

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ABACAVIR SULFATE 300 MG TAB	0000	0.60392	07/05/2026
ACAMPROSATE CALCIUM 333 MG TAB DR	0000	0.52459	04/05/2026
ACARBOSE 100 MG TAB	0000	0.23331	04/05/2026
ACARBOSE 25 MG TAB	0000	0.14644	10/05/2025
ACARBOSE 50 MG TAB	0000	0.16260	08/05/2025
ACEBUTOLOL 200 MG CAP	0000	0.64265	06/05/2025
ACEBUTOLOL 400 MG CAP	0000	0.80005	08/05/2026
ACETAMINOPHEN WITH CODEINE 120-12MG/5 SOLUTION	0000	0.43649	07/05/2025
ACETAMINOPHEN/COD 300/15 MG TAB	0000	0.25622	01/05/2026
ACETAMINOPHEN/COD 300/30 MG TAB	0000	0.23111	09/05/2025
ACETAMINOPHEN/COD 300/60 MG TAB	0000	0.42183	05/05/2026
ACETAZOLAMIDE 250 MG TAB	0000	0.13382	12/05/2025
ACETAZOLAMIDE 500 MG CAP	0000	0.31226	05/05/2026
ACETIC ACID 0.25% IRRIG SOLN	0000	0.00460	03/05/2015
ACETIC ACID 2 % SOLN	0000	1.43955	04/05/2026
ACETIC ACID/HYDROCORTISONE 2 %-1 % DROPS	0000	5.63175	08/05/2026
ACETYLCYSTEINE 10% VIAL	0000	0.99141	08/05/2026
ACETYLCYSTEINE 20% VIAL	0000	0.55744	02/05/2026
ACITRETIN 10 MG CAPSULE	0000	2.25909	04/05/2026
ACITRETIN 25 MG CAP	0000	3.81879	10/05/2025
ACYCLOVIR 200 MG CAP	0000	0.09816	04/05/2026
ACYCLOVIR 200 MG/5 ML SUSP	0000	0.07005	06/05/2026
ACYCLOVIR 400 MG TAB	0000	0.09289	04/05/2026
ACYCLOVIR 5 % OINT. (G)	0000	0.59232	11/05/2025
ACYCLOVIR 800 MG TAB	0000	0.15077	04/05/2026
ALBUTEROL 0.83 MG/ML SOLN	0000	0.05918	07/05/2025
ALBUTEROL 2.5 MG/0.5 ML SOL	0000	0.46860	03/05/2026
ALBUTEROL 5 MG/ML SOLN	0000	2.12250	09/05/2019
ALBUTEROL SUL 1.25 MG/3 ML SOLN	0000	0.23839	01/05/2026
ALBUTEROL SULF 2 MG/5 ML SYRP	0000	0.03630	03/05/2026
ALBUTEROL SULFATE 0.63MG/3ML VIAL-NEB	0000	0.21765	01/05/2026
ALBUTEROL SULFATE 2 MG TAB	0000	0.26922	08/05/2026
ALBUTEROL SULFATE 4 MG TAB	0000	0.29983	03/05/2026
ALCLOMETASONE DIP 0.05% CRM	0000	1.42725	03/05/2026
ALCLOMETASONE DIP 0.05% OINT	0000	0.67540	08/05/2026
ALENDRONATE SODIUM 10 MG TAB	0000	0.12156	07/05/2026
ALENDRONATE SODIUM 35 MG TAB	0000	0.30438	03/05/2026
ALENDRONATE SODIUM 5 MG TAB	0000	0.18514	04/05/2019
ALENDRONATE SODIUM 70 MG TAB	0000	0.26291	09/05/2025
ALFUZOSIN HCL 10 MG TAB ER 24H	0000	0.12957	02/05/2026
ALLOPURINOL 100 MG TAB	0000	0.03613	02/05/2026
ALLOPURINOL 300 MG TAB	0000	0.09677	08/05/2026
ALMOTRIPTAN MALATE 12.5 MG TAB	0000	17.86465	05/05/2026
ALOSETRON HCL 1 MG TAB	0000	3.75033	01/05/2026
ALPRAZOLAM 0.25 MG TAB	0000	0.02340	07/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ALPRAZOLAM 0.5 MG ODT	0000	1.37914	05/05/2026
ALPRAZOLAM 0.5 MG TAB	0000	0.02322	08/05/2026
ALPRAZOLAM 1 MG ODT	0000	2.34054	02/05/2026
ALPRAZOLAM 1 MG TAB	0000	0.02335	07/05/2025
ALPRAZOLAM 2 MG TAB	0000	0.04334	08/05/2026
ALPRAZOLAM XR 0.5 MG TAB	0000	0.14485	01/05/2026
ALPRAZOLAM XR 1 MG TAB	0000	0.17477	04/05/2026
ALPRAZOLAM XR 2 MG TAB	0000	0.20354	08/05/2026
ALPRAZOLAM XR 3 MG TAB	0000	0.35298	12/05/2025
AMANTADINE 100 MG CAP	0000	0.15582	01/05/2026
AMANTADINE 100 MG TAB	0000	0.42918	11/05/2025
AMANTADINE 50 MG/5 ML SYRP	0000	0.05090	03/05/2026
AMILORIDE HCL 5 MG TAB	0000	0.20769	11/05/2025
AMILORIDE HCL/HCTZ 5/50 MG TAB	0000	0.40011	05/05/2026
AMIODARONE HCL 100 MG TAB	0000	0.47132	01/05/2026
AMIODARONE HCL 200 MG TAB	0000	0.12732	06/05/2026
AMIODARONE HCL 400 MG TAB	0000	0.38266	09/05/2025
AMITRIPTYLINE HCL 10 MG TAB	0000	0.04291	02/05/2026
AMITRIPTYLINE HCL 100 MG TAB	0000	0.15741	08/05/2026
AMITRIPTYLINE HCL 150 MG TAB	0000	0.26196	10/05/2025
AMITRIPTYLINE HCL 25 MG TAB	0000	0.05664	01/05/2026
AMITRIPTYLINE HCL 50 MG TAB	0000	0.09029	05/05/2026
AMITRIPTYLINE HCL 75 MG TAB	0000	0.13081	08/05/2026
AMLODIPINE BESYLATE 10 MG TAB	0000	0.01732	07/05/2025
AMLODIPINE BESYLATE 2.5 MG TAB	0000	0.01063	07/05/2026
AMLODIPINE BESYLATE 5 MG TAB	0000	0.01036	05/05/2026
AMLODIPINE-ATORVAST 5-40 MG TAB	0000	1.70014	04/05/2026
AMLODIPINE-BENAZEPRIL 10-40 MG CAP	0000	0.13589	07/05/2026
AMLODIPINE-BENAZEPRIL 10/20 MG CAP	0000	0.13519	05/05/2026
AMLODIPINE-BENAZEPRIL 2.5/10 MG CAP	0000	0.10396	04/05/2026
AMLODIPINE-BENAZEPRIL 5-40 MG CAP	0000	0.15064	05/05/2026
AMLODIPINE-BENAZEPRIL 5/10 MG CAP	0000	0.09988	04/05/2026
AMLODIPINE-BENAZEPRIL 5/20 MG CAP	0000	0.12927	07/05/2026
AMLODIPINE/ATORVASTATIN 10 MG-10 MG TAB	0000	1.07841	06/05/2026
AMLODIPINE/ATORVASTATIN 10 MG-20 MG TAB	0000	0.84833	08/05/2026
AMLODIPINE/ATORVASTATIN 10 MG-40 MG TAB	0000	1.59308	12/05/2025
AMLODIPINE/ATORVASTATIN 5 MG-10 MG TAB	0000	1.30328	07/05/2025
AMLODIPINE/ATORVASTATIN 5 MG-20 MG TAB	0000	0.95967	12/05/2025
AMMONIUM LACTATE 12% CRM	0000	0.06604	04/05/2026
AMMONIUM LACTATE 12% LOT	0000	0.06688	08/05/2025
AMOX TR-K CLV 200-28.5 MG/5ML SUSP	0000	0.07284	06/05/2026
AMOX TR-K CLV 200-28.5 TAB CHW	0000	2.32040	03/05/2015
AMOX TR-K CLV 250-125 MG TAB	0000	1.31800	03/05/2026
AMOX TR-K CLV 250-62.5/5 SUSP	0000	0.49574	07/05/2025
AMOX TR-K CLV 400-57 MG TAB CHEW	0000	1.69535	08/05/2024

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AMOX TR-K CLV 400-57 MG/5 ML SUSP	0000	0.08599	10/05/2025
AMOX TR-K CLV 500-125 MG TAB	0000	0.31817	05/05/2026
AMOX TR-K CLV 600-42.9 MG/5 ML SUSP	0000	0.06892	09/05/2025
AMOX TR-K CLV 875-125 MG TAB	0000	0.33882	06/05/2026
AMOXICILLIN 125 MG/5 ML SUSP	0000	0.01952	09/05/2025
AMOXICILLIN 200 MG/5 ML SUSP	0000	0.03940	01/05/2026
AMOXICILLIN 250 MG CAP	0000	0.06472	10/05/2025
AMOXICILLIN 250 MG TAB CHEW	0000	0.26409	12/05/2025
AMOXICILLIN 250 MG/5 ML SUSP	0000	0.02629	10/05/2025
AMOXICILLIN 400 MG/5 ML SUSP	0000	0.03774	04/05/2026
AMOXICILLIN 500 MG CAP	0000	0.09122	05/05/2026
AMOXICILLIN 875 MG TAB	0000	0.16430	04/05/2026
AMOXICILLIN-CLAV ER 1,000-62.5 TAB	0000	5.69567	10/05/2025
AMPHETAMINE SALTS 10 MG TAB	0000	0.83991	12/05/2025
AMPHETAMINE SALTS 12.5 MG TAB	0000	0.36206	10/05/2025
AMPHETAMINE SALTS 15 MG TAB	0000	0.27391	12/05/2025
AMPHETAMINE SALTS 20 MG TAB	0000	0.69887	12/05/2025
AMPHETAMINE SALTS 30 MG TAB	0000	1.05083	06/05/2026
AMPHETAMINE SALTS 5 MG TAB	0000	0.25030	12/05/2025
AMPHETAMINE SALTS 7.5 MG TAB	0000	0.32421	08/05/2026
