



OFFICE OF THE STATE OF THE STAT

APR 2 2 1995

The Honorable Don Parkinson Speaker Twenty-Third Guam Legislature 424 West O'Brien Drive Julale Center - Suite 222 Agana, Guam 96910

Dear Speaker Parkinson:

Enclosed please find a copy of Bill No. 185 (LS), "AN ACT TO APPROVE THE ADDITION OF FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE", which I have **signed** into law today as **Public Law 23-07.**

Very truly yours,

Attachment

230372

TWENTY-THIRD GUAM LEGISLATURE 1995 (FIRST) Regular Session

CERTIFICATION OF PASSAGE OF AN ACT TO THE GOVERNOR

This is to certify that Bill No. 185 (LS), "AN ACT TO APPROVE THE ADDITION OF FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE," was on the 7th day of April, 1995, duly and regularly passed.

regularly passed. DON PARKINSON Speaker Attested: Senator and Legislative Secretary This Act was received by the Governor this 17th day of April 1995, at _// 35 _____ o'clock _A.M. Assistant Staff Officer Governor's Office APPROVED: CARL T. C. GUTIERREZ Governor of Guam

Date: 4 - 22 - 95

Public Law No. <u>23-07</u>

TWENTY-THIRD GUAM LEGISLATURE 1995 (FIRST) Regular Session

Bill No.	185	(LS)
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Introduced by:	Committee on Rules
	At the request of the Governor

AN ACT TO APPROVE THE ADDITION OF FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE.

1 BE IT ENACTED BY THE PEOPLE OF THE TERRITORY OF GUAM:

Section 1. The Guam Memorial Hospital has identified fifty-seven (57) additional pharmaceutical items to add to its current fee schedule. Such pharmaceutical items have been rendered to patients but prior hereto have not been adjudicated by statute. The following fees for pharmaceutical items are hereby approved as additions to the Guam Memorial Hospital's current fee schedule.

8	<u>Medication</u>	Recomm	<u>nended Pr</u>	<u>ice</u>
9	1. Acetaminophen 325 mg/10 ml	\$	0.33	
10	2. Acetaminophen 650 mg/20 ml	\$	0.50	
11	3. Acetazolamide 250 mg	\$	0.25	
12	4. Acetylcysteine, Mucomyst 10%, 10 m	ત્રી \$	48.18	
13	5. Aluminum/Magnesium Simeth/II-3	0 ml \$	0.72	
14	6. Ammonium Chloride 100mg/20 ml	\$	3.97	
15	7. Antihemophilic Factor 8, 1 unit	\$	385.72	
16	8. Aristocort Forte Parenteral 40 mg/m	ป \$	6.84	

1	9. Bacitracin 500 u/GM, 0.9 gm	\$ 0.14
2	10. Benzoin Comp. Tincture 473 ml	\$ 8.27
3	11. Cyanide Antidote	\$ 321.00
4	12. Dacroise Eye, Irrigating 118 ml	\$ 8.96
5	13. Dantrium 70 ml	\$ 152.19
6	14. Empty Tubex 1 ml	\$ 1.52
7	15. Empty Tubex 2 ml	\$ 1.52
8	16. Enkaid 25 mg	\$ 0.94
9	17. Ophthalgen 7.5 ml	\$ 13.20
10	18. Guaifenesin, Robitussin 100 mg/5 ml	\$ 3.06
11	19. Hydrophilic 1 lb	\$ 7.41
12	20. Hyperab 2 ml	\$ 128.45
13	21. Hyperab 10 ml	\$ 426.40
14	22. Iodine Povidone, Efodine 1% / 1.5 g	\$ 0.14
15	23. Kaolin/Pectin 30 ml	\$ 0.74
16	24. Labetalol, Normodyne HCL 300 mg	\$ 2.13
17	25. Lidocaine Hydrochloride 2%/2 ml	\$ 1.49
18	26. Manganese 0.1 mg/ml, 10 ml	\$ 1.49
19	27. Metopirone 250 mg	\$ 2.89
20	28. Mineral Oil 10 ml	\$ 2.34
21	29. Nesacaine 3%/30 ml	\$ 46.25
22	30. Norvasc 10 mg	\$ 4.48
23	31. Norvasc 2.5 mg	\$ 2.62
24	32. Norvasc 5 mg	\$ 2.62
25	33. Papaverine HCL Injection, 30 mg/10 ml	\$ 10.25
26	34. Pentothal Ready-to-Mix, 250 mg	\$ 9.23
27	35. Phenobarbital Elixir, 30 mg/7.5 ml	\$ 1.87

1	36. Kayexalate 453.6 gm (Bottle)	\$ 357.51
2	37. Kayexalate 1 gm	\$ 0.94
3	38. Potassium Chlor. Oral, 15 mg/11.25 ml	\$ 0.72
4	39. Potassium Chlor. Oral, 30 mg/22.5 ml	\$ 0.72
5	40. Potassium Chlor. Oral, 40 mg / 30 ml	\$ 0.72
6	41. Primaxin Injection 500 mg	\$ 62.45
7	42. Matulane 50 mg	\$ 1.60
8	43. Robitussin 10 ml	\$ 0.77
9	44. Robitussin-DM 10 ml	\$ 1.43
10	45. Sodium Lactate 10 ml / 20 ml	\$ 10.78
11	46. Empty Container Sterile Vial 10 ml	\$ 2. 92
12	47. Empty Container Sterile Vial 30 ml	\$ 5.40
13	48. Surgilube 3.0 gm	\$ 0.08
14	49. Triple-Dye .65 ml	\$ 1.98
15	50. Vincristine Sulfate 1 mg	\$ 97. <i>7</i> 7
16	51. Water for Injection 10 ml (Sterile)	\$ 1.48
17	52. Xylocaine 20 ml / 1.5%	\$ 24.06
18	53. Xylocaine MPF 1% / 5ml	\$ 5.56
19	54. Xylocaine MPF 2% / 10ml	\$ 17.28
20	55. Xylocaine with Epin. MPF 1% / 30 m	\$ 17.04
21	56. Xylocaine with Epin. MPF 2% / 20 m	\$ 18.61
22	57. Zinc Gluconate 100 mg	\$ 0.08

