62011018701	Generic	GAS RELIEF DRO 20/0.3ML	
	49348074027	Generic	GAS RELIEF DRO 20/0.3ML	
	00536130375	Generic	SIMETHICONE DRO INFANTS	
	00536222075	Generic	GAS RELIEF DRO 20/0.3ML	
	00113088210	Generic	SIMETHICONE DRO 20/0.3ML	
	00904589430	Generic	GAS RELIEF DRO 20/0.3ML	
Sorbitol Oral Solution 70%				
	60258090116	Generic	SORBITOL SOL 70%	PA REQUIRED
	54162070016	Generic	SORBITOL SOL 70%	PA REQUIRED
	54162070017	Generic	SORBITOL SOL 70%	PA REQUIRED
	54162070030	Generic	SORBITOL SOL 70%	PA REQUIRED
	10135013708	Generic	SORBITOL SOL 70%	PA REQUIRED
	10135013718	Generic	SORBITOL SOL 70%	PA REQUIRED
*Lactobacillus Rhamnosus (GG) Cap**				
	49100036374	Brand	CULTURELLE CAP IMMUNITY	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Lactobacillus Tab**				
	00536718101	Generic	ACIDOPHILUS TAB L-SPORO	PA REQUIRED
*Probiotic Product - Packet**				
	49100040054	Brand	CULTURE BABY PAK GRW THVE	PA REQUIRED
	45749001536	Brand	VSL#3 PAK JUNIOR	PA REQUIRED
	45749001780	Brand	VSL#3 PAK 450BIL	PA REQUIRED
Aluminum Hydroxide Gel Susp 320 MG/5ML				
	00536009185	Generic	ALUM HYDROX SUS 320/5ML	
Bismuth Subsalicylate Chew Tab 262 MG				
	49348095344	Generic	STOMACH RELF CHW 262MG	
	62011014001	Generic	STOMACH RELF CHW 262MG	
	70000043301	Generic	STOMACH RELF CHW 262MG	
	70000043302	Generic	STOMACH RELF CHW 262MG	
	70000059101	Generic	STOMACH RELF CHW 262MG	
	70000059102	Generic	STOMACH RELF CHW 262MG	
	00536102107	Generic	PEPTIC RELF CHW 262MG	
	00904131546	Generic	BISMATROL CHW 262MG	
	00113046991	Generic	STOMACH RELF CHW 262MG	
	00904720546	Generic	BISMUTH CHW 262MG	
	24385002465	Generic	PINK BISMUTH CHW 262MG	
Bismuth Subsalicylate Susp 262 MG/15ML				
	70677006201	Generic	SM STOMACH SUS 525/30ML	
	70000004401	Generic	STOMACH RELF SUS 525/30ML	
	70000004402	Generic	STOMACH RELF SUS 525/30ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Bismuth Subsalicylate Susp 262 MG/15ML				
	24385030226	Generic	STOMACH RELF SUS 262/15ML	
	00121091030	Generic	BISMUTH SUBS SUS 525/30ML	
	00121091040	Generic	BISMUTH SUBS SUS 525/30ML	
	00904131309	Generic	BISMATROL SUS 262/15ML	
	00536128636	Generic	STOMACH RELF SUS 525/30ML	
Bismuth Subsalicylate Tab 262 MG				
	24385001758	Generic	PINK BISMUTH TAB 262MG	
	49348051159	Generic	STOMACH RELF TAB 262MG	
Calcium Carbonate (Antacid) Chew Tab 1000 MG				
	70000043601	Generic	ANTACID CHW 1000MG	
	70000045901	Generic	ANTACID CHW 1000MG	
Calcium Carbonate (Antacid) Chew Tab 500 MG				
	70677006601	Generic	SM ANTACID CHW 500MG	
	70677006701	Generic	SM ANTACID CHW 500MG	
	70000003401	Generic	ANTACID CHW 500MG	
	68084098832	Generic	ANTACID CHW 500MG	
	68084098833	Generic	ANTACID CHW 500MG	
	62011039801	Generic	HM ANTACID CHW 500MG	
	63868004715	Generic	QC ANTACID CHW 500MG	
	49348010821	Generic	CALCIUM ANTA CHW 500MG	
	00536100715	Generic	CAL-GEST CHW 500MG	
	00536104815	Generic	ANTACID CHW 500MG	
	00904641292	Generic	CALC ANTACID CHW 500MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Carbonate (Antacid) Chew Tab 750 MG				
	62011039701	Generic	HM ANTACID CHW 750MG	
	62011022901	Generic	CALC ANTACID CHW 750MG	
	70000046001	Generic	ANTACID CHW 750MG	
	70000043002	Generic	ANTACID CHW 750MG	
	70000043101	Generic	ANTACID CHW 750MG	
	00536122522	Generic	ANTACID CHW 750MG	
	00536122922	Generic	CALC ANTACID CHW 750MG	
	49348005539	Generic	CALC ANTACID CHW 750MG	
	46122022575	Generic	GNP ANTACID CHW 750MG	
	24385010680	Generic	ANTACID CHW 750MG	
Calcium Carbonate (Antacid) Susp 1250 MG/5ML				
	00121076616	Generic	CALCIUM CARB SUS 1250/5ML	
	00121476605	Generic	CALCIUM CARB SUS 1250/5ML	
	00054311763	Generic	CALCIUM CARB SUS 1250/5ML	
	00904709894	Generic	CALCIUM CARB SUS 1250/5ML	
Magnesium Oxide Tab 400 MG				
	69367029820	Generic	MAG OXIDE TAB 400MG	
	58657012012	Generic	MAG OXIDE TAB 400MG	
	00603020922	Generic	MAG OXIDE TAB 400MG	
Sodium Bicarbonate Tab 325 MG				
	00536104610	Generic	SODIUM BICAR TAB 325MG	
Sodium Bicarbonate Tab 650 MG				
	00536104710	Generic	SODIUM BICAR TAB 650MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Loperamide HCl Cap 2 MG				
	62011039001	Generic	ANTI-DIARRHE CAP 2MG	
	63868087612	Generic	QC ANTI-DIAR CAP 2MG	
	63868087624	Generic	QC ANTI-DIAR CAP 2MG	
	70000046101	Generic	ANTI-DIARRHE CAP 2MG	
	70677006001	Generic	ANTI-DIARRHE CAP 2MG	
	46122058162	Generic	ANTI-DIARRHE CAP 2MG	
Lactase Chew Tab 9000 Unit				
	78742009271	Generic	DAIRY DIGEST CHW 9000UNIT	
	49614038876	Generic	DAIRY DIGES CHW 9000UNIT	PA REQUIRED
	50428034017	Generic	DAIRY RELIEF CHW 9000UNIT	
	46122014866	Generic	DAIRY RELIEF CHW 9000UNIT	
	00045093032	Brand	LACTAID FAST CHW 9000UNIT	
	00045093060	Brand	LACTAID FAST CHW 9000UNIT	
	00363067660	Generic	LACTOSE CHW FAST ACT	
	00363012460	Generic	LACTOSE CHW FAST ACT	
	11822064460	Generic	DAIRY RELIEF CHW 9000UNIT	
	11822000230	Generic	DAIRY RELIEF CHW 9000UNIT	
	11822590210	Generic	DAIRY RELIEF CHW 9000UNIT	
Famotidine Tab 10 MG				
	51660003531	Generic	ACID CONTROL TAB 10MG	
	63868071430	Generic	ACID CONTROL TAB 10MG	
	62011014201	Generic	FAMOTIDINE TAB 10MG	
	55111011890	Generic	FAMOTIDINE TAB 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Famotidine Tab 10 MG				
	70000004801	Generic	ACID REDUCER TAB 10MG	
	68001049404	Generic	FAMOTIDINE TAB 10MG	
	68001049406	Generic	FAMOTIDINE TAB 10MG	
	00093274865	Generic	FAMOTIDINE TAB 10MG	
	00093274892	Generic	FAMOTIDINE TAB 10MG	
	00093274894	Generic	FAMOTIDINE TAB 10MG	
	00113014165	Generic	ACID REDUCER TAB 10MG	
	00904552952	Generic	HEARTBURN TAB RELIEF	
	00904552987	Generic	HEARTBURN TAB RELIEF	
	46122039465	Generic	ACID REDUCER TAB 10MG	
	46122039475	Generic	ACID REDUCER TAB 10MG	
	49348012812	Generic	ACID REDUCER TAB 10MG	
	49348012813	Generic	ACID REDUCER TAB 10MG	
	49348012844	Generic	ACID REDUCER TAB 10MG	
Ranitidine HCl Tab 75 MG				
	51660035230	Generic	ACID REDUCER TAB 75MG	
	51660035260	Generic	ACID REDUCER TAB 75MG	
	49348013612	Generic	ACID REDUCER TAB 75MG	
	49348013644	Generic	ACID REDUCER TAB 75MG	
	00113087665	Generic	ACID REDUCER TAB 75MG	
*Lactobacillus Acidophilus-Pectin Tab**				
	80681002600	Brand	ACIDOPHILUS/ TAB CIT PECT	PA REQUIRED
	00536718001	Brand	ACIDOPHILUS/ TAB CIT PECT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Sodium Phosphates - Enema***				
	70000010801	Generic	ENEMA READY- ENE TO-USE	
	70000010802	Generic	ENEMA READY- ENE TO-USE	
	62011027101	Generic	HM ENEMA ENE R-T-U	
	62011027102	Generic	HM ENEMA ENE R-T-U	
	63868038045	Generic	QC ENEMA ENE	
	63868038090	Generic	QC ENEMA ENE	
	00536741551	Generic	ENEMA READY- ENE -TO-USE	
	00132020110	Brand	FLEET ENE	
	00132020140	Brand	FLEET ENE	
	00132020142	Brand	FLEET ENE	
	00132020145	Brand	FLEET ENE	
	00904632078	Generic	ENEMA READY- ENE -TO-USE	
	49348018614	Generic	SM ENEMA ENE	
	49348018620	Generic	SM ENEMA ENE	
	46122036428	Generic	GNP ENEMA ENE	
	46122036436	Generic	GNP ENEMA ENE	
*Wheat Dextrin Oral Powder**				
	52569013780	Generic	HM CLEAR POW FIBER	PA REQUIRED
	81131029773	Generic	EQ FIBER POW	PA REQUIRED
	81131002711	Generic	EQ FIBER POW	PA REQUIRED
	81131002923	Generic	EQ FIBER POW	PA REQUIRED
	86790001338	Brand	BENEFIBER POW	PA REQUIRED
	86790001362	Brand	BENEFIBER POW	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Wheat Dextrin Oral Powder**				
	86790001383	Brand	BENEFIBER POW	PA REQUIRED
	86790016280	Generic	BENEFIBER ON POW THE GO	PA REQUIRED
	86790021380	Brand	BENEFIBER POW	PA REQUIRED
	86790021620	Brand	BENEFIBER POW	PA REQUIRED
	86790021830	Brand	BENEFIBER POW	PA REQUIRED
	46122013248	Generic	GNP BEST POW FIBER	PA REQUIRED
	46036000361	Generic	BEST FIBER POW	PA REQUIRED
	36800005527	Generic	TOTAL FIBER POW	PA REQUIRED
	11917015078	Generic	CLR SOLUBLE POW FIBER	PA REQUIRED
	00067003938	Brand	BENEFIBER POW CHILDREN	PA REQUIRED
	00067004419	Brand	BENEFIBER POW	PA REQUIRED
	00067004420	Brand	BENEFIBER POW	PA REQUIRED
	00067004438	Brand	BENEFIBER POW	PA REQUIRED
	00067004462	Brand	BENEFIBER POW	PA REQUIRED
	00067004483	Brand	BENEFIBER POW	PA REQUIRED
	00067004490	Brand	BENEFIBER POW	PA REQUIRED
	00067006815	Brand	BENEFIBER POW ORANGE	PA REQUIRED
	00067006858	Brand	BENEFIBER POW ORANGE	PA REQUIRED
Alum & Mag Hydroxide-Simethicone Susp 200-200-20 MG/5ML				
	70000006301	Generic	ANTACID SUS MINT	
	66689006099	Generic	ALUMINA/MAG SUS SIMETHIC	
	70677011501	Generic	SM ANTACID SUS	
	63868069457	Generic	QC ANTACID SUS	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Alum & Mag Hydroxide-Simethicone Susp 200-200-20 MG/5ML				
	63868071257	Generic	QC ANTACID SUS ANTI-GAS	
	62011029201	Generic	HM ANTACID SUS	
	00113035740	Generic	ANTACID PLUS SUS GAS REL	
	00113085140	Generic	ANTACID SUS	
	00121176130	Generic	MAG-AL PLUS LIQ	
	00536118583	Generic	ALMACONE SUS	
	00536129383	Generic	ANTACID SUS REG ST	
	00536131783	Generic	ANTACID SUS ANTIGAS	
	00904683873	Generic	ALUM/MAGNES/ SUS SIMETH	
	00904676414	Generic	MINTOX REGUL SUS MINT	
	46122043340	Generic	GNP ANTACID SUS REG ST	
	46122043440	Generic	GNP ANTACID SUS COOLMINT	
	49348015339	Generic	SM ANTACID SUS ADVANCED	
	49348001939	Generic	SM ANTACID/ SUS ANTIGAS	
Alum & Mag Hydroxide-Simethicone Susp 400-400-40 MG/5ML				
	62011014901	Generic	HM ANTACID SUS ANTI-GAS	
	62011012201	Generic	ADVANCED SUS ANTACID	
	63868071557	Generic	QC ANTACID SUS ANTI-GAS	
	70000042201	Generic	ANTACID MAX SUS CHERRY	
	66689006199	Generic	ALUM/MAGNES/ SUS SIMETH	PA REQUIRED
	70000006201	Generic	ANTACID SUS MAX ST	
	49348030239	Generic	SM ANTACID SUS ADVANCED	
	49348030339	Generic	SM ANTACID SUS MAX ST	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Alum & Mag Hydroxide-Simethicone Susp 400-400-40 MG/5ML				
	46122043140	Generic	GNP ANTACID SUS ORIGINAL	
	46122043240	Generic	GNP ANTACID SUS CHERRY	
	00904675514	Generic	MI-ACID SUS MAX ST	
	00904683973	Generic	ALUM/MAGNES/ SUS SIMETH	PA REQUIRED
	00904572514	Generic	MINTOX SUS MAX ST	
	00536131883	Generic	ANTACID SUS ANTIGAS	
	00536001583	Generic	ALMACONE DBL SUS STRENGTH	
	00121176230	Generic	MAG-AL PLUS LIQ XS	
	00113034040	Generic	ANTACID PLUS SUS GAS REL	
	00113058840	Generic	ANTACID SUS ANTI-GAS	
Bisacodyl Suppos 10 MG				
	70000045101	Generic	GENTLE LAXAT SUP 10MG	
	70000045102	Generic	GENTLE LAXAT SUP 10MG	
	70000057301	Generic	GENTLE LAXAT SUP 10MG	
	70000057302	Generic	GENTLE LAXAT SUP 10MG	
	63868032808	Generic	QC LAXATIVE SUP 10MG	
	00536123801	Generic	BISACODYL SUP 10MG	
	00574705012	Generic	BISACODYL SUP 10MG	
	00574705050	Generic	BISACODYL SUP 10MG	
	00904698112	Generic	BISACODYL SUP 10MG	
	00904698160	Generic	BISACODYL SUP 10MG	
	00904714212	Generic	BISACODYL SUP 10MG	
	46122060851	Generic	GENTLE LAXAT SUP 10MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Bisacodyl Tab Delayed Release 5 MG				
	62011027701	Generic	HM LAXATIVE TAB 5MG	
	62011027702	Generic	HM LAXATIVE TAB 5MG	
	62011027703	Generic	HM LAXATIVE TAB 5MG	
	49483000301	Generic	BISACODYL TAB 5MG EC	
	49483000310	Generic	BISACODYL TAB 5MG EC	
	70000053801	Generic	GENTLE LAXAT TAB 5MG EC	
	70000022101	Generic	GENTLE LAXAT TAB 5MG EC	
	70000022102	Generic	GENTLE LAXAT TAB 5MG EC	
	70000022103	Generic	GENTLE LAXAT TAB 5MG EC	
	46122052963	Generic	GNP GNTL LAX TAB 5MG EC	
	46122052978	Generic	GNP GNTL LAX TAB 5MG EC	
	46122042963	Generic	GNP LAXATIVE TAB 5MG EC	
	49348003205	Generic	SM GENTLE TAB LAXATIVE	
	49348003210	Generic	SM GENTLE TAB LAXATIVE	
	24385090363	Generic	GNP LAXATIVE TAB 5MG EC	
	00904674817	Generic	BISACODYL TAB 5MG EC	
	00904674860	Generic	BISACODYL TAB 5MG EC	
	00904674880	Generic	BISACODYL TAB 5MG EC	
	00904640761	Generic	BISACODYL TAB 5MG EC	
Calcium Polycarbophil Tab 625 MG				
	70000043201	Generic	FIBER LAXATV TAB 625MG	
	70000006701	Generic	FIBR LAX+CAL TAB 625MG	
	00536430605	Generic	FIBER-LAX TAB 625MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Polycarbophil Tab 625 MG				
	00536430608	Generic	FIBER-LAX TAB 625MG	
	00536430611	Generic	FIBER-LAX TAB 625MG	
	00904250091	Generic	FIBER TAB 625MG	
	24385012576	Generic	FIBER-CAPS TAB 625MG	
	49348019013	Generic	SM FIBER TAB 625MG	
Docosate Calcium Cap 240 MG				
	46122068878	Generic	STOOL SOFT CAP 240MG	
	00536106505	Generic	STOOL SOFTNR CAP 240MG	
	00536106510	Generic	STOOL SOFTNR CAP 240MG	
	00904645959	Generic	KAO-TIN CAP 240MG	
	00904699740	Generic	DOCUSATE CAL CAP 240MG	
	00904699760	Generic	DOCUSATE CAL CAP 240MG	
	00904699780	Generic	DOCUSATE CAL CAP 240MG	
Docosate Sodium Cap 100 MG				
	70000009101	Generic	STOOL SOFTEN CAP 100MG	
	70000009102	Generic	STOOL SOFTEN CAP 100MG	
	70000009103	Generic	STOOL SOFTEN CAP 100MG	
	67618010110	Brand	COLACE CAP 100MG	PA REQUIRED
	67618010130	Brand	COLACE CAP 100MG	PA REQUIRED
	67618010152	Brand	COLACE CAP 100MG	PA REQUIRED
	67618010160	Brand	COLACE CAP 100MG	PA REQUIRED
	70000036501	Generic	STOOL SOFTNR CAP 100MG	
	70000036502	Generic	STOOL SOFTNR CAP 100MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Docusate Sodium Cap 100 MG				
	70000036503	Generic	STOOL SOFTNR CAP 100MG	
	70677003401	Generic	STOOL SOFTNR CAP 100MG	
	70677003402	Generic	STOOL SOFTNR CAP 100MG	
	62011038601	Generic	STOOL SOFTNR CAP 100MG	
	62011036101	Generic	HM STOOL SOF CAP 100MG	
	62011042102	Generic	STOOL SOFTNR CAP 100MG	
	63868056025	Generic	STOOL SOFTNR CAP 100MG	
	63739047801	Generic	DOCUSATE SOD CAP 100MG	
	63739047802	Generic	DOCUSATE SOD CAP 100MG	
	63739047840	Generic	DOCUSATE SOD CAP 100MG	
	63739047848	Generic	DOCUSATE SOD CAP 100MG	
	60687012901	Generic	DOCUSATE SOD CAP 100MG	
	60687012911	Generic	DOCUSATE SOD CAP 100MG	
	00904699860	Generic	DOCUSATE SOD CAP 100MG	
	00904699880	Generic	DOCUSATE SOD CAP 100MG	
	00904711561	Generic	DOCUSATE CAP 100MG	PA REQUIRED
	00904645561	Generic	DOK CAP 100MG	
	00904645760	Generic	DOK CAP 100MG	
	00904645780	Generic	DOK CAP 100MG	
	00536106210	Generic	STOOL SOFTNR CAP 100MG	
	00536106229	Generic	STOOL SOFTNR CAP 100MG	
	00113048672	Generic	STOOL SOFTNR CAP 100MG	
	46122045172	Generic	STOOL SOFTNR CAP 100MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Docusate Sodium Cap 100 MG				
	46122045178	Generic	STOOL SOFTNR CAP 100MG	
	46122045185	Generic	STOOL SOFTNR CAP 100MG	
	45802048678	Generic	DOCUSATE SOD CAP 100MG	
	49348048310	Generic	STOOL SOFTNR CAP 100MG	
	49348048319	Generic	STOOL SOFTNR CAP 100MG	
Docusate Sodium Cap 250 MG				
	62011047401	Generic	STOOL SOFTEN CAP 250MG	
	62011024401	Generic	STOOL SOFTNR CAP 250MG	
	70000038501	Generic	STOOL SOFTEN CAP 250MG	
	46122026378	Generic	STOOL SOFTNR CAP 250MG	
	00536106401	Generic	STOOL SOFTNR CAP 250MG	
	00536106410	Generic	STOOL SOFTNR CAP 250MG	
	00904645859	Generic	DOK CAP 250MG	
	00904699960	Generic	DOCUSATE SOD CAP 250MG	
	00904699980	Generic	DOCUSATE SOD CAP 250MG	
Docusate Sodium Cap 50 MG				
	67618011128	Brand	COLACE CLEAR CAP 50MG	PA REQUIRED
Docusate Sodium Enema 283 MG/5ML				
	00904692093	Generic	DOCUSATE MIN ENE 283MG	PA REQUIRED
	17433987603	Generic	ENEMEEZ MINI ENE	PA REQUIRED
	17433987805	Generic	DOCUSOL MINI ENE	PA REQUIRED
Docusate Sodium Liquid 150 MG/15ML				
	54838011680	Generic	SILACE LIQ 10MG/ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Docusate Sodium Liquid 150 MG/15ML				
	50383034910	Generic	DOCU LIQ 100/10ML	
	50383034911	Generic	DOCU LIQ 100/10ML	
	50383077110	Generic	DOCU LIQ 50MG/5ML	
	50383077111	Generic	DOCU LIQ 50MG/5ML	
	50383077116	Generic	DOCU LIQ 50MG/5ML	
	00536130485	Generic	DOCUSATE SOD LIQ 50MG/5ML	
	00121054410	Generic	DOCUSATE SOD LIQ 50MG/5ML	
	00121093516	Generic	DOCUSATE SOD LIQ 50MG/5ML	
	00121187000	Generic	DOCUSATE SOD LIQ 50MG/5ML	
	00121187010	Generic	DOCUSATE SOD LIQ 50MG/5ML	
Docusate Sodium Syrup 60 MG/15ML				
	54838010780	Generic	SILACE SYP 60/15ML	
Magnesium Citrate Soln				
	62011038001	Generic	MAG CITRATE SOL LEMON	
	62011038101	Generic	MAG CITRATE SOL CHERRY	
	63868093510	Generic	MAG CITRATE SOL LEMON	
	63868094210	Generic	MAG CITRATE SOL CHERRY	
	63868094410	Generic	MAG CITRATE SOL GRAPE	
	70000042401	Generic	MAG CITRATE SOL LEMON	
	70677005101	Generic	MAG CITRATE SOL LEMON	
	70677005301	Generic	SM MAGNESIUM SOL CHERRY	
	00904678744	Generic	MAG CITRATE SOL LEMON	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Hydroxide Susp 400 MG/5ML				
	70677004301	Generic	SM MILK MAGN SUS ORIGINAL	
	70000048301	Generic	MILK OF MAGN SUS 1200/15	
	70000048401	Generic	MILK OF MAGN SUS CHERRY	
	66689005301	Generic	MILK OF MAGN SUS 2400/30	
	66689005399	Generic	MILK OF MAGN SUS 2400/30	
	65504001515	Generic	MILK OF MAGN SUS	
	70000006401	Generic	MILK OF MAGN SUS 400/5ML	
	70000006501	Generic	MILK OF MAGN SUS 1200/15	
	70000006101	Generic	MILK OF MAGN SUS 1200/15	
	70000002701	Generic	MILK OF MAGN SUS 1200/15	
	69339015301	Generic	MILK OF MAGN SUS 2400/30	
	69339015317	Generic	MILK OF MAGN SUS 2400/30	
	81421002604	Generic	DULCOLAX MOM SUS MINT	
	81421002910	Generic	DULCOLAX SUS 1200MG	
	81421002920	Generic	DULCOLAX SUS	
	75450029485	Generic	MILK OF MAGN SUS 1200/15	
	75450029758	Generic	MILK OF MAGN SUS 1200/15	
	63868078757	Generic	MILK OF MAGN SUS 400/5ML	
	63868078857	Generic	MILK OF MAGN SUS 400/5ML	
	65504030416	Generic	MILK OF MAGN SUS 400/5ML	
	63868031012	Generic	MILK OF MAGN SUS 400/5ML	
	62107002411	Generic	MILK OF MAGN SUS MINT	
	62011012301	Generic	MILK OF MAGN SUS 400/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Hydroxide Susp 400 MG/5ML				
	62011012401	Generic	MILK OF MAGN SUS 400/5ML	
	57896064712	Generic	MILK OF MAGN SUS 1200/15	
	57896064812	Generic	MILK OF MAGN SUS 1200/15	
