

PUBLIC NOTICE
(SPA 14-047)
Dispensing Fees

The Department of Health and Human Services, Division of Medical Assistance hereby provides notice of its intent to amend the Medicaid State Plan page Attachment 4.19-B, Section 12, Page 1a for dispensing fees. The new methodology requires DMA to raise dispensing fees to \$14 for preferred brands and generics and \$13 for non-preferred brands and generics. This notice is subject to change pending the outcome of the current legislation session.

This amendment will become effective July 1, 2015. The annual estimated state fiscal impact of this change is:

- a. SFY 2015 (\$126,283,000)
- b. SFY 2016 (\$126,283,000)

A copy of the proposed public notice may be viewed at the County Department of Social Services. Questions, comments and requests for copies of the proposed State Plan amendment should be directed to the Division of Medical Assistance at the address listed below:

Dave Richard
Director
Division of Medical Assistance
2501 Mail Service Center
Raleigh, NC 27699-2501