1995 (FIRST) Regular Session

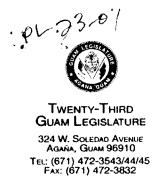
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VOTING SHEET

Bill No	
Resolution No.	
Question:	

NAME	AYE	NO	NOT VOTING/ ABSTAINED	ABSENT/ OUT DURING ROLL CALL
ADA, Thomas C.	~			
AGUON, John P.			,	
BARRETT-ANDERSON, Elizabeth	V			
BLAZ, Anthony C.	V			
BROWN, Joanne S.				
CAMACHO, Felix P.	V			
CHARFAUROS, Mark C				
CRISTOBAL, Hope A.				
FORBES, MARK				
LAMORENA, Alberto C., V				
LEON GUERRERO, Carlotta	W			
LEON GUERRERO, Lou				
NELSON, Ted S.				
ORSINI, Sonny L.				
PANGELINAN, Vicente C	W			
PARKINSON, Don				
SAN AGUSTIN, Joe T.	/			
SANTOS, Angel L. G.	W			
SANTOS, Francis E.	V			
UNPINGCO, Antonio R.	W			
WONPAT-BORJA, Judith				

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TOTAL	0		



SENATOR LOU LEON GUERRERO, RN, MPH

<u>CHAIRPERSON</u>

COMMITTEE ON HEALTH, WELFARE, AND SENIOR CITIZENS

April 5, 1995

The Honorable Don Parkinson Speaker, 23rd Guam Legislature Agana, Guam

via: Committee on Rules

Dear Mr. Speaker:

The Committee on Health, Welfare & Senior Citizens to which was referred Bill 185, RELATIVE TO THE ADOPTION OF THE ADDING FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE herein reports back and recommends **To Do Pass**.

Votes of committee members are as follows:

8 To Pass

Not To Pass

To The Inactive File

Abstained

Off-Island

Not Available

Sincerely,

Lou Leon Guerrero, RN, MPH

attachments

Committee On Health, Welfare, And Senior Citizens VOTE SHEET

on

Bill 185, RELATIVE TO THE ADOPTION OF THE ADDING FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE.

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COMMITTEE MEMBER	TO PASS	NOT TO PASS	ABSTAIN	INACTIVE FILE
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Sen. Lou Leon Guerrero, RN, MPH, Chair				
Sen. Ben C. Pangelinan, Vice Chair				
2 C. QQ	12			
Sen. Tom C. Ada, member				
Sen. Mark C. Charfauros, member				
Stade a. Cristabal				
Sex. Hope A. Cristoliai, member	V			
Vice Speaker Ted S. Nelson, member	1			
Sen. Angel L.G. Santos, member				
The C				
Sen. Judith Won Pat-Borja, member				
Sen. Anthony C. Blaz, member				
Jen maiony C. Dally monde.				
Sen Felix P. Camacho, member				
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CAN COL		!		
Sen. Alberto Lamorena V, member				
Carlolla Port 2	L/			
Sen. Carlotta Leon Guerrero, member				

Twenty-Third Guam Legislature

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BIII	no.:_	

Introduced at the Request of the Governor

"Relative to the Adoption of the Adding Fifty-Seven (57) Pharmaceutical Items to the Hospital' s Fee Schedule"

BE IT ENACTED BY THE PEOPLE OF THE TERRITORY OF GUAM:

Section 1. A new subsection (g) is added to section 80105 of 10 GCA to read:

"Section 80105(g). The Hospital has identified fifty-seven (57) additional pharmaceutical items to add to its current fee schedule. Such pharmaceutical items have been rendered to patients but have not been adjudicated by statute. These fees being recommended for adoption are as follows:

<u>Medication</u>	Recommended Price
1. Acetaminophen 325 mg/10 ml	\$ 0.33
2. Acetaminophen 650 mg/20 ml	\$ 0.50
3. Acetazolamide 250 mg	\$ 0.25
4. Acetylcysteine, Mucomyst 10%, 10 ml	\$ 48.18
5. Aluminum/Magnesium Simeth/II-30 ml	\$ 0.72
6. Ammonium Chloride 100 mg/20 ml	\$ 3.97
7. Antihemophilic Factor 8, 1 unit	\$ 385.72
8. Aristocort Forte Parenteral 40 mg/ml	\$ 6.84
9. Bacitracin 500 u /GM, 0.9gm	\$ 0.14
10. Benzoin Comp. Tincture 473 ml	\$ 8.27
11. Cyanide Antidote	\$ 321.00
12. Dacroise Eye, Irrigating 118 ml	\$ 8.96
13. Dantrium 70 ml	\$ 152.19
14. Empty Tubex 1 ml	\$ 1.52
15. Empty Tubex 2 ml	\$ 1.52
16. Enkaid 25 mg	\$ 0.94
17. Ophthalgen 7.5 ml	\$ 13.20
18. Guaifenesin, Robitussin 100 mg/ 5m1	\$ 3.06
19. Hydrophilic 1 lb	\$ 7.41

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20. Hyperab 2 ml	\$128.45
21. Hyperab 10 ml	\$426.40
22. Iodine Povidone, Efodine 1% / 1.5 g	\$ 0.14
23. Kaolin/Pectin 30 ml	\$ 0.74
24. Labetalol, Normodyne HCL 300 mg	\$ 2.13
25. Lidocaine Hydrochloride 2%/2ml	\$ 1.49
26. Manganese 0.1 mg/ml, 10 ml	\$ 1.49
27. Metopirone 250 mg	\$ 2.89
28. Mineral Oil 10 ml	\$ 2.34
29. Nesacaine 3%/30 ml	\$ 46.25
30. Norvasc 10 mg	\$ 4.48
31. Norvasc 2.5 mg	\$ 2.62
32. Norvasc 5 mg	\$ 2.62
33. Papaverine HCL Injection, 30 mg/10 ml	\$ 10.25
34. Pentothal Ready-to-Mix, 250 mg	\$ 9.23
35. Phenobarbital Elixir, 30mg/7.5ml	\$ 1.87
36. Kayexalate 453.6 gm (Bottle)	\$357.51
37. Kayexalate 1 gm	\$ 0.94
38. Potassium Chlor. Oral, 15mg/11.25 ml	\$ 0.72
39. Potassium Chlor. Oral, 30mg/22.5 ml	\$ 0.72
40. Potassium Chlor. Oral, 40 mg / 30 ml	\$ 0.72
41. Primaxin Injection 500 mg	\$ 62.45
42. Matulane 50 mg	\$ 1.60
43. Robitussin 10 ml	\$ 0.77
44. Robitussin-DM 10 ml	\$ 1.43
45. Sodium Lactate 10 ml / 20 ml	\$ 10.78
46. Empty Container Sterile Vial 10 ml	\$ 2.92
47. Empty Container Sterile Vial 30 ml	\$ 5.40
48. Surgilube 3.0 gm	\$ 0.08
49. Triple-Dye .65 ml	\$ 1.98
50. Vincristine Sulfate 1 mg	\$ 97.77
51. Water for Injection 10 ml (Sterile)	\$ 1.48
52. Xylocaine 20 ml / 1.5%	\$ 24.06
53. Xylocaine MPF 1% / 5ml	\$ 5.56
54. Xylocaine MPF 2% / 10ml	\$ 17.28
55. Xylocaine with Epin. MPF 1% / 30 m	\$ 17.04
56. Xylocaine with Epin. MPF 2% / 20 m	\$ 18.61
57. Zinc Gluconate 100 mg	\$ 0.08