AMPHETAMINE SULFATE 10 MG TAB	0000	0.42330	04/05/2026
AMPHETAMINE SULFATE 5 MG TAB	0000	3.51834	05/05/2026
AMPICILLIN TR 500 MG CAP	0000	0.47495	06/05/2026
AMPICILLIN-SULBACTAM 3 GM VIAL	0000	5.62800	03/05/2015
ANAGRELIDE HCL 0.5 MG CAP	0000	0.72596	02/05/2026
ANAGRELIDE HCL 1 MG CAP	0000	1.65048	11/05/2025
ANASTROZOLE 1 MG TAB	0000	0.14977	05/05/2026
APAP-BUTALBITAL 325/50 MG TAB	0000	0.65187	05/05/2026
ASA/BUTALB/CAFF/COD 325/50/40/30 MG CAP	0000	1.08735	06/05/2026
ASPIRIN 81 MG TAB CHEW	0000	0.02425	08/05/2025
ASPIRIN 81 MG TAB DR	0000	0.01421	01/05/2026
ATENOLOL 100 MG TAB	0000	0.04153	09/05/2025
ATENOLOL 25 MG TAB	0000	0.02297	07/05/2026
ATENOLOL 50 MG TAB	0000	0.02780	09/05/2025
ATENOLOL/CHLORTHALIDONE 100/25 MG TAB	0000	0.37718	05/05/2026
ATENOLOL/CHLORTHALIDONE 50/25 MG TAB	0000	0.28178	05/05/2026
ATORVASTATIN CALCIUM 10 MG TAB	0000	0.03077	07/05/2026
ATORVASTATIN CALCIUM 20 MG TAB	0000	0.03518	01/05/2026
ATORVASTATIN CALCIUM 40 MG TAB	0000	0.05486	09/05/2025
ATORVASTATIN CALCIUM 80 MG TAB	0000	0.08405	05/05/2026
ATOVAQUONE 750 MG/5ML ORAL SUSP	0000	0.85585	04/05/2026
ATOVAQUONE/PROGUANIL HCL 250 MG-100 MG TAB	0000	1.54663	02/05/2026
AZATHIOPRINE 50 MG TAB	0000	0.16708	02/05/2026
AZELASTINE 137 MCG NASAL SPRY	0000	0.41231	10/05/2025
AZELASTINE HCL 0.05 % DROPS	0000	0.90809	03/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AZELASTINE HCL 205.5MCG SPRAY/PUMP	0000	0.83075	12/05/2022
AZITHROMYCIN 100 MG/5 ML SUSP	0000	0.45245	02/05/2026
AZITHROMYCIN 200 MG/5 ML SUSP	0000	0.25056	09/05/2025
AZITHROMYCIN 250 MG TAB	0000	0.30864	02/05/2026
AZITHROMYCIN 500 MG TAB	0000	0.65252	05/05/2026
AZITHROMYCIN 600 MG TAB	0000	0.92208	06/05/2026
BACITRACIN-POLYMYXIN OINT	0000	2.48746	05/05/2026
BACLOFEN 10 MG TAB	0000	0.06200	02/05/2026
BACLOFEN 20 MG TAB	0000	0.05795	07/05/2026
BALSALAZIDE DISODIUM 750 MG CAP	0000	0.39559	04/05/2026
BENAZEPRIL HCL 10 MG TAB	0000	0.05394	02/05/2026
BENAZEPRIL HCL 20 MG TAB	0000	0.06899	04/05/2026
BENAZEPRIL HCL 40 MG TAB	0000	0.09853	09/05/2025
BENAZEPRIL HCL 5 MG TAB	0000	0.04559	05/05/2026
BENAZEPRIL/HCTZ 10/12.5 MG TAB	0000	0.22792	04/05/2026
BENAZEPRIL/HCTZ 20/12.5 MG TAB	0000	0.23588	06/05/2026
BENAZEPRIL/HCTZ 20/25 MG TAB	0000	0.25937	05/05/2026
BENAZEPRIL/HCTZ 5/6.25 MG TAB	0000	0.51986	08/05/2026
BENZONATATE 100 MG CAP	0000	0.07319	01/05/2026
BENZOYL PEROXIDE 4 % CLEANSER	0000	0.05042	11/05/2017
BENZTROPINE MES 0.5 MG TAB	0000	0.08478	10/05/2025
BENZTROPINE MES 1 MG TAB	0000	0.08107	09/05/2025
BENZTROPINE MES 2 MG TAB	0000	0.10446	09/05/2025
BETAMET DIPROP/PROP GLY 0.05% LOT	0000	0.58000	11/05/2025
BETAMETHASONE DP 0.05% AUGMTD CRM	0000	0.17866	07/05/2026
BETAMETHASONE DP 0.05% AUGMTD OINT	0000	0.71153	07/05/2026
BETAMETHASONE DP 0.05% CRM	0015	0.51641	02/05/2026
BETAMETHASONE DP 0.05% CRM	0045	0.74247	12/05/2025
BETAMETHASONE DP 0.05% LOT	0000	0.36846	02/05/2026
BETAMETHASONE DP 0.05% OINT	0045	0.38290	08/05/2026
BETAMETHASONE DP 0.05% OINT	0015	0.52722	01/05/2026
BETAMETHASONE VA 0.1% CRM	0000	0.51428	08/05/2026
BETAMETHASONE VA 0.1% LOT	0060	0.50190	04/05/2026
BETAMETHASONE VA 0.1% OINT	0000	0.59990	01/05/2026
BETAMETHASONE VALERATE 0.12 % FOAM	0000	0.77584	11/05/2025
BETHANECHOL 10 MG TAB	0000	0.20938	04/05/2026
BETHANECHOL 25 MG TAB	0000	0.24905	05/05/2026
BETHANECHOL 5 MG TAB	0000	0.11136	03/05/2026
BETHANECHOL CHLORIDE 50 MG TAB	0000	0.27070	03/05/2026
BICALUTAMIDE 50 MG TAB	0000	0.41744	08/05/2026
BISOPROLOL FUMARATE 10 MG TAB	0000	0.19644	03/05/2026
BISOPROLOL FUMARATE 5 MG TAB	0000	0.12481	08/05/2026
BISOPROLOL/HCTZ 10/6.25 MG TAB	0000	0.18569	05/05/2026
BISOPROLOL/HCTZ 2.5/6.25 MG TAB	0000	0.21297	05/05/2026
BISOPROLOL/HCTZ 5/6.25 MG TAB	0000	0.21039	04/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
BRIMONIDINE 0.2% EYE DROPS	0000	0.57326	07/05/2026
BRIVARACETAM 10 MG TABLET	0000	0.91666	05/05/2026
BRIVARACETAM 10 MG/ML SOLUTION	0000	0.50000	04/05/2026
BRIVARACETAM 100 MG TABLET	0000	0.39999	04/05/2026
BRIVARACETAM 25 MG TABLET	0000	0.30800	04/05/2026
BRIVARACETAM 50 MG TABLET	0000	0.35200	04/05/2026
BRIVARACETAM 75 MG TABLET	0000	0.91666	05/05/2026
BROMFENAC SODIUM 0.09% EYE DROPS	0000	16.57382	08/05/2026
BROMOCRIPTINE 2.5 MG TAB	0000	1.63435	10/05/2025
BROMOCRIPTINE 5 MG CAP	0000	3.70482	05/05/2026
BUDESONIDE EC 3 MG CAP	0000	0.53346	06/05/2026
BUMETANIDE 0.5 MG TAB	0000	0.14259	10/05/2025
BUMETANIDE 1 MG TAB	0000	0.11528	04/05/2026
BUMETANIDE 2 MG TAB	0000	0.19420	12/05/2025
BUPRENORPHINE HCL 2 MG TAB SL	0000	0.33530	03/05/2026
BUPRENORPHINE HCL 8 MG TAB SL	0000	0.55670	05/05/2026
BUPRENORPHINE HCL/NALOXONE HCL 2 MG-0.5MG TAB SUBL	0000	0.46976	05/05/2026
BUPRENORPHINE HCL/NALOXONE HCL 8 MG-2 MG TAB SUBL	0000	0.66549	01/05/2026
BUPROPION HCL 100 MG TAB	0000	0.14010	04/05/2026
BUPROPION HCL 75 MG TAB	0000	0.10668	08/05/2025
BUPROPION HCL ER 100 MG TAB	0000	0.06948	11/05/2025
BUPROPION HCL ER 200 MG TAB	0000	0.11047	11/05/2025
BUPROPION HCL SR 150 MG TAB - AB1	0000	0.07285	09/05/2025
BUPROPION HCL SR 150 MG TAB - AB2	0000	0.26830	04/05/2026
BUPROPION XL 150MG TAB	0000	0.09685	05/05/2026
BUPROPION XL 300 MG TAB	0000	0.10335	03/05/2026
BUSPIRONE HCL 10 MG TAB	0000	0.04216	01/05/2026
BUSPIRONE HCL 15 MG TAB	0000	0.04828	11/05/2025
BUSPIRONE HCL 30 MG TAB	0000	0.12769	04/05/2025
BUSPIRONE HCL 5 MG TAB	0000	0.02211	01/05/2026
BUSPIRONE HCL 7.5 MG TAB	0000	0.10111	05/05/2026
BUTALBITAL/APAP/CAFF 50/325/40 MG TAB	0000	0.14009	04/05/2026
BUTALBITAL/ASA/CAFF 50/325/40 MG CAP	0000	0.95740	08/05/2025
BUTALBITAL/CAF/APAP/COD 50/40/325/30 MG CAP	0000	0.78677	03/05/2025
BUTORPHANOL 10 MG/ML SPRY	0000	15.18951	08/05/2026
CABERGOLINE 0.5 MG TAB	0000	1.33007	03/05/2026
CALCIPOTRIENE 0.005 % CREAM (G)	0000	1.17718	05/05/2026
CALCIPOTRIENE/BETAMETHASONE 0.005-.064 OINT. (G)	0000	2.53417	09/05/2025
CALCITRIOL 0.25 MCG CAP	0000	0.17826	09/05/2025
CALCITRIOL 0.5 MCG CAP	0000	0.19415	09/05/2025