	57896064912	Generic	MILK OF MAGN SUS 400/5ML	
	57896064916	Generic	MILK OF MAGN SUS 400/5ML	
	57896064928	Generic	MILK OF MAGN SUS 400/5ML	
	60687042945	Generic	MILK OF MAGN SUS 400/5ML	
	60687042976	Generic	MILK OF MAGN SUS 400/5ML	
	59390005745	Generic	MILK OF MAGN SUS	
	59390005746	Generic	MILK OF MAGN SUS	
	60258096016	Generic	MILK OF MAGN SUS 400/5ML	
	50428214916	Generic	MILK OF MAGN SUS 400/5ML	
	50428233005	Generic	MILK OF MAGN SUS 1200/15	
	50428305623	Generic	MILK OF MAGN SUS 400/5ML	
	50428308240	Generic	MILK OF MAGN SUS 400/5ML	
	49999076916	Generic	MILK OF MAGN SUS	
	50090237900	Generic	MILK OF MAGN SUS	
	49781004012	Generic	MILK OF MAGN SUS 1200/15	
	54569665700	Generic	MILK OF MAGN SUS	
	50428690036	Generic	MILK OF MAGN SUS 1200/15	
	00904684673	Generic	MILK OF MAGN SUS 2400MG	
	00904675614	Generic	MILK OF MAGN SUS	
	00904675714	Generic	MILK OF MAGN SUS 1200/15	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Hydroxide Susp 400 MG/5ML				
	11822039940	Generic	RA MILK MAGN SUS 400/5ML	
	11822308100	Generic	RA MILK MAGN SUS 400/5ML	
	11822332980	Generic	RA MILK MAGN SUS 400/5ML	
	11917015176	Generic	MILK OF MAGN SUS 1200/15	
	11917015592	Generic	MILK OF MAGN SUS 1200/15	
	11917015593	Generic	MILK OF MAGN SUS 1200/15	
	11917015594	Generic	MILK OF MAGN SUS 1200/15	
	11917015595	Generic	MILK OF MAGN SUS 1200/15	
	11917016878	Generic	MILK OF MAGN SUS 1200/15	
	12843035301	Generic	MILK OF MAGN SUS 400/5ML	
	12843035303	Generic	MILK OF MAGN SUS 400/5ML	
	12843036305	Generic	MILK OF MAGN SUS 400/5ML	
	12843036306	Generic	MILK OF MAGN SUS 400/5ML	
	12843039324	Generic	MILK OF MAGN SUS 400/5ML	
	12843039325	Generic	MILK OF MAGN SUS 400/5ML	
	12843055104	Generic	MILK OF MAGN SUS 400/5ML	
	11917011505	Generic	MILK OF MAGN SUS	
	11822505530	Generic	RA MILK MAGN SUS 400/5ML	
	00280003012	Generic	MILK OF MAGN SUS 400/5ML	
	00363192112	Generic	MILK OF MAGN SUS 400/5ML	
	00363193112	Generic	MILK OF MAGN SUS 400/5ML	
	00363193126	Generic	MILK OF MAGN SUS 400/5ML	
	00121043130	Generic	MILK OF MAGN SUS	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Hydroxide Susp 400 MG/5ML				
	00113039640	Generic	MILK OF MAGN SUS	
	00113033240	Generic	MILK OF MAGN SUS FRSH MNT	
	00536131983	Generic	MILK OF MAGN SUS	
	00536247083	Generic	MILK OF MAGN SUS	
	00536247085	Generic	MILK OF MAGN SUS	
	00395167016	Generic	MILK OF MAGN SUS	
	00904078814	Generic	MILK OF MAGN SUS 1200/15	
	00904078816	Generic	MILK OF MAGN SUS 1200/15	
	00904078914	Generic	MILK OF MAGN SUS MINT	
	15127083573	Generic	SB MILK MAGN SUS MINT	
	24385033240	Generic	GNP MILK MAG SUS	
	24385060840	Generic	GNP MILK MAG SUS	
	24385039640	Generic	GNP MILK MAG SUS	
	37205083340	Generic	MILK OF MAGN SUS 400/5ML	
	37205083440	Generic	MILK OF MAGN SUS MINT	
	41163033235	Generic	MILK OF MAGN SUS 1200/15	
	41163033240	Generic	MILK OF MAGN SUS 1200/15	
	41163039640	Generic	MILK OF MAGN SUS 400/5ML	
	36800033240	Generic	MILK OF MAGN SUS 1200/15	
	36800039640	Generic	MILK OF MAGN SUS	
	36800064912	Generic	MILK OF MAGN SUS 1200/15	
	36800094940	Generic	MILK OF MAGN SUS CHERRY	
	46122043540	Generic	GNP MILK MAG SUS CHERRY	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Hydroxide Susp 400 MG/5ML				
	46122043640	Generic	GNP MILK MAG SUS MINT	
	46122043740	Generic	GNP MILK MAG SUS ORIGINAL	
	41520031317	Generic	MILK OF MAGN SUS 1200/15	
	41520031319	Generic	MILK OF MAGN SUS MINT	
	41250052129	Generic	MILK OF MAGN SUS 400/5ML	
	41415023673	Generic	MILK OF MAGN SUS	
	41415005073	Generic	MILK OF MAGN SUS	
	41415005173	Generic	MILK OF MAGN SUS	
	41163094940	Generic	MILK OF MAGN SUS 1200/15	
	41250033235	Generic	MILK OF MAGN SUS 400/5ML	
	49348030739	Generic	MILK OF MAGN SUS 1200/15	
	49348030839	Generic	MILK OF MAGN SUS 1200/15	
	49348031344	Generic	MILK OF MAGN SUS 1200/15	
	49348017138	Generic	MILK OF MAGN SUS 1200/15	
	49348030539	Generic	MILK OF MAGN SUS 1200/15	
Magnesium Sulfate Powder				
	51552037604	Brand	EPSOM SALT POW	PA REQUIRED
	51552037606	Brand	EPSOM SALT POW	PA REQUIRED
	51552037607	Brand	EPSOM SALT POW	PA REQUIRED
	51927461000	Generic	MAGN SULFATE POW HEPTAHYD	PA REQUIRED
	49452429501	Generic	MAGN SULFATE POW ANHYDROU	PA REQUIRED
	49452429503	Generic	MAGN SULFATE POW ANHYDROU	PA REQUIRED
	49452429505	Generic	MAGN SULFATE POW ANHYDROU	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Magnesium Sulfate Powder				
	49452430001	Generic	MAGN SULFATE POW USP/NF	PA REQUIRED
	49452430002	Generic	MAGN SULFATE POW USP/NF	PA REQUIRED
	49452430003	Generic	MAGN SULFATE POW USP/NF	PA REQUIRED
Methylcellulose Powder Laxative				
	00135008969	Brand	CITRUCEL POW ORANGE	
	00135008971	Brand	CITRUCEL POW ORANGE	
	00135009070	Brand	CITRUCEL POW SF ORANG	
	00135009074	Brand	CITRUCEL POW SF ORANG	
	00135009075	Brand	CITRUCEL POW SF ORANG	
	00904567516	Generic	SOLUBLE FIB POW THERAPY	
Methylcellulose Tab 500 MG				
	62011013401	Generic	HM FIBER TAB 500MG	
	49348054110	Generic	SM FIBER LAX TAB 500MG	
	24385046678	Generic	FIBER THERAP TAB 500MG	
Mineral Oil				
	63868093816	Generic	QC MINERAL OIL HEAVY	
	70000044801	Generic	MINERAL OIL	
	46122039516	Generic	GNP MINERAL OIL	
Mineral Oil Enema				
	70000010901	Generic	MINERAL OIL ENE	
	62011027001	Generic	MINERAL OIL ENE	
	49348088020	Generic	MINERAL OIL ENE	
	49348018520	Generic	SM ENEMA ENE	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Mineral Oil Enema				
	00132030140	Brand	FLEET OIL ENE	
Sennosides Cap 8.6 MG				
	70000044101	Generic	SENNA CAP 8.6MG	
Sennosides Chew Tab 15 MG				
	70000047701	Generic	CHOC LAXATIV CHW 15MG	PA REQUIRED
Sennosides Syrup 8.8 MG/5ML				
	70166063605	Generic	SENNA SYP 8.8MG/5	
	71399823708	Generic	SENNA SYP 8.8/5ML	
	69618006958	Generic	SENNA SYP 8.8MG/5	
	66424056208	Generic	SENNA SYP 8.8MG/5	
	76518010008	Generic	SENNAZON SYP 8.8MG/5	
	50268073124	Generic	SENNA SYP 8.8/5ML	
	54162000708	Generic	SENNA-GRX SYP 8.8MG/5	
	54162000715	Generic	SENNA-GRX SYP 8.8MG/5	
	59390012541	Generic	SENNA SYP 8.8MG/5	
	58657051808	Generic	SENNA SYP 8.8/5ML	
	57896045208	Generic	SENNA SYP 8.8MG/5	
	57896046208	Generic	SENNA SYP 8.8MG/5	
	54859080808	Generic	SENNA SYP 8.8/5ML	
	00536126659	Generic	SENNA LIQ 8.8/5ML	
	48433021105	Generic	SENNA SYP 8.8MG/5	
	48433021905	Generic	SENNA SYP 8.8MG/5	
	48433021940	Generic	SENNA SYP 8.8MG/5	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Sennosides Syrup 8.8 MG/5ML				
	17856823701	Generic	SENNA SYP 8.8/5ML	
	17856823702	Generic	SENNA SYP 8.8/5ML	
	17856823703	Generic	SENNA SYP 8.8/5ML	PA REQUIRED
	17856100001	Generic	SENEXON LIQ 8.8MG/5	
	17856100005	Generic	SENEXON LIQ 8.8MG/5	
	39328002008	Generic	SENNA SYP 8.8/5ML	
Sennosides Tab 15 MG				
	70000044301	Generic	LAXATIVE REG TAB 15MG	PA REQUIRED
Sennosides Tab 17.2 MG				
	67618012006	Generic	SENNOKOT EXTR TAB 17.2MG	PA REQUIRED
	67618012012	Generic	SENNOKOT EXTR TAB 17.2MG	PA REQUIRED
Sennosides Tab 25 MG				
	70000007701	Generic	LAXATIVE MAX TAB 25MG	PA REQUIRED
	49348019304	Generic	SM LAXATIVE TAB 25MG	PA REQUIRED
Sennosides Tab 8.6 MG				
	67618030010	Brand	SENNOKOT TAB 8.6MG	
	67618030020	Brand	SENNOKOT TAB 8.6MG	
	67618030050	Brand	SENNOKOT TAB 8.6MG	
	70000044701	Generic	SENNA TAB 8.6MG	
	70000044702	Generic	SENNA TAB 8.6MG	
	70000044703	Generic	SENNA TAB 8.6MG	
	70677005801	Generic	SM SENNA LAX TAB 8.6MG	
	62011038701	Generic	HM SENNA TAB 8.6MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Sennosides Tab 8.6 MG				
	63868025710	Generic	NAT VEG LAX TAB 8.6MG	
	51645085199	Generic	SENNA TAB 8.6MG	
	49483008001	Generic	SENNA-TIME TAB 8.6MG	
	49483008010	Generic	SENNA-TIME TAB 8.6MG	
	46122057578	Generic	SENNA LAX TAB 8.6MG	
	00904643480	Generic	SENNA TAB 8.6MG	
	00904652261	Generic	SENNA-LAX TAB 8.6MG	
	00904672559	Generic	SENNA TAB 8.6MG	
	00904672580	Generic	SENNA TAB 8.6MG	
Sennosides-Docusate Sodium Cap 8.6-50 MG				
	70000044501	Brand	SENNA PLUS CAP 8.6-50MG	PA REQUIRED
	70000044201	Brand	STL SOFT/LAX CAP 8.5-50MG	PA REQUIRED
Sennosides-Docusate Sodium Tab 8.6-50 MG				
	70000052601	Generic	STOOL SOFTNR TAB 8.6-50MG	
	70000052001	Generic	SENNA PLUS TAB 8.6-50MG	
	70677005901	Generic	SENNA/DSS TAB 8.6-50MG	
	70677008301	Generic	SM STOOL SOF TAB 8.6-50MG	
	70677004201	Generic	SM SENNA-S TAB 8.6-50MG	
	67618031001	Brand	SENOKOT S TAB 8.6-50MG	
	67618031030	Brand	SENOKOT S TAB 8.6-50MG	
	67618031060	Brand	SENOKOT S TAB 8.6-50MG	
	67618011010	Generic	COLACE 2IN1 TAB 8.6-50MG	
	67618011030	Generic	COLACE 2IN1 TAB 8.6-50MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Sennosides-Docusate Sodium Tab 8.6-50 MG				
	67618011060	Generic	COLACE 2IN1 TAB 8.6-50MG	
	49483008101	Generic	SENNA-TIME S TAB 8.6-50MG	
	49483008110	Generic	SENNA-TIME S TAB 8.6-50MG	
	63868013510	Generic	STOOL SOFTNR TAB 8.6-50MG	
	63739043201	Generic	SENNA/DSS TAB 8.6-50MG	
	63739043210	Generic	SENNA/DSS TAB 8.6-50MG	
	63868087460	Generic	STOOL SOFTNR TAB 8.6-50MG	
	62011039501	Generic	HM STOOL SOF TAB 8.6-50MG	
	62011036401	Generic	HM SENNA-S TAB 8.6-50MG	
	62011041701	Generic	HM STOOL SOF TAB 8.6-50MG	
	60258095106	Generic	SENNA-S TAB 8.6-50MG	
	60687062201	Generic	SENNA/DSS TAB 8.6-50MG	
	60687062211	Generic	SENNA/DSS TAB 8.6-50MG	
	00904672361	Generic	DOK PLUS TAB 50-8.6MG	
	00904672461	Generic	SENNA PLUS TAB 8.6-50MG	
	00536124701	Generic	SENEXON-S TAB 8.6-50MG	
	00536124710	Generic	SENEXON-S TAB 8.6-50MG	
	00536124801	Generic	STIMULANT TAB 8.6-50MG	
	00536124810	Generic	STIMULANT TAB 8.6-50MG	
	00536116701	Generic	DSS/SENNA TAB 50-8.6MG	
	00536116901	Generic	SENEXON-S TAB 8.6-50MG	
	00536408610	Generic	SENEXON-S TAB 8.6-50MG	
	46122062572	Generic	SENNA PLUS TAB 8.6-50MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Sennosides-Docusate Sodium Tab 8.6-50 MG				
	46122056778	Generic	STOOL SOFTNR TAB 8.6-50MG	
	46122066978	Generic	STOOL SOFTNR TAB 8.6-50MG	
	49348018719	Generic	SM STOOL TAB SOFTENER	
Sorbitol Solution (Bulk)				
	49452711001	Generic	SORBITOL SOL 70%	
	49452711002	Generic	SORBITOL SOL 70%	
	49452711003	Generic	SORBITOL SOL 70%	
	51552009605	Generic	SORBITOL SOL 70%	
	51552009608	Generic	SORBITOL SOL 70%	
	46287050001	Generic	SORBITOL SOL 70%	
	46287050030	Generic	SORBITOL SOL 70%	
	46287050099	Generic	SORBITOL SOL 70%	
Omeprazole Magnesium Delayed Release Tab 20 MG (Base Equiv)				
	69230031835	Generic	OMEPRAZOLE TAB 20MG	PA REQUIRED
	69230031836	Generic	OMEPRAZOLE TAB 20MG	PA REQUIRED
	69230031837	Generic	OMEPRAZOLE TAB 20MG	PA REQUIRED
	70000052101	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	70000052102	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	70000052103	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	70000052104	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	00536132213	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	00536132271	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED
	00536132288	Generic	OMEPRAZOLE TAB 20MG DR	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Carbonate-Cholecalciferol Tab 600 MG-400 Unit				
	68752064060	Generic	CALCIUM CARB TAB /VIT D	
	68752064093	Generic	CALCIUM CARB TAB /VIT D	
	68752064098	Generic	CALCIUM CARB TAB /VIT D	
	80681013900	Generic	CALCIUM/D3 TAB 600-10	
	80681013901	Generic	CALCIUM/D3 TAB 600MG	
	80681002900	Generic	CALCIUM/D3 TAB 600-400	
	52569013404	Generic	HM CA/VIT D3 TAB 600-400	
	52569013409	Generic	HM CA/VIT D3 TAB 600-400	
	54629007200	Generic	CALCIUM CARB TAB /VIT D	
	54629001681	Generic	CALCIUM CARB TAB /VIT D	
	50268015011	Generic	CALCIUM/D3 TAB 600-400	
	50268015015	Generic	CALCIUM/D3 TAB 600-400	
	54629073303	Generic	CALCIUM/D3 TAB 600-400	
	57896074806	Generic	CALCIUM/D TAB 600-400	
	00536342408	Generic	CALCIUM 600 TAB -D	
	00904323306	Generic	CALCIUM/D TAB 600-400	
	00904323352	Generic	CALCIUM/D TAB 600-400	
	00904323392	Generic	CALCIUM/D TAB 600-400	
	00904323393	Generic	CALCIUM/D TAB 600-400	
	00179841302	Generic	KP CALCIUM TAB 600+D	
	00440722792	Generic	CALCIUM/D TAB 600-400	
	11822049250	Generic	PA CALCIUM TAB VIT D	
	10939051344	Generic	SM CA/VIT D3 TAB 600-400	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Carbonate-Cholecalciferol Tab 600 MG-400 Unit				
	11822770050	Generic	RA CA/VIT D3 TAB 600-400	
	11822770390	Generic	RA CALCIUM TAB VIT D	
	11822771220	Generic	PA CALCIUM TAB VIT D	
	11822775250	Generic	RA CA/VIT D3 TAB 600-400	
	11822778450	Generic	RA CALCIUM TAB VIT D	
	11845008891	Generic	CALCIUM+D3 TAB 600-400	
	11845008892	Generic	SUPER CA 600 TAB + D3 400	
	11845008894	Generic	SUPER CA 600 TAB + D 400	
	11845008895	Generic	SUPER CA 600 TAB + D3	
	11917007548	Generic	CALCIUM 600 TAB +D	
	11917007550	Generic	CALCIUM 600 TAB +D	
	11917008809	Generic	CALCIUM 600 TAB +D	
	11917011331	Generic	CALCIUM 600 TAB +D	
	11917011334	Generic	CALCIUM 600 TAB +D	
	11917009241	Generic	CALCIUM 600 TAB +D	
	11917014592	Generic	CALCIUM+D3 TAB 600-400	
	11917017079	Generic	CALCIUM+D3 TAB 600-400	
	11917017080	Generic	CALCIUM+D3 TAB 600-400	
	11917017081	Generic	CALCIUM+D3 TAB 600-400	
	11917014682	Generic	CALCIUM+D TAB 600-400	
	11917014683	Generic	CALCIUM+D TAB 600-400	
	43292056392	Generic	CALCIUM/D TAB 600-400	
	41163026673	Generic	EQL CALCIUM TAB W/VIT D	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Carbonate-Cholecalciferol Tab 600 MG-400 Unit				
	41163045745	Generic	EQL CALCIUM TAB W/VIT D	
	41415037377	Generic	PX CALCIUM&D TAB 600-400	
	43063078160	Generic	CALCIUM/D TAB 600-400	
	43063078193	Generic	CALCIUM/D TAB 600-400	
	43063078198	Generic	CALCIUM/D TAB 600-400	
	43292055643	Generic	CALCIUM 600/ TAB VIT D	
	49348030423	Generic	SM CALCIUM/D TAB 600-400	
	48433010501	Generic	CALCIUM/D3 TAB 600-400	
	37205082972	Generic	CALCIUM 600 TAB + D	
	37205039272	Generic	CALCIUM 600 TAB + D	
	40985022722	Generic	CALCIUM 600 TAB +D	
	40985022729	Generic	CALCIUM 600 TAB +D	
	35046000057	Generic	CALCIUM CARB TAB /VIT D	
	35046000063	Generic	CALCIUM CARB TAB /VIT D	
	33261079103	Generic	CALCIUM/D TAB 600-400	
	17856323302	Generic	CALCIUM/D TAB 600-400	
	20555001700	Generic	CALCIUM/D3 TAB 600-400	
	16103040299	Generic	CALCIUM/D TAB 600-400	
	24385027372	Generic	GNP CALCIUM TAB 600/D	
	24385027387	Generic	GNP CALCIUM TAB 600/D	
	31604001212	Generic	CALCIUM/D TAB 600-400	
	31604001237	Generic	CALCIUM/D TAB 600-400	
	31604001473	Generic	CALCIUM/D TAB 600-400	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Calcium Citrate-Vitamin D Tab 200 MG-250 Unit (Elemental Ca)				
	00536322301	Generic	CIT CALC/D TAB 200-250	
Ferrous Sulfate Elixir 220 MG/5ML (44 MG/5ML Elemental Fe)				
	57896070916	Generic	IRON SUPPMNT ELX 220/5ML	
	57629010121	Generic	FERROUS SULF ELX 220/5ML	
	54838000180	Generic	FERROUS SULF ELX 220/5ML	
	63629180801	Generic	FERROUS SULF ELX 220/5ML	
	50383077816	Generic	FERROUS SULF ELX 220/5ML	
	54569352800	Generic	FERROUS SULF ELX 220/5ML	
	52959086208	Generic	FERROUS SULF ELX 220/5ML	
	00904146516	Generic	FEROSUL ELX 220/5ML	
	17856146501	Generic	FERROUS SULF ELX 220/5ML	
	17856146502	Generic	FERROUS SULF ELX 220/5ML	
Ferrous Sulfate Soln 75 MG/ML (15 MG/ML Elemental Fe)				
	50383062750	Generic	FERROUS SULF DRO 15MG/ML	
	54838001150	Generic	FERROUS SULF DRO 15MG/ML	
	76518006050	Generic	PEDIA IRON DRO 15MG/ML	
	98302014006	Generic	PEDIATRIC DRO IRON	
	71399748005	Generic	FE-VITE IRON SOL 15MG/ML	
	17856062704	Generic	FERROUS SULF DRO 15MG/ML	
	17856062708	Generic	FERROUS SULF DRO 15MG/ML	
	39328005750	Generic	IRON SUPPLMT DRO 15MG/ML	
	00536115480	Generic	FERROUS SULF DRO 15MG/ML	
	00087074002	Brand	FER-IN-SOL DRO 15MG/ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	71205041400	Generic	FERROUS SULF TAB 325MG	
	71205062800	Generic	FERROUS SULF TAB 325MG	
	70934074290	Generic	FERROUS SULF TAB 325MG EC	
	71335033401	Generic	FERROUS SULF TAB 325MG	
	71335033402	Generic	FERROUS SULF TAB 325MG	
	71335033403	Generic	FERROUS SULF TAB 325MG	
	71335033404	Generic	FERROUS SULF TAB 325MG	
	71335033405	Generic	FERROUS SULF TAB 325MG	
	71335033406	Generic	FERROUS SULF TAB 325MG	
	71335033407	Generic	FERROUS SULF TAB 325MG	
	71335046501	Generic	FERROUS SULF TAB 325MG	
	71335046502	Generic	FERROUS SULF TAB 325MG	
	71335046503	Generic	FERROUS SULF TAB 325MG	
	71335046504	Generic	FERROUS SULF TAB 325MG	
	71335046505	Generic	FERROUS SULF TAB 325MG	
	71335046506	Generic	FERROUS SULF TAB 325MG	
	71335046507	Generic	FERROUS SULF TAB 325MG	
	70030012983	Generic	IRON TAB 65MG	
	68788017901	Generic	FERROUS SULF TAB 325MG	
	66267051900	Generic	FERROUS SULF TAB 325MG	
	66267051930	Generic	FERROUS SULF TAB 325MG	
	66267051990	Generic	FERROUS SULF TAB 325MG	
	69618002601	Generic	FERROUS SULF TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	74312041383	Generic	IRON TAB 325MG	
	81131074933	Generic	IRON TAB 325MG	
	81131031251	Generic	IRON TAB 325MG	
	94604070202	Generic	NAT-RUL IRON TAB 325MG	
	96295013571	Generic	IRON TAB 65MG	
	96295012804	Generic	IRON TAB 325MG	
	54738096301	Generic	FERROUS SULF TAB 325MG	
	54738096303	Generic	FERROUS SULF TAB 325MG	
	54738096313	Generic	FERROUS SULF TAB 325MG	
	54629077500	Generic	FERROUS SULF TAB 5GR	
	55289001360	Generic	FERROUS SULF TAB 325MG	
	55289001390	Generic	FERROUS SULF TAB 325MG	
	57664007001	Generic	FERROUS SULF TAB 325MG	
	57664007010	Generic	FERROUS SULF TAB 325MG	
	57664007101	Generic	FERROUS SULF TAB 325MG	
	57664007110	Generic	FERROUS SULF TAB 325MG	
	57896072301	Generic	IRON TAB 325MG	
	57896070301	Generic	IRON TAB 325MG	
	57896070310	Generic	IRON TAB 325MG	