COMMITTEE REPORT HEALTH, WELFARE & SENIOR CITIZENS

Bill No. 185-"Relative to the Adoption of the Adding Fifty-Seven (57) Pharmaceutical Items to the Hospital's Fee Schedule"

PUBLIC HEARING

The Health, Welfare & Senior Citizens Committee held a public hearing on Monday, April 3, 1995 at 9:00 a.m. to hear testimonies on Bill No. 185-"Relative to the Adoption of the Adding Fifty-Seven (57) Pharmaceutical Items to the Hospital's Fee Schedule". The public hearing was held at Guam Memorial Hospital First Floor Classroom.

The hearing was called to order by the HW&SC Chairperson, Senator Lou Leon Guerrero. Committee members present were Senators Ben Pangelinan and Tony Lamorena.

PURPOSE

All fees for new services and products/supplies must be adjudicated through the Administrative Adjudication Act and must be introduced at the Request of the Governor. Fifty-Seven (57) new Pharmaceutical items are currently being dispensed but are not being charged.

BACKGROUND

P.L. 21-90 § 80105 of 10GCA Chapter 80 states:

- §. Hospital Rates. (d) The Authority shall not implement rates in the current fee schedule, unless approved by the Legislature by statute. The Authority may set fees, pursuant to the Administrative Adjudication Act....."
- P.L. 22-96 Subsection (b) § 9303, Title 5 GCA requires the Governor to submit proposed rules to the Legislature in bill format.

TESTIMONY

Oral testimony was presented by George Macris, M.D. and Helen Ripple, GMHA Administrator. Both stated that they are in favor of this bill. Dr. Macris commented that he believes "the fees are fair,

maybe a little too low and the markup is conservative relative to cost."

Written testimony was presented by Dennis G. Rodriguez, Director Department of Public Health and Social Services who favors Bill 185. James W. Gillan, Chief Operating Officer, GMHP provided written testimony indicating "that some of the charges proposed exceed our current Formulary Charges by 100 percent." "The cost increases in all Pharmacy items used by in-patients will, of course, have to be passed on in Premium increases."

FINDINGS

Pharmaceutical fees are set following the criteria of the Net Revenue Enhancement Model using the inventory price (landed price) and factoring a markup of either 1.45 for supply items, or 2.756 for medications.

Fifty-Seven (57) items are currently being dispensed but are not charged or collected.

COMMITTEE RECOMMENDATION

On Bill 185-"Relative to the Adoption of the Adding Fifty-Seven (57) Pharmaceutical Items to the Hospital's Fee Schedule", the Committee on Health, Welfare & Senior Citizens hereby recommends TO DO PASS.

GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

57 Pharmacy Items Package #4

PHARMACY DEPARTMENT **MEDICATION**

Acetaminophen 325 mg/ 10 ml: Medication is used for analgesic, and

antipyretic.

NEW * (42-00304)

Charge Cost:

\$.33

Acetaminophen 650 mg/ 20 ml: Medication is used for analgesic, and

antipyretic.

* (42-00305) NEW

Charge Cost: \$.50

Acetazolamide 250 mg:

Medication is used for carbonic, and

anhydrose inhibitor.

(42 - 00052)NEW

Charge Cost:

\$.25

Acetylcysteine,

Mucomyst 10%, 10 ml:

Medication is used for mucolytic

agent, and respiratory inhalant.

NEW * (42-00306)

Charge Cost:

\$48.18

Aluminum/ Magnesium

Simeth/-II 30 ml:

Medication is used for antacid.

NEW * (42-00307)

Charge Cost:

\$.72

Ammonium Chloride

100 mg/ 20 ml:

Medication is used for astringent.

* (42-00125)

Charge Cost:

\$3.97

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GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Antihemophilic Factor 8, 1 Unit:

Medication is used for antihemophlic.

NEW * (42-00128)

Charge Cost: \$385.72

Aristocort Forte

Parenteral 40 mg/ ml:

Corticosteroid medication.

NEW * (42-00164)

Charge Cost:

\$6.84

Bacitracin 500 u/ GM,

0.9gm:

Medication is used for antibacterial.

NEW * (42-00165)

Charge Cost: \$.14

Benzoin Comp. Tincture

473 ml:

Medication is used for topical

protectant.

NEW * (42-00175)

Charge Cost: \$8.27

Cyanide Antidote:

Medication is used for antidote.