CALCITRIOL 1 MCG/ML SOLN	0000	6.74603	08/05/2026
CALCIUM ACETATE 667 MG CAP	0000	0.17540	04/05/2026
CANDESARTAN CILEXETIL 16 MG TAB	0000	0.63522	06/05/2026
CANDESARTAN CILEXETIL 32 MG TAB	0000	0.73988	02/05/2026
CANDESARTAN CILEXETIL 8 MG TAB	0000	0.62905	11/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CANDESARTAN/HCTZ 16 MG-12.5 MG TAB	0000	1.05965	06/05/2026
CANDESARTAN/HCTZ 32 MG/12.5 MG TAB	0000	1.03658	02/05/2026
CAPECITABINE 500 MG TABLET	0000	0.57081	07/05/2026
CAPTOPRIL 100 MG TAB	0000	0.36573	07/05/2025
CAPTOPRIL 12.5 MG TAB	0000	0.24767	07/05/2026
CAPTOPRIL 25 MG TAB	0000	0.12617	06/05/2026
CAPTOPRIL 50 MG TAB	0000	0.25967	04/05/2026
CAPTOPRIL/HCTZ 50/15 MG TAB	0000	1.92420	06/05/2016
CARBAMAZEPINE 100 MG CPMP 12HR	0000	1.09384	05/05/2026
CARBAMAZEPINE 100 MG TAB CHEW	0000	0.24960	11/05/2025
CARBAMAZEPINE 100 MG/5 ML SUSP	0000	0.13120	04/05/2026
CARBAMAZEPINE 200 MG CPMP 12HR	0000	1.06709	07/05/2026
CARBAMAZEPINE 200 MG TAB	0000	0.11746	02/05/2026
CARBAMAZEPINE 200 MG TAB SR 12H	0000	0.37208	04/05/2026
CARBAMAZEPINE 400 MG TAB SR 12H	0000	0.71168	03/05/2026
CARBAMAZEPINE ER 300 MG CAP	0000	1.05973	04/05/2026
CARBIDOPA-LEVO 10-100 MG ODT	0000	1.06300	12/05/2014
CARBIDOPA-LEVODOPA-ENTA 100 MG TAB	0000	0.78851	05/05/2026
CARBIDOPA-LEVODOPA-ENTA 150 MG TAB	0000	0.80751	08/05/2026
CARBIDOPA-LEVODOPA-ENTA 200 MG TAB	0000	0.68906	09/05/2025
CARBIDOPA/LEVO 10/100 MG TAB	0000	0.07581	08/05/2026
CARBIDOPA/LEVO 25/100 MG TAB	0000	0.08536	04/05/2026
CARBIDOPA/LEVO 25/100 MG TAB RAPDIS	0000	0.80637	09/05/2025
CARBIDOPA/LEVO 25/100 MG TAB SA	0000	0.13663	04/05/2026
CARBIDOPA/LEVO 25/250 MG TAB	0000	0.12386	04/05/2026
CARBIDOPA/LEVO 50/200 MG TAB SA	0000	0.19585	07/05/2026
CARBINOXAMINE MALEATE 4 MG TAB	0000	0.42695	07/05/2026
CARBINOXAMINE MALEATE 4 MG/5 ML LIQUID	0000	0.95758	01/05/2025
CARBOPLATIN 50 MG/5 ML VIAL	0000	1.73240	06/05/2015
CARISOPRODOL 350 MG TAB	0000	0.06679	04/05/2026
CARTEOLOL HCL 1% EYE DROPS	0000	1.40421	12/05/2025
CARVEDILOL 12.5 MG TAB	0000	0.02861	07/05/2026
CARVEDILOL 25 MG TAB	0000	0.03412	06/05/2025
CARVEDILOL 3.125 MG TAB	0000	0.02322	08/05/2025
CARVEDILOL 6.25 MG TAB	0000	0.02502	09/05/2025
CDP/AMITRIP 10/25 MG TAB	0000	1.81308	06/05/2025
CDP/AMITRIP 5/12.5 MG TAB	0000	1.18483	02/05/2026
CEFACLOL 500 MG CAP	0000	1.15626	08/05/2026
CEFADROXIL 250 MG/5 ML SUSP	0000	0.17459	08/05/2025
CEFADROXIL 500 MG CAP	0000	0.29990	11/05/2025
CEFAZOLIN 1 GM VIAL	0000	0.97088	09/05/2025
CEFDINIR 125 MG/5 ML SUSP	0000	0.13877	01/05/2026
CEFDINIR 250 MG/5 ML SUSP	0000	0.11569	06/05/2026
CEFDINIR 300 MG CAP	0000	0.45347	04/05/2026
CEFEPIME HCL 2 GRAM VIAL	0000	7.22018	01/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CEFPODOXIME 200 MG TAB	0000	1.97933	10/05/2025
CEFPROZIL 125 MG/5 ML SUSP	0000	0.10392	04/05/2026
CEFPROZIL 250 MG TAB	0000	0.58896	09/05/2025
CEFPROZIL 250 MG/5 ML SUSP	0000	0.21683	02/05/2026
CEFPROZIL 500 MG TAB	0000	1.05371	12/05/2025
CEFTAZIDIME 6 GM VIAL	0000	25.20000	12/05/2014
CEFTAZIDIME PENTAHYDRATE 1 GM VIAL	0000	4.53200	11/05/2025
CEFTRIAXONE 1 GM VIAL	0000	1.53950	05/05/2026
CEFTRIAXONE 10 GM VIAL	0000	29.40000	12/05/2014
CEFTRIAXONE 2 GM VIAL	0000	3.14195	07/05/2025
CEFTRIAXONE 250 MG VIAL	0000	0.94765	01/05/2026
CEFTRIAXONE 500 MG VIAL	0000	1.08367	08/05/2026
CEFUROXIME AXETIL 250 MG TAB	0000	0.29765	07/05/2026
CEFUROXIME AXETIL 500 MG TAB	0000	0.69873	03/05/2026
CEPHALEXIN 125 MG/5 ML SUSP	0000	0.06490	01/05/2026
CEPHALEXIN 250 MG CAP	0000	0.09249	06/05/2026
CEPHALEXIN 250 MG/5 ML SUSP	0000	0.06586	04/05/2026
CEPHALEXIN 500 MG CAP	0000	0.12324	04/05/2026
CETIRIZINE 1 MG/ML SOLN	0000	0.03203	08/05/2026
CETIRIZINE 5 MG TAB	0000	0.04881	04/05/2026
CETIRIZINE HCL 10 MG TAB	0000	0.06105	08/05/2026
CETIRIZINE HCL/PSEUDOEPHEDRINE 5-120MG TAB ER 12H	0000	0.56397	03/05/2026
CEVIMELINE HCL 30 MG CAP	0000	0.64444	03/05/2026
CHLORDIAZEPOXIDE 10 MG CAP	0000	0.10911	08/05/2026
CHLORDIAZEPOXIDE 25 MG CAP	0000	0.14154	01/05/2026
CHLORDIAZEPOXIDE 5 MG CAP	0000	0.18006	05/05/2026
CHLORHEXIDINE 0.12% RINSE	0000	0.00958	05/05/2026
CHLORTHALIDONE 25 MG TAB	0000	0.07921	04/05/2026
CHLORZOXAZONE 500 MG TAB	0000	0.22359	05/05/2026
CICLOPIROX 0.77 % GEL	0000	1.02813	11/05/2025
CICLOPIROX 0.77% CRM	0000	0.21297	07/05/2026
CICLOPIROX 1 % SHAMPOO	0000	0.22900	07/05/2026
CICLOPIROX 8% SOLN	0000	1.47018	06/05/2026
CILOSTAZOL 100 MG TAB	0000	0.11747	12/05/2025
CILOSTAZOL 50 MG TAB	0000	0.12252	10/05/2025
CIMETIDINE 200 MG TAB	0000	0.26941	08/05/2026
CIMETIDINE 300 MG TAB	0000	0.25503	07/05/2026
CIMETIDINE 300 MG/5 ML SOLN	0000	0.11174	10/05/2025
CIMETIDINE 400 MG TAB	0000	0.40428	10/05/2025
CIMETIDINE 800 MG TAB	0000	0.95176	11/05/2025
CIPROFLOXACIN 0.3% EYE DROPS	0000	1.79393	02/05/2026
CIPROFLOXACIN HCL 250 MG TAB	0000	0.08920	09/05/2025
CIPROFLOXACIN HCL 500 MG TAB	0000	0.12645	04/05/2026
CIPROFLOXACIN HCL 750 MG TAB	0000	0.27209	10/05/2025
CITALOPRAM 10 MG/5 ML SOLN	0000	0.19456	01/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CITALOPRAM HBR 10 MG TAB	0000	0.02532	07/05/2026
CITALOPRAM HBR 20 MG TAB	0000	0.02678	04/05/2026
CITALOPRAM HBR 40 MG TAB	0000	0.04189	04/05/2026
CLADRIBINE 10 MG/10ML VIAL	0000	38.59500	06/05/2015
CLARITHROMYCIN 125MG/ML SUSP	0000	0.78690	10/05/2025
CLARITHROMYCIN 250 MG TAB	0000	0.46764	05/05/2026
CLARITHROMYCIN 250MG/ML SUSP	0000	1.45758	06/05/2026
CLARITHROMYCIN 500 MG TAB	0000	0.44791	04/05/2026
CLARITHROMYCIN ER 500 MG TAB	0000	2.23582	08/05/2026
CLEMASTINE FUM 2.68 MG TAB	0000	3.34925	03/05/2026
CLINDAMYCIN 2% VAG CRM	0000	1.55430	04/05/2026
CLINDAMYCIN HCL 150 MG CAP	0000	0.11724	01/05/2026
CLINDAMYCIN HCL 300 MG CAP	0000	0.16904	01/05/2026
CLINDAMYCIN PALM HCL 75 MG/5 ML SOLN RECON	0000	0.17682	06/05/2026
CLINDAMYCIN PH 1% GEL	0000	0.17385	12/05/2025
CLINDAMYCIN PH 1% LOT	0000	0.30621	05/05/2026
CLINDAMYCIN PH 1% SOLN	0000	0.21104	06/05/2026
CLINDAMYCIN PH 150 MG/ML VIAL	0000	0.29828	06/05/2016
CLINDAMYCIN PH/BENZ PEROX 1%-5% GEL	0000	0.68758	05/05/2026
CLINDAMYCIN PHOS/BENZOYL PEROX 1 %-5 % GEL W/PUMP	0050	2.20956	10/05/2019
CLINDAMYCIN PHOSPHATE 1% FOAM	0000	2.83980	12/05/2025
CLOBAZAM 10 MG TABLET	0000	0.26781	02/05/2026
CLOBAZAM 2.5 MG/ML ORAL SUSP	0000	0.21821	10/05/2025
CLOBAZAM 20 MG TABLET	0000	0.46838	12/05/2025
CLOBETASOL 0.05% CRM	0000	0.15525	05/05/2026
CLOBETASOL 0.05% GEL	0000	0.62294	01/05/2026
CLOBETASOL 0.05% OINT	0000	0.16332	04/05/2026
CLOBETASOL 0.05% SOLN	0000	0.18377	01/05/2026
CLOBETASOL EMOLLIENT 0.05% CRM	0000	0.65611	10/05/2025
CLOBETASOL PROPIONATE 0.05 % FOAM	0000	0.35476	05/05/2026
CLOBETASOL PROPIONATE 0.05 % LOTION	0000	0.29963	10/05/2025
CLOBETASOL PROPIONATE 0.05 % SHAMPOO	0000	0.21035	03/05/2026
CLOBETASOL PROPIONATE 0.05 % SPRAY	0000	0.34570	09/05/2025
CLOMIPRAMINE 25 MG CAP	0000	0.25621	02/05/2026
CLOMIPRAMINE 50 MG CAP	0000	0.28005	08/05/2025
CLOMIPRAMINE 75 MG CAP	0000	0.29576	02/05/2026
CLONAZEPAM 0.125 MG DIS TAB	0000	0.46549	11/05/2025
CLONAZEPAM 0.25 MG DIS TAB	0000	0.43311	04/05/2026
CLONAZEPAM 0.5 MG DIS TAB	0000	0.53768	08/05/2025
CLONAZEPAM 0.5 MG TAB	0000	0.01948	07/05/2026
CLONAZEPAM 1 MG DIS TAB	0000	0.62137	07/05/2026
CLONAZEPAM 1 MG TAB	0000	0.03065	07/05/2026
CLONAZEPAM 2 MG TAB	0000	0.04364	09/05/2025
CLONIDINE HCL 0.1 MG TAB	0000	0.02752	11/05/2025
CLONIDINE HCL 0.1 MG TAB ER 12H	0000	0.24140	03/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CLONIDINE HCL 0.2 MG TAB	0000	0.03941	07/05/2026
CLONIDINE HCL 0.3 MG TAB	0000	0.03980	09/05/2025
CLOPIDOGREL BISULFATE 75 MG TAB	0000	0.06028	02/05/2026
CLORAZEPATE 15 MG TAB	0000	1.21286	03/05/2026
CLORAZEPATE 3.75 MG TAB	0000	0.70699	02/05/2026
CLORAZEPATE 7.5 MG TAB	0000	0.77694	04/05/2026
CLOTTRIMAZOLE 1% CRM	0000	0.42345	09/05/2025
CLOTTRIMAZOLE 1% SOLN	0000	1.67672	09/05/2025
CLOTTRIMAZOLE 10 MG TROCHE	0000	0.45373	06/05/2026
CLOTTRIMAZOLE-BETAMETH CRM	0015	0.22646	10/05/2025
CLOTTRIMAZOLE-BETAMETH CRM	0000	0.23711	01/05/2026
CLOTTRIMAZOLE-BETAMETH LOT	0000	2.41028	12/05/2025
CLOZAPINE 100 MG TAB	0000	0.56314	02/05/2026
CLOZAPINE 200 MG TAB	0000	0.94608	08/05/2025
CLOZAPINE 25 MG TAB	0000	0.24924	12/05/2025
CLOZAPINE 50 MG TAB	0000	0.55207	07/05/2026
COLCHICINE/PROBENECID 0.5 MG-500 MG TAB	0000	0.90462	10/05/2025
COLESTIPOL HCL 1 GM TAB	0000	0.72599	09/05/2025
COLISTIMETHATE 150 MG VIAL	0000	17.81429	06/05/2026
CROMOLYN SODIUM 20 MG/ML ORAL CONC	0000	0.33640	05/05/2026
CROMOLYN SODIUM 4% EYE DROPS	0000	0.57055	12/05/2025
CYANOCOBALAMIN 1,000 MCG/ML VIAL	0000	2.13871	08/05/2026
CYCLOBENZAPRINE 10 MG TAB	0000	0.01873	08/05/2026
CYCLOBENZAPRINE 5 MG TAB	0000	0.01906	08/05/2026
CYCLOPENTOLATE 1% EYE DROPS	0000	1.12374	01/05/2026
CYCLOPENTOLATE 1% EYE DROPS	0002	2.20274	07/05/2026
CYCLOSPORINE 100 MG CAP	0000	7.59891	08/05/2026
CYCLOSPORINE 100 MG/ML SOLN	0000	3.89245	09/05/2024
CYCLOSPORINE 25 MG CAP	0000	2.43486	02/05/2026
CYCLOSPORINE MODIFIED 25 MG	0000	0.48801	09/05/2025
CYCLOSPORINE, MODIFIED 100 MG CAP	0000	1.57045	04/05/2026
CYCLOSPORINE, MODIFIED 50 MG CAPSULE	0000	0.91865	02/05/2026
CYPROHEPTADINE 2 MG/5 ML SYRP	0000	0.05960	08/05/2025
CYPROHEPTADINE 4 MG TAB	0000	0.07886	05/05/2026
D-AMPHETAMINE 10 MG TAB	0000	0.36854	08/05/2026
D-AMPHETAMINE 15 MG CAP SA	0000	1.60133	12/05/2025
D-AMPHETAMINE 5 MG TAB	0000	0.42899	07/05/2026
DANAZOL 200 MG CAP	0000	3.58032	03/05/2026
DANTROLENE SODIUM 100 MG CAP	0000	0.95609	12/05/2025
DANTROLENE SODIUM 25 MG CAP	0000	0.41504	08/05/2026
DANTROLENE SODIUM 50 MG CAP	0000	0.74586	08/05/2026
DAPAGLIFLOZIN 10 MG TABLET	0000	0.20494	08/05/2026
DAPAGLIFLOZIN 5 MG TABLET	0000	0.18453	08/05/2026
DAPAGLIFLOZIN-METFO ER 10-1000	0000	0.77105	08/05/2026
DAPAGLIFLOZIN-METFOR ER 10-500	0000	1.83333	05/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DAPAGLIFLOZIN-METFOR ER 5-1000	0000	0.47546	08/05/2026
DAPAGLIFLOZIN-METFOR ER 5-500	0000	1.50000	05/05/2026
DAPSONE 100 MG TAB	0000	0.99130	10/05/2025
DAPSONE 25 MG TAB	0000	0.49972	01/05/2026
DEFEROXAMINE 2 GM VIAL	0000	43.26000	12/05/2014
DEMECLOCYCLINE 150 MG TAB	0000	3.22780	03/05/2026
DESIPRAMINE 10 MG TAB	0000	0.15547	08/05/2026
DESIPRAMINE 100 MG TAB	0000	0.74773	01/05/2026
DESIPRAMINE 25 MG TAB	0000	0.15337	01/05/2026
DESIPRAMINE 50 MG TAB	0000	0.20480	05/05/2026
DESIPRAMINE HCL 75 MG TAB	0000	0.40283	11/05/2025
DES Loratadine 5 MG TAB	0000	0.29268	04/05/2026
DESMOPRESSIN 10 MCG/0.1ML SPRY	0000	12.59188	07/05/2026
DESMOPRESSIN ACET 0.1 MG TAB	0000	0.29167	08/05/2025
DESMOPRESSIN ACET 0.2 MG TAB	0000	0.48972	10/05/2025
DESONIDE 0.05% CRM	0000	0.30297	04/05/2026
DESONIDE 0.05% LOT	0000	0.61410	04/05/2026
DESONIDE 0.05% OINT	0000	0.38197	01/05/2026
DESOXIMETASONE 0.05% CRM	0060	1.60533	10/05/2025
DESOXIMETASONE 0.05% GEL	0060	2.98226	07/05/2026
DESOXIMETASONE 0.05% GEL	0015	3.75133	11/05/2025
DESOXIMETASONE 0.25% CRM	0060	0.30717	05/05/2026
DESOXIMETASONE 0.25% CRM	0015	0.40905	08/05/2026
DESOXIMETASONE 0.25% OINT	0060	0.29474	02/05/2026
DESOXIMETASONE 0.25% OINT	0015	0.35673	04/05/2026
DESOXIMETASONE 0.25% OINT	0000	3.29324	02/05/2026
DEXAMETHASONE 0.1% EYE DROPS	0000	8.55136	03/05/2026
DEXAMETHASONE 0.5 MG/5 ML ELX	0000	0.09168	06/05/2026
DEXAMETHASONE 1.5 MG TAB	0000	0.18822	08/05/2026
DEXAMETHASONE SP 4 MG/ML VIAL	0000	0.60894	09/05/2025
DIAZEPAM 10 MG TAB	0000	0.02894	06/05/2026
DIAZEPAM 2 MG TAB	0000	0.02240	08/05/2026
DIAZEPAM 5 MG TAB	0000	0.03079	01/05/2026
DICLOFENAC EPOLAMINE 1.3% PTCH	0000	4.55497	01/05/2026
DICLOFENAC POT 50 MG TAB	0000	0.12323	02/05/2026
DICLOFENAC SOD 50 MG TAB EC	0000	0.06874	05/05/2026
DICLOFENAC SOD 75 MG TAB EC	0000	0.06933	04/05/2026
DICLOFENAC SOD ER 100 MG TAB	0000	0.71933	05/05/2026
DICLOFENAC SODIUM 0.1% DROPS	0000	1.82478	08/05/2026
DICLOFENAC SODIUM 1 % GEL	0000	0.09945	02/05/2026
DICLOFENAC SODIUM 1.5 % DROPS	0000	0.12425	05/05/2026
DICLOFENAC SODIUM 25 MG TABLET DR	0000	0.74859	09/05/2025
DICLOFENAC SODIUM 3 % GEL (GRAM)	0000	0.39855	12/05/2025