	57629010020	Generic	FERROUS SULF TAB 325MG	
	61919096330	Generic	FERROUS SULF TAB 325MG	
	58864083601	Generic	FERROUS SULF TAB 325MG FC	
	58607011310	Generic	FERROUS SULF TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	63868061701	Generic	FERROUS SULF TAB 325MG	
	65155070301	Generic	FERROUS SULF TAB 325MG	
	62107004401	Generic	FERROUSUL TAB 325MG	
	62107004415	Generic	FERROUSUL TAB 325MG	
	63629175401	Generic	FERROUS SULF TAB 325MG	
	63629175402	Generic	FERROUS SULF TAB 325MG	
	63629175403	Generic	FERROUS SULF TAB 325MG	
	50428029449	Generic	CVS IRON TAB 325MG	
	50428035980	Generic	CVS IRON TAB 325MG	
	49483006301	Generic	FERROUS SULF TAB 325MG	
	49483006310	Generic	FERROUS SULF TAB 325MG	
	49483006401	Generic	FERROUS SULF TAB 325MG	
	49483006404	Generic	FERROUS SULF TAB 325MG	
	49483006410	Generic	FERROUS SULF TAB 325MG	
	49999019700	Generic	FERROUS SULF TAB 325MG	
	50090255100	Generic	FEROSUL TAB 325MG	
	50090259900	Generic	FERROUS SULF TAB 325MG	
	49614056078	Generic	FERROUS SULF TAB 325MG	
	52959097600	Generic	FERROUS SULF TAB 325MG	
	54569453700	Generic	FERROUS SULF TAB 325MG	
	54569912200	Generic	FERROUS SULF TAB 325MG	
	54629011090	Generic	FERROUS SULF TAB 325MG	
	00440754190	Generic	FERROUS SULF TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	00179841901	Generic	FERROUS SULF TAB 325MG	
	00179805401	Generic	FERROUS SULF TAB 325MG	
	00536100901	Generic	FERROUS SULF TAB 325MG	
	00761094020	Generic	IRON TAB 65MG	
	00677007001	Generic	FERROUS SULF TAB 325MG	
	11917017126	Generic	IRON TAB 325MG	
	11917017060	Generic	HGH-POT IRON TAB 325MG	
	11917009215	Generic	FERROUS SULF TAB 325MG	
	11917009216	Generic	FERROUS SULF TAB 325MG	
	11917007568	Generic	FERROUS SULF TAB 325MG	
	11917007569	Generic	FERROUS SULF TAB 325MG	
	11917005585	Generic	FERROUS SULF TAB 325MG	
	11917005586	Generic	FERROUS SULF TAB 325MG	
	11845014971	Generic	FERROUS SULF TAB 325MG	
	11845012731	Generic	FERROUS SULF TAB 325MG	
	11822993250	Generic	RA IRON TAB 65MG	
	10939054944	Generic	SM IRON TAB 325MG	
	10135069001	Generic	FERROUS SULF TAB 325MG EC	
	10267095001	Generic	FERROUS SULF TAB 325MG	
	10267095004	Generic	FERROUS SULF TAB 325MG	
	11822110990	Generic	RA IRON TAB 325MG	
	10135024313	Generic	FERROUS SULF TAB 325MG	
	10135024319	Generic	FERROUS SULF TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	00904759060	Generic	FEROSUL TAB 325MG	
	00904759080	Generic	FEROSUL TAB 325MG	
	00904759082	Generic	FEROSUL TAB 325MG	
	00904759160	Generic	FEROSUL TAB 325MG	
	00904759161	Generic	FERROUS SULF TAB 325MG	
	00904759180	Generic	FEROSUL TAB 325MG	
	00904759182	Generic	FEROSUL TAB 325MG	
	40093010134	Generic	IRON TAB 65MG	
	40093010390	Generic	IRON TAB 65MG	
	37205041396	Generic	FERROUS SULF TAB 325MG	
	37864000028	Generic	FERROUS SULF TAB 325MG	
	37864000041	Generic	FERROUS SULF TAB 325MG	
	37864076099	Generic	FERROUS SULF TAB 325MG	
	41163042350	Generic	IRON SUPPLEM TAB THERAPY	
	41163042886	Generic	IRON SUPPLEM TAB THERAPY	
	40985022670	Generic	IRON TAB 325MG	
	31604004252	Generic	IRON TAB 325MG	
	33261071500	Generic	FERROUS SULF TAB 325MG	
	33261071530	Generic	FERROUS SULF TAB 325MG	
	33261071560	Generic	FERROUS SULF TAB 325MG	
	33261071590	Generic	FERROUS SULF TAB 325MG	
	31604001426	Generic	FERROUS SULF TAB 325MG	
	31604002612	Generic	IRON TAB 325MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ferrous Sulfate Tab 325 MG (65 MG Elemental Fe)				
	17856589001	Generic	FERROUS SULF TAB 325MG	
	20555002101	Generic	FERROUS SULF TAB 325MG	
	16103035908	Generic	FERROUS SULF TAB 325MG	
	16103035911	Generic	FERROUS SULF TAB 325MG	
	16103038208	Generic	FERROUS SULF TAB 325MG	
	16103038211	Generic	FERROUS SULF TAB 325MG	
	30768041283	Generic	IRON TAB 65MG	
	24385013778	Generic	GNP IRON TAB 325MG	
	49348018010	Generic	SM IRON TAB 325MG	
	43063099090	Generic	FERROUS SULF TAB 325MG	
	43292056360	Generic	FERROUS SULF TAB 325MG	
	43292055995	Generic	FERROUS SULF TAB 325MG	
	41250087540	Generic	FERROUS SULF TAB 325MG	
	43353044665	Generic	FERROUS SULF TAB 325MG	
	43353045865	Generic	FERROUS SULF TAB 325MG	
Magnesium Cl-Ca Carbonate Tab DR 70-117 MG (Base Equiv)				
	57896063506	Generic	SLOW MAG/CAL TAB 70-117MG	
	96295012853	Generic	SLOW MAG/CAL TAB 70-117MG	
Magnesium Cl-Ca Carbonate Tab DR 71.5-119 MG (Elemental)				
	69315020906	Brand	NU-MAG TAB 71.5-119	
	67618010760	Brand	SLOW-MAG TAB	
	67618011220	Brand	SLOW-MAG TAB 71.5-119	
	67618011280	Brand	SLOWMAG MG TAB MUS/HRT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Polysaccharide Iron Complex Cap 150 MG (Iron Equivalent)				
	69367021001	Generic	IRON COMPLEX CAP 150MG	PA REQUIRED
	69367021020	Generic	IRON COMPLEX CAP 150MG	PA REQUIRED
	89411029101	Generic	NU-IRON 150 CAP	PA REQUIRED
	57896077701	Generic	FERRIC X-150 CAP 150MG	PA REQUIRED
	58607011185	Generic	MYFERON 150 CAP 150MG	PA REQUIRED
	60258018501	Generic	POLY-IRON CAP 150MG	PA REQUIRED
	63044020301	Generic	IFEREX 150 CAP	PA REQUIRED
	63044020361	Generic	IFEREX 150 CAP	PA REQUIRED
	51991020301	Generic	FERREX 150 CAP 150MG	PA REQUIRED
	51991020311	Generic	FERREX 150 CAP 150MG	PA REQUIRED
	42582041110	Generic	POLYSAC-IRON CAP 150MG	PA REQUIRED
	00904539561	Generic	FERREX 150 CAP 150MG	PA REQUIRED
	00259029101	Generic	NU-IRON 150 CAP 150MG	PA REQUIRED
Potassium & Sodium Phosphates Powder Pack 280-160-250 MG				
	60258000601	Brand	PHOS-NAK POW CONCENTR	PA REQUIRED
Sodium Chloride Tab 1 GM				
	58657011801	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	58526000552	Generic	SOD CHLORIDE TAB 1000MG	PA REQUIRED
	55154607500	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	77333083510	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	77333083525	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	69367022001	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	70795112000	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Sodium Chloride Tab 1 GM				
	70795112001	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	00223176001	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	00223176002	Generic	SOD CHLORIDE TAB 1GM	PA REQUIRED
	00527111610	Generic	SOD CHLORIDE TAB 1000MG	PA REQUIRED
Zinc Sulfate Cap 220 MG (50 MG Elemental Zn)				
	68585000801	Generic	ZINC SULFATE CAP 220MG	PA REQUIRED
	77333098310	Generic	ZINC SULFATE CAP 220MG	PA REQUIRED
	77333098325	Generic	ZINC SULFATE CAP 220MG	PA REQUIRED
	80681013500	Generic	ZINC CAP 220MG	PA REQUIRED
	00731040101	Generic	ZINC-220 CAP	PA REQUIRED
	00731040106	Generic	ZINC-220 CAP	PA REQUIRED
	00731040110	Generic	ZINC-220 CAP	PA REQUIRED
	00394049902	Generic	ORAZINC CAP 220MG	PA REQUIRED
	20555004000	Generic	ZINC SULFATE CAP 220MG	PA REQUIRED
	37864099101	Generic	ZINC SULFATE CAP 220MG	PA REQUIRED
Zinc Sulfate Cap 50 MG (Elemental Zn)				
	00904533260	Generic	ZINC SULFATE CAP 50MG	PA REQUIRED
Zinc Sulfate Tab 110 MG (25 MG Elemental Zn)				
	00394012402	Brand	ORAZINC TAB 110MG	PA REQUIRED
Zinc Sulfate Tab 140 MG (50 MG Zinc Equivalent)				
	35046000419	Generic	ZINC SULFATE TAB	PA REQUIRED
Zinc Sulfate Tab 220 MG (50 MG Zinc Equivalent)				
	57896086501	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Zinc Sulfate Tab 220 MG (50 MG Zinc Equivalent)				
	57896086506	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED
	16571069901	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED
	42937080710	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED
	00536245001	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED
	10006073027	Generic	ZINC SULFATE TAB 220MG	PA REQUIRED
Zinc Sulfate Tab 66 MG (15 MG Elemental Zn)				
	00394012202	Brand	ZINC 15 TAB 66MG	PA REQUIRED
Zinc Sulfate Tab ER 220 MG (50 MG Elemental Zinc)				
	71791000374	Brand	ZINC TAB 220MG	PA REQUIRED
*Alcohol Nasal Swab Kit***				
	56923001177	Brand	NOZIN NASAL KIT SANITIZE	PA REQUIRED
*Alcohol Nasal Swabs***				
	56923001122	Brand	NOZIN NASAL MIS SANITIZE	
	56923001153	Brand	NOZIN NASAL MIS SANITIZE	
	56923001160	Brand	NOZIN NASAL MIS SANITIZE	
	56923001164	Brand	NOZIN NASAL MIS SANITIZE	
*Misc. Devices**				
	49614012594	Generic	PILL SPLITTR MIS	PA REQUIRED
	73913154133	Generic	PILL SPLITTR MIS	PA REQUIRED
	79573001115	Generic	PILL SPLITTR MIS	PA REQUIRED
*Oral Syringe***				
	08290305208	Generic	ORAL SYRINGE MIS 5ML	PA REQUIRED
	08290305209	Generic	ORAL SYRINGE MIS 10ML	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Oral Syringe***				
	08290305210	Generic	ORAL SYRINGE MIS 3ML	PA REQUIRED
	08290305217	Generic	ORAL SYRINGE MIS 1ML	PA REQUIRED
	08290305218	Generic	ORAL SYRINGE MIS 5ML	PA REQUIRED
	08290305219	Generic	ORAL SYRINGE MIS 10ML	PA REQUIRED
	08290305220	Generic	ORAL SYRINGE MIS 3ML	PA REQUIRED
*Oral Vehicles - Susp***				
	00574031116	Brand	ORA-BLEND SUS	PA REQUIRED
*Oral Vehicles - Syrup***				
	00574030416	Brand	ORA-SWEET SYP	
*Oral Vehicles For Susp***				
	51552127402	Brand	SYRSPEND SF SUS	PA REQUIRED
*Oral Vehicles***				
	51552107905	Brand	SYRSPEND SF LIQ	PA REQUIRED
	00574030316	Brand	ORA-PLUS LIQ	PA REQUIRED
Alpha-Lipoic Acid (Bulk) Powder				
	51552103204	Generic	LIPOIC ACID POW	PA REQUIRED
	51552103205	Generic	LIPOIC ACID POW	PA REQUIRED
Biotin (Bulk) Powder				
	51552065401	Generic	BIOTIN-D POW	PA REQUIRED
	51552065402	Generic	BIOTIN-D POW	PA REQUIRED
	51552065404	Generic	BIOTIN-D POW	PA REQUIRED
	51552065405	Generic	BIOTIN-D POW	PA REQUIRED
	51552065406	Generic	BIOTIN-D POW	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Biotin (Bulk) Powder				
	49452111502	Generic	BIOTIN POW	PA REQUIRED
	49452111503	Generic	BIOTIN POW	PA REQUIRED
	49452111504	Generic	BIOTIN POW	PA REQUIRED
	49452111505	Generic	BIOTIN POW	PA REQUIRED
Cherry Syrup				
	51552029003	Generic	CHERRY SYP CONCENTR	PA REQUIRED
Coal Tar Shampoo 0.5%				
	00904525944	Generic	THERAPEUTIC SHA	
	00096073608	Brand	DHS TAR GEL SHA 0.5%	
	00096073704	Brand	DHS TAR SHA	
	00096073708	Brand	DHS TAR SHA	
	49348060247	Generic	ANTI-DANDRUF SHA COAL TAR	
Coenzyme Q10 Powder				
	51552064602	Generic	COENZYME Q10 POW	PA REQUIRED
	51552064604	Generic	COENZYME Q10 POW	PA REQUIRED
	51552064605	Generic	COENZYME Q10 POW	PA REQUIRED
	51552064607	Generic	COENZYME Q10 POW	PA REQUIRED
	37803035804	Generic	COENZYME Q10 POW	PA REQUIRED
	37803035805	Generic	COENZYME Q10 POW	PA REQUIRED
	37803035807	Generic	COENZYME Q10 POW	PA REQUIRED
COVID-19 At Home Antigen Test Kit				
	50021086001	Brand	ELLUME COV19 KIT HOME TES	
	56362000589	Brand	IHEALTH 2-PK KIT COVID-19	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
COVID-19 At Home Antigen Test Kit				
	56362000590	Brand	IHEALTH 5-PK KIT COVID-19	
	56362000596	Brand	IHEALTH 40PK KIT COVID-19	
	56964000000	Brand	ELLUME COV19 KIT HOME TES	
	60006019166	Brand	ON/GO COVID KIT ANTIGEN	
	82607066026	Brand	FLOWFLEX KIT TEST	
	82607066027	Brand	FLOWFLEX KIT TEST	
	82607066028	Brand	FLOWFLEX KIT TEST	
	82607066047	Brand	FLOWFLEX KIT TEST	
	95893053317	Generic	OTC ANTIGENT KIT 2-PACK	
	95893077490	Generic	OTC ANTIGENT KIT 1-PACK	
	16490002574	Brand	CLINITEST KIT SELF-TST	
	14613033967	Brand	QUICKVUE HOM KIT COVID-19	
	14613033968	Brand	QUICKVUE HOM KIT COVID-19	
	14613033972	Brand	QUICKVUE HOM KIT COVID-19	
	00111070752	Generic	COVID-19 AT- KIT 1-PACK	
	00111070772	Generic	COVID-19 AT- KIT 4-PACK	
	08337000158	Brand	INTELISWAB KIT COVID-19	
	11877001133	Brand	BINAXNOW COV KIT HOME TES	
	11877001140	Brand	BINAXNOW COV KIT HOME TES	
COVID-19 At Home Molecular Test Kit				
	10055097004	Brand	LUCIRA CHECK KIT COVID-19	
COVID-19 Home Collection Test Kit				
	95893095898	Brand	SIMPLICITY KIT COVID-19	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
COVID-19 Home Collection Test Kit				
	50024092400	Brand	PIXEL COVID KIT HOME TES	PA REQUIRED
	50521000612	Brand	DXTERITY TES KIT COVID-19	PA REQUIRED
	53346000799	Brand	MYLAB BOX KIT COVID-19	PA REQUIRED
Creatine Monohydrate (Bulk) Powder				
	51552048904	Generic	CREATINE POW MONOHYDR	PA REQUIRED
	51552048905	Generic	CREATINE POW MONOHYDR	PA REQUIRED
	51552048907	Generic	CREATINE POW MONOHYDR	PA REQUIRED
Diphenhydramine HCl Syrup 12.5 MG/5ML				
	54838015440	Brand	SILPHEN COUG SYP 12.5/5ML	PA REQUIRED
	54838015470	Brand	SILPHEN COUG SYP 12.5/5ML	PA REQUIRED
	54838015480	Brand	SILPHEN COUG SYP 12.5/5ML	PA REQUIRED
Diphenhydramine-Acetaminophen Tab 25-500 MG (sleep)				
	62011002501	Generic	ACETAMIN PM TAB 25-500MG	
	62011025601	Generic	PAIN RELIEVR TAB 25-500MG	
	62011025001	Generic	PAIN RELIEVE TAB 25-500	
	63868009450	Generic	PAIN RELIEF TAB PM	
	63868032501	Generic	PAIN RELIEVE TAB 25-500MG	
	63868032550	Generic	PAIN RELIEVE TAB 25-500MG	
	70000041101	Generic	ACETAMIN PM TAB 25-500MG	
	70000041102	Generic	ACETAMIN PM TAB 25-500MG	
	70000041103	Generic	ACETAMIN PM TAB 25-500MG	
	00904673151	Generic	ACETAMIN PM TAB 25-500MG	
	00113035571	Generic	HEADACHE PM TAB 25-500MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Diphenhydramine-Acetaminophen Tab 25-500 MG (sleep)				
	00113043771	Generic	PAIN RELIEF TAB 25-500MG	
	49348015109	Generic	PAIN RELIEVE TAB 25-500MG	
	49348014010	Generic	PAIN RELIEVE TAB 25-500	
	46122041971	Generic	GNP PAIN PM TAB 25-500MG	
	46122064371	Generic	PAIN RELIEF TAB 25-500MG	
Glucosamine Sulfate Tab 1000 MG				
	96295012851	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	96295013722	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	87701040758	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	90011019012	Generic	GLUCOSAMINE TAB SULFATE	PA REQUIRED
	81131004601	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	81131004602	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	48107001043	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	49348056553	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	37205055976	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	40985022215	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	40985021394	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
	11917018861	Generic	GLUCOSAMINE TAB 1000MG	PA REQUIRED
Glycerin Liquid				
	62991271501	Generic	GLYCERIN LIQ	PA REQUIRED
	51552009404	Generic	GLYCERIN LIQ	PA REQUIRED
	51552009406	Generic	GLYCERIN LIQ	PA REQUIRED
	51552009408	Generic	GLYCERIN LIQ	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Glycerin Liquid				
	51552009409	Generic	GLYCERIN LIQ	PA REQUIRED
	51552102605	Generic	GLYCERIN LIQ	PA REQUIRED
	49452335901	Generic	GLYCERIN LIQ	PA REQUIRED
	49452335902	Generic	GLYCERIN LIQ	PA REQUIRED
	49452335903	Generic	GLYCERIN LIQ	PA REQUIRED
	49452336001	Generic	GLYCERIN LIQ	PA REQUIRED
	49452336002	Generic	GLYCERIN LIQ	PA REQUIRED
	49452336003	Generic	GLYCERIN LIQ	PA REQUIRED
	11917000347	Generic	GLYCERIN LIQ	PA REQUIRED
	00395103116	Generic	GLYCERIN LIQ	PA REQUIRED
	00395103128	Generic	GLYCERIN LIQ	PA REQUIRED
	00395103175	Generic	GLYCERIN LIQ	PA REQUIRED
	00395103185	Generic	GLYCERIN LIQ	PA REQUIRED
	00395103196	Generic	GLYCERIN LIQ	PA REQUIRED
	00869089126	Generic	GLYCERIN LIQ	PA REQUIRED
	00574017810	Generic	GLYCERIN LIQ	PA REQUIRED
	31722013747	Generic	GLYCERIN LIQ	PA REQUIRED
	31722093947	Generic	GLYCERIN LIQ	PA REQUIRED
Riboflavin (Bulk) Powder				
	51552087706	Generic	RIBOFLAVIN POW	PA REQUIRED
Simple - Syrup				
	51552069206	Generic	SIMPLE SYP	
	51552069208	Generic	SIMPLE SYP	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Simple - Syrup				
	49452759001	Brand	SYRUP SYP NF	PA REQUIRED
	49452759002	Brand	SYRUP SYP NF	PA REQUIRED
	31722093747	Generic	SIMPLE SYRUP SYP NF	
Vitamin E Acetate (Bulk) Liquid				
	51552072604	Generic	VITAMIN E LIQ ACETATE	PA REQUIRED
	51552072605	Generic	VITAMIN E LIQ ACETATE	PA REQUIRED
Xanthan Gum Oral Thickening Gel				
	20513001001	Brand	SIMPLYTHICK GEL NECTAR	PA REQUIRED
	20513001004	Brand	SIMPLYTHICK GEL NECTAR	PA REQUIRED
	20513001005	Brand	SIMPLYTHICK GEL NECTAR	PA REQUIRED
	20513001006	Brand	SIMPLYTHICK GEL NECTAR	PA REQUIRED
	20513002001	Brand	SIMPLYTHICK GEL HONEY	PA REQUIRED
	20513002004	Brand	SIMPLYTHICK GEL HONEY	PA REQUIRED
	20513002005	Brand	SIMPLYTHICK GEL HONEY	PA REQUIRED
	20513002006	Brand	SIMPLYTHICK GEL HONEY	PA REQUIRED
	20513004001	Brand	SIMPLYTHICK GEL EASYMIX	PA REQUIRED
	20513005000	Brand	SIMPLYTHICK GEL	PA REQUIRED
	20513005005	Brand	SIMPLYTHICK GEL	PA REQUIRED
	20513005010	Brand	SIMPLYTHICK GEL	PA REQUIRED
	20513006005	Brand	SIMPLYTHICK GEL EASYMIX	PA REQUIRED
	20513007001	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513007004	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513007005	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Xanthan Gum Oral Thickening Gel				
	20513007006	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513008001	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513008004	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513008005	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
	20513008006	Brand	SIMPLYTHICK GEL EASY MIX	PA REQUIRED
Nicotine TD Patch 24HR 14 MG/24HR				
	62011035001	Generic	HM NICOTINE DIS 14MG/24H	
	70000051101	Generic	NICOTINE TD DIS 14MG/24H	
	70000051102	Generic	NICOTINE TD DIS 14MG/24H	
	70677003101	Generic	SM NICOTINE DIS 14MG/24H	
	68001043388	Generic	NICOTINE TD DIS 14MG/24H	
	68001043390	Generic	NICOTINE TD DIS 14MG/24H	
	46122035274	Generic	GNP NICOTINE DIS 14MG/24H	
	43598044770	Generic	NICOTINE TD DIS 14MG/24H	
	43598044774	Generic	NICOTINE TD DIS 14MG/24H	
	00536589553	Generic	NICOTINE TD DIS 14MG/24H	
	00536589571	Generic	NICOTINE TD DIS 14MG/24H	
	00536589588	Generic	NICOTINE TD DIS 14MG/24H	
	00536110788	Generic	NICOTINE TD DIS 14MG/24H	
Nicotine TD Patch 24HR 21 MG/24HR				
	68001043488	Generic	NICOTINE TD DIS STEP 1	
	68001043490	Generic	NICOTINE TD DIS STEP 1	
	68001043491	Generic	NICOTINE TD DIS STEP 1	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine TD Patch 24HR 21 MG/24HR				
	70677003201	Generic	SM NICOTINE DIS 21MG/24H	
	70000051201	Generic	NICOTINE TD DIS 21MG/24H	
	70000051202	Generic	NICOTINE TD DIS 21MG/24H	
	62011035101	Generic	HM NICOTINE DIS 21MG/24H	
	00536110888	Generic	NICOTINE TD DIS 21MG/24H	
	00536589653	Generic	NICOTINE TD DIS 21MG/24H	
	00536589671	Generic	NICOTINE TD DIS 21MG/24H	
	00536589688	Generic	NICOTINE TD DIS 21MG/24H	
	43598044828	Generic	NICOTINE TD DIS 21MG/24H	
	43598044870	Generic	NICOTINE TD DIS 21MG/24H	
	43598044874	Generic	NICOTINE TD DIS 21MG/24H	
	46122035374	Generic	GNP NICOTINE DIS 21MG/24H	
	46122056807	Generic	GNP NICOTINE DIS 21MG/24H	
Nicotine TD Patch 24HR 7 MG/24HR				
	62011034901	Generic	HM NICOTINE DIS 7MG/24HR	
	70000051001	Generic	NICOTINE TD DIS 7MG/24HR	
	70677003001	Generic	SM NICOTINE DIS 7MG/24HR	
	68001043288	Generic	NICOTINE TD DIS STEP 3	
	68001043290	Generic	NICOTINE TD DIS STEP 3	
	46122035474	Generic	GNP NICOTINE DIS 7MG/24HR	
	43598044670	Generic	NICOTINE TD DIS 7MG/24HR	
	43598044674	Generic	NICOTINE TD DIS 7MG/24HR	
	00536589453	Generic	NICOTINE TD DIS 7MG/24HR	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine TD Patch 24HR 7 MG/24HR				
	00536589488	Generic	NICOTINE TD DIS 7MG/24HR	
	00536110688	Generic	NICOTINE TD DIS 7MG/24HR	
Nicotine Polacrilex Gum 2 MG				
	70677008501	Generic	SM NICOTINE GUM 2MG	
	70000034501	Generic	NICOTINE POL GUM 2MG ORIG	
	70000034601	Generic	NICOTINE POL GUM 2MGFRUIT	
	70000034701	Generic	NICOTINE POL GUM 2MG MINT	
	70000034801	Generic	NICOTINE POL GUM 2MG MINT	
	70000034802	Generic	NICOTINE POL GUM 2MG MINT	
	62011042501	Generic	HM NICOTINE GUM 2MG	
	63739037010	Generic	NICOTINE POL GUM 2MG CINN	
	63739037163	Generic	NICOTINE POL GUM 2MG	
	62011004702	Generic	HM NICOTINE GUM 2MG MINT	
	49348078710	Generic	SM NICOTINE GUM 2MG MINT	
	00536302906	Generic	NICOTINE POL GUM 2MG ORIG	
	00536302923	Generic	NICOTINE POL GUM 2MG ORIG	
	00536302934	Generic	NICOTINE POL GUM 2MG ORIG	
	00536311201	Generic	NICOTINE POL GUM 2MG MINT	
	00536311237	Generic	NICOTINE POL GUM 2MG MINT	
	00536136206	Generic	NICOTINE POL GUM 2MG	
	00536136223	Generic	NICOTINE POL GUM 2MG	
	00536136234	Generic	NICOTINE POL GUM 2MG	
	00536338601	Generic	NICOTINE POL GUM 2MGFRUIT	

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Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine Polacrilex Gum 2 MG				
	00536340401	Generic	NICOTINE POL GUM 2MG CINN	
	00113045660	Generic	NICOTINE GUM 2MG	
	00113002971	Generic	NICOTINE GUM 2MG	
	00113020625	Generic	NICOTINE POL GUM 2MG MINT	
	45802020625	Generic	NICOTINE POL GUM 2MG MINT	
	46122028460	Generic	GNP NICOTINE GUM 2MG MINT	
	46122017125	Generic	GNP NICOTINE GUM 2MG MINT	
	46122017320	Generic	GNP NICOTINE GUM 2MG ORIG	
	46122044858	Generic	GNP NICOTINE GUM 2MG MINT	
	46122066478	Generic	GNP NICOTINE GUM 2MG FRT	
	49348069136	Generic	SM NICOTINE GUM 2MG MINT	
	49348057308	Generic	SM NICOTINE GUM 2MG	
	49348057336	Generic	SM NICOTINE GUM 2MG	
Nicotine Polacrilex Gum 4 MG				
	49348078810	Generic	SM NICOTINE GUM 4MG MINT	
	63739036810	Generic	NICOTINE POL GUM 4MGFRUIT	
	63739036910	Generic	NICOTINE POL GUM 4MG CINN	
	62011042601	Generic	HM NICOTINE GUM 4MG FRT	
	62011017001	Generic	HM NICOTINE GUM 4MG MINT	
	70000034101	Generic	NICOTINE POL GUM 4MG ORIG	
	70000034201	Generic	NICOTINE POL GUM 4MGFRUIT	
	70000034301	Generic	NICOTINE POL GUM 4MG MINT	
	70000034401	Generic	NICOTINE POL GUM 4MG MINT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine Polacrilex Gum 4 MG				
	70000034402	Generic	NICOTINE POL GUM 4MG MINT	
	70677008601	Generic	SM NICOTINE GUM 4MG	
	49348069236	Generic	SM NICOTINE GUM 4MG MINT	
	49348057208	Generic	SM NICOTINE GUM 4MG	
	49348057236	Generic	SM NICOTINE GUM 4MG	
	46122066678	Generic	GNP NICOTINE GUM 4MG FRT	
	46122044958	Generic	GNP NICOTINE GUM 4MG MINT	
	46122017460	Generic	GNP NICOTINE GUM 4MG ORIG	
	46122017225	Generic	GNP NICOTINE GUM 4MG MINT	
	46122028660	Generic	GNP NICOTINE GUM 4MG MINT	
	45802000125	Generic	NICOTINE POL GUM 4MG MINT	
	24385059871	Generic	GNP NICOTINE GUM 4MG MINT	
	00113017060	Generic	NICOTINE GUM 4MG	
	00113017071	Generic	NICOTINE GUM 4MG	
	00113042225	Generic	NICOTINE POL GUM 4MG MINT	
	00113053260	Generic	NICOTINE GUM 4MG	
	00113053278	Generic	NICOTINE GUM 4MG	
	00536340501	Generic	NICOTINE POL GUM 4MG	
	00536338701	Generic	NICOTINE POL GUM 4MG	
	00536137206	Generic	NICOTINE POL GUM 4MG MINT	
	00536137223	Generic	NICOTINE POL GUM 4MG MINT	
	00536137234	Generic	NICOTINE POL GUM 4MG MINT	
	00536311301	Generic	NICOTINE POL GUM 4MG MINT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine Polacrilex Gum 4 MG				
	00536311337	Generic	NICOTINE POL GUM 4MG MINT	
	00536303006	Generic	NICOTINE POL GUM 4MG ORIG	
	00536303023	Generic	NICOTINE POL GUM 4MG ORIG	
Nicotine Polacrilex Lozenge 2 MG				
	70677008701	Generic	SM NICOTINE LOZ 2MG CINN	
	70677008901	Generic	SM NICOTINE LOZ 2MG CHRY	
	70000056001	Generic	NICOTINE POL LOZ 2MG MINI	
	70000056201	Generic	NICOTINE POL LOZ 2MG MINT	
	62011019901	Generic	HM NICOTINE LOZ 2MG MINT	
	62011042701	Generic	HM NICOTINE LOZ 2MG CINN	
	62011042901	Generic	HM NICOTINE LOZ 2MG	
	62011004801	Generic	HM NICOTINE LOZ 2MG MINT	
	49348085216	Generic	SM NICOTINE LOZ 2MG MINT	
	00536133709	Generic	NICOTINE POL LOZ 2MG MINT	
	00536123981	Generic	NICOTINE LOZ MINI 2MG	
	00113034405	Generic	NICOTINE POL LOZ 2MG MINT	
	00113073402	Generic	NICOTINE LOZ 2MG MINT	
	43598048672	Generic	NICOTINE LOZ 2MG MINT	
	45802008901	Generic	NICOTINE LOZ 2MG MINT	
	45802008902	Generic	NICOTINE LOZ 2MG MINT	
	45802034403	Generic	NICOTINE POL LOZ 2MG MINT	
	45802034405	Generic	NICOTINE POL LOZ 2MG MINT	
	46122025415	Generic	GNP NICOTINE LOZ MINI 2MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine Polacrilex Lozenge 2 MG				
	46122025460	Generic	GNP NICOTINE LOZ MINI 2MG	
	46122017608	Generic	GNP NICOTINE LOZ 2MG MINT	
	46122066315	Generic	GNP NICOTINE LOZ MINI 2MG	
Nicotine Polacrilex Lozenge 4 MG				
	49348085316	Generic	SM NICOTINE LOZ 4MG MINT	
	62011043001	Generic	HM NICOTINE LOZ 4MG MINT	
	62011042801	Generic	HM NICOTINE LOZ 4MG CINN	
	62011020001	Generic	HM NICOTINE LOZ 4MG MINT	
	62011017101	Generic	HM NICOTINE LOZ 4MG MINT	
	70000055901	Generic	NICOTINE POL LOZ 4MG MINT	
	70000056101	Generic	NICOTINE LOZ 4MG MINT	
	70677009001	Generic	SM NICOTINE LOZ 4MG	
	70677008801	Generic	SM NICOTINE LOZ 4MG CINN	
	46122066515	Generic	GNP NICOTINE LOZ 4MG CHER	
	46122017708	Generic	GNP NICOTINE LOZ 4MG MINT	
	45802095701	Generic	NICOTINE LOZ 4MG MINT	
	45802095702	Generic	NICOTINE LOZ 4MG MINT	
	46122025515	Generic	GNP NICOTINE LOZ 4MG MINT	
	46122025560	Generic	GNP NICOTINE LOZ 4MG MINT	
	45802087303	Generic	NICOTINE POL LOZ 4MG MINT	
	45802087305	Generic	NICOTINE POL LOZ 4MG MINT	
	43598048772	Generic	NICOTINE POL LOZ 4MG MINT	
	00113087305	Generic	NICOTINE POL LOZ 4MG MINT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Nicotine Polacrilex Lozenge 4 MG				
	00113087306	Generic	NICOTINE POL LOZ 4MG MINT	
	00113095702	Generic	NICOTINE LOZ 4MG MINT	
	00113095760	Generic	NICOTINE LOZ 4MG MINT	
	00536124181	Generic	NICOTINE POL LOZ 4MG MINT	
	00536133809	Generic	NICOTINE LOZ 4MG MINT	
Ibuprofen Susp 100 MG/5ML				
	70000025901	Generic	IBUPROFEN SUS 100/5ML	
	70000026201	Generic	IBUPROFEN SUS 100/5ML	
	70000026301	Generic	IBUPROFEN SUS 100/5ML	
	70000026302	Generic	IBUPROFEN SUS 100/5ML	
	70000026401	Generic	IBUPROFEN SUS 100/5ML	
	68001043592	Generic	IBUPROFEN SUS 100/5ML	
	68001043594	Generic	IBUPROFEN SUS 100/5ML	
	68094003701	Generic	IBUPROFEN SUS 100/5ML	
	68094003758	Generic	IBUPROFEN SUS 100/5ML	
	68094060059	Generic	IBUPROFEN SUS 100/5ML	
	68094060061	Generic	IBUPROFEN SUS 100/5ML	
	68094060062	Generic	IBUPROFEN SUS 100/5ML	
	68094049459	Generic	IBUPROFEN SUS 100/5ML	
	68094049461	Generic	IBUPROFEN SUS 100/5ML	
	68094049462	Generic	IBUPROFEN SUS 100/5ML	
	68094050359	Generic	IBUPROFEN SUS 100/5ML	
	68094050361	Generic	IBUPROFEN SUS 100/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Susp 100 MG/5ML				
	68094050362	Generic	IBUPROFEN SUS 100/5ML	
	69230030811	Generic	IBUPROFEN SUS 100/5ML	
	69230030812	Generic	IBUPROFEN SUS 100/5ML	
	69230030911	Generic	IBUPROFEN SUS 100/5ML	
	69230030912	Generic	IBUPROFEN SUS 100/5ML	
	69230031011	Generic	IBUPROFEN SUS 100/5ML	
	69230031012	Generic	IBUPROFEN SUS 100/5ML	
	69230031111	Generic	IBUPROFEN SUS 100/5ML	
	69230031112	Generic	IBUPROFEN SUS 100/5ML	
	70000018101	Generic	IBUPROFEN SUS 100/5ML	
	62011021401	Generic	IBUPROFEN SUS 100/5ML	
	63868075618	Generic	IBUPROFEN SUS 100/5ML	
	63868075818	Generic	IBUPROFEN SUS 100/5ML	
	63868077604	Generic	IBUPROFEN SUS 100/5ML	
	63868077904	Generic	IBUPROFEN SUS 100/5ML	
	63868077908	Generic	IBUPROFEN SUS 100/5ML	
	62011003001	Generic	IBUPROFEN SUS 100/5ML	
	62011003002	Generic	IBUPROFEN SUS 100/5ML	
	61269076194	Generic	IBUPROFEN CH SUS 100/5ML	
	61269076394	Generic	IBUPROFEN CH SUS 100/5ML	
	62011001001	Generic	IBUPROFEN SUS 100/5ML	
	62011001101	Generic	IBUPROFEN SUS 100/5ML	
	49348087634	Generic	IBUPROFEN SUS 100/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Susp 100 MG/5ML				
	51672213001	Generic	IBUPROFEN SUS 100/5ML	
	51672213008	Generic	IBUPROFEN SUS 100/5ML	
	00472176098	Generic	IBUPROFEN SUS 100/5ML	
	00472176194	Generic	IBUPROFEN CH SUS 100/5ML	
	00472176394	Generic	IBUPROFEN SUS 100/5ML	
	00472176494	Generic	IBUPROFEN SUS 100/5ML	
	00904557720	Generic	IBUPROFEN SUS 100/5ML	
	00904530909	Generic	IBUPROFEN SUS 100/5ML	
	00904530920	Generic	IBUPROFEN SUS 100/5ML	
	00113089726	Generic	IBUPROFEN SUS 100/5ML	
	00113089734	Generic	IBUPROFEN SUS 100/5ML	
	00113066026	Generic	IBUPROFEN SUS 100/5ML	
	00113068526	Generic	IBUPROFEN SUS 100/5ML	
	00121091400	Generic	IBUPROFEN SUS 100/5ML	
	00121091405	Generic	IBUPROFEN SUS 100/5ML	
	00121091700	Generic	IBUPROFEN CH SUS 100/5ML	
	00121091705	Generic	IBUPROFEN CH SUS 100/5ML	
	00121182800	Generic	IBUPROFEN SUS 200/10ML	
	00121182810	Generic	IBUPROFEN SUS 200/10ML	
	00121183605	Generic	IBUPROFEN SUS 100/5ML	
	00113016626	Generic	IBUPROFEN SUS 100/5ML	
	00113016634	Generic	IBUPROFEN SUS 100/5ML	
	45802089726	Generic	IBUPROFEN SUS 100/5ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Susp 100 MG/5ML				
	45802089734	Generic	IBUPROFEN SUS 100/5ML	
	45802013326	Generic	IBUPROFEN SUS 100/5ML	
	45802014026	Generic	IBUPROFEN SUS 100/5ML	
	49348022934	Generic	IBUPROFEN SUS 100/5ML	
	49348022937	Generic	IBUPROFEN SUS 100/5ML	
	49348049934	Generic	IBUPROFEN SUS 100/5ML	
	49348050034	Generic	IBUPROFEN SUS 100/5ML	
	24385037226	Generic	IBUPROFEN SUS 100/5ML	
	24385090526	Generic	IBUPROFEN SUS 100/5ML	
	24385090534	Generic	IBUPROFEN SUS 100/5ML	
	24385036126	Generic	IBUPROFEN SUS 100/5ML	
	24385036134	Generic	IBUPROFEN SUS 100/5ML	
	24385000926	Generic	IBUPROFEN SUS 100/5ML	
	24385000934	Generic	IBUPROFEN SUS 100/5ML	
Ibuprofen Tab 200 MG				
	49348092709	Generic	SM IBUPROFEN TAB 200MG	
	49348092710	Generic	SM IBUPROFEN TAB 200MG	
	49483060101	Generic	IBUPROFEN TAB 200MG	
	49483060110	Generic	IBUPROFEN TAB 200MG	
	62011001401	Generic	HM IBUPROFEN TAB 200MG	
	62011001402	Generic	HM IBUPROFEN TAB 200MG	
	62011001403	Generic	HM IBUPROFEN TAB 200MG	
	62011001407	Generic	HM IBUPROFEN TAB 200MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Tab 200 MG				
	62011001501	Generic	HM IBUPROFEN TAB 200MG	
	62011001502	Generic	HM IBUPROFEN TAB 200MG	
	63868077324	Generic	QC IBUPROFEN TAB 200MG	
	63868079150	Generic	QC IBUPROFEN TAB 200MG	
	63868079301	Generic	QC IBUPROFEN TAB 200MG	
	63868079401	Generic	QC IBUPROFEN TAB 200MG	
	63868097924	Generic	QC IBUPROFEN TAB 200MG	
	63868098350	Generic	QC IBUPROFEN TAB 200MG	
	62011022201	Generic	HM IBUPROFEN TAB 200MG	
	62011022202	Generic	HM IBUPROFEN TAB 200MG	
	70000017501	Generic	IBUPROFEN TAB 200MG	
	70000017502	Generic	IBUPROFEN TAB 200MG	
	70000017503	Generic	IBUPROFEN TAB 200MG	
	70000017505	Generic	IBUPROFEN TAB 200MG	
	70000017508	Generic	IBUPROFEN TAB 200MG	
	70000017601	Generic	IBUPROFEN TAB 200MG	
	70000017604	Generic	IBUPROFEN TAB 200MG	
	70000017605	Generic	IBUPROFEN TAB 200MG	
	70000000301	Generic	IBUPROFEN TAB 200MG	
	70000000302	Generic	IBUPROFEN TAB 200MG	
	70000029101	Generic	IBUPROFEN TAB 200MG	
	70000030801	Generic	IBUPROFEN TAB 200MG	
	70000030802	Generic	IBUPROFEN TAB 200MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Tab 200 MG				
	24385005878	Generic	IBUPROFEN TAB 200MG	
	24385005978	Generic	IBUPROFEN TAB 200MG	
	24385064771	Generic	IBUPROFEN TAB 200MG	
	24385064778	Generic	IBUPROFEN TAB 200MG	
	24385060471	Generic	IBUPROFEN TAB 200MG	
	24385060478	Generic	IBUPROFEN TAB 200MG	
	24385060485	Generic	IBUPROFEN TAB 200MG	
	49348019609	Generic	IBUPROFEN TAB 200MG	
	49348019610	Generic	IBUPROFEN TAB 200MG	
	49348019635	Generic	IBUPROFEN TAB 200MG	
	49348070604	Generic	IBUPROFEN TAB 200MG	
	49348070609	Generic	IBUPROFEN TAB 200MG	
	49348070610	Generic	IBUPROFEN TAB 200MG	
	49348070614	Generic	IBUPROFEN TAB 200MG	
	49348070616	Generic	IBUPROFEN TAB 200MG	
	49348072710	Generic	SM IBUPROFEN TAB 200MG	
	46122054890	Generic	IBUPROFEN TAB 200MG	
	00113007471	Generic	IBUPROFEN TAB 200MG	
	00113007478	Generic	IBUPROFEN TAB 200MG	
	00113051771	Generic	IBUPROFEN TAB 200MG	
	00113060462	Generic	IBUPROFEN TAB 200MG	
	00113060471	Generic	IBUPROFEN TAB 200MG	
	00113060478	Generic	IBUPROFEN TAB 200MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Ibuprofen Tab 200 MG				
	00113060485	Generic	IBUPROFEN TAB 200MG	
	00113060490	Generic	IBUPROFEN TAB 200MG	
	00113064762	Generic	IBUPROFEN TAB 200MG	
	00113064771	Generic	IBUPROFEN TAB 200MG	
	00113064778	Generic	IBUPROFEN TAB 200MG	
	00904674724	Generic	IBUPROFEN TAB 200MG	
	00904674740	Generic	IBUPROFEN TAB 200MG	
	00904674751	Generic	IBUPROFEN TAB 200MG	
	00904674759	Generic	IBUPROFEN TAB 200MG	
	00904674770	Generic	IBUPROFEN TAB 200MG	
	00904674780	Generic	IBUPROFEN TAB 200MG	
	00904791251	Generic	IBUPROFEN TAB 200MG	
	00904791259	Generic	IBUPROFEN TAB 200MG	
	00904791451	Generic	IBU-200 TAB 200MG	
	00904791459	Generic	IBU-200 TAB 200MG	
	00904791461	Generic	IBUPROFEN TAB 200MG	
Naproxen Sodium Tab 220 MG				
	69230031301	Generic	ALL DAY PAIN TAB 220MG	
	69230031305	Generic	ALL DAY PAIN TAB 220MG	
	69230031350	Generic	ALL DAY PAIN TAB 220MG	
	70000017101	Generic	ALL DAY PAIN TAB 220MG	
	70000017103	Generic	ALL DAY PAIN TAB 220MG	
	70000020101	Generic	ALL DAY PAIN TAB 220MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Naproxen Sodium Tab 220 MG				
	70000020102	Generic	ALL DAY PAIN TAB 220MG	
	70000020103	Generic	ALL DAY PAIN TAB 220MG	
	63868046501	Generic	NAPROXEN SOD TAB 220MG	
	63868046550	Generic	NAPROXEN SOD TAB 220MG	
	63868046650	Generic	NAPROXEN SOD TAB 220MG	
	62011001701	Generic	NAPROXEN SOD TAB 220MG	
	62011001702	Generic	NAPROXEN SOD TAB 220MG	
	49483060901	Generic	NAPROXEN SOD TAB 220MG	
	49483060905	Generic	NAPROXEN SOD TAB 220MG	
	00113090162	Generic	NAPROXEN SOD TAB 220MG	
	00113090178	Generic	NAPROXEN SOD TAB 220MG	
	00113436862	Generic	NAPROXEN SOD TAB 220MG	
	00113436871	Generic	NAPROXEN SOD TAB 220MG	
	00113436878	Generic	NAPROXEN SOD TAB 220MG	
	00536109301	Generic	ALL DAY RELF TAB 220MG	
	00536109306	Generic	ALL DAY RELF TAB 220MG	
	00536109401	Generic	ALL DAY RELF TAB 220MG	
	00536109406	Generic	ALL DAY RELF TAB 220MG	
	46122056271	Generic	NAPROXEN TAB 220MG	
	46122056278	Generic	NAPROXEN TAB 220MG	
	46122056471	Generic	NAPROXEN TAB 220MG	
	46122056478	Generic	NAPROXEN TAB 220MG	
	46122056481	Generic	NAPROXEN TAB 220MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Naproxen Sodium Tab 220 MG				
	45802049071	Generic	NAPROXEN SOD TAB 220MG	
	45802049078	Generic	NAPROXEN SOD TAB 220MG	
	49348030609	Generic	NAPROXEN SOD TAB 220MG	
	49348030610	Generic	NAPROXEN SOD TAB 220MG	
Ketotifen Fumarate Opth Soln 0.025% (Base Equiv)				
	70000012401	Generic	EYE ITCH REL DRO 0.025%OP	
	70000052201	Generic	EYE ITCH REL DRO 0.025%OP	
	70000052202	Generic	EYE ITCH REL DRO 0.025%OP	
	76385010617	Generic	KETOTIF FUM DRO	
	49348010717	Generic	EYE ITCH REL DRO 0.025%OP	
	17478071710	Generic	KETOTIF FUM DRO 0.025%OP	
	24208060105	Generic	ALAWAY CHILD DRO 0.025%OP	
	24208060110	Generic	ALAWAY DRO 0.025%OP	
	00536125240	Generic	EYE ITCH REL DRO 0.025%OP	
	00065401105	Brand	ZADITOR DRO 0.025%OP	
	00065401106	Brand	ZADITOR DRO 0.025%OP	
Olopatadine HCl Opth Soln 0.1% (Base Equivalent)				
	70000005401	Generic	EYE ALLERGY SOL ITCH/RED	
	62011046901	Generic	EYE ALLERGY SOL ITCH/RED	
	00065427401	Brand	PATADAY SOL 0.1%	PA REQUIRED
	00536130840	Generic	OLOPATADINE DRO 0.1%	
	46122067264	Generic	OLOPATADINE DRO 0.1% OP	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Olopatadine HCl Opth Soln 0.2% (Base Equivalent)				
	70000005301	Generic	EYE ALLERGY SOL ITCH REL	PA REQUIRED
	70677012201	Generic	SM OLOPATADI SOL 0.2%	PA REQUIRED
	46122067127	Generic	GNP OLOPATAD SOL 0.2%	PA REQUIRED
	00536130723	Generic	OLOPATADINE SOL 0.2%	PA REQUIRED
	00065815001	Brand	PATADAY SOL 0.2%	PA REQUIRED
	00065815003	Brand	PATADAY SOL 0.2%	PA REQUIRED
Olopatadine HCl Opth Soln 0.7% (Base Equivalent)				