NEW * (42-00180)

Charge Cost: \$321.00

GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Dacroise Eye,	
Irrigating 118 ml:	Medication is used for irrigating solutions, and ophthalmic.
NEW * (42-00222)	Charge Cost: \$8.96
Dantrium 70 ml:	Medication is used for skeletal muscle relaxant.
NEW * (42-00251)	Charge Cost: \$152.19
Empty Tubex 1 ml:	Tubex is used for placebo injection.
NEW * (42-00254)	Charge Cost: \$1.52
Empty Tubex 2 ml:	Tubex is used for placebo injection.
NEW * (42-00256)	Charge Cost: \$1.52

GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Enkaid 25 mg:	Medication is used for antiarrhythmic.
NEW * (42-00257)	Charge Cost: \$.94
Ophthalgen 7.5 ml:	Hyperosmolar eye preparations.
NEW * (42-00258)	Charge Cost: \$13.20
Guaifenesin, Robitussin 100 mg/ 5 ml:	Medication is used for expectorant.
NEW * (42-00259)	Charge Cost: \$3.06
Hydrophilic 1 lb:	Medication is used for ointment base.
NEW + (42-00308)	Charge Cost: \$7.41
Hyperab 10 ml:	Medication is used for agent for immunization.
NEW * (42-00261)	Charge Cost: \$426.40
Hyperab 2 ml:	Medication is used for agent for immunization.
NEW * (42-00262)	Charge Cost: \$128.45
Iodine Povidone, Efodine 1 %/ 1.5 g:	Medication is used as an antiseptic.
NEW * (42-00264)	Charge Cost: \$.14

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GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Kaolin/Pectin 30 ml:

Medication is used for antidiarrheal

combinations.

NEW (42-00265) Charge Cost:

\$.74

Labetalol, Normodyne

HCL 300 mg:

Medication is used

antihypertensive.

(42 - 00266)NEW

Charge Cost:

\$2.13

Lidocaine Hydrochloride

2%/ 2 ml:

Medication is used for local

anesthetic.

(42 - 00269)NEW *

Charge Cost:

\$1.49

Manganese 0.1 mg/ ml, 10 ml:

Medication is used for manganese

deficiency. Pharmaceutical necessity.

(42 - 00271)NEW

Charge Cost:

\$1.49

GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Metopirone 250 mg:	Medication is used for diagnostic aid. (For pituitary function determination).
NEW * (42-00273)	Charge Cost: \$2.89
Mineral Oil 10 ml:	Medication is used for cathartic pharmaceutic aid. (Solvent, oleaginous vehicle).
NEW * (42-00274)	Charge Cost: \$2.34
Nesacaine 3%/ 30 ml:	Medication is used for local anesthetic.
NEW * (42-00247)	Charge Cost: \$46.25
Norvasc 10 mg:	Medication is used as calcium channel blocker.
NEW * (42-00246)	Charge Cost: \$4.48
Norvasc 2.5 mg:	Medication is used as calcium channel blocker.
NEW * (42-00244)	Charge Cost: \$2.62
Norvasc 5 mg:	Medication is used as calcium channel blocker.
NEW * (42-00245)	Charge Cost: \$2.62
Papaverine HCL Injection, 30 mg/ ml, 10 ml:	Medication is used for smooth muscle relaxant.
NEW * (42-00275)	Charge Cost: \$10.25

GUAM MEMORIAL HOSPITAL AUTHORITY

PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Pentothal Ready-To-Mix, 250 mg:

Medication is used for anesthetic.

NEW * (42-00276)

Charge Cost: \$9.23

Phenobarbital Elixir,

30 mg/ 7.5 ml:

Medication is used for anticonvulsant,

hypnotic, and sedative.

NEW * (42-00277)

Charge Cost: \$1.87

Kayexalate

453.6 gm (Bottle):

Medication is used for lowering

potassium.

NEW * (42-00278)

Charge Cost: \$357.51

Kayexalate 1 qm:

Medication is used for lowering

potassium.

NEW * (42-00312)

Charge Cost: \$.94

Potassium Chlor. Oral,

15 mg/ 11.25 ml:

Medication is used for potassium

deficiency, and hypoptassemia.

NEW * (42-00279)

Charge Cost:

\$.72

Potassium Chlor. Oral,

30 mg/ 22.5 ml:

Medication is used for potassium

deficiency, and hypoptassemia.

NEW * (42-00281)

Charge Cost:

\$.72

CONTENT OF GUAM EXPENS GUAM MEMORIAL HOSPITAL AUTHORITY

PUBLIC HEARING RELATIVE TO NEW RAT

PHARMACY DEPARTMENT MEDICATION (Continued)

Potassium Chlor. Oral, 40 mg/ 30 ml:

Medication is used for potassium

deficiency, and hypoptassemia.

(42 - 00282)NEW

Charge Cost:

\$.72

Primaxin Injection 500 mg:

Medication is used for anti-infective.

(42 - 00243)NEW

Charge Cost: \$62.45

Matulane 50 mg:

Medication is used for cytostatic

antineoplastic agent.

(42 - 00285)NEW

Charge Cost:

\$1.60

Robitussin 10 ml:

Medication is used for expectorant.

(42 - 00286)NEW

Charge Cost:

\$.77

Robitussin-DM 10 ml:

Medication is used for expectorant.

NEW (42 - 00287) Charge Cost:

\$1.43

GUAM MEMORIAL HOSPITAL AUTHORITY

PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Sodium Lactate 10 ml/ 20 ml:

Medication is used for fluid and

electrolyte replenisher.

NEW * (42-00288)

Charge Cost: \$10.78

Empty Container Sterile

Vial 10 ml:

Item is used for transferring

solutions.

NEW * (42-00291)

Charge Cost: \$2.92

Empty Container Sterile

Vial 30 ml:

Item is used for transferring

solutions.

NEW * (42-00292)

Charge Cost: \$5.40

Surgilube 3.0 gm:

Medication is used for surgical

\$.08

lubricant.

NEW * (42-00293)

Charge Cost:

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GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Triple-Dye .65 ml:	Medication is used for unbilical area disinfectant.
NEW * (42-00296)	Charge Cost: \$1.98
Vincristine Sulfate 1 mg:	Medication is used for anineoplastic.
NEW * (42-00297)	Charge Cost: \$97.77
Water for Injection 10 ml (Sterile):	Medication is used for Pharmaceutic aid (solvent), irrigation therapy, vehicle, and fluid.
NEW * (42-00298)	Charge Cost: \$1.48
Xylocaine 20 ml/ 1.5%:	Medication is used for local anesthetic.
NEW * (42-00299)	Charge Cost: \$24.06
Xylocaine MPF 1%/ 5 ml:	Medication is used for local anesthetic.
NEW * (42-00248)	Charge Cost: \$5.56
Xylocaine MPF 2%/ 10 ml:	Medication is used for local anesthetic.
NEW * (42-00249)	Charge Cost: \$17.28
Xylocaine with Epin. MPF 1%/ 30 m:	Medication is used for local anesthetic.
NEW * (42-00253)	Charge Cost: \$17.04

ALL RODUCED AT GOVERNMENT OF GUAM EXPENS.

GUAM MEMORIAL HOSPITAL AUTHORITY PUBLIC HEARING RELATIVE TO NEW RATES

PHARMACY DEPARTMENT MEDICATION (Continued)

Xylocaine with Epin.

MPF 2%/ 20 m:

Medication is used for local

anesthetic.

NEW * (42-00255)

Charge Cost:

\$18.61

Zinc Gluconate 100 mg:

Medication is used for zinc supplement

(trace mineral).

NEW * (42-00301)

Charge Cost:

\$.08

FISCAL NOTE AU OF BUDGET AND MAKAGEMENT REMECH APR 0 5 1995

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Inpact on Property $\frac{X}{X}$	esent Progr Increase	rem Funding: Decrease	Reallo	cation	No Change	
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PROGRAM CATEGORY	ESTIMATE	D SINGLE-YEAD GENERAL FUND	FUND REQUIR	EMENTS (Per 81 THER	11) TOTAL	
, , , , , , , , , , , , , , , , , , , ,				THER	TOTAL	
Health & Welfare		See Attache			- 	-
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FUNDS ADEQUATE TO (COVER INTEN	T OF THE BILL	.7 YES/NO-IF N	io, ADD'L AHOU	NT REQUIRED	\$
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FOOTNOTES:				<u> </u>		

Comments on Bill No. 185

Bill No. 185 is an Act to add a new subsection (g) to section 80105 of 10 GCA relavtive to the adoption of adding fifty—seven (57) pharmaceutical items to the Hospital's Fee Schedule.

Based on information from the Guam Memorial Hospital Authority, it is anticipated that potential revenues in the amount of \$383,057.64 for the first year will be realized.

Medication	Unit Price	Est. Usage Annual	Total Costs
Acetaminophen 325 mg/10 ml	0.33	2400	792.00
Acetaminophen 650 mg/20 ml	0.5	4800	2,400.00
Acetazolamide 250 mg	0.25	2520	630.00
Acetylcysteine, Mucomyst 10%, 10 ml	48.18	240	11,563.20
Aluminum/Magnesium Simeth/II-30 ml	0.72	2400	1,728.00
Ammomium Chloride 100 mg/20 ml	3,97	300	1,191.00
Antihemophilic Factor 8, 1 unit	385.72	480	185,145.60
Aristocort Forte Parenteral 40 mg/ml	6.84	60	410.40
Bacitracin 500 u/GM, 0.9 gm	0.14	2400	336,00
Benzoin Comp. Tincture 473 ml	8.27	72	595.44
Cyanide Antidote	321	12	3,852.00
Dacroise Eye, Irrigating 118 ml	8,96	48	430.08
Dantrium 70 ml	152.19	12	1,826.28
Empty Tubex 1 ml	1.52	1200	1,824.00
Empty Tubex 2 ml	1.52	1200	1,824.00
Enkaid 25 mg	0.94	60	56.40
Ophthalgen 7.5 ml	13.2	12	158.40
Guaifenesin, Robitussin 100 mg/5 ml	3,06	240	734.40
Hydrophilic 1 lb	7.41	12	88.92
Hyperab 2 ml	128.45	12	1,541.40
Hyperab 10 ml	426.4	12	5,116.80
lodine Povidone, Efodine 1%/1.5 g	0.14	2400	336.00
Kaolin/Pectin 30 ml	0.74	240	177.60
Labetalol, Normodyne HCL 300 mg	2.13	96	204.48
Lidocaine Hydrochloride 2%/2 ml	1.49	120	178.80
Manganese 0.1 mg/ml, 10 ml	1.49	12	17.88
Metopirone 250 mg	2.89	12	34.68
Mineral Oil 10 ml	2.34	240	561.60
Nescaine 3%/30 ml	46.25	72	3,330.00
Norvasc 10 mg	4.48	2400	10,752.00
Norvasc 2.5 mg	2.62	2400	6,288.00
Norvasc 5 mg	2.62	2400	6,288.00
Papaverine HCL Injection, 30 mg/10 ml	10.25	12	123.00
Pentothal Ready-to-Mix, 250 mg	9.23	4800	44,304.00
Phenobarbital Elixir, 30 mg/7/5	1.87	60	112.20
Kayexalate 453.6 gm (Bottle)	357.51	60	21,450.60

		65	
Kayexalate 1 gm	0.94	60	564.00
Potassium Chlor. Oral, 15 mg/11.25 ml	0.72	240	172.80
Potassium Chlor. Oral, 30 mg/22.5 ml	0.72	240	172.80
Potassium Chlor. Oral, 40 mg/30 ml	0.72	240	172.80
Primaxin Injection 500 mg	62.45	600	37,470.00
Matulane 50 mg	1.6	60	96.00
Robitussin 10 ml	0.77	2400	1,848.00
Robitussin-DM 10 ml	1.43	600	858.00
Sodium Lactate 10 ml/20 ml	10.78	60	646.80
Empty container Sterile Vial 10 ml	2.92	60	175.20
Empty container Sterile Vial 30 ml	5.4	60	324.00
Surgilube 3.0 gm	0.08	1200	96.00
Triple Dye .65 ml	1.98	60	118.80
Vincristine Sulfate 1 mg	97,77	24	2,346.48
Water for Injection 10 ml (Sterile)	1.48	1200	1,776.00
Xylocaine 20 ml/1.5%	24.06	240	5,774.40
Xylocaine MFP 1%/5ml	5.56	240	1,334.40
Xylocaine MFP 2%/10ml	17.28	240	4,147.20
Xylocaine with Epin. MPF 1%/30 m	17.04	240	4,089.60
Xylocaine with Epin. MPF 2%/20 m	18.61	240	4,466.40
Zinc Gluconate 100 mg	0.08	60	4.80

Total \$383,057.64

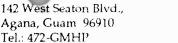


The undersigned have appeared and/or submitted testimony to the Committee on Health, Welfare & Senior Citizens to testify on Bill 185, RELATIVE TO THE ADOPTION OF THE ADDING FIFTY-SEVEN (57) PHARMACEUTICAL ITEMS TO THE HOSPITAL'S FEE SCHEDULE.