DICLOFENAC SODIUM/MISOPROSTOL 75 MG-200 TAB IR DR	0000	1.12546	07/05/2026
DICLOFENAC-MISOPROST 50 MG-200 MCG TAB	0000	0.93776	05/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DICLOXACILLIN 250 MG CAP	0000	0.51368	08/05/2026
DICLOXACILLIN 500 MG CAP	0000	0.98032	06/05/2026
DICYCLOMINE 10 MG CAP	0000	0.07357	01/05/2026
DICYCLOMINE 20 MG TAB	0000	0.08568	03/05/2026
DIFLUNISAL 500 MG TAB	0000	1.10468	10/05/2025
DIGOXIN 125 MCG TAB	0000	0.12047	08/05/2026
DIGOXIN 250 MCG TAB	0000	0.14246	04/05/2026
DILTIAZEM 120 MG TAB	0000	0.11715	07/05/2026
DILTIAZEM 30 MG TAB	0000	0.06707	02/05/2026
DILTIAZEM 60 MG TAB	0000	0.07607	07/05/2026
DILTIAZEM 90 MG TAB	0000	0.08546	10/05/2025
DILTIAZEM ER 120 MG CAP SA	0000	2.22845	06/05/2026
DILTIAZEM ER 90 MG CAP SA	0000	1.84976	11/05/2025
DILTIAZEM HCL 120 MG CAP SA - AB2	0000	0.34965	04/05/2026
DILTIAZEM HCL 120 MG CAP SA - AB3	0000	0.13065	02/05/2026
DILTIAZEM HCL 120 MG CAP SA - AB4	0000	0.11208	02/05/2026
DILTIAZEM HCL 180 MG CAP SA - AB2	0000	0.36815	06/05/2026
DILTIAZEM HCL 180 MG CAP SA - AB3	0000	0.15753	02/05/2026
DILTIAZEM HCL 180 MG CAP SA - AB4	0000	0.11911	02/05/2026
DILTIAZEM HCL 240 MG CAP SA - AB2	0000	0.56063	04/05/2026
DILTIAZEM HCL 240 MG CAP SA - AB3	0000	0.20461	12/05/2025
DILTIAZEM HCL 240 MG CAP SA - AB4	0000	0.19595	02/05/2026
DILTIAZEM HCL 300 MG CAP SA - AB3	0000	0.26896	01/05/2026
DILTIAZEM HCL 300 MG CAP SA - AB4	0000	0.24047	05/05/2026
DILTIAZEM HCL 360 MG CAP ER 24H	0000	0.32697	10/05/2025
DILTIAZEM HCL 360 MG CAP SA - AB4	0000	0.40153	01/05/2026
DILTIAZEM HCL 420 MG CAP SA	0000	1.12074	11/05/2025
DIPHENHYDRAMINE 25 MG CAP	0000	0.05383	12/05/2025
DIPHENHYDRAMINE 50 MG CAP	0000	0.02193	12/05/2025
DIPHENHYDRAMINE 50 MG/ML VIAL	0000	0.90237	07/05/2026
DIPHENHYDRAMINE HCL 12.5 MG/5 ML LIQ	0000	0.01305	10/05/2025
DIPHENHYDRAMINE HCL 25 MG TAB (ALLERGY)	0000	0.03638	05/05/2026
DIPHENOXYLATE-ATROPINE LIQ	0000	1.08450	03/05/2018
DIPHENOXYLATE/ATROPINE 2.5/0.025 MG TAB	0000	0.16486	04/05/2026
DIPYRIDAMOLE 25 MG TAB	0000	0.18498	07/05/2026
DIPYRIDAMOLE 50 MG TAB	0000	0.34344	07/05/2026
DIPYRIDAMOLE 75 MG TAB	0000	0.31730	03/05/2026
DISOPYRAMIDE 150 MG CAP	0000	1.44004	08/05/2026
DISOPYRAMIDE PHOSPHATE 100 MG CAP	0000	0.71432	02/05/2026
DISULFIRAM 250 MG TAB	0000	1.78369	08/05/2026
DIVALPROEX SODIUM 125 MG CAP	0000	0.33080	10/05/2025
DIVALPROEX SODIUM 125 MG TAB DR	0000	0.05961	07/05/2026
DIVALPROEX SODIUM 250 MG TAB DR	0000	0.09501	09/05/2025
DIVALPROEX SODIUM 500 MG TAB DR	0000	0.14495	03/05/2026
DIVALPROEX SODIUM ER 250 MG TAB	0000	0.14671	04/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DIVALPROEX SODIUM ER 500 MG TAB	0000	0.16920	06/05/2025
DOCUSATE SODIUM 50 MG/5 ML LIQ	0000	0.02111	08/05/2026
DONEPEZIL HCL 10 MG TAB	0000	0.05065	08/05/2026
DONEPEZIL HCL 10 MG TAB RAPDIS	0000	0.29685	08/05/2026
DONEPEZIL HCL 23 MG TAB	0000	0.68263	03/05/2026
DONEPEZIL HCL 5 MG TAB	0000	0.04458	07/05/2026
DORZOLAMIDE HCL 2% EYE DROPS	0000	1.24891	09/05/2025
DORZOLAMIDE-TIMOLOL EYE DROPS	0000	1.02282	10/05/2025
DOXAZOSIN MESYLATE 1 MG TAB	0000	0.07539	06/05/2026
DOXAZOSIN MESYLATE 2 MG TAB	0000	0.07077	01/05/2026
DOXAZOSIN MESYLATE 4 MG TAB	0000	0.08937	07/05/2025
DOXAZOSIN MESYLATE 8 MG TAB	0000	0.09698	06/05/2026
DOXEPIN 10 MG CAP	0000	0.08211	04/05/2026
DOXEPIN 100 MG CAP	0000	0.25545	01/05/2026
DOXEPIN 150 MG CAP	0000	0.48260	11/05/2025
DOXEPIN 25 MG CAP	0000	0.12911	01/05/2026
DOXEPIN 50 MG CAP	0000	0.17880	07/05/2026
DOXEPIN 75 MG CAP	0000	0.18722	12/05/2025
DOXEPIN HCL 10 MG/ML ORAL CONC	0000	0.61273	06/05/2026
DOXYCYCLINE 50 MG TAB	0000	0.16852	02/05/2026
DOXYCYCLINE HYCLATE 100 MG CAP	0000	0.11792	06/05/2026
DOXYCYCLINE HYCLATE 100 MG TAB	0000	0.12484	06/05/2026
DOXYCYCLINE HYCLATE 20 MG TAB	0000	0.10353	04/05/2026
DOXYCYCLINE HYCLATE 50 MG CAP	0000	0.14914	04/05/2026
DOXYCYCLINE MONO 100MG CAP	0000	0.25800	12/05/2024
DOXYCYCLINE MONO 50 MG CAP	0000	0.14463	09/05/2025
DOXYCYCLINE MONOHYDRATE 100 MG TAB	0000	0.26073	06/05/2026
DRONABINOL 10 MG CAP	0000	5.08143	02/05/2025
DRONABINOL 2.5 MG CAP	0000	1.34971	10/05/2024
DRONABINOL 5 MG CAP	0000	2.71743	12/05/2024
DULOXETINE HCL 20 MG CAP DR	0000	0.11537	05/05/2026
DULOXETINE HCL 30 MG CAP DR	0000	0.09762	07/05/2026
DULOXETINE HCL 40 MG CAPSULE DR	0000	1.33412	02/05/2026
DULOXETINE HCL 60 MG CAP DR	0000	0.12286	05/05/2026
DUTASTERIDE 0.5 MG CAP	0000	0.18418	05/05/2026
ECONAZOLE NITRATE 1% CRM	0000	0.32544	04/05/2026
ENALAPRIL MALEATE 10 MG TAB	0000	0.06297	03/05/2026
ENALAPRIL MALEATE 2.5 MG TAB	0000	0.06469	07/05/2026
ENALAPRIL MALEATE 20 MG TAB	0000	0.12384	06/05/2026
ENALAPRIL MALEATE 5 MG TAB	0000	0.08189	11/05/2025
ENALAPRIL/HCTZ 10/25 MG TAB	0000	0.16803	09/05/2025
ENALAPRIL/HCTZ 5/12.5 MG TAB	0000	0.19995	08/05/2026
ENALAPRILAT DIHYDRATE 1.25 MG/ML VIAL	0000	3.15000	03/05/2015
ENOXAPARIN SOD 100 MG/ML DISP SYRN	0000	7.26419	08/05/2026
ENOXAPARIN SOD 40 MG/0.4 ML DISP SYRN	0000	8.08217	01/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ENOXAPARIN SOD 60 MG/0.6 ML DISP SYRN	0000	8.10785	07/05/2026
ENOXAPARIN SOD 80 MG/0.8 ML DISP SYRN	0000	7.31531	08/05/2026
ENOXAPARIN SODIUM 120MG/.8ML SYRINGE	0000	11.62703	08/05/2026
ENOXAPARIN SODIUM 150 MG/ML SYRINGE	0000	10.47307	08/05/2026
ENOXAPARIN SODIUM 30 MG/0.3 ML DISP SYR	0000	9.11777	04/05/2026
ENTACAPONE 200 MG TAB	0000	0.34293	04/05/2026
EPINASTINE HCL 0.05 % DROPS	0000	15.14487	07/05/2026
EPIRUBICIN HCL 200MG/0.1L VIAL	0000	1.96880	06/05/2015
EPLERENONE 25 MG TAB	0000	0.43355	12/05/2025
EPLERENONE 50 MG TAB	0000	0.53797	02/05/2026
ERYTHROMYCIN 2% SOLN	0000	0.37702	08/05/2025
ERYTHROMYCIN EYE OINT	0000	4.68101	05/05/2026
ESCITALOPRAM OXALATE 10 MG TAB	0000	0.04573	02/05/2026
ESCITALOPRAM OXALATE 20 MG TAB	0000	0.07268	04/05/2026
ESCITALOPRAM OXALATE 5 MG TAB	0000	0.04744	07/05/2025
ESCITALOPRAM OXALATE 5 MG/5 ML SOLN	0000	0.15946	08/05/2026
ESLICARBAZEPINE 200 MG TABLET	0000	2.71428	08/05/2026
