

New Jersey Formulary Coverage –

For Adult Patients*

(Rx's Needed for Approval)



AETNA BETTER HEALTH
AMERIGROUP
HORIZON NJ HEALTH
NJ FAMILY CARE
WELLCARE OF NJ

Mucinex®

Prescribe Indication

Maximum Strength MUCINEX® D Tablets Per tablet - 1200 mg guaifenesin + 120 mg pseudoephedrine HCl	24 count	Chest Congestion + Sinus Pressure		✓			
MUCINEX® D Tablets Per tablet - 600 mg guaifenesin + 60 mg pseudoephedrine HCl	18 count 36 count	Chest Congestion + Sinus Pressure	✓	✓		✓	✓
Maximum Strength MUCINEX® DM Tablets Per tablet - 1200 mg guaifenesin + 60 mg dextromethorphan HBr	7 count 14 count 28 count 42 count	Chest Congestion + Cough	✓	✓			
MUCINEX® DM Tablets Per tablet - 600 mg guaifenesin + 30 mg dextromethorphan HBr	6 count 20 count 40 count	Chest Congestion + Cough	✓	✓	✓	✓	
Maximum Strength MUCINEX® Tablets Per tablet - 1200 mg guaifenesin	7 count 14 count 28 count 42 count	Chest Congestion		✓	✓	✓	✓
MUCINEX® Tablets Per tablet - 600 mg guaifenesin	6 count 20 count 40 count 68 count 100 count 500 count	Chest Congestion	✓	✓	✓	✓	✓
Maximum Strength[†] MUCINEX® Fast-Max® DM Max Liquid Per 20 mL - 20 mg dextromethorphan HBr + 400 mg guaifenesin	6 fl oz	Cough + Chest Congestion		✓	✓	✓	
Maximum Strength[†] MUCINEX® Fast-Max® Congestion & Headache Liquid Per 20 mL - 650 mg acetaminophen + 400 mg guaifenesin + 10 mg phenylephrine HCl	6 fl oz	Multi-Symptom		✓			
Maximum Strength[†] MUCINEX® Fast-Max® Cold, Flu & Sore Throat Liquid Per 20 mL - 650 mg acetaminophen + 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl	6 fl oz 9 fl oz	Multi-Symptom		✓			
Maximum Strength[†] MUCINEX® Fast-Max® Severe Congestion & Cough Liquid Per 20 mL - 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl	6 fl oz 9 fl oz	Multi-Symptom		✓			

Delsym®

Prescribe Indication

DELSYM® 12 Hour Liquids Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange	3 fl oz 5 fl oz	Cough		✓	✓	✓	✓
DELSYM® Cough + Cold Night Time Liquid Per 20 mL - 650 mg acetaminophen + 25 mg diphenhydramine HCl + 10 mg phenylephrine HCl – Mixed Berry	6 fl oz	Multi-Symptom					✓

For Pediatric Patients*

(Rx's Needed for Approval)

Mucinex®

Prescribe Indication

Children's MUCINEX® Cough Liquid Per 5 mL - 5 mg dextromethorphan HBr + 100 mg guaifenesin – Cherry	4 fl oz	Cough + Chest Congestion		✓	✓	✓	✓
Children's MUCINEX® Congestion & Cough Liquid Per 5 mL - 5 mg dextromethorphan HBr + 100 mg guaifenesin + 2.5 mg phenylephrine HCl – Berrylicious	6.8 fl oz	Multi-Symptom		✓	✓		

Delsym®

Prescribe Indication

Children's DELSYM® 12 Hour Liquids Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange	3 fl oz 5 fl oz	Cough			✓		
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For more information about MUCINEX, call 1-866-682-4639 or visit www.mucinex.com/professional.
For more information about DELSYM, call 1-866-682-4639 or visit www.delsym.com/professional.

*The use of these medications is for the approved indications only and should be dispensed according to the proper dosing instructions. REV. 091718
[†]Maximum strength per 4-hour dose. Use as directed. ©2018 RB Health Distributed by: RB Health