	00065081601	Brand	PATADAY SOL 0.7%	PA REQUIRED
	00065081604	Brand	PATADAY SOL 0.7%	PA REQUIRED
*Artificial Tear Opth Solution***				
	00065042636	Generic	GENTEAL TEAR SOL MODERATE	
	00065042637	Generic	GENTEAL TEAR SOL MODERATE	
*White Petrolatum-Mineral Oil Opth Ointment***				
	70000051301	Generic	LUBRICNT EYE OIN NIGHTTIM	PA REQUIRED
	00065050935	Generic	SYSTANE OIN	PA REQUIRED
	00065051801	Generic	GENTEAL TEAR OIN NT-TIME	PA REQUIRED
	00023024004	Generic	REFRESH P.M. OIN OP	PA REQUIRED
	00023031204	Generic	REFRESH LACR OIN OP	PA REQUIRED
	00023031207	Generic	REFRESH LACR OIN OP	PA REQUIRED
	00904648838	Generic	LUBRIFRESH OIN P.M.	
	17478006235	Generic	ARTIFI TEARS OIN OP	PA REQUIRED
Carboxymethylcellulose Sodium (PF) Opth Soln 0.5%				
	70000001201	Generic	LUBRICNT EYE DRO 0.5% OP	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Carboxymethylcellulose Sodium (PF) Ophth Soln 0.5%				
	70000001202	Generic	LUBRICNT EYE DRO 0.5% OP	PA REQUIRED
	62011020301	Generic	LUBRICATING DRO 0.5%	PA REQUIRED
	46122019565	Generic	LUBRICNT EYE DRO 0.5% OP	PA REQUIRED
	49348032944	Generic	LUBRICATING DRO 0.5%	PA REQUIRED
	00904632946	Generic	LUBRICNT EYE DRO 0.5% OP	PA REQUIRED
	00904632951	Generic	LUBRICNT EYE DRO 0.5% OP	PA REQUIRED
	00023040330	Brand	REFRESH PLUS DRO 0.5% OP	
	00023040350	Brand	REFRESH PLUS DRO 0.5% OP	
	00023040370	Brand	REFRESH PLUS DRO 0.5% OP	
	00113032365	Generic	LUBRICATING DRO 0.5%	PA REQUIRED
Carboxymethylcellulose Sodium Ophth Gel 1%				
	70000008901	Generic	DRY EYE RELF GEL 1%	PA REQUIRED
	00023920515	Brand	REFRESH LIQU DRO 1% OP	PA REQUIRED
Carboxymethylcellulose Sodium Ophth Soln 0.5%				
	70000009001	Generic	LUBRICNT EYE DRO 0.5% OP	
	70000009002	Generic	LUBRICNT EYE DRO 0.5% OP	
	50268006815	Generic	CARBOXYMETHY SOL 0.5%	
	00023079801	Brand	REFRESH TEAR DRO 0.5% OP	
	00023079815	Brand	REFRESH TEAR DRO 0.5% OP	
Dextran 70-Hypromellose (PF) Ophth Soln 0.1-0.3%				
	00065041928	Generic	BION TEARS SOL OP	
	00065806301	Brand	GENTEAL TEAR SOL MOD PF	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Dextran 70-Hypromellose Opth Soln 0.1-0.3%				
	00536128294	Generic	LUBRICATING SOL TEARS	
Polyvinyl Alcohol Opth Soln 1.4%				
	00536132594	Generic	POLYVINYL AL SOL 1.4% OP	
	17478006012	Generic	ARTIFI TEARS SOL 1.4% OP	
Naphazoline w/ Pheniramine Opth Soln 0.025-0.3%				
	00065008515	Brand	NAPHCON-A SOL OP	
	00065008542	Brand	NAPHCON-A SOL OP	
Sodium Chloride Hypertonic Opth Oint 5%				
	00536125391	Generic	SOD CHLORIDE OIN 5% OP	
	17478062235	Generic	SOD CHLORIDE OIN 5% OP	
	24208038555	Brand	MURO 128 OIN 5% OP	
	24208038556	Brand	MURO 128 OIN 5% OP	
Sodium Chloride Hypertonic Opth Soln 5%				
	24208027715	Brand	MURO 128 SOL 5% OP	
	17478062312	Generic	SOD CHLORIDE SOL 5% OP	
	00536125494	Generic	SOD CHLORIDE SOL 5% OP	
Tetrahydrozoline HCl Opth Soln 0.05%				
	62011010201	Generic	HM EYE DROPS SOL 0.05% OP	
	70000045401	Generic	EYE DROPS SOL 0.05% OP	
	00536121794	Generic	EYE DROPS SOL 0.05% OP	
	24385007505	Generic	GNP EYE DROP SOL 0.05% OP	
Benzoyl Peroxide Gel 10%				
	45802030801	Generic	BENZOYL PER GEL 10%	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Benzoyl Peroxide Gel 10%				
	45802030896	Generic	BENZOYL PER GEL 10%	PA REQUIRED
	00536105625	Generic	ACNE MEDICAT GEL 10%	PA REQUIRED
	00536105656	Generic	ACNE MEDICAT GEL 10%	PA REQUIRED
Benzoyl Peroxide Gel 5%				
	00536105525	Generic	ACNE MEDICAT GEL 5%	PA REQUIRED
	00536105556	Generic	ACNE MEDICAT GEL 5%	PA REQUIRED
	00536105557	Generic	ACNE MEDICAT GEL 5%	PA REQUIRED
	45802021601	Generic	BENZOYL PER GEL 5%	PA REQUIRED
	45802021696	Generic	BENZOYL PER GEL 5%	PA REQUIRED
Benzoyl Peroxide Liq 10%				
	67405083005	Generic	BENZOYL PER LIQ 10% WASH	PA REQUIRED
	67405083008	Generic	BENZOYL PER LIQ 10% WASH	PA REQUIRED
	45802031801	Generic	BENZOYL PER LIQ 10% WASH	PA REQUIRED
	45802031834	Generic	BENZOYL PER LIQ 10% WASH	PA REQUIRED
	00536126163	Generic	BENZOYL PER LIQ 10% WASH	PA REQUIRED
Benzoyl Peroxide Lotion 5%				
	00536105775	Brand	ACNE MEDICAT LOT 5%	PA REQUIRED
*Neomycin-Bacitracin-Polymyxin Oint***				
	68001048345	Generic	TRIPLE ANTIB OIN	
	68001048346	Generic	TRIPLE ANTIB OIN	
	70000009401	Generic	TRIPLE ANTIB OIN	
	70000005801	Generic	TRIPLE ANTIB OIN	
	70677001301	Generic	SM TRIPLE OIN ANTIBIOT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Neomycin-Bacitracin-Polymyxin Oint***				
	70512010230	Generic	TRIPLE ANTIB OIN	
	62011032101	Generic	HM TRIPLE OIN ANTIBIOT	
	61269017934	Generic	TRIPLE ANTIB OIN	
	61269017956	Generic	TRIPLE ANTIB OIN	
	51672201601	Generic	TRIPLE ANTIB OIN	
	51672201602	Generic	TRIPLE ANTIB OIN	
	51672212001	Generic	TRIPLE ANTIB OIN	
	51672212002	Generic	TRIPLE ANTIB OIN	
	00904073431	Generic	TRIPLE ANTIB OIN	
	00713026831	Generic	TRIPLE ANTIB OIN	
	00113008464	Generic	FIRST AID OIN ANTIBIOT	
	00472017934	Generic	TRIPLE ANTIB OIN	
	00472017956	Generic	TRIPLE ANTIB OIN	
	00904668067	Generic	TRIPLE ANTIB OIN FRST AID	
	00904880567	Generic	TRIPLE ANTIB OIN	
	45802014301	Generic	TRIPLE ANTIB OIN	
	45802014303	Generic	TRIPLE ANTIB OIN	
	45802014370	Generic	TRIPLE ANTIB OIN	
	46122041403	Generic	GNP TRIPLE OIN ANTIBIOT	
	46122041405	Generic	GNP TRIPLE OIN ANTIBIOT	
Bacitracin Oint 500 Unit/GM				
	63868096028	Generic	BACITRACIN OIN 500/GM	
	68001047746	Generic	BACITRACIN OIN 500/GM	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Bacitracin Oint 500 Unit/GM				
	68001047747	Generic	BACITRACIN OIN 500/GM	
	68001047748	Generic	BACITRACIN OIN 500/GM	
	45802006001	Generic	BACITRACIN OIN 500/GM	
	45802006003	Generic	BACITRACIN OIN 500/GM	
	45802006070	Generic	BACITRACIN OIN 500/GM	
	00713028031	Generic	BACITRACIN OIN 500/GM	
	00536125628	Generic	BACITRACIN OIN 500/GM	
Bacitracin Zinc Oint 500 Unit/GM				
	70000047001	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	70000054701	Generic	BACITR ZINC OIN 500UNIT	PA REQUIRED
	62011009401	Generic	BACITRACIN OIN 500/GM	PA REQUIRED
	61269010534	Generic	BACITR ZINC OIN 500UNIT	PA REQUIRED
	61269010556	Generic	BACITR ZINC OIN 500UNIT	PA REQUIRED
	51672207501	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	51672207502	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	00536126328	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	00472110534	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	00472110556	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	00904880467	Generic	BACITR ZINC OIN 500/GM	
	00904702367	Generic	BACITRACIN OIN 500/GM	PA REQUIRED
	00904667967	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED
	49348015472	Generic	SM ANTIBIOTI OIN 500/GM	PA REQUIRED
	24385006003	Generic	BACITR ZINC OIN 500/GM	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Clotrimazole Cream 1%				
	51672200201	Generic	CLOTRIMAZOLE CRE 1%	
	51672200202	Generic	CLOTRIMAZOLE CRE 1%	
	59088047607	Generic	MICOTRIN AC CRE 1%	
	70000054202	Generic	ATHLETE FOOT CRE 1%	
	70512010030	Generic	CLOTRIMAZOLE CRE 1%	
	68001047545	Generic	ANTIFUNGAL CRE 1%	
	68001047547	Generic	ANTIFUNGAL CRE 1%	
	24385020501	Generic	ATHLETE FOOT CRE 1%	
	24385020503	Generic	ATHLETE FOOT CRE 1%	
	49348027972	Generic	CLOTRIMAZOLE CRE 1%	
	45802043401	Generic	CLOTRIMAZOLE CRE 1%	
	45802043411	Generic	CLOTRIMAZOLE CRE 1%	
	00904782231	Generic	CLOTRIMAZOLE CRE 1%	
	00904782236	Generic	CLOTRIMAZOLE CRE 1%	
	00472035056	Generic	CLOTRIMAZOLE CRE 1%	
	00536126526	Generic	CLOTRIMAZOLE CRE 1%	
	00536127211	Generic	ANTIFUNGAL CRE 1%	
	00536127222	Generic	ANTIFUNGAL CRE 1%	
Miconazole Nitrate Cream 2%				
	70000034001	Generic	MICONAZOLE CRE 2%	
	61269073514	Generic	MICONAZOLE CRE 2%	
	61269073542	Generic	MICONAZOLE CRE 2%	
	61269073556	Generic	MICONAZOLE CRE 2%	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Miconazole Nitrate Cream 2%				
	51672200101	Generic	MICONAZOLE CRE 2%	
	51672200102	Generic	MICONAZOLE CRE 2%	
	00472073514	Generic	ANTIFUNGAL CRE 2%	
	00472073542	Generic	ANTIFUNGAL CRE 2%	
	00472073556	Generic	ANTIFUNGAL CRE 2%	
	00536113428	Generic	MICONAZOLE CRE 2%	
	49348068972	Generic	SM ANTIFUNGL CRE 2%	
Terbinafine HCl Cream 1%				
	51672208001	Generic	TERBINAFINE CRE 1%	PA REQUIRED
	51672208002	Generic	TERBINAFINE CRE 1%	PA REQUIRED
	49348079072	Generic	ATHLETE FOOT CRE 1%	PA REQUIRED
	70000033801	Generic	ATHLETE FOOT CRE 1%	PA REQUIRED
	24385052403	Generic	TERBINAFINE CRE 1%	PA REQUIRED
	24385052405	Generic	TERBINAFINE CRE 1%	PA REQUIRED
Tolnaftate Aerosol Pow 1%				
	70000032201	Generic	ATHLETES FT AER 1% POW	
Tolnaftate Cream 1%				
	70000049401	Generic	TOLNAFTATE CRE 1%	
	70000008401	Generic	TOLNAFTATE CRE 1%	
	51672202001	Generic	TOLNAFTATE CRE 1%	
	51672202002	Generic	TOLNAFTATE CRE 1%	
	63868010446	Generic	TOLNAFTATE CRE 1%	
	24385003203	Generic	TOLNAFTATE CRE 1%	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Tolnaftate Cream 1%				
	49348015529	Generic	SM ANTIFUNGL CRE 1%	
	00536131543	Generic	TOLNAFTATE CRE 1%	
	00904072236	Generic	ANTIFUNGAL CRE 1%	
Selenium Sulfide Lotion 1%				
	70000053101	Generic	DANDRUFF SHA 1%	
	00536199553	Generic	ANTI-DANDRUF SHA 1%	
Chlorhexidine Gluconate Liquid 4%				
	67618020004	Generic	BETASEPT LIQ 4%	
	67618020008	Generic	BETASEPT LIQ 4%	
	67618020016	Generic	BETASEPT LIQ 4%	
	67618020030	Generic	BETASEPT LIQ 4%	
	67618020032	Generic	BETASEPT LIQ 4%	
Oxychlorosene Sodium Powder				
	00327000110	Brand	CLORPACTIN POW WCS-90	PA REQUIRED
Povidone-Iodine Soln 10%				
	67618015001	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015004	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015005	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015008	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015009	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015017	Brand	BETADINE SOL 10%	PA REQUIRED
	67618015032	Brand	BETADINE SOL 10%	PA REQUIRED
	70000006001	Generic	POVIDONE-IOD SOL 10%	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Povidone-Iodine Soln 10%				
	70000040201	Generic	POVIDONE-IOD SOL 10%	
	63868023008	Generic	POVIDONE/IOD SOL 10%	
	62011011801	Generic	HM POVID-IOD SOL 10%	
	00904110309	Generic	POVIDONE-IOD SOL 10%	
	49348062237	Generic	SM POVID-IOD SOL 10%	
	49348062238	Generic	SM POVID-IOD SOL 10%	
Zinc Oxide Oint 20%				
	70000033401	Generic	ZINC OXIDE OIN 20%	
	70512010330	Generic	ZINC OXIDE OIN 20%	
	46122011846	Generic	ZINC OXIDE OIN 20%	
	00536570025	Generic	ZINC OXIDE OIN 20%	
	00536570028	Generic	ZINC OXIDE OIN 20%	
	00536570098	Generic	ZINC OXIDE OIN 20%	
	00536131625	Generic	ZINC OXIDE OIN 20%	
	00536131628	Generic	ZINC OXIDE OIN 20%	
	00536131698	Generic	ZINC OXIDE OIN 20%	
Hydrocortisone Cream 0.5%				
	24385019003	Generic	HYDROCORT CRE 0.5%	
Hydrocortisone Cream 1%				
	70000048501	Generic	HYDROCORT CRE 1%	
	61269034356	Generic	HYDROCORT CRE 1%	
	51672201301	Generic	HYDROCORT CRE 1%	
	51672201302	Generic	HYDROCORT CRE 1%	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Hydrocortisone Cream 1%				
	51672206302	Generic	HYDROCORT CRE 1%	
	51672206902	Generic	HYDROCORT CRE 1%	
	24385002103	Generic	GNP HYDROCOR CRE 1% PLUS	
	45802043803	Generic	HYDROCORT CRE 1%	
	45802043805	Generic	HYDROCORT CRE 1%	
	49348052172	Generic	SM HYDROCORT CRE 1%	
	49348052178	Generic	SM HYDROCORT CRE 1%	
	00472034356	Generic	HYDROCORT CRE 1%	
	00113097364	Generic	ANTI-ITCH CRE 1%	
	00113054164	Generic	ANTI-ITCH CRE 1%	
Hydrocortisone Oint 1%				
	51672201802	Generic	HYDROCORT OIN 1%	
	61269034556	Generic	HYDROCORT OIN 1%	
	00113047164	Generic	ANTI-ITCH OIN 1%	
	00472034556	Generic	HYDROCORT OIN 1%	
	49348052272	Generic	SM HYDROCORT OIN 1%	
	45802027603	Generic	HYDROCORT OIN 1%	
	24385027603	Generic	HYDROCORT OIN 1%	
*COVID-19 Test Specimen Collection Kit***				
	99999099211	Generic	COVID-19 TES KIT SPECIMEN	
Glycerin Topical Liquid				
	10135010404	Generic	GLYCERIN LIQ	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Lactic Acid (Ammonium Lactate) Cream 12%				
	63044040420	Generic	AMMONIUM LAC CRE 12%	
Lactic Acid (Ammonium Lactate) Lotion 12%				
	63044048409	Generic	AMMONIUM LAC LOT 12%	
Capsaicin Cream 0.025%				
	00536252525	Generic	CAPSAICIN CRE 0.025%	
Capsaicin Cream 0.075%				
	00536111825	Generic	ARTH PAIN CRE 0.075%	
Dibucaine Oint 1%				
	00536121195	Generic	DIBUCAINE OIN 1%	
Permethrin Creme Rinse 1%				
	62011025501	Generic	LICE TRTMNT LIQ 1%	
	63736012002	Brand	NIX CREM RIN LIQ 1%	
	63736012003	Brand	NIX CREM RIN LIQ 1%	
	70000004101	Generic	LICE TREATMT LIQ 1%	
	46122010846	Generic	LICE TRTMNT LIQ 1%	
Permethrin Lotion 1%				
	49348015078	Generic	LICE TREATMT LOT 1%	
Pyreth-Piperonyl Butox Sham-Permeth Aero-Nit Remover Gel Kit				
	16500050492	Brand	RID COMPLETE KIT LICE	
	16500052990	Brand	RID COMPLETE KIT LICE	
Pyrethrins-Piperonyl Butoxide Liq 0.33-4%				
	74300000320	Brand	RID LIQ	
	74300000412	Brand	RID LIQ	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyrethrins-Piperonyl Butoxide Liq 0.33-4%				
	74300000414	Brand	RID LIQ	
Pyrethrins-Piperonyl Butoxide Shampoo 0.33-4%				
	70000054001	Generic	LICE KILLING SHA 0.33-4%	
	62011011902	Generic	LICE KILLING SHA 0.33-4%	
	24385011603	Generic	LICE TREATMT SHA 0.33-4%	
	49348044334	Generic	LICE KILLING SHA 0.33-4%	
	00904252820	Generic	LICE KILLING SHA 0.33-4%	
	00113086626	Generic	LICE KILLING SHA 0.33-4%	
Clotrimazole Vaginal Cream 1%				
	61269022041	Generic	CLOTRIMAZOLE CRE 1% VAG	
	61269022063	Generic	CLOTRIMAZOLE CRE 1% VAG	
	51672200306	Generic	CLOTRIMAZOLE CRE 1% VAG	
	49348079376	Generic	CLOTRIMAZOLE CRE 1% VAG	
	00472022041	Generic	CLOTRIMAZOLE CRE 1%	
	00472022063	Generic	CLOTRIMAZOLE CRE 1%	
Clotrimazole Vaginal Cream 2%				
	51672206200	Generic	3 DAY VAGINL CRE 2%	
	49348037954	Generic	3 DAY VAGINL CRE 2%	
	24385011009	Generic	CLOTRIMAZOLE CRE 3 DAY	
Miconazole Nitrate Vaginal Cream 2%				
	51672203506	Generic	MICONAZOLE CRE 2%	
	49348087277	Generic	MICONAZOLE 7 CRE 2%	
	61269073041	Generic	MICONAZOLE 7 CRE 2%	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Miconazole Nitrate Vaginal Cream 2%				
	61269073063	Generic	MICONAZOLE 7 CRE 2%	
	63868019845	Generic	MICONAZOLE 7 CRE 2%	
	70000000901	Generic	MICONAZOLE 7 CRE 2%	
	24385059029	Generic	MICONAZOLE 7 CRE 2%	
	49348053077	Generic	MICONAZOLE 7 CRE 2%	
	00113082529	Generic	MICONAZOLE 7 CRE 2%	
	00113021429	Generic	MICONAZOLE 7 CRE TUBE/KIT	
	00472073041	Generic	MICONAZOLE CRE 2%	
	00472073063	Generic	MICONAZOLE CRE 2%	
	00904773445	Generic	MICONAZOLE 7 CRE 2%	
Miconazole Nitrate Vaginal Supp 200 MG & 2% Cream 9 GM Kit				
	70000002501	Generic	MICONAZOLE 3 KIT COMBO PK	
	70000002502	Generic	MICONAZOLE 3 KIT COMBO PK	
	00904541501	Generic	MICONAZOLE 3 KIT COMBO PK	
	00113008100	Generic	MICONAZOLE 3 KIT COMBO PK	
	49348035543	Generic	MICONAZOLE 3 KIT COMBO PK	
	24385060602	Generic	MICONAZOLE 3 KIT COMBO PK	
Miconazole Nitrate Vaginal Suppos 100 MG				
	61269073607	Generic	MICONAZOLE 7 SUP 100MG	
	49348083361	Generic	SM MICON 7 SUP 100MG	
	00472173607	Generic	MICONAZOLE 7 SUP 100MG	
Levonorgestrel Tab 1.5 MG				
	50102011101	Generic	ECONTRA EZ TAB 1.5MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Levonorgestrel Tab 1.5 MG				
	50102011112	Generic	ECONTRA EZ TAB 1.5MG	
	50102021111	Generic	ECONTRA OS TAB 1.5MG	
	50102021113	Generic	ECONTRA OS TAB 1.5MG	
	50102021116	Generic	ECONTRA OS TAB 1.5MG	
	62756071860	Generic	OPCICON TAB 1.5MG	
	62756072060	Generic	MY CHOICE TAB 1.5MG	
	68180085211	Generic	MY WAY TAB 1.5MG	
	68180085212	Generic	MY WAY TAB 1.5MG	
	70700016406	Generic	LEVONORGESTR TAB 1.5MG	
	00536114263	Generic	LEVONORGESTR TAB 1.5MG	
	00113200312	Generic	OPTION 2 TAB 1.5MG	
	16714080901	Generic	NEW DAY TAB 1.5MG	
Cholecalciferol Cap 1.25 MG (50000 Unit)				
	70934067012	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
	67112090250	Generic	DECARA CAP 50000UNT	PA REQUIRED
	75834002001	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
	75834002012	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
	75834016712	Generic	WEEKLY-D CAP 50000UNT	PA REQUIRED
	75834016724	Generic	WEEKLY-D CAP 50000UNT	PA REQUIRED
	80681017400	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
	80681017401	Generic	VITAMIN D3 CAP 1.25MG	PA REQUIRED
	63044040201	Generic	VITAMIN D3 CAP 1.25MG	PA REQUIRED
	50090170000	Generic	D3-50 CAP 50000UNT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 1.25 MG (50000 Unit)				
	51663000507	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
	51663000500	Generic	OPTIMAL-D CAP 50000UNT	PA REQUIRED
	51663000501	Generic	OPTIMAL-D CAP 50000UNT	PA REQUIRED
	53191036201	Generic	D3-50 CAP 50000UNT	PA REQUIRED
	53191036212	Generic	D3-50 CAP 50000UNT	PA REQUIRED
	53191048901	Generic	D3-50 CAP 50000UNT	PA REQUIRED
	54569659000	Generic	VITAMIN D3 CAP 50000UNT	PA REQUIRED
Cholecalciferol Cap 10 MCG (400 Unit)				
	49614057878	Generic	VITAMIN D CAP 400UNIT	
	50428038354	Generic	CVS D3 CAP 10MCG	
	50428006520	Generic	CVS D3 CAP 400UNIT	
	88395001441	Generic	VITAMIN D3 CAP 400UNIT	
	96121000262	Generic	VITAMIN D CAP 400UNIT	
	41163049712	Generic	VITAMIN D3 CAP 400UNIT	
	05388099945	Generic	VITAMIN D3 CAP 400UNIT	
	11917005831	Generic	VITAMIN D CAP 400UNIT	
	11917007506	Generic	VITAMIN D CAP 400UNIT	
	11845011831	Generic	VITAMIN D3 CAP 400UNIT	
	11917013944	Generic	D3 CAP 400UNIT	
	11917011823	Generic	D3 CAP 400UNIT	
Cholecalciferol Cap 100 MCG (4000 Unit)				
	52569013401	Generic	VITAMIN D3 CAP 4000UNIT	
	10939052244	Brand	VITAMIN D3 CAP 4000UNIT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 125 MCG (5000 Unit)				
	51663000503	Generic	VITAMIN D CAP 5000UNIT	PA REQUIRED