ESLICARBAZEPINE 400 MG TABLET	0000	4.18719	08/05/2026
ESLICARBAZEPINE 600 MG TABLET	0000	4.41242	06/05/2026
ESLICARBAZEPINE 800 MG TABLET	0000	4.07794	08/05/2026
ESTAZOLAM 2 MG TAB	0000	0.80914	01/05/2026
ESTRADIOL 0.025 MG/DAY PATCH	0000	11.34075	08/05/2026
ESTRADIOL 0.0375 MG/DAY PATCH	0000	11.43811	07/05/2026
ESTRADIOL 0.05 MG/DAY PATCH - AB2	0000	10.88883	06/05/2026
ESTRADIOL 0.06 MG/24 DAY PATCH	0000	12.29458	08/05/2026
ESTRADIOL 0.075 MG/DAY PATCH	0000	11.94224	07/05/2026
ESTRADIOL 0.1 MG/DAY PATCH - AB2	0000	12.42773	06/05/2026
ESTRADIOL 0.5 MG TAB	0000	0.07106	05/05/2026
ESTRADIOL 1 MG TAB	0000	0.05756	06/05/2026
ESTRADIOL 2 MG TAB	0000	0.08845	05/05/2026
ESTRADIOL/NORETH AC 0.5 MG-0.1 MG TAB	0000	0.89763	08/05/2026
ESTRADIOL/NORETH AC 1 MG-0.5 MG TAB	0000	0.76504	01/05/2026
ESZOPICLONE 1 MG TAB	0000	0.12780	01/05/2026
ESZOPICLONE 2 MG TAB	0000	0.10337	08/05/2026
ESZOPICLONE 3 MG TAB	0000	0.08762	01/05/2026
ETH E/DESO 25/25/25MCG-0.1/.125/.15MG TAB	0000	0.65484	02/05/2026
ETH E/LEVONOR 30/40/30MCG - 0.05/0.075/0.125MG TAB	0000	0.31906	01/05/2026
ETH E/NOR 25/25/25MCG-0.18/.215/.25MG TAB	0000	0.16997	07/05/2026
ETH E/NOR 30MCG/0.15MG(84)-ETH E 10MCG(7) TAB	0000	0.12348	12/05/2025
ETH E/NOR 35/35/35MCG-0.18/.215/.25MG TAB	0000	0.21028	12/05/2025
ETH E/NOR 35/35/35MCG-0.5/.75/1MG TAB	0000	0.25414	04/05/2026
ETH E/NOR 35/35MCG-0.5/1MG (7-9-5) TAB	0000	0.52254	12/05/2025
ETH E/NORETH 20/30/35MCG-1/1/1MG FE TAB	0000	0.84017	06/05/2026
ETH ESTRADIOL/DESOGEST 20/0.15 TAB	0000	0.17698	10/05/2025
ETH ESTRADIOL/DESOGEST 30 MCG/0.15MG TAB	0000	0.20546	08/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ETH ESTRADIOL/DROSPIRENONE 0.02/3MG TAB	0000	0.16111	01/05/2026
ETH ESTRADIOL/DROSPIRENONE 0.03-3MG TAB	0000	0.16471	10/05/2025
ETH ESTRADIOL/ETHYN 35MCG/1MG TAB	0000	0.38809	07/05/2025
ETH ESTRADIOL/ETHYN 50MCG/1MG TAB	0000	0.72092	10/05/2025
ETH ESTRADIOL/LEVONOR 20MCG/0.1MG TAB	0000	0.15858	10/05/2025
ETH ESTRADIOL/NORETH 20MCG/1MG TAB	0000	0.16406	01/05/2026
ETH ESTRADIOL/NORETH 30MCG/1.5MG TAB	0000	0.39793	08/05/2026
ETH ESTRADIOL/NORETH 35MCG/0.4MG TAB	0000	0.32762	06/05/2026
ETH ESTRADIOL/NORETH 35MCG/0.5MG TAB	0000	0.50071	04/05/2026
ETH ESTRADIOL/NORETH 35MCG/1MG TAB	0000	0.25226	01/05/2026
ETH ESTRADIOL/NORETH FE 20MCG/1MG TAB	0000	0.16622	06/05/2026
ETH ESTRADIOL/NORETH FE 30MCG/1.5MG TAB	0000	0.14835	08/05/2025
ETH ESTRADIOL/NORGEST 30MCG/0.3MG TAB	0000	0.43312	09/05/2025
ETH ESTRADIOL/NORGEST 35MCG/0.25MG TAB	0000	0.16118	12/05/2025
ETHAMBUTOL HCL 400 MG TAB	0000	0.46905	07/05/2026
ETHOSUXIMIDE 250 MG CAP	0000	0.26071	04/05/2026
ETHOSUXIMIDE 250 MG/5 ML SYRP	0000	0.09059	12/05/2025
ETODOLAC 200 MG CAP	0000	0.33428	05/05/2026
ETODOLAC 300 MG CAP	0000	0.32116	03/05/2026
ETODOLAC 400 MG TAB	0000	0.22833	04/05/2026
ETODOLAC 400 MG TAB SA	0000	0.93722	08/05/2026
ETODOLAC 500 MG TAB	0000	0.31725	05/05/2026
ETODOLAC 500 MG TAB SA	0000	0.95209	11/05/2025
ETODOLAC 600 MG TAB	0000	1.11514	10/05/2025
ETOPOSIDE 50 MG CAP	0000	87.08040	06/05/2016
EXEMESTANE 25 MG TAB	0000	0.70053	10/05/2025
FAMCICLOVIR 250 MG TAB	0000	0.41720	05/05/2026
FAMCICLOVIR 500 MG TAB	0000	0.80093	11/05/2025
FAMOTIDINE 20 MG TAB	0000	0.07646	07/05/2026
FAMOTIDINE 40 MG TAB	0000	0.05740	09/05/2025
FAMOTIDINE 40 MG/5 ML SUSP	0000	0.23966	03/05/2026
FAMOTIDINE/CA CARB/MAG HYDROX 10-800-165MG TAB CHEW	0000	0.27535	08/05/2026
FELBAMATE 400 MG TAB	0000	1.82477	09/05/2022
FELBAMATE 600 MG TAB	0000	1.34672	09/05/2022
FELODIPINE ER 10 MG TAB	0000	0.15583	05/05/2026
FELODIPINE ER 2.5 MG TAB	0000	0.11895	05/05/2026
FELODIPINE ER 5 MG TAB	0000	0.14710	02/05/2026
FENOFIBRATE 134 MG CAP	0000	0.13530	04/05/2025
FENOFIBRATE 160 MG TAB	0000	0.10077	12/05/2025
FENOFIBRATE 200 MG CAP	0000	0.16400	12/05/2025
FENOFIBRATE 54 MG TAB	0000	0.10203	01/05/2026
FENOFIBRATE,MICRONIZED 130 MG CAP	0000	0.75293	12/05/2025
FENOFIBRATE,MICRONIZED 43 MG CAPSULE	0000	0.31051	03/05/2026
FENOFIBRATE,MICRONIZED 67 MG CAP	0000	0.08845	07/05/2026
FENOPROFEN 600 MG TAB	0000	3.45792	09/05/2015

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FENTANYL 100 MCG/HR PATCH	0000	17.95923	08/05/2026
FENTANYL 12MCG/HR PATCH	0000	9.82144	03/05/2026
FENTANYL 25 MCG/HR PATCH	0000	5.45146	05/05/2026
FENTANYL 50 MCG/HR PATCH	0000	9.49147	07/05/2026
FENTANYL 75 MCG/HR PATCH	0000	14.43553	08/05/2026
FENTANYL CITRATE 1,200 MCG LOZ HD	0000	38.61952	01/05/2016
FENTANYL CITRATE 400 MCG LOZ HD	0000	26.05710	06/05/2015
FENTANYL CITRATE OTFC 600 MCG	0000	31.91570	06/05/2015
FERROUS SULFATE 325 MG (65 MG IRON) TAB	0000	0.00884	11/05/2015
FEXOFENADINE HCL 180 MG TAB	0000	0.27169	05/05/2026
FEXOFENADINE HCL 30 MG/5 ML ORAL SUSP	0000	0.08776	06/05/2026
FEXOFENADINE HCL 60 MG TAB	0000	0.17221	10/05/2025
FINASTERIDE 5 MG TAB	0000	0.07135	06/05/2026
FLAVOXATE HCL 100 MG TAB	0000	0.47857	07/05/2026
FLECAINIDE ACETATE 100 MG TAB	0000	0.16674	11/05/2025
FLECAINIDE ACETATE 150 MG TAB	0000	0.31268	07/05/2026
FLECAINIDE ACETATE 50 MG TAB	0000	0.13165	02/05/2026
FLUCONAZOLE 10 MG/ML SUSP	0000	0.27206	05/05/2026
FLUCONAZOLE 100 MG TAB	0000	0.26694	07/05/2026
FLUCONAZOLE 150 MG TAB	0000	0.43470	04/05/2026
FLUCONAZOLE 200 MG TAB	0000	0.42204	05/05/2026
FLUCONAZOLE 40 MG/ML SUSP	0000	0.57555	12/05/2025
FLUCONAZOLE-NS 400 MG/200 ML PB	0000	0.06040	09/05/2014
FLUDROCORTISONE 0.1 MG TAB	0000	0.34825	07/05/2026
FLUNISOLIDE 0.025% SPRY	0000	1.74701	08/05/2025
FLUOCINOLONE 0.01% SOLN	0000	0.25097	06/05/2026
FLUOCINOLONE 0.025% CRM	0000	1.39334	10/05/2025
FLUOCINOLONE 0.025% OINT	0000	0.96666	11/05/2025
FLUOCINOLONE ACETONIDE 0.01 % CRM	0000	1.56255	10/05/2025
FLUOCINOLONE ACETONIDE OIL 0.01 % DROPS	0000	1.30630	01/05/2026
FLUOCINONIDE 0.05% CRM	0000	0.43588	07/05/2026
FLUOCINONIDE 0.05% GEL	0000	0.95180	12/05/2025
FLUOCINONIDE 0.05% OINT	0000	0.31150	08/05/2025
FLUOCINONIDE 0.05% SOLN	0000	0.26805	01/05/2026
FLUOCINONIDE 0.1 % CREAM (G)	0000	0.27994	12/05/2025
FLUOCINONIDE-E 0.05% CRM	0000	0.86787	07/05/2026