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Representing _ ら M ユ ア	
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MEMORIAL HEALTH PLAN 142 West Seaton Blvd., Agana, Guam 96910





April 3, 1995

Honorable Lourdes Leon Guerrero, RN, MPH Chairperson, Committee on Health, Welfare and Senior Citizens Twenty-Third Guam Legislature (First) Regular Session 342 W. Soledad Avenue Agana, Guam 96910

Fax: (671) 477-1784

Dear Senator Leon Guerrero:

DIAGNOGIG

My testimony relates to bills 184, 185, 186, and 187 respectively.

Bill 184 approves the existing fee schedule at the Guam Memorial Hospital reflecting price adjustments developed from the Net Revenue Enhancement Model.

While the annual adjustment sought in this fee schedule is an aggregate 13.5 percent, we looked at some of the most common procedures we currently cover at GMH to determine what the impact would be on our future costs. We offer the following for your information:

DIAGNOSIS	INCREASE
Chronic Cholecystitis Benign Prostatic Hyper-	31%
trophy	45%
Appendicitis	42%
Torn Ligament Knee	69%
Pyelonephritis	37%
Chest Pain R/O MI	5 2 %
C-Section	48%
Term Pregnancy	85%*

*(Assumes we will be required to pay for three separate room charges on the day of admission, i.e., Labor Room Observation, Delivery Room, and Obstetrics Floor Bed

As you can see, most of our common costs are going to increase much more than the 13.5 percent aggregate. To put this in another perspective, we estimate that the anticipated increase in premium for the Government of Guam, Commercial Accounts, and Federal Government Accounts for Hospital costs alone will be: 12%, 8%, and 8%, respectively.

While we appreciate the Hospital's need to charge fees sufficient to meet their costs, we also will have to adjust our charges to meet the anticipated increase in charges to us. We would also be very interested in looking for more cost effective alternatives to Hospital based care and will be working with other Third Party Payors to encourage the development of those kinds of alternatives.

Bill 185

This bill seeks to add fifty-seven pharmaceutical items to the current fee schedule. We have done a cursory review and find that some of the charges proposed exceed our current Formulary Charges by 100 percent. (Our current Formulary is based upon the January 1, 1995 Medispan report for Average Wholesale Price (AWP)). The cost increases in all Pharmacy items used by in-patients will, of course, have to passed on in Premium increases. We currently do not have an agreement to use the Out-patient Pharmacy services at the Hospital due to the higher charges.

Bill 186

This bill seeks adoption by law of a Professional Fee Model for the development of fees for professional services. The bill would give the Hospital the authority to adjust these fees annually with out recourse to Administrative Adjudication Requirements.

GMHP endorses the concept of agreement on **any** reasonable method for establishing fees for Professional services. Using the CPT and the Resource Based Relative Value Scale (RBRVS) is a forward thinking concept on the part of the Hospital and the Consultants and Physicians who put it together. It recognizes time and skills required to provide a service, and also takes into account the complexities of the settings in which the provider operates. It appears on its face to be eminently equitable.

I am sure most physicians would agree that the CPT adequately describes the services provided, and the RBRVS allows for an equitable **method** to determine how much is to be paid for the service provided.

What becomes somewhat troublesome for me, however, are the proposed fees that would become effective with the passage of this act. They are easily 10 to 20 percent higher than the fees GMHP currently pays to its providers. This fee schedule will eventually effect our providers when they see what a GMH "House" Physician will be getting reimbursed. This schedule will cause upward pressures on our rate schedule any will probably force us to increase our RVS.

I do not support exempting the fee schedule from the Administrative Adjudication process. As can be seen from the record of attendees last few hearings, the Third the AAA only Payors, interested Government Agencies and Legislative staff were in attendance. The general public is I'm sure somewhat hesitant to become involved in this process as it is quite complex and even confusing. As long as the Hospital remains a Governmental Agency, as long as it continues to provide care paid for by General Revenues and as long as it is the only civilian source of acute care, some public accounting must be given of all the activities of the facility. The Legislature has I feel an obligation to use its best efforts to determine for the people of Guam, whether any proposed fee or charge by any Government Agency is reasonable and appropriate. Perhaps there is a way to streamline the process, but the Public's best interest is served by requiring some sort of Administrative Review Process

Bill 187

This bill would allow for the adoption of the Guam Memorial Hospital's Pricing Model for use in the establishment and adjustment of fees set by the Hospital. The model was the result of a revenue enhancement project undertaken by Deloitte and Touche several years ago.

We agree that a reasonable and rational **method** for determining the rate structure should be adopted. The model used by the consultants is as good as any used in other hospitals. Our basic concern is that in the development of the model, the consultants did not question the hospital's costs in order to determine whether they were appropriate as the base for the development of the model.

Page 4.

We do not agree that the Pricing Model needs to be adopted by legislation, that should be a policy decision made by the Board of Trustees. The model for the development of Professional fees also should not be adopted by legislation. The Hospital should have the flexibility to use any rational methodology for developing its fee schedules.

opposed to any exemption from the We are Administrative Adjudication process for the same reasons as stated in our position on Bill 186. Some would lead you to believe that the AAA process hampers their ability to establish rates and fees on a timely basis. We do not agree. The example of the anti clotting agent Activase has been used by the Hospital several times as an example of what happens when they do not get their new drugs adjudicated in a timely manner. Is that drug still not adopted in the fee schedule? We would be very disappointed if that were so since the hospital has had many years to properly include it in the fee schedule. Indeed, there was enough information available on that drug early enough that it could have been adopted in the schedule of fees in a relatively timely manner.

We would support a streamlined adjudication process for medically necessary pharmaceuticals and supplies with provision for retrospective review of the circumstances causing the 'medical necessity'.

Thank you for the opportunity to present this testimony.