	53191024401	Generic	VITAMIN D3 CAP 5000UNIT	
	53191024425	Generic	VITAMIN D3 CAP 5000UNIT	
	53191008201	Generic	VITAMIN D3 CAP 5000UNIT	
	53191008225	Generic	VITAMIN D3 CAP 5000UNIT	
	50268086811	Generic	VITAMIN D3 CAP US 5000U	
	50268086815	Generic	VITAMIN D3 CAP US 5000U	
	50428016516	Generic	CVS D3 CAP 5000UNIT	PA REQUIRED
	50428041389	Generic	CVS D3 CAP 5000UNIT	PA REQUIRED
	50428054089	Generic	CVS D3 CAP 5000UNIT	PA REQUIRED
	54629090980	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	88395014110	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	81131031271	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	80681013100	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	74312019377	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	74312029176	Generic	D3 MAXIMUM CAP 5000UNIT	PA REQUIRED
	69618004201	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	10542009090	Generic	DIALYVITE D CAP 5000UNIT	PA REQUIRED
	10939086944	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	03573015331	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	03573015334	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	03573015337	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	05388000927	Generic	D3 MAXIMUM CAP 5000UNIT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 125 MCG (5000 Unit)				
	00904598660	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11917013981	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11917014360	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11917011540	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11917017183	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11917014767	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11822517560	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11822549870	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11822511220	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11822490000	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11822489720	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11845015331	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	11845015339	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	41163048256	Generic	EQL VITAMIN CAP D3	PA REQUIRED
	30768029173	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	31604002621	Generic	VITAMIN D3 CAP 5000UNIT	PA REQUIRED
	33739000373	Generic	VITAMIN D-3 CAP 5000UNIT	PA REQUIRED
	40093010107	Generic	D3 HIGH POT CAP 125MCG	PA REQUIRED
	40093010323	Generic	D3 HIGH POT CAP 125MCG	PA REQUIRED
Cholecalciferol Cap 25 MCG (1000 Unit)				
	74312030413	Generic	D3 CAP 25MCG	PA REQUIRED
	74312015605	Generic	D3-1000 CAP 1000UNIT	PA REQUIRED
	74312015606	Generic	D3 CAP 25MCG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 25 MCG (1000 Unit)				
	88395001451	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	88395001452	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	87701041269	Generic	GNP D CAP 1000UNIT	PA REQUIRED
	81131007165	Generic	D3 CAP 1000UNIT	PA REQUIRED
	96295013867	Generic	VITAMIN D3 CAP 25MCG	PA REQUIRED
	50428067309	Generic	CVS D3 CAP 1000UNIT	PA REQUIRED
	50428031441	Generic	CVS D3 CAP 1000UNIT	PA REQUIRED
	50428015144	Generic	CVS D3 CAP 1000UNIT	PA REQUIRED
	54629009310	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	54629009330	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	54458032334	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	54458032344	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	51663000517	Generic	VITAMIN D3 CAP 25MCG	PA REQUIRED
	40093010306	Generic	D3 CAP 25MCG	PA REQUIRED
	40093010150	Generic	D3 CAP 1000UNIT	PA REQUIRED
	40093010230	Generic	D3 CAP 1000UNIT	PA REQUIRED
	37205074685	Generic	D3 CAP 1000UNIT	PA REQUIRED
	40985027415	Generic	D3-1000 CAP 1000UNIT	PA REQUIRED
	35515095723	Generic	QC VIT D3 CAP 1000UNIT	PA REQUIRED
	31604002511	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	31604002675	Generic	D3 CAP 1000UNIT	PA REQUIRED
	31604002676	Generic	D3 CAP 1000UNIT	PA REQUIRED
	31604002677	Generic	D3 CAP 1000UNIT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 25 MCG (1000 Unit)				
	31604004251	Generic	D3 CAP 25MCG	PA REQUIRED
	30768019969	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	30768019995	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	30768015605	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	11917020345	Generic	VITAMIN D3 CAP 25MCG	PA REQUIRED
	11917022014	Generic	FINEST NUTRT CAP VIT D3	PA REQUIRED
	11917019835	Generic	VITAMIN D3 CAP 25MCG	PA REQUIRED
	41163048255	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	41163049147	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11845014770	Generic	D 1000 CAP 1000UNIT	PA REQUIRED
	11845014772	Generic	D 1000 CAP 1000UNIT	PA REQUIRED
	11845014775	Generic	D 1000 CAP 1000UNIT	PA REQUIRED
	11917007630	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	11917014763	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917014764	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917014765	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917017181	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917017182	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917011810	Generic	D3 CAP 1000UNIT	PA REQUIRED
	11917011811	Generic	D3 CAP 1000UNIT	PA REQUIRED
	11917011820	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917011822	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917009247	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 25 MCG (1000 Unit)				
	11917009248	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	11917009905	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	11917010165	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	11917013940	Generic	D3 CAP 1000UNIT	PA REQUIRED
	05388000924	Generic	VITAMIN D-3 CAP 1000UNIT	PA REQUIRED
	05388062842	Generic	VITAMIN D-3 CAP 1000UNIT	PA REQUIRED
	00179844502	Generic	VITAMIN D CAP 1000UNIT	PA REQUIRED
	00179806002	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
	00005760880	Generic	VITAMIN D3 CAP 1000UNIT	PA REQUIRED
Cholecalciferol Cap 250 MCG (10000 Unit)				
	51663000508	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	54629009332	Generic	VITAMIN D3 CAP 10000	PA REQUIRED
	50428054266	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	63044401101	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	63044040101	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	88395001421	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	74312035873	Generic	D3 CAP 250MCG	PA REQUIRED
	76420011430	Generic	IS-D 10000 CAP 250MCG	PA REQUIRED
	67112090350	Generic	DECARA CAP 10000UNT	PA REQUIRED
	11917018556	Generic	D3 CAP 10000	PA REQUIRED
	11845016238	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED
	31604002888	Generic	VITAMIN D3 CAP 10000UNT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 350 MCG (14000 Unit)				
	51663000511	Brand	OPTIMAL D3 M CAP	PA REQUIRED
	51663000506	Brand	OPTIMAL D3 M CAP	PA REQUIRED
Cholecalciferol Cap 50 MCG (2000 Unit)				
	52569013400	Generic	HM VIT D3 CAP 2000UNIT	
	54569651500	Generic	VITAMIN D3 CAP 2000UNIT	
	54569651501	Generic	VITAMIN D3 CAP 2000UNIT	
	54458032345	Generic	VITAMIN D CAP 2000UNIT	
	54458032355	Generic	VITAMIN D CAP 2000UNIT	
	50428016183	Generic	CVS D3 CAP 2000UNIT	
	50428014677	Generic	CVS D3 CAP 2000UNIT	
	50428028110	Generic	CVS D3 CAP 50MCG	
	50428032343	Generic	CVS D3 CAP 50MCG	
	50268086711	Generic	VITAMIN D3 CAP 2000 UNT	
	50268086715	Generic	VITAMIN D3 CAP 2000 UNT	
	50090163700	Generic	VITAMIN D3 CAP 2000UNIT	
	50090163701	Generic	VITAMIN D3 CAP 2000UNIT	
	54629090970	Generic	VITAMIN D3 CAP 2000UNIT	
	69618000901	Generic	VITAMIN D3 CAP 2000UNIT	
	74312052807	Generic	D3 CAP 50MCG	
	74312017621	Generic	D3 CAP 50MCG	
	74312030698	Generic	D3 SUPER STR CAP 2000UNIT	
	74312019939	Generic	D3 CAP 2000UNIT	
	80681000900	Generic	VITAMIN D3 CAP 50MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 50 MCG (2000 Unit)				
	81131031282	Generic	D3 CAP 2000UNIT	
	81131000720	Generic	D3 CAP 2000UNIT	
	96295013869	Generic	VITAMIN D3 CAP 50MCG	
	96295013967	Generic	VITAMIN D3 CAP 50MCG	
	96619039391	Generic	KLS D3 CAP 50MCG	
	31604002585	Generic	VITAMIN D CAP 2000UNIT	
	31604002678	Generic	D3 CAP 2000UNIT	
	31604004073	Generic	D3 CAP 2000UNIT	
	35515096680	Generic	QC VIT D3 CAP 2000UNIT	
	33739000377	Generic	VITAMIN D3 CAP 50MCG	
	40985027416	Generic	D3 SUPER STR CAP 2000UNIT	
	40093014002	Generic	D3 HIGH POTE CAP 50MCG	
	37205074797	Generic	D3 SUPER STR CAP 2000UNIT	
	40093010231	Generic	VIT D3 HP CAP 2000UNIT	
	40093010373	Generic	D3 CAP 50MCG	
	40093010116	Generic	D3 CAP 2000UNIT	
	11917022013	Generic	VITAMIN D3 CAP 50MCG	
	11917019833	Generic	VITAMIN D3 CAP 2000UNIT	
	30768017621	Generic	VITAMIN D3 CAP 2000UNIT	
	30768019941	Generic	VITAMIN D3 CAP 50MCG	
	41163049713	Generic	VITAMIN D3 CAP 2000UNIT	
	43063070560	Generic	D3 SUPER STR CAP 2000UNIT	
	11845015010	Generic	VITAMIN D CAP 2000UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 50 MCG (2000 Unit)				
	11845015012	Generic	VITAMIN D CAP 2000UNIT	
	11845015015	Generic	VITAMIN D CAP 2000UNIT	
	11917008608	Generic	VITAMIN D3 CAP 2000UNIT	
	11822489990	Generic	RA VITAMIN CAP 2000UNIT	
	11822489670	Generic	PA VITAMIN CAP 2000UNIT	
	11822511200	Generic	VITAMIN D-3 CAP 2000UNIT	
	11822511210	Generic	VITAMIN D-3 CAP 2000UNIT	
	11822547890	Generic	VITAMIN D-3 CAP 2000UNIT	
	11917014678	Generic	VITAMIN D3 CAP 2000UNIT	
	11917014679	Generic	VITAMIN D3 CAP 2000UNIT	
	11917016632	Generic	VITAMIN D3 CAP 2000UNIT	
	11917017094	Generic	VITAMIN D3 CAP 2000UNIT	
	11917017096	Generic	VITAMIN D3 CAP 2000UNIT	
	11917013941	Generic	D3 CAP 2000UNIT	
	11917013942	Generic	D3 CAP 2000UNIT	
	11917013943	Generic	D3 CAP 2000UNIT	
	11917012697	Generic	VITAMIN D3 CAP 2000UNIT	
	11917012698	Generic	VITAMIN D3 CAP 2000UNIT	
	11917012703	Generic	VITAMIN D3 CAP 2000UNIT	
	11917010706	Generic	VITAMIN D3 CAP 2000UNIT	
	11917011818	Generic	D3 CAP 2000UNIT	
	11917011819	Generic	D3 CAP 2000UNIT	
	10939095376	Generic	SM VIT D3 CAP 50MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Cap 50 MCG (2000 Unit)				
	10939052444	Generic	VITAMIN D3 CAP 2000UNIT	
	00179805701	Generic	VITAMIN D3 CAP 2000UNIT	
	00179802401	Generic	VITAMIN D3 CAP 2000UNIT	
	00536379001	Generic	VITAMIN D3 CAP 2000UNIT	
Cholecalciferol Drops 50 MCG/0.028ML (2000 Unit/0.028ML)				
	88395001280	Brand	SUPER DAILY DRO D3	PA REQUIRED
	51228000009	Brand	DDROPS LIQ	PA REQUIRED
Cholecalciferol Oral Liquid 10 MCG/ML (400 Unit/ML)				
	53217006501	Generic	VITAMIN D DRO 400UNIT	
	50383091750	Generic	VITAMIN D DRO 400UNIT	
	54629077232	Generic	VITAMIN D3 DRO 400UNIT	
	54838000650	Generic	VITAMIN D3 DRO 10MCG/ML	
	84984000001	Generic	JUST D LIQ 400UNIT	
	76518005050	Generic	PEDIA D-VITE DRO 400UNIT	
	98302014002	Generic	D-VITAMIN DRO 400UNIT	
	69618001959	Generic	VITAMIN D DRO 400UNIT	
	71399740105	Generic	D-VITE PEDIA DRO 400UNIT	
	00536115680	Generic	D3 VITAMIN LIQ 400UNIT	
	00087086604	Brand	D-VI-SOL LIQ 400UNIT	
	00087086644	Brand	D-VI-SOL LIQ 400UNIT	
Cholecalciferol Tab 1.25 MG (50000 Unit)				
	96348000272	Generic	VITAMIN D3 TAB 50000UNI	
	57896081501	Generic	VITAMIN D3 TAB 50000UNI	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 1.25 MG (50000 Unit)				
	10542010002	Generic	VITAMIN D3 TAB 50000UNT	
	10542010008	Generic	VITAMIN D3 TAB 50000UNT	
Cholecalciferol Tab 10 MCG (400 Unit)				
	57896087401	Generic	VITAMIN D TAB 400UNIT	
	58526000550	Generic	D 400 TAB 400UNIT	
	58487001702	Generic	DELTA D3 TAB 400UNIT	
	58487001703	Generic	DELTA D3 TAB 400UNIT	
	50268086311	Generic	VITAMIN D3 TAB 400UNIT	
	50268086315	Generic	VITAMIN D3 TAB 400UNIT	
	52569013452	Generic	VITAMIN D3 TAB 400UNIT	
	77333094810	Generic	VITAMIN D3 TAB 400UNIT	
	77333094825	Generic	VITAMIN D3 TAB 400UNIT	
	79854001162	Generic	VITAMIN D3 TAB 400UNIT	
	96295012845	Generic	VITAMIN D3 TAB 400UNIT	
	94604010192	Generic	VITAMIN D TAB 400UNIT	
	74312001140	Generic	VITAMIN D TAB 400UNIT	
	10939052344	Generic	SM VITAMIN D TAB 400UNIT	
	00904582360	Generic	VITAMIN D3 TAB 400UNIT	
	00761005820	Generic	VITAMIN D3 TAB 400UNIT	
	43292055881	Generic	VITAMIN D TAB 400UNIT	
	43292056083	Generic	VITAMIN D TAB 400UNIT	
	43353046660	Generic	VITAMIN D TAB 400UNIT	
	43353046680	Generic	VITAMIN D TAB 400UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 10 MCG (400 Unit)				
	43353053332	Generic	VITAMIN D TAB 400UNIT	
	43353053353	Generic	VITAMIN D TAB 400UNIT	
	43353053360	Generic	VITAMIN D TAB 400UNIT	
	43353053380	Generic	VITAMIN D TAB 400UNIT	
	46122015978	Generic	VITAMIN D TAB 400UNIT	
	48433010901	Generic	VITAMIN D3 TAB 400UNIT	
	31604001688	Generic	VITAMIN D TAB 400UNIT	
	16563011302	Generic	VITAMIN D TAB 400UNIT	
	37205042678	Generic	D 400 TAB 400UNIT	
	40093010618	Generic	D3 TAB 400UNIT	
	40985022661	Generic	VITAMIN D3 TAB 400UNIT	
	35046000215	Generic	VITAMIN D3 TAB 400UNIT	
	35515095917	Generic	QC VIT D3 TAB 400UNIT	
	31604002671	Generic	VITAMIN D3 TAB 400UNIT	
Cholecalciferol Tab 100 MCG (4000 Unit)				
	13349001023	Brand	THERA-D TAB 4000UNIT	
Cholecalciferol Tab 125 MCG (5000 Unit)				
	68071099404	Generic	VITAMIN D TAB 5000UNIT	PA REQUIRED
	94604010199	Generic	VITAMIN D TAB 5000IU	PA REQUIRED
	96295012846	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	87701040752	Generic	GNP VIT D TAB 5000UNIT	PA REQUIRED
	96295014036	Generic	VITAMIN D3 TAB 125MCG	PA REQUIRED
	50268086611	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 125 MCG (5000 Unit)				
	50268086615	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	50428057523	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	58487003702	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	54629794101	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	35515098643	Generic	QC VIT D3 TAB 5000UNIT	PA REQUIRED
	37205024678	Generic	VITAMIN D-3 TAB 5000UNIT	PA REQUIRED
	35046000218	Generic	VITAMIN D-3 TAB 5000UNIT	PA REQUIRED
	40985027288	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	43292056338	Generic	VITAMIN D3 TAB 5000UNIT	PA REQUIRED
	07610017840	Generic	VITAMIN D-3 TAB 5000UNIT	PA REQUIRED
Cholecalciferol Tab 20 MCG (800 Unit)				
	43913020390	Generic	VITAMIN D3 TAB 20MCG	
Cholecalciferol Tab 25 MCG (1000 Unit)				
	57896087601	Generic	VITAMIN D TAB 1000UNIT	
	58487002371	Generic	VITAMIN D3 TAB 1000UNIT	
	58487002373	Generic	VITAMIN D3 TAB 1000UNIT	
	50090138101	Generic	VITAMIN D3 TAB 1000UNIT	
	49348087410	Generic	VITAMIN D3 TAB 1000UNIT	
	52569013458	Generic	HM VITAMIN D TAB 1000UNIT	
	52569014194	Generic	HM VITAMIN D TAB 25MCG	
	54569644300	Generic	VITAMIN D3 TAB 1000UNIT	
	54569644301	Generic	VITAMIN D3 TAB 1000UNIT	
	54629005024	Generic	VITAMIN D3 TAB 1000UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 25 MCG (1000 Unit)				
	51645091999	Generic	VITAMIN D3 TAB 1000UNIT	
	87701040749	Generic	GNP VIT D TAB 1000UNIT	
	87701040750	Generic	GNP VIT D3 TAB 1000UNIT	
	96295012848	Generic	VITAMIN D3 TAB 1000UNIT	
	94604010195	Generic	VITAMIN D TAB 1000UNIT	
	96121000261	Generic	VITAMIN D TAB 1000UNIT	
	96295012844	Generic	VITAMIN D3 TAB 1000UNIT	
	79854005023	Generic	VITAMIN D3 TAB 1000UNIT	
	80681016800	Generic	VITAMIN D3 TAB 25MCG	
	80681016801	Generic	VITAMIN D3 TAB 25MCG	
	80681016900	Generic	VITAMIN D3 TAB 25MCG	
	71791000373	Generic	VITAMIN D3 TAB 1000UNIT	
	43353062460	Generic	VITAMIN D TAB 1000UNIT	
	43292056299	Generic	VITAMIN D TAB 1000UNIT	
	43292056286	Generic	VITAMIN D TAB 1000UNIT	
	48433010401	Generic	VITAMIN D3 TAB 1000UNIT	
	40985027292	Generic	VITAMIN D TAB 1000UNIT	
	40985027062	Generic	VITAMIN D3 TAB 1000UNIT	
	40985027139	Generic	VITAMIN D3 TAB 1000UNIT	
	35515098641	Generic	QC VIT D3 TAB 1000UNIT	
	37205024897	Generic	VITAMIN D TAB 1000UNIT	
	37205024898	Generic	VITAMIN D TAB 1000UNIT	
	37864091901	Generic	VITAMIN D TAB 1000UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 25 MCG (1000 Unit)				
	35046000105	Generic	VITAMIN D3 TAB 1000UNIT	
	35356056300	Generic	VITAMIN D3 TAB 1000UNIT	
	31604002683	Generic	D3 TAB 1000UNIT	
	31604002793	Generic	D3 TAB 1000UNIT	
	33261076000	Generic	VITAMIN D TAB 1000UNIT	
	31604004069	Generic	D3 TAB 1000UNIT	
	31604004070	Generic	D3 TAB 1000UNIT	
	31604001870	Generic	VITAMIN D TAB 1000UNIT	
	24385065578	Generic	GNP VIT D TAB 1000UNIT	
	20555003300	Generic	VITAMIN D3 TAB 25MCG	
	10006070033	Generic	VITAMIN-D3 TAB 25MCG	
	10939052744	Generic	VITAMIN D3 TAB 1000UNIT	
	10939090444	Generic	SM VITAMIND3 TAB 1000UNIT	
	11822044719	Generic	VITAMIN D-3 TAB 1000UNIT	
	11822002601	Generic	VITAMIN D-3 TAB 1000UNIT	
	11822026010	Generic	VITAMIN D-3 TAB 1000UNIT	
	11822334220	Generic	VITAMIN D-3 TAB 1000UNIT	
	11822447190	Generic	VITAMIN D-3 TAB 1000UNIT	
	00904582460	Generic	VITAMIN D3 TAB 1000UNIT	
	00904582461	Generic	VITAMIN D3 TAB 1000UNIT	
	00904582489	Generic	VITAMIN D3 TAB 1000UNIT	
	00904582493	Generic	VITAMIN D3 TAB 1000UNIT	
	11822967310	Generic	VITAMIN D-3 TAB 1000UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 25 MCG (1000 Unit)				
	00761009840	Generic	VITAMIN D3 TAB 1000UNIT	
	00536333401	Generic	VITAMIN D TAB 1000UNIT	
Cholecalciferol Tab 250 MCG (10000 Unit)				
	76420011630	Generic	VITAMIN D3 TAB 10000UNT	
	96295012564	Generic	VITAMIN D3 TAB 10000UNT	
	40985027504	Generic	VITAMIN D3 TAB 10000UNT	
Cholecalciferol Tab 50 MCG (2000 Unit)				
	94604010198	Generic	VITAMIN D TAB 2000UNIT	
	96295012847	Generic	VITAMIN D3 TAB 2000UNIT	
	96295012795	Generic	VITAMIN D3 TAB 2000UNIT	