FLUOROMETHOLONE 0.1% DROPS	0000	12.25526	08/05/2026
FLUOROURACIL 2,500 MG/50 ML VL	0000	0.40740	06/05/2015
FLUOROURACIL 5 % SOLN	0000	4.02449	01/05/2026
FLUOROURACIL 5% CRM	0000	0.64604	03/05/2026
FLUOROURACIL 5,000 MG/100 ML	0000	0.34970	06/05/2015
FLUOROURACIL 500 MG/10 ML VIAL	0000	0.32820	09/05/2014
FLUOXETINE 10 MG CAP	0000	0.03548	08/05/2026
FLUOXETINE 10 MG TAB	0000	0.07603	12/05/2025
FLUOXETINE 20 MG CAP	0000	0.03197	05/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FLUOXETINE 20 MG/5 ML SOLN	0000	0.19745	05/05/2026
FLUOXETINE 40 MG CAP	0000	0.05698	03/05/2026
FLUOXETINE HCL 90 MG CAP DR	0000	30.43619	02/05/2026
FLUPHENAZINE DEC 25 MG/ML VIAL	0000	10.23050	08/05/2026
FLURAZEPAM 15 MG CAP	0000	0.48811	07/05/2018
FLURAZEPAM 30 MG CAP	0000	0.58648	06/05/2019
FLURBIPROFEN 0.03% EYE DROPS	0000	10.66835	08/05/2026
FLURBIPROFEN 100 MG TAB	0000	3.27840	09/05/2025
FLUTICASONE 50 MCG NASAL SPRY	0000	0.43295	03/05/2026
FLUTICASONE PROP 0.005% OINT	0000	0.53003	06/05/2026
FLUTICASONE PROP 0.05% CRM	0000	0.32022	11/05/2025
FLUVASTATIN SODIUM 20 MG CAP	0000	3.35690	08/05/2026
FLUVASTATIN SODIUM 40 MG CAP	0000	3.08372	06/05/2026
FLUVOXAMINE MAL 100 MG TAB	0000	0.30958	02/05/2026
FLUVOXAMINE MAL 25 MG TAB	0000	0.14021	07/05/2026
FLUVOXAMINE MAL 50 MG TAB	0000	0.21117	04/05/2026
FLUVOXAMINE MALEATE 100 MG CAP ER 24H	0000	4.85719	11/05/2025
FLUVOXAMINE MALEATE 150 MG CAP ER 24H	0000	4.85994	05/05/2026
FOLIC ACID 1 MG TAB	0000	0.02251	08/05/2025
FONDAPARINUX 7.5 MG/0.6 ML SYR	0000	37.38896	05/05/2026
FOSINOPRIL SODIUM 10 MG TAB	0000	0.14551	08/05/2026
FOSINOPRIL SODIUM 20 MG TAB	0000	0.16252	01/05/2026
FOSINOPRIL SODIUM 40 MG TAB	0000	0.18784	07/05/2026
FOSINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.52731	03/05/2026
FOSINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.55244	02/05/2026
FUROSEMIDE 10 MG/ML SOLN	0000	0.09234	08/05/2026
FUROSEMIDE 10 MG/ML VIAL	0000	0.55293	07/05/2026
FUROSEMIDE 20 MG TAB	0000	0.02808	01/05/2026
FUROSEMIDE 40 MG TAB	0000	0.03025	08/05/2026
FUROSEMIDE 80 MG TAB	0000	0.05115	04/05/2026
GABAPENTIN 100 MG CAP	0000	0.02137	02/05/2026
GABAPENTIN 250 MG/5 ML SOLN	0000	0.12336	07/05/2025
GABAPENTIN 300 MG CAP	0000	0.04446	07/05/2026
GABAPENTIN 400 MG CAP	0000	0.04002	01/05/2026
GABAPENTIN 600 MG TAB	0000	0.07488	06/05/2026
GABAPENTIN 800 MG TAB	0000	0.09980	05/05/2026
GALANTAMINE 12MG TAB	0000	0.62088	10/05/2025
GALANTAMINE 4MG TAB	0000	0.28583	08/05/2026
GALANTAMINE 8MG TAB	0000	0.39227	03/05/2026
GALANTAMINE ER 16MG CAP	0000	0.86324	03/05/2026
GALANTAMINE ER 24MG CAP	0000	1.13091	11/05/2025
GALANTAMINE ER 8MG CAP	0000	0.85623	09/05/2025
GATIFLOXACIN 0.5 % DROPS	0000	7.51127	08/05/2026
GEMCITABINE HCL 1 GRAM VIAL	0000	19.99600	03/05/2025
GEMFIBROZIL 600 MG TAB	0000	0.09761	04/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
GENTAMICIN 0.1% CRM	0000	0.85725	08/05/2026
GENTAMICIN 0.1% OINT	0000	1.01015	06/05/2026
GENTAMICIN 3 MG/ML EYE DROPS	0000	0.68358	07/05/2026
GENTAMICIN 40 MG/ML VIAL	0000	1.45011	05/05/2026
GLIMEPIRIDE 1 MG TAB	0000	0.02491	07/05/2025
GLIMEPIRIDE 2 MG TAB	0000	0.03714	09/05/2025
GLIMEPIRIDE 4 MG TAB	0000	0.04664	09/05/2025
GLIPIZIDE 10 MG TAB	0000	0.04758	01/05/2026
GLIPIZIDE 5 MG TAB	0000	0.03407	10/05/2025
GLIPIZIDE ER 10 MG TAB	0000	0.19728	11/05/2025
GLIPIZIDE ER 2.5 MG TAB	0000	0.12185	09/05/2025
GLIPIZIDE ER 5 MG TAB	0000	0.11204	10/05/2025
GLIPIZIDE/METFORMIN 2.5/250 MG TAB	0000	0.26710	05/05/2026
GLIPIZIDE/METFORMIN 2.5/500 MG TAB	0000	0.22228	06/05/2026
GLIPIZIDE/METFORMIN 5/500 MG TAB	0000	0.26231	07/05/2026
GLYBURIDE 1.25 MG TAB	0000	0.08177	11/05/2025
GLYBURIDE 2.5 MG TAB	0000	0.07348	05/05/2026
GLYBURIDE 5 MG TAB	0000	0.05985	07/05/2026
GLYBURIDE MICRO 3 MG TAB	0000	0.14599	09/05/2025
GLYBURIDE MICRO 6 MG TAB	0000	0.18529	08/05/2025
GLYBURIDE/METFORMIN 1.25/250 MG TAB	0000	0.04220	09/05/2024
GLYBURIDE/METFORMIN 2.5/500 MG TAB	0000	0.13627	10/05/2025
GLYBURIDE/METFORMIN 5/500 MG TAB	0000	0.18044	06/05/2026
GLYCOPYRROLATE 1 MG TAB	0000	0.10675	09/05/2025
GLYCOPYRROLATE 2 MG TAB	0000	0.20445	04/05/2026
GRANISETRON HCL 1 MG TAB	0000	1.29315	12/05/2025
GRANISETRON HCL 1 MG/ML VIAL	0000	8.20320	06/05/2015
GRISEOFULVIN 125 MG/5 ML SUSP	0000	0.49126	01/05/2026
GRISEOFULVIN 500 MG TAB	0000	6.48930	02/05/2026
GUAIFENESIN 100 MG/5 ML LIQ	0000	0.01651	04/05/2025
GUAIFENESIN/DEXTROMETHORPHAN 100-10MG/5ML SF LIQ	0000	0.01104	06/05/2026
GUANFACINE HCL 1 MG TAB ER 24H	0000	0.22255	10/05/2025
GUANFACINE HCL 2 MG TAB ER 24H	0000	0.27839	02/05/2026
GUANFACINE HCL 3 MG TAB ER 24H	0000	0.20197	02/05/2026
GUANFACINE HCL 4 MG TAB ER 24H	0000	0.22177	09/05/2025
HALOBETASOL PROP 0.05% CRM	0000	0.79416	08/05/2026
HALOBETASOL PROP 0.05% OINT	0000	0.81990	09/05/2025
HALOPERIDOL 0.5 MG TAB	0000	0.12254	04/05/2026
HALOPERIDOL 1 MG TAB	0000	0.12702	08/05/2026
HALOPERIDOL 10 MG TAB	0000	0.16851	03/05/2026
HALOPERIDOL 2 MG TAB	0000	0.16105	03/05/2026
HALOPERIDOL 20 MG TAB	0000	0.34485	11/05/2025
HALOPERIDOL 5 MG TAB	0000	0.21964	08/05/2025
HALOPERIDOL DEC 100 MG/ML AMP	0000	32.85497	07/05/2026
HALOPERIDOL DEC 100 MG/ML VIAL	0000	13.50304	08/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HALOPERIDOL DECAN 50 MG/ML AMP	0000	20.76335	08/05/2026
HALOPERIDOL LAC 2 MG/ML CONC	0120	0.17895	08/05/2026
HALOPERIDOL LAC 2 MG/ML CONC	0000	0.98633	02/05/2026
HALOPERIDOL LAC 5 MG/ML VIAL	0000	1.11449	07/05/2025
HEPARIN NA 10,000 UNIT/ML VIAL	0000	2.15073	02/05/2026
HEPARIN NA 5,000 UNITS/ML VIAL	0000	1.19577	07/05/2026
HYDRALAZINE 10 MG TAB	0000	0.02981	01/05/2026
HYDRALAZINE 100 MG TAB	0000	0.07987	05/05/2026
HYDRALAZINE 25 MG TAB	0000	0.03754	01/05/2026
HYDRALAZINE 50 MG TAB	0000	0.04747	01/05/2026
HYDROCHLOROTHIAZIDE 12.5 MG CAP	0000	0.02806	02/05/2025
HYDROCHLOROTHIAZIDE 12.5 MG TAB	0000	0.04037	01/05/2026
HYDROCHLOROTHIAZIDE 25 MG TAB	0000	0.01237	01/05/2026
HYDROCHLOROTHIAZIDE 50 MG TAB	0000	0.03237	02/05/2026