Sincerely,

James W. Gillan

Chief Operating Officer



GOVERNMENT OF GUAM
P. O. BOX 2816
AGANA, GUAM 96910



APR 0 1 1995

Honorable Lou Leon Guerrero Chairperson, Health, Welfare And Senior Citizens 23rd Guam Legislature Guam

Dear Madam Chair:

Thank you for the opportunity to present our position on Bill No. 184:

An Act to Accept the Hospital's Implementation of an Annual Adjustment to the Net Revenue Enhancement Model Reflecting Price Adjustments to the Existing Fee Schedule Items of the Guam Memorial Hospital Authority."

I agree that the Hospital's existing fee schedule deserves some adjustments to increase its rates. P.L.18-26 allowed the Hospital to increase their rates across the board for three successive years. The rate increase was started in 1986 and ended in 1988 at 12% for the first two years and 4% on the third year. The law precluded them to have any rate increase after 1988.

The increase to these rates are long overdue. I think that for most of the fees, 13.5% increase is realistic. The implementation of the annual adjustment to the new Net Revenue Enhancement Model, to increase rates though, needs a thorough analysis of the model.

Granted that this model is a workable model to use on Guam, what guarantee that payors on island will reimburse the Hospital at this rates. This is very significant since Hospital fees using this model utilizes contractual adjustment as part of its indirect costs. What guarantee does the Hospital have, that payors will reimburse the Hospital if not at full charge at least at a reasonable percentage of charges?

MIP as you all know pays at 100% percent of covered charges. If the Hospital, for some reasons is unable to be reimbursed appropriately, again there will be a shifting of cost to the government.

Thank you.

DENNIS G. RODRIGUEZ

Director





GOVERNMENT OF GUAM
P. O. BOX 2816
AGANA, GUAM 96910



APR 0 1 1995

Honorable Lou Leon Guerrero Chairperson, Health, Welfare And Senior Citizens 23rd Guam Legislature Guam

Dear Madam Chair:

Thank you for the opportunity to present our position on Bill No. 185:

"Relative to the Adoption of the Adding Fifty Seven (57) Pharmaceutical Items to the Hopital's Fee Schedule."

I am in favor of adding the requested list of pharmaceutical preparations to GMHA's current fee schedule. These pharmaceutical preparation are currently dispensed to patients without the Hospital being re-imbursed for it. Non-adjudication of these fees will result to continued non-payment of these items by GMHA's payors.

Thank you.

DENNIS G. RODRIGUEZ

Director





GOVERNMENT OF GUAM
P. O. BOX 2816
AGANA, GUAM 96910



APR 0 1 1995

Honorable Lou Leon Guerrero Chairperson, Health, Welfare And Senior Citizens 23rd Guam Legislature Guam

Dear Madam Chair:

Thank you for allowing me to share with you some of my comments on Bill 186:

"Relative to the Adoption of the Hospital's Professional Fee Model for use in the Establishment and Adjustment of Fees for Professional Services set by the Authority"

This Bill authorizes and exempts GMHA from the provisions of the Administrative Adjudication Act on the use the Professional Fee Model for the pricing of professional fees at the Hospital. Furthermore, this is in an attempt by the Hospital to assure the people of Guam that the Hospital is cost effective in the delivery of services by physicians and other professional practitioners.

The implementation of RBRVS as a basis for physician reimbursement was started in Jan.1,1992 with full implementation by Jan.1996. Actually what spurred Congress' interest in physician payment reform was the dramatic increase in the Government spending for physician services and Medicare Part B services. This prompted Congress to establish in 1986, the Physician Payment Review Commission (PPRC) which together with Department of Health Human Services (DHSS) made an extensive set of recommendations that was incorporated in the Omnibus Budget Reconciliation Act of 1989 (OBRA'89) to authorize the development of the RVS.

The ultimate goals of using this payment system is fairness, in that physician reimbursement is based on the amount of work it takes a doctor to diagnose and/or treat patients, instead of basing payment on physicians' charge histories. By basing payments on work, adjusted by cost of practice in different localities, the assumption is that reimbursement will be equitable across specialties and geographic areas. Ultimately this will slow down the rise in government (Medicare) spending for physician services. This is made possible by reduction of reimbursement for overvalued procedures.



Page 2
Bill No. 186
Committee Health, Welfare & Senior Citizens

The significant reimbursement impact that accompanies RVS, aside from a departure from the basic ways physicians are reimbursed for services, is, the overall shifting of Medicare dollars from specialist to physicians who provide evaluation and management services.

With this background information, I do not envision a problem in the Hospital wanting to use the Medicare's Resource Based Relative Value Scale (RBRVS) scheme as a basis for pricing professional services on Guam.

The principle of reimbursement from federal funded programs like Medicaid (which is being administered by DPHSS), will still remain the same. Medicaid's reimbursement cannot be more than what Medicare would pay.

On a related matter, I am concern with the Hospital's inability to bill for professional services of house staff. Concurrent efforts should be directed into streamlining billing activities as this will help the Hospital recover cost at the same time lift the financial burden from the government. Let us try to shift the cost to the rightful payors in this community.

Thank you.

DENNIS G. RODRIGUEZ

Director,



GOVERNMENT OF GUAM P.O. BOX 2816 AGANA, GUAM 96910



APR 0 3 1995

Honorable Lou Leon Guerrerro Chairperson, Committee on Health, Welfare and Senior Citizens 23rd Guam Legislature Agana, Guam

Dear Madam Chair:

Thank you for allowing me to share with you my thoughts on Bill 187:

"Relative to the Adoption of the Hospital's Pricing Model for use in the Establishment and Adjustment of Fees set by the Authority"

There is no doubt in my mind that the Hospital is in the right direction as far as efforts to come up with a fee setting model. However, this model should not only provide a more realistic approach to generating appropriate fees sufficient to cover the costs of providing medical services, but should also be a model that is able to provide for adjustment of fees if deemed necessary.

The last adjustment to the Hospital's fee schedule was in 1985, when P.L.18-26 allowed GMHA an increase over a three-year period of 12% for the first two years and 4% on the third year commencing from 1986 to 1988. Since that time the law prevented them from any further fee adjustments. However, I feel that for as long as nothing is in place to force payors to pay the Hospital at whatever rates are generated using this model, or else improve the Hospital's billing and collection practices, then the Hospital (government) will continue to be plagued by the same problems that it has all these years.