	87701040751	Generic	VITAMIN D3 TAB 2000UNIT	
	80681017000	Generic	VITAMIN D3 TAB 50MCG	
	80681013200	Generic	VITAMIN D TAB 50MCG	
	51645092199	Generic	VITAMIN D3 TAB 2000UNIT	
	54629041120	Generic	VITAMIN D3 TAB 2000UNIT	
	50268086511	Generic	VITAMIN D3 TAB 2000UNIT	
	50268086515	Generic	VITAMIN D3 TAB 2000UNIT	
	58526000542	Generic	D 2000 TAB 2000UNIT	
	40985027111	Generic	D3 TAB 2000UNIT	
	37864092001	Generic	VITAMIN D TAB 2000UNIT	
	31604004071	Generic	D3 2000 TAB 2000UNIT	
	31604002758	Generic	D3 TAB 2000UNIT	
	31604002673	Generic	D3 TAB 2000UNIT	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cholecalciferol Tab 50 MCG (2000 Unit)				
	31604002674	Generic	D3 TAB 2000UNIT	
	31604002516	Generic	VITAMIN D3 TAB 2000UNIT	
	37205024798	Generic	VITAMIN D3 TAB 2000UNIT	
	35515096685	Generic	QC VIT D3 TAB 2000UNIT	
	13349001045	Generic	THERA-D TAB 2000UNIT	
	43292056371	Generic	VITAMIN D3 TAB 2000UNIT	
	43353085960	Generic	VITAMIN D-3 TAB 2000UNIT	
	43353085980	Generic	VITAMIN D-3 TAB 2000UNIT	
	13349001022	Generic	THERA-D TAB 2000UNIT	
	00904615760	Generic	VITAMIN D TAB 2000UNIT	
	07610016840	Generic	VITAMIN D-3 TAB 2000UNIT	
	10006070162	Generic	VITAMIN D3 TAB 2000UNIT	
Cholecalciferol Tab 75 MCG (3000 Unit)				
	58487003691	Generic	VITAMIN D3 TAB 3000UNIT	PA REQUIRED
Cyanocobalamin Cap 1000 MCG				
	31604002732	Generic	B-12 CAP 1000MCG	
	31604004130	Generic	B12 CAP 1000MCG	
Cyanocobalamin Cap 3000 MCG				
	31604002720	Generic	B-12 CAP 3000MCG	
Cyanocobalamin Cap 5000 MCG				
	31604002886	Generic	B-12 CAP 5000MCG	
Cyanocobalamin Lozenge 1000 MCG				
	31604002717	Generic	B-12 LOZ 1000MCG	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin SL Tab 1000 MCG				
	58765000054	Generic	VITAMIN B-12 SUB 1000MCG	
	63629438001	Generic	VITAMIN B-12 SUB 1000MCG	
	63629438002	Generic	VITAMIN B-12 SUB 1000MCG	
	63629438003	Generic	VITAMIN B-12 SUB 1000MCG	
	63629438004	Generic	VITAMIN B-12 SUB 1000MCG	
	63629438005	Generic	VITAMIN B-12 SUB 1000MCG	
	88395002432	Generic	B-12-SL SUB 1000MCG	
	88395002434	Generic	B-12-SL SUB 1000MCG	
	35046001130	Generic	B-12 SUB 1000MCG	
	43292055992	Generic	VITAMIN B-12 SUB 1000MCG	
	11845009661	Generic	VITAMIN B-12 SUB 1000MCG	
	11845009662	Generic	B-12 SUB 1000MCG	
Cyanocobalamin Tab 100 MCG				
	80681007100	Generic	VITAMIN B-12 TAB 100MCG	
	74312001170	Generic	VITAMIN B-12 TAB 100MCG	
	57896085601	Generic	VITAMIN B-12 TAB 100MCG	
	50268085211	Generic	VITAMIN B12 TAB 100MCG	
	50268085215	Generic	VITAMIN B12 TAB 100MCG	
	54629005801	Generic	VITAMIN B-12 TAB 100MCG	
	11845005741	Generic	B-12 TAB 100MCG	
	11917007928	Generic	VITAMIN B-12 TAB 100MCG	
	11917003929	Generic	VITAMIN B12 TAB 100MCG	
	11917017170	Generic	VITAMIN B12 TAB 100MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 100 MCG				
	11917014672	Generic	B-12 TAB 100MCG	
	10006073035	Generic	VITAMIN B12 TAB 100MCG	
	11822003360	Generic	RA VIT B-12 TAB 100MCG	
	00536354201	Generic	VITAMIN B-12 TAB 100MCG	
	00761037220	Generic	VITAMIN B-12 TAB 100MCG	
	00904113213	Generic	VITAMIN B-12 TAB 100MCG	
	43292055566	Generic	VITAMIN B-12 TAB 100MCG	
	43292056358	Generic	VITAMIN B-12 TAB 100MCG	
	49348039210	Generic	SM VIT B-12 TAB 100MCG	
	35046000127	Generic	B-12 TAB 100MCG	
Cyanocobalamin Tab 1000 MCG				
	54629058605	Generic	VITAMIN B-12 TAB 1000MCG	
	54569288100	Generic	VITAMIN B-12 TAB 1000MCG	
	50268085511	Generic	VITAMIN B-12 TAB 1000MCG	
	50268085515	Generic	VITAMIN B-12 TAB 1000MCG	
	50428029936	Generic	VITAMIN B12 TAB 1000MCG	
	50428037624	Generic	VITAMIN B12 TAB 1000MCG	
	57896089601	Generic	VITAMIN B-12 TAB 1000MCG	
	54738000301	Generic	VITAMIN B-12 TAB 1000MCG	
	54738000333	Generic	VITAMIN B-12 TAB 1000MCG	
	54738000350	Generic	VITAMIN B-12 TAB 1000MCG	
	55154681100	Generic	VITAMIN B-12 TAB 1000MCG	
	74312001380	Generic	VITAMIN B-12 TAB 1000MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 1000 MCG				
	68094011561	Generic	VITAMIN B-12 TAB 1000MCG	
	69618003701	Generic	VITAMIN B-12 TAB 1000MCG	
	77333093810	Generic	VITAMIN B-12 TAB 1000MCG	
	77333093825	Generic	VITAMIN B-12 TAB 1000MCG	
	74312052805	Generic	VITAMIN B-12 TAB 1000MCG	
	96295013587	Generic	VITAMIN B-12 TAB 1000MCG	
	94604010450	Generic	VITAMIN B-12 TAB 1000MCG	
	33261098000	Generic	VITAMIN B-12 TAB 1000MCG	
	33261098030	Generic	VITAMIN B-12 TAB 1000MCG	
	33261098060	Generic	VITAMIN B-12 TAB 1000MCG	
	33261098090	Generic	VITAMIN B-12 TAB 1000MCG	
	37864091401	Generic	VITAMIN B-12 TAB 1000MCG	
	40093010137	Generic	B-12 TAB 1000MCG	
	40093010602	Generic	B-12 TAB 1000MCG	
	20555000600	Generic	VITAMIN B-12 TAB 1000MCG	
	20555001600	Generic	VITAMIN B-12 TAB 1000MCG	
	30768060693	Generic	VITAMIN B-12 TAB 1000MCG	
	41163049000	Generic	EQL B-12 TAB 1000MCG	
	00904421713	Generic	VITAMIN B-12 TAB 1000MCG	
	00536355601	Generic	VITAMIN B-12 TAB 1000MCG	
	00179805802	Generic	VITAMIN B-12 TAB 1000MCG	
	10006073043	Generic	VITAMIN B-12 TAB 1000MCG	
	10006070165	Generic	VITAMIN B-12 TAB 1000MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 1000 MCG				
	10006070163	Generic	VITAMIN B-12 TAB 1000MCG	
	10006070022	Generic	VITAMIN B-12 TAB 1000MCG	
	10135065201	Generic	B-12 TAB 1000MCG	
	10135065250	Generic	B-12 TAB 1000MCG	
	10135065263	Generic	B-12 TAB 1000MCG	
	11845006935	Generic	VITAMIN B-12 TAB 1000MCG	
Cyanocobalamin Tab 2000 MCG				
	50428204743	Generic	VITAMIN B-12 TAB 2000MCG	
	11845007625	Generic	B-12 TAB 2000MCG	
Cyanocobalamin Tab 250 MCG				
	50268085311	Generic	VITAMIN B-12 TAB 250MCG	
	50268085315	Generic	VITAMIN B-12 TAB 250MCG	
	54629058001	Generic	VITAMIN B-12 TAB 250MCG	
	54738000133	Generic	VITAMIN B-12 TAB 250MCG	
	94604010430	Generic	VITAMIN B-12 TAB 250MCG	
	80681016500	Generic	VITAMIN B-12 TAB 250MCG	
	74312000660	Generic	VITAMIN B-12 TAB 250MCG	
	11845005751	Generic	B-12 TAB 250MCG	
	00904421813	Generic	VITAMIN B-12 TAB 250MCG	
	43292012349	Generic	VITAMIN B-12 TAB 250MCG	
	31604001289	Generic	VITAMIN B-12 TAB 250MCG	
	30768004067	Generic	VITAMIN B-12 TAB 250MCG	
	30768003989	Generic	VITAMIN B-12 TAB 250MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 250 MCG				
	35046000128	Generic	B-12 TAB 250MCG	
Cyanocobalamin Tab 2500 MCG				
	31604002718	Generic	B-12 TAB 2500MCG	
Cyanocobalamin Tab 50 MCG				
	11845005731	Generic	B-12 TAB 50MCG	
	11917003928	Generic	VITAMIN B-12 TAB 50MCG	
Cyanocobalamin Tab 500 MCG				
	74312001370	Generic	VITAMIN B-12 TAB 500MCG	
	80681007200	Generic	VITAMIN B-12 TAB 500MCG	
	80681012800	Generic	VITAMIN B-12 TAB 500MCG	
	78742000986	Generic	VITAMIN B12 TAB 500MCG	
	77333093710	Generic	VITAMIN B-12 TAB 500MCG	
	77333093725	Generic	VITAMIN B-12 TAB 500MCG	
	94604010440	Generic	VITAMIN B-12 TAB 500MCG	
	96295012778	Generic	VITAMIN B-12 TAB 500MCG	
	96295013675	Generic	VITAMIN B12 TAB 500MCG	
	87701040731	Generic	GNP VIT B-12 TAB 500MCG	
	54738000201	Generic	VITAMIN B-12 TAB 500MCG	
	54738000233	Generic	VITAMIN B-12 TAB 500MCG	
	57896088601	Generic	VITAMIN B-12 TAB 500MCG	
	54629058501	Generic	VITAMIN B-12 TAB 500MCG	
	52569014185	Generic	HM VIT B12 TAB 500MCG	
	52569013439	Generic	HM VIT B12 TAB 500MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 500 MCG				
	50268085411	Generic	VITAMIN B12 TAB 500MCG	
	50268085415	Generic	VITAMIN B12 TAB 500MCG	
	50428005345	Generic	B-12 TAB 500MCG	
	49348082110	Generic	SM VIT B-12 TAB 500MCG	
	49614065478	Generic	VITAMIN B-12 TAB 500MCG	
	11917003940	Generic	VITAMIN B-12 TAB 500MCG	
	11917007929	Generic	VITAMIN B-12 TAB 500MCG	
	11917007930	Generic	B-12 TAB 500MCG	
	11917006545	Generic	VITAMIN B-12 TAB 500MCG	
	11845005761	Generic	B-12 TAB 500MCG	
	11917013971	Generic	B-12 TAB 500MCG	
	11917013972	Generic	B-12 TAB 500MCG	
	10006070023	Generic	VITAMIN B12 TAB 500MCG	
	10006070164	Generic	VITAMIN B-12 TAB 500MCG	
	10006073036	Generic	VITAMIN B-12 TAB 500MCG	
	10939050444	Generic	SM VIT B12 TAB 500MCG	
	00904320713	Generic	VITAMIN B-12 TAB 500MCG	
	00761044020	Generic	VITAMIN B-12 TAB 500MCG	
	00536355101	Generic	VITAMIN B-12 TAB 500MCG	
	35046000129	Generic	B-12 TAB 500MCG	
	35515095912	Generic	QC VIT B12 TAB 500MCG	
	40093010600	Generic	B-12 TAB 500MCG	
	40093010646	Generic	B-12 TAB 500MCG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Cyanocobalamin Tab 500 MCG				
	40985022309	Generic	B-12 TAB 500MCG	
	41163023154	Generic	VITAMIN B-12 TAB 500MCG	
	37864091301	Generic	VITAMIN B-12 TAB 500MCG	
	37205049178	Generic	VITAMIN B12 TAB 500MCG	
	30768000576	Generic	VITAMIN B-12 TAB 500MCG	
	30768012608	Generic	VITAMIN B-12 TAB 500MCG	
	31604001290	Generic	VITAMIN B-12 TAB 500MCG	
	31604001079	Generic	VITAMIN B-12 TAB 500MCG	
	24385011778	Generic	GNP VIT B-12 TAB 500MCG	
	20555003200	Generic	VITAMIN B-12 TAB 500MCG	
	43353063160	Generic	VITAMIN B-12 TAB 500MCG	
	43353063180	Generic	VITAMIN B-12 TAB 500MCG	
	48107004899	Generic	VITAMIN B-12 TAB 500MCG	
Ergocalciferol Soln 200 MCG/ML (8000 Unit/ML)				
	58980050021	Generic	ERGOCALCIFER DRO 8000/ML	
	75834001060	Generic	ERGOCALCIFER SOL 8000/ML	
	69543023460	Generic	ERGOCALCIFER SOL 8000/ML	
	69367028302	Generic	ERGOCALCIFER DRO 8000/ML	
	47781064726	Generic	ERGOCALCIFER DRO 8000/ML	
	43199001560	Generic	ERGOCALCIFER SOL 8000/ML	
	13811065560	Generic	ERGOCALCIFER DRO 8000/ML	
	39328035760	Generic	CALCIDOL DRO 8000/ML	
	00091415060	Generic	CALCIFEROL DRO 8000/ML	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Niacin Cap ER 250 MG				
	49483001401	Generic	NIACIN CAP 250MG SR	
	49483001410	Generic	NIACIN CAP 250MG SR	
Niacin Cap ER 500 MG				
	49483001801	Generic	NIACIN CAP 500MG SR	
Pyridoxine HCl Tab 100 MG				
	49614059378	Generic	VITAMIN B-6 TAB 100MG	
	49999080330	Generic	VITAMIN B-6 TAB 100MG	
	50428028945	Generic	CVS B6 TAB 100MG	
	50268085911	Generic	VITAMIN B6 TAB 100MG	
	50268085915	Generic	VITAMIN B6 TAB 100MG	
	50428043019	Generic	CVS B6 TAB 100MG	
	52569013440	Generic	HM VIT B6 TAB 100MG	
	52959021500	Generic	VITAMIN B-6 TAB 100MG	
	52959021520	Generic	VITAMIN B-6 TAB 100MG	
	52959021530	Generic	VITAMIN B-6 TAB 100MG	
	54569259800	Generic	VITAMIN B-6 TAB 100MG	
	58487000881	Generic	VITAMIN B-6 TAB 100MG	
	58487000882	Generic	VITAMIN B-6 TAB 100MG	
	57896085401	Generic	VITAMIN B-6 TAB 100MG	
	54629063001	Generic	VITAMIN B-6 TAB 100MG	
	62107006101	Generic	VITAMIN B-6 TAB 100MG	
	74312000650	Generic	VITAMIN B-6 TAB 100MG	
	74970005285	Generic	YL VIT B-6 TAB 100MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyridoxine HCl Tab 100 MG				
	80681002500	Generic	VITAMIN B-6 TAB 100MG	
	78742043574	Generic	B6 NATURAL TAB 100MG	
	87701040730	Generic	GNP VIT B-6 TAB 100MG	
	96295013883	Generic	VITAMIN B6 TAB 100MG	
	96295012780	Generic	VITAMIN B-6 TAB 100MG	
	94604010410	Generic	VITAMIN B-6 TAB 100MG	
	00179806102	Generic	VITAMIN B-6 TAB 100MG	
	00536440901	Generic	VITAMIN B-6 TAB 100MG	
	00904051860	Generic	VITAMIN B-6 TAB 100MG	
	10939050644	Generic	SM VIT B6 TAB 100MG	
	10939089944	Generic	SM VITAMI B6 TAB 100MG	
	10135014501	Generic	PYRIDOXINE TAB 100MG	
	10135014510	Generic	PYRIDOXINE TAB 100MG	
	11917013973	Generic	VITAMIN B-6 TAB 100MG	
	11917013989	Generic	VITAMIN B-6 TAB 100MG	
	11845005711	Generic	B-6 TAB 100MG	
	11822517540	Generic	RA VIT B-6 TAB 100MG	
	11917007926	Generic	B-6 TAB 100MG	
	11917007957	Generic	B-6 TAB 100MG	
	11917003939	Generic	VITAMIN B-6 TAB 100MG	
	11917006544	Generic	VITAMIN B-6 TAB 100MG	
	11917003926	Generic	VITAMIN B-6 TAB 100MG	
	40093010128	Generic	B-6 TAB 100MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyridoxine HCl Tab 100 MG				
	37864091001	Generic	VITAMIN B-6 TAB 100MG	
	37205054378	Generic	B-6 TAB 100MG	
	41163026606	Generic	EQL B-6 TAB 100MG	
	40985021196	Generic	B-6 TAB 100MG	
	35515095913	Generic	QC VIT B6 TAB 100MG	
	35046000123	Generic	VITAMIN B-6 TAB 100MG	
	33358035800	Generic	VITAMIN B-6 TAB 100MG	
	33358035830	Generic	VITAMIN B-6 TAB 100MG	
	33358035860	Generic	VITAMIN B-6 TAB 100MG	
	33261098560	Generic	PYRIDOXINE TAB 100MG	
	33261098590	Generic	PYRIDOXINE TAB 100MG	
	24385011578	Generic	GNP VIT B-6 TAB 100MG	
	31604001285	Generic	VITAMIN B-6 TAB 100MG	
	30768012590	Generic	VITAMIN B-6 TAB 100MG	
	30768000571	Generic	VITAMIN B-6 TAB 100MG	
	48107004900	Generic	VITAMIN B-6 TAB 100MG	
	49348039410	Generic	SM VIT B-6 TAB 100MG	
Pyridoxine HCl Tab 50 MG				
	94604010400	Generic	VITAMIN B-6 TAB 50MG	
	77333094010	Generic	VITAMIN B-6 TAB 50MG	
	77333094025	Generic	VITAMIN B-6 TAB 50MG	
	74312001160	Generic	VITAMIN B-6 TAB 50MG	
	72789016030	Generic	PYRIDOXINE TAB 50MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyridoxine HCl Tab 50 MG				
	68071133800	Generic	VITAMIN B-6 TAB 50MG	
	66267021430	Generic	VITAMIN B-6 TAB 50MG	
	63629366001	Generic	PYRIDOXINE TAB 50MG	
	63629366002	Generic	PYRIDOXINE TAB 50MG	
	63629366003	Generic	PYRIDOXINE TAB 50MG	
	55289040195	Generic	PYRIDOXINE TAB 50MG	
	55289050401	Generic	PYRIDOXINE TAB 50MG	
	55289050430	Generic	PYRIDOXINE TAB 50MG	
	57896085301	Generic	VITAMIN B-6 TAB 50MG	
	58487000871	Generic	VITAMIN B 6 TAB 50MG	
	58487000872	Generic	VITAMIN B 6 TAB 50MG	
	61748009501	Generic	PYRIDOXINE TAB 50MG	
	61748009510	Generic	PYRIDOXINE TAB 50MG	
	61748009530	Generic	PYRIDOXINE TAB 50MG	
	54569126900	Generic	VITAMIN B-6 TAB 50MG	
	54569126901	Generic	VITAMIN B-6 TAB 50MG	
	54348049530	Generic	VITAMIN B-6 TAB 50MG	
	54629006301	Generic	VITAMIN B-6 TAB 50MG	
	54629006310	Generic	VITAMIN B-6 TAB 50MG	
	52959021800	Generic	PYRIDOXINE TAB 50MG	
	52959021802	Generic	PYRIDOXINE TAB 50MG	
	52959021820	Generic	PYRIDOXINE TAB 50MG	
	52959021830	Generic	PYRIDOXINE TAB 50MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyridoxine HCl Tab 50 MG				
	52959021850	Generic	PYRIDOXINE TAB 50MG	
	52959021860	Generic	PYRIDOXINE TAB 50MG	
	50268085811	Generic	VITAMIN B6 TAB 50MG	
	50268085815	Generic	VITAMIN B6 TAB 50MG	
	49999089430	Generic	PYRIDOXINE TAB 50MG	
	50090025300	Generic	VITAMIN B-6 TAB 50MG	
	50090025301	Generic	VITAMIN B-6 TAB 50MG	
	43063094430	Generic	PYRIDOXINE TAB 50MG	
	30768012587	Generic	VITAMIN B-6 TAB 50MG	
	30768003987	Generic	VITAMIN B-6 TAB 50MG	
	31604001284	Generic	VITAMIN B-6 TAB 50MG	
	33358035700	Generic	VITAMIN B-6 TAB 50MG	
	33358035701	Generic	VITAMIN B-6 TAB 50MG	
	33358035730	Generic	VITAMIN B-6 TAB 50MG	
	33358035760	Generic	VITAMIN B-6 TAB 50MG	
	33358035780	Generic	VITAMIN B-6 TAB 50MG	
	33358035790	Generic	VITAMIN B-6 TAB 50MG	
	35046000122	Generic	B-6 TAB 50MG	
	37864090901	Generic	VITAMIN B-6 TAB 50MG	
	11917003925	Generic	VITAMIN B-6 TAB 50MG	
	11845005701	Generic	B-6 TAB 50MG	
	11822880100	Generic	RA VIT B-6 TAB 50MG	
	10135013910	Generic	PYRIDOXINE TAB 50MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Pyridoxine HCl Tab 50 MG				
	10135013930	Generic	PYRIDOXINE TAB 50MG	
	10006073016	Generic	VITAMIN B-6 TAB 50MG	
	10006073017	Generic	VITAMIN B6 TAB 50MG	
	10006070012	Generic	VITAMIN B-6 TAB 50MG	
	11694096301	Generic	NEURO-K-50 TAB	
	10135016713	Generic	PYRIDOXINE TAB 50MG	
	00904052060	Generic	VITAMIN B-6 TAB 50MG	
	00761043620	Generic	VITAMIN B-6 TAB 50MG	
	00536440801	Generic	VITAMIN B-6 TAB 50MG	
	00536440810	Generic	VITAMIN B-6 TAB 50MG	
	00440255730	Generic	PYRIDOXINE TAB 50MG	
	00440855730	Generic	PYRIDOXINE TAB 50MG	
	00440855792	Generic	PYRIDOXINE TAB 50MG	
Riboflavin Tab 100 MG				
	50428048229	Generic	VITAMIN B-2 TAB 100MG	
	54629009501	Generic	VITAMIN B-2 TAB 100MG	
	58487000601	Generic	VITAMIN B-2 TAB 100MG	
	74312000640	Generic	VITAMIN B-2 TAB 100MG	
	88395002211	Generic	B-2 TAB 100MG	
	07610003220	Generic	VITAMIN B-2 TAB 100MG	
	11845007141	Generic	B-2 TAB 100MG	
	37864094101	Generic	VITAMIN B-2 TAB 100MG	
	40093010661	Generic	B-2 TAB 100MG	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Riboflavin Tab 100 MG				
	40093010589	Generic	B-2 TAB 100MG	
	30768003986	Generic	B2 TAB 100MG	
	43292056000	Generic	VITAMIN B-2 TAB 100MG	
	48107012169	Generic	VITAMIN B-2 TAB 100MG	
Vitamin A Cap 2250 MCG (7500 Unit)				
	00904762960	Brand	VIT A FISH CAP 7500UNIT	PA REQUIRED
Vitamin A Cap 2400 MCG (8000 Unit)				
	78742043564	Generic	VITAMIN A CAP 8000UNIT	PA REQUIRED
	54629011001	Generic	VITAMIN A CAP 8000UNIT	PA REQUIRED
	50428033650	Generic	CVS VIT A CAP 8000UNIT	PA REQUIRED
	11917003945	Generic	VITAMIN A CAP 8000UNIT	PA REQUIRED
	41415000077	Generic	PX VITAMIN A CAP 8000UNIT	PA REQUIRED
	31604001306	Generic	VITAMIN A CAP 8000UNIT	PA REQUIRED
	24385028178	Generic	VITAMIN A CAP 8000UNIT	PA REQUIRED
Vitamin A Cap 3 MG (10000 Unit)				
	50268084911	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	50268084915	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	50428199216	Generic	CVS VIT A CAP 10000UNT	PA REQUIRED
	88395001121	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	94604010142	Generic	NATURAL VITA CAP A	PA REQUIRED
	87701040725	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	74312001020	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	74312006480	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
Vitamin A Cap 3 MG (10000 Unit)				
	30768003978	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	30768004064	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	40985021464	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	35046000106	Generic	A-10000 CAP	PA REQUIRED
	48107004893	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	11845005921	Generic	A-10000 CAP	PA REQUIRED
	11845005931	Generic	A-10000 CAP	PA REQUIRED
	11822880000	Generic	RA VITAMIN A CAP 10000UNT	PA REQUIRED
	00761043310	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
