

BadgerCare Plus Benchmark Plan

Covered National Drug Code (NDC) List

The information provided below does not guarantee Wisconsin BadgerCare Plus Benchmark coverage or payment. Real-time claim submission provides the most accurate member enrollment, drug coverage, and reimbursement determination. Please reference the date below when contacting Provider Services with questions about information received through this page. Providers may want to keep a copy of the page for their records.

This list reflects additional deletions for October.

Last Updated: October 15, 2009

N/D	Start	END	NDC	Description	N/D	Start	END	NDC	Description
D	2/1/08	9/30/09	00054414622	CLOTRIMAZOLE 10MG TROCHE					
D	2/1/08	9/30/09	00054414623	CLOTRIMAZOLE 10MG TROCHE					
D	2/1/08	9/30/09	00054814622	CLOTRIMAZOLE 10MG TROCHE					
D	7/1/09	9/30/09	00093718001	OFLOXACIN 200 MG TABLET					
D	7/1/09	9/30/09	00093718101	OFLOXACIN 300 MG TABLET					
D	2/1/08	9/30/09	00487990401	ALBUTEROL SUL 1.25 MG/3 ML SOL					
D	2/1/08	9/30/09	00487990402	ALBUTEROL SUL 1.25 MG/3 ML SOL					
D	2/1/08	9/30/09	00574010714	CLOTRIMAZOLE 10 MG TROCHE					
D	2/1/08	9/30/09	00574010770	CLOTRIMAZOLE 10 MG TROCHE					
D	6/1/08	9/30/09	00574010777	CLOTRIMAZOLE 10 MG TROCHE					
D	2/1/08	9/30/09	00603142258	METAPROTERENOL 10MG/5ML SYR					
D	2/1/08	9/30/09	54838050780	METAPROTERENOL 10MG/5ML SYR					
D	7/1/09	9/30/09	55111016050	OFLOXACIN 200 MG TABLET					
D	7/1/09	9/30/09	55111016150	OFLOXACIN 300 MG TABLET					
D	7/1/09	9/30/09	63304071550	OFLOXACIN 300 MG TABLET					
D	7/1/09	9/30/09	63304071650	OFLOXACIN 200 MG TABLET					

Count: