

# Florida Formulary Coverage –

For Adult Patients\*

(Rx's Needed for Approval)



## Mucinex®

Prescribe Indication

			AETNA BETTER HEALTH	AMERIGROUP	FLORIDA MEDICAID	HILLSBOROUGH CITY HEALTH PLAN	HUMANA FAMILY HEALTH PLAN	IMAGELLAN	MOLINA	PRESTIGE HEALTH	SIMPLY HEALTH	STAYWELL	STAYWELL KIDS	SUNSHINE STATE HEALTH	UHC COMMUNITY PLAN
<b>Maximum Strength MUCINEX® D Tablets</b> Per tablet - 1200 mg guaifenesin + 120 mg pseudoephedrine HCl	24 count	Chest Congestion + Sinus Pressure	✓				✓		✓						
<b>MUCINEX® D Tablets</b> Per tablet - 600 mg guaifenesin + 60 mg pseudoephedrine HCl	18 count 36 count	Chest Congestion + Sinus Pressure	✓				✓		✓						
<b>Maximum Strength MUCINEX® DM Tablets</b> Per tablet - 1200 mg guaifenesin + 60 mg dextromethorphan HBr	7 count 14 count 28 count 42 count	Chest Congestion + Cough	✓		✓		✓		✓						
<b>MUCINEX® DM Tablets</b> Per tablet - 600 mg guaifenesin + 30 mg dextromethorphan HBr	6 count 20 count 40 count	Chest Congestion + Cough	✓		✓	✓	✓		✓						
<b>Maximum Strength MUCINEX® Tablets</b> Per tablet - 1200 mg guaifenesin	7 count 14 count 28 count 42 count	Chest Congestion	✓	✓	✓	✓		✓	✓	✓	✓		✓	✓	✓
<b>MUCINEX® Tablets</b> Per tablet - 600 mg guaifenesin	6 count 20 count 40 count 68 count 100 count 500 count	Chest Congestion	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Maximum Strength<sup>†</sup> MUCINEX® Fast-Max® DM Max Liquid</b> Per 20 mL - 20 mg dextromethorphan HBr + 400 mg guaifenesin	6 fl oz	Cough + Chest Congestion						✓		✓			✓	✓	
<b>Maximum Strength<sup>†</sup> MUCINEX® Fast-Max® Congestion &amp; Headache Liquid</b> Per 20 mL - 650 mg acetaminophen + 400 mg guaifenesin + 10 mg phenylephrine HCl	6 fl oz	Multi-Symptom		✓											
<b>Maximum Strength<sup>†</sup> MUCINEX® Fast-Max® Cold, Flu &amp; Sore Throat Liquid</b> 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		✓					✓						
<b>Maximum Strength<sup>†</sup> MUCINEX® Fast-Max® Day Time Severe Cold/Night Time Cold &amp; Flu Liquids</b> Day = Per 20 mL - 650 mg acetaminophen + 20 mg dextromethorphan HBr + 400 mg guaifenesin + 10 mg phenylephrine HCl Night = Per 20 mL - 650 mg acetaminophen + 25 mg diphenhydramine HCl + 10 mg phenylephrine HCl	6 fl oz x 2	Multi-Symptom							✓						
<b>Maximum Strength<sup>†</sup> MUCINEX® Fast-Max® Severe Congestion &amp; Cough Liquid</b> 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

			AETNA BETTER HEALTH	AMERIGROUP	FLORIDA MEDICAID	HILLSBOROUGH CITY HEALTH PLAN	HUMANA FAMILY HEALTH PLAN	IMAGELLAN	MOLINA	PRESTIGE HEALTH	SIMPLY HEALTH	STAYWELL	STAYWELL KIDS	SUNSHINE STATE HEALTH	UHC COMMUNITY PLAN
<b>DELSYM® 12 Hour Liquids</b> Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange	3 fl oz 5 fl oz	Cough		✓										✓	✓

For Pediatric Patients\*

(Rx's Needed for Approval)

## Mucinex®

Prescribe Indication

			AETNA BETTER HEALTH	AMERIGROUP	FLORIDA MEDICAID	HILLSBOROUGH CITY HEALTH PLAN	HUMANA FAMILY HEALTH PLAN	IMAGELLAN	MOLINA	PRESTIGE HEALTH	SIMPLY HEALTH	STAYWELL	STAYWELL KIDS	SUNSHINE STATE HEALTH	UHC COMMUNITY PLAN
<b>Children's MUCINEX® Cough Liquid</b> Per 5 mL - 5 mg dextromethorphan HBr + 100 mg guaifenesin – Cherry	4 fl oz	Cough + Chest Congestion		✓					✓	✓		✓			
<b>Children's MUCINEX® Stuffy Nose &amp; Cold Liquid</b> Per 5 mL - 100 mg guaifenesin + 2.5 mg phenylephrine HCl – Mixed Berry	4 fl oz	Chest Congestion + Sinus Pressure						✓		✓					
<b>Children's MUCINEX® Chest Congestion Mini-Melts™</b> Per granule packet - 100 mg guaifenesin – Bubble Gum	12 count	Chest Congestion			✓					✓					
<b>Children's MUCINEX® Cough Mini-Melts™</b> Per granule packet - 5 mg dextromethorphan HBr + 100 mg guaifenesin – Orange Creme	12 count	Cough + Chest Congestion		✓											

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<b>Children's DELSYM® 12 Hour Liquids</b> Per 5 mL - dextromethorphan polistirex equivalent to 30 mg dextromethorphan HBr – Grape and Orange	3 fl oz 5 fl oz	Cough								✓				✓	✓

For more information about MUCINEX, call 1-866-682-4639 or visit [www.mucinex.com/professional](http://www.mucinex.com/professional).  
For more information about DELSYM, call 1-866-682-4639 or visit [www.delsym.com/professional](http://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.  
†Maximum strength per 4-hour dose. Use as directed. ©2018 RB Health Distributed by: RB Health