	00904208560	Generic	VITAMIN A CAP 10000UNT	PA REQUIRED
Vitamin A Cap 7.5 MG (25000 Unit)				
	88395001131	Generic	VITAMIN A CAP 25000UNT	PA REQUIRED
	88395001161	Generic	VITAMIN A CAP 25000UNT	PA REQUIRED
	53191001001	Generic	A-25 CAP 25000UNT	PA REQUIRED
	53191021801	Generic	A-25 CAP 25000UNT	PA REQUIRED
Vitamin E Soln 15 Unit/0.3ML (50 Unit/ML)				
	54162072512	Generic	VITAMIN E DRO 15/0.3ML	PA REQUIRED
Vitamin E Soln 6.75 MG/0.3ML (15 Unit/0.3ML)				
	54838000530	Generic	AQUEOUS E DRO 50UNT/ML	PA REQUIRED
	71321080230	Generic	VITAMIN E DRO 15/0.3ML	PA REQUIRED
	39328001030	Generic	SOLUVITA E SOL 50UNT/ML	PA REQUIRED
*Multiple Vitamins w/ Minerals Cap**				
	71791000105	Brand	NUTRIENTS CAP ANTIOXID	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	74312007420	Generic	ANTIOXIN CAP 4000	
	74312004150	Generic	ANTI-OXIDANT CAP FORMULA	
	71149000033	Brand	ACTIVNUTRIEN CAP	PA REQUIRED
	71149000446	Brand	ACTIVNUTRIEN CAP	PA REQUIRED
	68176000011	Brand	DEKAS PLUS CAP	PA REQUIRED
	68176000014	Brand	DEKAS PLUS CAP OCEAN	PA REQUIRED
	87701042775	Generic	HEALTHY EYES CAP SUPERV 2	
	87701040787	Generic	HEALTHY EYES CAP SUPERVIS	
	91241045445	Brand	VISTA ADVAN CAP DRY EYE	PA REQUIRED
	91241045450	Brand	VISTA ADVAN CAP AREDS2	PA REQUIRED
	92828000200	Generic	MACULAR HLTH CAP FORMULA	
	92828000202	Generic	DRY EYE CAP FORMULA	
	88856000001	Brand	K-PAX CAP SINGLE	PA REQUIRED
	88856000002	Brand	K-PAX CAP DOUBLE	PA REQUIRED
	82966000100	Generic	VITEYES CAP /LUTEIN	
	82966000101	Generic	VITEYES ARED CAP ADVANCED	
	82966000102	Generic	VITEYES CAP COMPLETE	
	82966000106	Brand	VITEYES CLAS CAP OMEGA-3	PA REQUIRED
	82966000150	Generic	VITEYES SMKR CAP W/LUTEIN	
	82966000151	Brand	VITEYES CLAS CAP ADVANCED	PA REQUIRED
	82966000154	Brand	VITEYES CLAS CAP MAC SUPP	PA REQUIRED
	82966000157	Brand	VITEYES CLAS CAP MAC SUPP	PA REQUIRED
	82966000300	Generic	VITEYES ARED CAP FORMULA	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	82966000876	Brand	VITEYES CLAS CAP OMEGA-3	PA REQUIRED
	82966000881	Brand	VITEYES CAP CLASSIC	PA REQUIRED
	82966000882	Brand	VITEYES CAP CLASSIC	PA REQUIRED
	82966000883	Brand	VITEYES CLAS CAP ADV	PA REQUIRED
	83076000001	Generic	MULTIVITAMIN CAP DAILY	
	95138000249	Brand	CELEBRATE CAP 36	PA REQUIRED
	96295012769	Generic	HEALTHY EYES CAP LUT-ZEAX	
	96295012776	Generic	HAIR/SKIN CAP NAILS	
	96295013970	Generic	VISION FORM CAP 2	
	96295013922	Generic	HEALTHY EYES CAP	
	96295012874	Generic	VISION FORM CAP EYE HLTH	
	96295012875	Generic	VISION FORM CAP 2	
	78742049906	Generic	ANTIOX FORM/ CAP MINERALS	
	79854001157	Brand	SUPER ANTIOX CAP	PA REQUIRED
	81131005703	Generic	VISION FORMU CAP 50+	
	74312050872	Generic	PMS SUPPORT CAP COMPLEX	
	96974000013	Brand	THERAMILL CAP FORTE	PA REQUIRED
	54629070110	Generic	VISION PLUS CAP	
	54629077660	Generic	ANTIOXIDANT CAP	
	54629603851	Brand	CHOICEFUL CAP MULTIVIT	PA REQUIRED
	55198000100	Brand	DECUBI-VITE CAP	PA REQUIRED
	55495001163	Brand	VITABEX CAP	PA REQUIRED
	54859080812	Generic	GLUCOTEN CAP	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	58204000400	Brand	MVW COMPLETE CAP FORMULAT	PA REQUIRED
	55571093033	Generic	ULTRA MULTI CAP /IRON	
	58204000406	Brand	MVW COMPLETE CAP D3000	PA REQUIRED
	58204000409	Brand	MVW COMPLETE CAP D5000	PA REQUIRED
	58204000418	Brand	MVW COMPLETE CAP MINIS	PA REQUIRED
	58607052057	Generic	MY-VITALIFE CAP	
	58607052060	Generic	MY-VITALIFE CAP	
	58552030860	Brand	BIOTECT PLUS CAP	PA REQUIRED
	58552032560	Brand	PROTECT CAP CARDIO	PA REQUIRED
	58552032660	Brand	PROTECT CAP PLUS SO	PA REQUIRED
	60002060370	Brand	GENADEK CAP STEP 1	PA REQUIRED
	60002060372	Brand	GENADEK CAP STEP 2	PA REQUIRED
	61269017406	Brand	ABDEK CAP	PA REQUIRED
	53191024001	Generic	VITA-MIN CAP	
	53191024018	Generic	VITA-MIN CAP	
	51707000612	Brand	CELEBRATE CAP 45	PA REQUIRED
	51707000623	Brand	CELEBRATE CAP 60	PA REQUIRED
	51707000651	Brand	CELEBRATE CAP 18	PA REQUIRED
	51759000203	Brand	PORENAL+D CAP OMEGA 3	PA REQUIRED
	51759000204	Brand	PRORENAL+D CAP OMEGA-3	PA REQUIRED
	51663000510	Brand	VITABEX PLUS CAP	PA REQUIRED
	50428042741	Brand	EYE HEALTH CAP ADLT 50+	PA REQUIRED
	50428053380	Brand	CVS VISION CAP HEALTH	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	50428053833	Brand	ADULT 50+ CAP EYE HLTH	PA REQUIRED
	50428035581	Brand	CVS VISION CAP HEALTH	PA REQUIRED
	39713054526	Brand	BARIATRIC CAP MULTIVIT	PA REQUIRED
	40093010211	Generic	HAIR/SKIN CAP NAILS	
	35515095304	Brand	OCUHEALTH CAP VISION 2	PA REQUIRED
	35046000451	Generic	DAILY VITAMN CAP PLUS	
	35797068726	Brand	BARIATRIC CAP MULTIVIT	PA REQUIRED
	36211031391	Generic	AMORYN MOOD CAP BOOSTER	
	36652037718	Brand	PROTEGRA CAP	PA REQUIRED
	31604040475	Generic	MULTI CAP FOR HIM	
	31604004045	Generic	MULTI CAP FOR HER	
	31604004046	Generic	MULTI 50+ CAP FOR HER	
	31604002537	Generic	MULTI 50+ CAP FOR HER	
	31604002538	Generic	MULTI CAP FOR HIM	
	31604002927	Brand	HAIR/SKIN/ CAP NAILS	PA REQUIRED
	31604002863	Generic	MULTI 50+ CAP FOR HER	
	31604002506	Generic	MULTI CAP COMPLETE	
	31604002507	Generic	MULTI CAP FOR HER	
	24208069765	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	24208069779	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	24208069864	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	26341012910	Brand	BIO-35 IRON CAP FREE	PA REQUIRED
	26341012920	Brand	BIO-35 GLUTE CAP FREE	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	16571072812	Brand	ONE-DAILY CAP MULTI	PA REQUIRED
	12539050001	Generic	ACTICAL CAP	
	12539053301	Generic	PREVENT CAP	
	13349001091	Brand	THERANATAL CAP LACTATIO	PA REQUIRED
	24208062504	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	24208063210	Brand	PRESERVISION CAP LUTEIN	PA REQUIRED
	24208063211	Brand	PRESERVISION CAP LUTEIN	PA REQUIRED
	24208063261	Brand	PRESERVISION CAP LUTEIN	PA REQUIRED
	24208069760	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	24208069762	Brand	PRESERVISION CAP AREDS 2	PA REQUIRED
	24208040319	Brand	OCUVITE LUTE CAP	PA REQUIRED
	24208046530	Brand	ADULT 50+ CAP OCUVITE	PA REQUIRED
	24208046535	Generic	OCUVITE EYE CAP HEALTH	
	24208046540	Brand	ADULT 50+ CAP OCUVITE	PA REQUIRED
	24208046570	Brand	ADULT 50+ CAP OCUVITE	PA REQUIRED
	24208046630	Brand	OCUVITE CAP ADULT	PA REQUIRED
	24208053210	Brand	PRESERVISION CAP AREDS	PA REQUIRED
	24208053220	Brand	PRESERVISION CAP AREDS	PA REQUIRED
	24208053230	Brand	PRESERVISION CAP AREDS	PA REQUIRED
	24208053240	Brand	PRESERVISION CAP AREDS	PA REQUIRED
	17204054685	Brand	THERAMILL CAP FORTE	PA REQUIRED
	17204054750	Brand	THERAMILL CAP FORTE	PA REQUIRED
	17204054850	Generic	THERAMILL CAP PLUS	

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	40985027772	Brand	HEALTHY EYES CAP SUPERVIS	PA REQUIRED
	45737040360	Brand	BIOCAL CAP	PA REQUIRED
	46122009372	Generic	HEALTHY EYES CAP SUPERVIS	
	00761071212	Generic	SUPER ANTIOX CAP PROTECT	
	00904549473	Generic	PROSIGHT CAP W/LUTEIN	
	00761028807	Generic	EYE VITAMINS CAP	
	00065804812	Generic	SYSTANE ICAP CAP AREDS2	
	00065895001	Generic	ICAPS LUTEIN CAP /OMEGA-3	
	00065804601	Generic	ICAPS CAP	
	00065804603	Generic	ICAPS CAP	
	11845012065	Generic	BDY/HAIR/SKN CAP NAILS	
	11917005159	Generic	CORAL CALCIU CAP PLUS	
	11845014645	Generic	SUPER MULTIP CAP	
	11845014675	Brand	SAVISION CAP	PA REQUIRED
	11845014781	Generic	MENS DAILY CAP LYCOPENE	
	11917010709	Brand	MENS 50+ CAP ADVANCED	PA REQUIRED
	11917010711	Generic	WOMENS 50+ CAP ADVANCED	
	11917010712	Generic	WOMENS CAP MULTI	
	11917016465	Generic	ADVANCED EYE CAP HEALTH	
	11917016564	Generic	50+ ADULT CAP EYE HLTH	
	11917017209	Brand	EYE HEALTH CAP	PA REQUIRED
	02966004132	Brand	CELLULAR CAP SECURITY	PA REQUIRED
	11694084201	Brand	REPLACE CAP	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Cap**				
	11694084205	Brand	REPLACE CAP	PA REQUIRED
*Multiple Vitamins w/ Minerals Chew Tab**				
	50428037845	Generic	CVS DAILY CHW GUMMIES	PA REQUIRED
	50428038220	Generic	AIRSHIELD CHW	PA REQUIRED
	50428046164	Generic	WOMENS DAILY CHW GUMMIES	PA REQUIRED
	50428046217	Generic	MENS DAILY CHW GUMMIES	PA REQUIRED
	50428042234	Generic	AIRSHIELD CHW	PA REQUIRED
	50428048818	Brand	AIRSHIELD CHW IMMUNITY	PA REQUIRED
	50428049081	Generic	MENS DAILY CHW GUMMIES	PA REQUIRED
	50428049159	Generic	WOMENS DAILY CHW GUMMIES	PA REQUIRED
	50428328152	Brand	SPECTRAVITE CHW ADLT 50+	PA REQUIRED
	50428057622	Brand	SPECTRAVITE CHW WOMEN	PA REQUIRED
	50428670999	Generic	CVS DAILY CHW GUMMIES	PA REQUIRED
	50428920206	Brand	SPECTRAVITE CHW ADULT	PA REQUIRED
	50428033183	Generic	MENS DAILY CHW GUMMIES	PA REQUIRED
	50428032239	Generic	CVS DAILY CHW GUMMIES	PA REQUIRED
	50428030282	Generic	WOMENS DAILY CHW GUMMIES	PA REQUIRED
	51707000625	Brand	CELEBRATE CHW 60	PA REQUIRED
	51707000644	Brand	CELEBRATE CHW 18	PA REQUIRED
	51707000618	Brand	CELEBRATE CHW 45	PA REQUIRED
	51707000602	Brand	CELEBRATE CHW 36	PA REQUIRED
	52569013763	Generic	HM MULTIVIT CHW GUMMY	PA REQUIRED
	58914001460	Brand	AQUADEKS CHW	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	58204000438	Brand	ADEK CHW PLUS ZN	PA REQUIRED
	55571093592	Generic	ADVANCED CHW MULTI EA	PA REQUIRED
	56215000002	Brand	OPURITY CHW BYPASS	PA REQUIRED
	54629601283	Brand	CHOICEFUL CHW MULTIVIT	PA REQUIRED
	76314032450	Brand	EMERGEN-C CHW VITA C	PA REQUIRED
	74312031014	Brand	YOUR LIFE CHW MULTIVIT	PA REQUIRED
	74312030421	Brand	YOUR LIFE CHW GUMMIES	PA REQUIRED
	81131005716	Brand	MULTIVITAMIN CHW ADLT GUM	PA REQUIRED
	96295013968	Generic	MULTIVI ADLT CHW GUMMIES	PA REQUIRED
	96295012706	Brand	IMMUNE CHW SUPPORT	PA REQUIRED
	96295012709	Brand	MULTIVITAMIN CHW ADULT	PA REQUIRED
	96295012710	Brand	MULTI ADULT CHW EXTRA C	PA REQUIRED
	96295012711	Generic	MULTIVITAMIN CHW VITA D3	PA REQUIRED
	95138000224	Brand	CELEBRATE CHW 36	PA REQUIRED
	95138000245	Brand	CELEBRATE CHW 36	PA REQUIRED
	85898010030	Brand	EMERGEN-C CHW IMMUNE/D	PA REQUIRED
	85898010060	Brand	EMERGEN-C CHW IMMUNE/D	PA REQUIRED
	94603000202	Brand	BARIATRIC CHW FUSION	PA REQUIRED
	68176000015	Brand	DEKAS PLUS CHW	PA REQUIRED
	68176000016	Brand	DEKAS CHW BARIATRI	PA REQUIRED
	11917017649	Generic	MULTI GUMMIE CHW MENS	PA REQUIRED
	11917017661	Generic	MULTI GUMMIE CHW WOMENS	PA REQUIRED
	11917017665	Generic	MULTI GUMMIE CHW MENS	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	11917017103	Generic	MULTIVI ADLT CHW GUMMIES	PA REQUIRED
	11917017163	Generic	MULTI GUMMIE CHW MENS	PA REQUIRED
	11917017164	Generic	MULTIVI ADLT CHW GUMMIES	PA REQUIRED
	11917016665	Generic	MULTI GUMMIE CHW MENS	PA REQUIRED
	11917016666	Generic	MULTI GUMMIE CHW WOMENS	PA REQUIRED
	11917016667	Generic	ADLT MULTIVI CHW GUMMIES	PA REQUIRED
	11917014689	Generic	ADLT MULTIVI CHW GUMMIES	PA REQUIRED
	11917015157	Brand	WAL-BORN CHW VIT C	PA REQUIRED
	11917011462	Brand	ADLT ONE DLY CHW GUMMIES	PA REQUIRED
	11917014164	Generic	MULTI-VITAMI CHW GUMMIES	PA REQUIRED
	11845014839	Generic	VITATRUM CHW	PA REQUIRED
	11917007001	Generic	A THRU Z CHW SELECT	PA REQUIRED
	11822517310	Generic	ONE DAILY CHW GUMMY	PA REQUIRED
	00065804803	Brand	SYSTANE ICAP CHW AREDS2	PA REQUIRED
	00005445260	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005445270	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005445460	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005445470	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005445560	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005445570	Brand	CENTRUM CHW VITAMINT	PA REQUIRED
	00005446119	Brand	CENTRUM CHW SILVER	PA REQUIRED
	00005452835	Brand	CENTRUM CHW	PA REQUIRED
	00005452861	Brand	CENTRUM CHW	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	00005452890	Brand	CENTRUM CHW ADULTS	PA REQUIRED
	00005486070	Brand	CENTRUM CHW MULTI	PA REQUIRED
	00005486090	Brand	CENTRUM CHW MULTI	PA REQUIRED
	00005486170	Brand	CENTRUM CHW WOMEN	PA REQUIRED
	00005486190	Brand	CENTRUM CHW WOMEN	PA REQUIRED
	00005486270	Brand	CENTRUM CHW MEN	PA REQUIRED
	00005486290	Brand	CENTRUM CHW MEN	PA REQUIRED
	00005486890	Brand	CENTRUM MULT CHW OMEGA 3	PA REQUIRED
	00005487460	Brand	CENTRUM 50+ CHW FRSH/FRU	PA REQUIRED
	00005490060	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	00005490092	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	00005490360	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	00005490392	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	00005490560	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	00005490592	Brand	CENTRUM CHW FLAV BST	PA REQUIRED
	43900037481	Brand	OPTISOURCE CHW BARIATRC	PA REQUIRED
	43900037482	Brand	OPTISOURCE CHW BARIATRC	PA REQUIRED
	43900068518	Brand	OPTIFAST POS CHW BARIATRI	PA REQUIRED
	43900069985	Brand	OPTIFAST POS CHW BARIATRI	PA REQUIRED
	41163049778	Brand	ONE DAILY CHW ADLT GUM	PA REQUIRED
	41163049809	Brand	ONE DAILY CHW ADLT GUM	PA REQUIRED
	43292056332	Brand	OPTIMUM CHW AIRVITES	PA REQUIRED
	43292056333	Brand	OPTIMUM CHW AIRVITES	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	47865010026	Brand	AIRBORNE CHW	PA REQUIRED
	47865018572	Generic	AIRBORNE CHW	PA REQUIRED
	47865018573	Generic	AIRBORNE CHW GUMMIES	PA REQUIRED
	47865018575	Generic	AIRBORNE CHW KIDS	PA REQUIRED
	47865018576	Brand	AIRBORNE CHW KIDS	PA REQUIRED
	47865018630	Brand	AIRBORNE CHW	PA REQUIRED
	47865018631	Generic	AIRBORNE CHW	PA REQUIRED
	47865020221	Generic	AIRBORNE CHW	PA REQUIRED
	47865020334	Generic	AIRBORNE CHW	PA REQUIRED
	47865090052	Brand	AIRBORNE CHW	PA REQUIRED
	47865090058	Generic	AIRBORNE CHW	PA REQUIRED
	47865090369	Brand	AIRBORNE CHW	PA REQUIRED
	47865090846	Brand	AIRBORNE CHW	PA REQUIRED
	47865094999	Brand	AIRBORNE CHW	PA REQUIRED
	47865095566	Brand	AIRBORNE CHW	PA REQUIRED
	47865096297	Generic	AIRBORNE CHW IMMUNE	PA REQUIRED
	47865096299	Brand	AIRBORNE CHW	PA REQUIRED
	47865096339	Brand	AIRBORNE CHW	PA REQUIRED
	47865096340	Brand	AIRBORNE CHW	PA REQUIRED
	47865097405	Brand	AIRBORNE+ CHW PROBIOTI	PA REQUIRED
	47865098409	Brand	AIRBORNE+ CHW PROBIOTI	PA REQUIRED
	47865099542	Brand	AIRBORNE+ CHW REST	PA REQUIRED
	47865099544	Brand	AIRBORNE CHW KIDS	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	47865099557	Brand	AIRBORNE CHW KIDS	PA REQUIRED
	49100040095	Brand	CULTURELLE CHW MULTIVIT	PA REQUIRED
	24208069763	Brand	PRESERVISION CHW AREDS 2	PA REQUIRED
	24208060260	Generic	OCUVITE EYE CHW HEATLH	PA REQUIRED
	11917019143	Generic	MULTI GUMMIE CHW MENS	PA REQUIRED
	16500053872	Brand	VITACRAVES CHW SOUR GUM	PA REQUIRED
	16500053873	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	16500054148	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	16500054269	Brand	ONE-A-DAY CHW IMMUNITY	PA REQUIRED
	16500054489	Brand	VITACRAVES CHW IMMUNITY	PA REQUIRED
	16500054876	Brand	VITACRAVES CHW WOMENS	PA REQUIRED
	16500054877	Brand	VITACRAVES CHW MENS	PA REQUIRED
	16500055591	Brand	VITACRAVES CHW WOMENS	PA REQUIRED
	16500055592	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	16500055594	Brand	VITACRAVES CHW MENS	PA REQUIRED
	16500055595	Brand	VITACRAVES CHW GUMMIES	PA REQUIRED
	16500055614	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	16500055818	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	16500055819	Brand	ONE-A-DAY CHW VITACRAV	PA REQUIRED
	30768030417	Generic	MULTIVI ADLT CHW GUMMIES	PA REQUIRED
	30768030420	Generic	ADULT GUMMY CHW	PA REQUIRED
	30768056766	Brand	WOMENS MULT CHW GUMMIES	PA REQUIRED
	31604002841	Generic	MULTI ADULT CHW GUMMIES	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Multiple Vitamins w/ Minerals Chew Tab**				
	31604002846	Generic	MULTI+OMEGA3 CHW ADULT	PA REQUIRED
	33674011247	Brand	ALIVE WOMENS CHW GUMMY	PA REQUIRED
	33674015787	Brand	ALIVE MULTI CHW VITAMIN	PA REQUIRED
	33674015903	Brand	ALIVE WOMENS CHW GUMMY	PA REQUIRED
	40093011370	Brand	WMNS MULTIVI CHW +COLLAGE	PA REQUIRED
	40093011539	Brand	MENS MULTI CHW	PA REQUIRED
*Pediatric Multiple Vit w/ Minerals & C Drops 45 MG/0.5ML***				
	58204000404	Brand	MVW COMPLETE DRO PEDIATRI	PA REQUIRED
*Pediatric Multiple Vitamin w/ C & FA Chew Tab**				
	00536430401	Generic	POLY VITAMIN CHW	PA REQUIRED
*Pediatric Multiple Vitamin w/ Minerals & C Chew Tab**				
	58204000411	Generic	MVW COMPLETE CHW D3000	PA REQUIRED
	58204000401	Generic	MVW COMPLETE CHW ORANGE	PA REQUIRED
*Pediatric Multiple Vitamin w/ Minerals & C Drops 45 MG/ML**				
	58914021460	Brand	AQUADEKS DRO	PA REQUIRED
	61269016660	Generic	ABDEK PEDIAT DRO	PA REQUIRED
*Pediatric Multiple Vitamin w/ Minerals Oral Powder**				
	57771000104	Brand	NANOVM T/F POW	PA REQUIRED
	57771000105	Brand	NANOVM POW 9-18 YRS	PA REQUIRED
	57771000113	Brand	NANOVM POW 1-3 YRS	PA REQUIRED
	57771000148	Brand	NANOVM POW 4-8YEARS	PA REQUIRED
*Pediatric Multiple Vitamins w/ Iron Drops 10 MG/ML**				
	52304071650	Generic	NOVAFERRUM DRO	PA REQUIRED

OTC Drug List for Maine Medicaid

Generic Drug Description	NDC	Brand/Generic	Product Description	PA Required
*Pediatric Multiple Vitamins w/ Iron Drops 10 MG/ML**				
	69618006359	Brand	POLY-VITA/FE DRO	PA REQUIRED
	76518004050	Brand	POLY-VITE SOL /IRON	PA REQUIRED
	98302014005	Brand	PED POLY-VIT DRO /IRON	PA REQUIRED
	17856063203	Brand	POLY-VITAMIN DRO /IRON	PA REQUIRED
	17856003902	Brand	POLY-VITE SOL /IRON	PA REQUIRED
	17856062503	Brand	POLY-VITAMIN DRO /IRON	PA REQUIRED
	17856062504	Brand	POLY-VITAMIN DRO /IRON	PA REQUIRED
	17856062550	Brand	POLY-VITAMIN DRO /IRON	PA REQUIRED
*Pediatric Multiple Vitamins w/ Iron Drops 11 MG/ML**				
	71399742005	Brand	POLY-VITE SOL IRON	PA REQUIRED
	00536115780	Brand	MULTIVITAMIN DRO /IRON	PA REQUIRED
	00087040501	Brand	POLY-VI-SOL SOL IRON	PA REQUIRED
	00087040506	Brand	POLY-VI-SOL SOL IRON	PA REQUIRED