Currently, the only payor that pays the Hospital at the highest rate, 100% of covered charges, is the local government-funded Medically Indigent Program (MIP). Should this model that utilizes "contractual allowances" as one of the major components of GMHA costs (in fee setting) be implemented, a further cost shifting to the government through MIP is expected to continue.

Medicare, a federal government administered program reimburses the Hospital on an interim per diem rate. I understand that this rate is based on Medicare's analysis of the Hospital's cost report. The rates vary from year to year. An example of which is as follows:



Acute Care Rate FY '93 FY '94 Effective Date

Part A (Hosp.) \$627/day \$608/day Service date on or after 5/1/94

Part B (Outpt.) 89% No change "

Medicare used to reimburse the Hospital at a hundred percent of charges in the early eighties. After the Hospital started unbundling their charges, Medicare started reimbursing the Hospital at lower rates. As a matter of fact, sometime later in the eighties, Medicare started reimbursing the Hospital at a low rate of \$320/day of hospitalization regardless of the level of acute care.

It is worth examining these areas since Medicaid which is a federal/local matching program, reimburses the Hospital following Medicare's principle of reimbursement. Medicaid, by federal regulation, cannot pay for medical services more than what Medicare would pay.

I firmly believe that changes in the Hospital's fee structure is long overdue. However, I donot believe that this is the only change necessary to solve the Hospital's long-standing problems.

Thank you.

DENNIS G. RODRIGUEZ DIRECTOR, DPHSS

Istroji ee

Twenty-Third Guam Legislature

TAIRMAN, COMMITTEE ON RULES

Bill no.: 185 (65)

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Introduced at the Request of the Governor

"Relative to the Adoption of the Adding Fifty-Seven (57) Pharmaceutical Items to the Hospital's Fee Schedule"

BE IT ENACTED BY THE PEOPLE OF THE TERRITORY OF GUAM:

Section 1. A new subsection (g) is added to section 80105 of 10 GCA to read:

"Section 80105(g). The Hospital has identified fifty-seven (57) additional pharmaceutical items to add to its current fee schedule. Such pharmaceutical items have been rendered to patients but have not been adjudicated by statute. These fees being recommended for adoption are as follows:

7	<u>Medication</u>	Recommended Price
8	1. Acetaminophen 325 mg/10 ml	\$ 0.33
9	2. Acetaminophen 650 mg/20 ml	\$ 0.50
10	3. Acetazolamide 250 mg	\$ 0.25
11	4. Acetylcysteine, Mucomyst 10%, 10 ml	\$ 48.18
12	5. Aluminum/Magnesium Simeth/II-30 ml	\$ 0.72
13	6. Ammonium Chloride 100 mg/20 ml	\$ 3.97
14	7. Antihemophilic Factor 8, 1 unit	\$ 385.72
15	8. Aristocort Forte Parenteral 40 mg/ml	\$ 6.84
16	9. Bacitracin 500 u /GM, 0.9gm	\$ 0.14
17	10. Benzoin Comp. Tincture 473 ml	\$ 8.27
18	11. Cyanide Antidote	\$ 321.00
19	12. Dacroise Eye, Irrigating 118 ml	\$ 8.96
20	13. Dantrium 70 ml	\$ 152.19
21	14. Empty Tubex 1 ml	\$ 1.52
22	15. Empty Tubex 2 ml	\$ 1.52
23	16. Enkaid 25 mg	\$ 0.94
24	17. Ophthalgen 7.5 ml	\$ 13.20
25	18. Guaifenesin, Robitussin 100 mg/ 5m1	\$ 3.06
26	19. Hydrophilic 1 lb	\$ 7.41

1 *	20. Hyperab 2 ml	\$128.45
1 2	21. Hyperab 10 ml	\$426.40
3	22. Iodine Povidone, Efodine 1% / 1.5 g	\$ 0.14
4 '	23. Kaolin/Pectin 30 ml	\$ 0.74
5	24. Labetalol, Normodyne HCL 300 mg	\$ 2.13
6	25. Lidocaine Hydrochloride 2%/2ml	\$ 1.49
7	26. Manganese 0.1 mg/ml, 10 ml	\$ 1.49
8	27. Metopirone 250 mg	\$ 2.89
9	28. Mineral Oil 10 ml	\$ 2.34
10	29. Nesacaine 3%/30 ml	\$ 46.25
11	30. Norvasc 10 mg	\$ 4.48
12	31. Norvasc 2.5 mg	\$ 2.62
13	32. Norvasc 5 mg	\$ 2.62
- 14	33. Papaverine HCL Injection, 30 mg/10 ml	\$ 10.25
15	34. Pentothal Ready-to-Mix, 250 mg	\$ 9.23
16	35. Phenobarbital Elixir, 30mg/7.5ml	\$ 1.87
17	36. Kayexalate 453.6 gm (Bottle)	\$357.51
18.	37. Kayexalate 1 gm	\$ 0.94
19	38. Potassium Chlor. Oral, 15mg/11.25 ml	\$ 0.72
20	39. Potassium Chlor. Oral, 30mg/22.5 ml	\$ 0.72
21	40. Potassium Chlor. Oral, 40 mg / 30 ml	\$ 0.72
22	41. Primaxin Injection 500 mg	\$ 62.45
23	42. Matulane 50 mg	\$ 1.60
24	43. Robitussin 10 ml	\$ 0.77
25	44. Robitussin-DM 10 ml	\$ 1.43
26	45. Sodium Lactate 10 ml / 20 ml	\$ 10.78
27	46. Empty Container Sterile Vial 10 ml	\$ 2.92
28	47. Empty Container Sterile Vial 30 ml	\$ 5.40
29	48. Surgilube 3.0 gm	\$ 0.08
3₫	49. Triple-Dye .65 ml	\$ 1.98
31	50. Vincristine Sulfate 1 mg	\$ 97.77
32	51. Water for Injection 10 ml (Sterile)	\$ 1.48
33	52. Xylocaine 20 ml / 1.5%	\$ 24.06
34	53. Xylocaine MPF 1% / 5ml	\$ 5.56
35	54. Xylocaine MPF 2% / 10ml	\$ 17.28
36	55. Xylocaine with Epin. MPF 1% / 30 m	\$ 17.04
37	56. Xylocaine with Epin. MPF 2% / 20 m	\$ 18.61
38	57. Zinc Gluconate 100 mg	\$ 0.08