HYDROCODON-ACETAMINOPHN 10-300	0000	0.23116	08/05/2026
HYDROCODONE BT/IBU 7.5/200 MG TAB	0000	0.46209	09/05/2025
HYDROCODONE/APAP 10/325 MG TAB	0000	0.14201	09/05/2025
HYDROCODONE/APAP 5/300 MG TAB	0000	0.16158	06/05/2026
HYDROCODONE/APAP 5/325 MG TAB	0000	0.13264	07/05/2026
HYDROCODONE/APAP 7.5-325 MG / 5ML SOLN	0000	0.25746	03/05/2026
HYDROCODONE/APAP 7.5/300 MG TAB	0000	0.19126	11/05/2025
HYDROCODONE/APAP 7.5/325 MG TAB	0000	0.13829	09/05/2025
HYDROCORTISONE 0.2% CRM	0000	0.35204	09/05/2025
HYDROCORTISONE 1% CRM	0000	0.08763	07/05/2026
HYDROCORTISONE 1% LOT	0000	0.06844	02/05/2018
HYDROCORTISONE 1% OINT	0000	0.17093	07/05/2025
HYDROCORTISONE 10 MG TAB	0000	0.23618	12/05/2025
HYDROCORTISONE 100 MG ENEMA	0000	0.17891	12/05/2025
HYDROCORTISONE 2.5 % CREAM/APPL	0000	0.56413	10/05/2025
HYDROCORTISONE 2.5% CRM	0000	0.09592	06/05/2025
HYDROCORTISONE 2.5% LOT	0000	0.20868	08/05/2025
HYDROCORTISONE 2.5% OINT	0000	0.10564	08/05/2026
HYDROCORTISONE 20 MG TAB	0000	0.31723	02/05/2026
HYDROCORTISONE 5 MG TAB	0000	0.17054	03/05/2026
HYDROCORTISONE BUTYR 0.1% CRM	0000	2.40304	07/05/2025
HYDROCORTISONE BUTYR 0.1% OINT	0000	2.77237	12/05/2025
HYDROCORTISONE VAL 0.2% OINT	0000	1.68333	01/05/2026
HYDROMORPHONE 2 MG TAB	0000	0.16477	07/05/2026
HYDROMORPHONE 4 MG TAB	0000	0.20449	08/05/2026
HYDROMORPHONE HCL 1 MG/ML LIQUID	0000	0.27458	02/05/2026
HYDROMORPHONE HCL 12 MG TAB ER 24H	0000	9.65557	06/05/2026
HYDROMORPHONE HCL 16 MG TAB ER 24H	0000	9.50269	08/05/2026
HYDROMORPHONE HCL 8 MG TAB	0000	0.51435	07/05/2026
HYDROMORPHONE HCL 8 MG TAB ER 24H	0000	6.03733	07/05/2026
HYDROQUINONE 4 % CRM	0000	0.59264	08/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HYDROXYCHLOROQUINE 200 MG TAB	0000	0.24483	06/05/2026
HYDROXYUREA 500 MG CAP	0000	0.35397	01/05/2026
HYDROXYZINE 10 MG/5 ML SYRP	0000	0.15009	11/05/2025
HYDROXYZINE HCL 10 MG TAB	0000	0.03259	01/05/2026
HYDROXYZINE HCL 25 MG TAB	0000	0.03427	01/05/2026
HYDROXYZINE HCL 50 MG TAB	0000	0.06161	05/05/2026
HYDROXYZINE PAM 25 MG CAP	0000	0.07129	10/05/2025
HYDROXYZINE PAM 50 MG CAP	0000	0.06903	08/05/2026
HYOSCYAMINE 0.125 MG/ML DROP	0000	1.12648	02/05/2018
HYOSCYAMINE SULFATE 0.125MG TAB	0000	0.19273	05/05/2026
IBANDRONATE SODIUM 150 MG TAB	0000	3.29173	10/05/2025
IBUPROFEN 100 MG/5 ML SUSP	0000	0.04522	09/05/2025
IBUPROFEN 200 MG TAB	0000	0.03147	08/05/2026
IBUPROFEN 400 MG TAB	0000	0.04466	06/05/2026
IBUPROFEN 600 MG TAB	0000	0.04620	08/05/2026
IBUPROFEN 800 MG TAB	0000	0.05198	04/05/2026
IMATINIB MESYLATE 400 MG TAB	0000	2.58993	12/05/2025
IMIPENEM/CILASTATIN SODIUM 250 MG VIAL	0000	5.90630	09/05/2014
IMIPENEM/CILASTATIN SODIUM 500 MG VIAL	0000	10.50000	09/05/2014
IMIPRAMINE HCL 10 MG TAB	0000	0.08277	04/05/2026
IMIPRAMINE HCL 25 MG TAB	0000	0.09285	05/05/2026
IMIPRAMINE HCL 50 MG TAB	0000	0.13922	05/05/2026
IMIPRAMINE PAMOATE 100 MG CAP	0000	3.39632	07/05/2026
IMIPRAMINE PAMOATE 75 MG CAP	0000	3.45522	03/05/2026
INDAPAMIDE 1.25 MG TAB	0000	0.10698	05/05/2026
INDAPAMIDE 2.5 MG TAB	0000	0.11470	06/05/2026
INDOMETHACIN 25 MG CAP	0000	0.10376	09/05/2025
INDOMETHACIN 50 MG CAP	0000	0.12831	07/05/2026
INDOMETHACIN 75 MG CAP SA	0000	0.20321	05/05/2026
INSULIN NPH HUM/REG INSULIN HM 70-30/ML INSULN PEN	0000	7.43799	03/05/2026
INSULIN NPH HUMAN ISOPHANE 100/ML (3) INSULN PEN	0000	7.43935	03/05/2026
IPRATR-ALBUTEROL 0.5-3 MG/3 ML SOLN	0000	0.08325	09/05/2025
IPRATROPIUM 0.03% SPRAY	0000	0.42711	06/05/2026
IPRATROPIUM 0.06% SPRAY	0000	0.83897	05/05/2026
IPRATROPIUM BR 0.02% SOLN	0000	0.10351	06/05/2026
IRBESARTAN 150 MG TAB	0000	0.12810	07/05/2025
IRBESARTAN 300 MG TAB	0000	0.15081	01/05/2026
IRBESARTAN 75 MG TAB	0000	0.09172	06/05/2026
IRBESARTAN/HCTZ 150 MG-12.5 MG TAB	0000	0.15937	04/05/2026
IRBESARTAN/HCTZ 300 MG-12.5 MG TAB	0000	0.24852	08/05/2025
ISONIAZID 300 MG TAB	0000	3.23149	08/05/2026
ISOSORBIDE DN 10 MG TAB	0000	0.16659	08/05/2026
ISOSORBIDE DN 20 MG TAB	0000	0.21515	01/05/2026
ISOSORBIDE DN 30 MG TAB	0000	0.30514	01/05/2026
ISOSORBIDE DN 5 MG TAB	0000	0.20497	03/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ISOSORBIDE MN 10 MG TAB	0000	2.39750	07/05/2026
ISOSORBIDE MN 120 MG TAB SA	0000	0.16925	06/05/2026
ISOSORBIDE MN 20 MG TAB	0000	2.93249	08/05/2026
ISOSORBIDE MN 30 MG TAB SA	0000	0.07510	06/05/2026
ISOSORBIDE MN 60 MG TAB SA	0000	0.09751	01/05/2026
ISOTRETINOIN 20 MG CAP	0000	4.83873	02/05/2026
ISOTRETINOIN 30 MG CAP	0000	4.80185	02/05/2026
ISOTRETINOIN 40 MG CAP	0000	4.83511	05/05/2026
ISRADIPINE 5 MG CAP	0000	1.61144	04/05/2026
ITRACONAZOLE 100 MG CAP	0000	0.87517	05/05/2026
IVERMECTIN 3 MG TAB	0000	3.00918	03/05/2026
KETOCONAZOLE 2 % FOAM	0000	4.27317	09/05/2025
KETOCONAZOLE 2% CRM	0000	0.68451	08/05/2026
KETOCONAZOLE 2% SHAMPOO	0000	0.08747	08/05/2026
KETOCONAZOLE 200 MG TAB	0000	0.65142	10/05/2025
KETOPROFEN 200 MG CAP SA	0000	7.94753	10/05/2025
KETOPROFEN 50 MG CAP	0000	0.49872	07/05/2016
KETOPROFEN 75 MG CAP	0000	0.66393	12/05/2015
KETOROLAC 0.4% OPTH SOLN	0000	11.49750	12/05/2025
KETOROLAC 0.5% OPTH SOLN	0000	1.34389	03/05/2026
KETOROLAC 10 MG TAB	0000	0.17637	07/05/2026
KETOROLAC 30 MG/ML VIAL	0000	1.19184	11/05/2025
KETOROLAC 60 MG/2ML VIAL	0000	0.64210	09/05/2025
L-NORG-E EST 0.15 MG-30 MCG 3 MONTH DOSE PK	0000	0.18659	07/05/2026
L-NORG-E EST/E EST 0.10 MG-20 MCG (84)/10 MCG 3 MONTH	0000	0.20392	10/05/2025
LABETALOL HCL 100 MG TAB	0000	0.08953	09/05/2025
LABETALOL HCL 200 MG TAB	0000	0.12379	01/05/2026
LABETALOL HCL 300 MG TAB	0000	0.20038	01/05/2026
LACTULOSE 10 GM/15 ML SOLN-CON	0000	0.02561	05/05/2025
LACTULOSE 10 GM/15 ML SOLN-ENU	0000	0.01349	08/05/2025
LAMIVUDINE 150 MG TAB	0000	0.51591	07/05/2025
LAMIVUDINE/ZIDOVUDINE 150 MG-300 MG TAB	0000	0.67146	12/05/2025
LAMOTRIGINE 100 MG TAB	0000	0.04845	08/05/2025
LAMOTRIGINE 100 MG TAB RAPDIS	0000	2.04666	12/05/2025
LAMOTRIGINE 150 MG TAB	0000	0.06803	08/05/2025
LAMOTRIGINE 200 MG TAB	0000	0.08232	05/05/2026
LAMOTRIGINE 200 MG TAB ER 24	0000	0.80357	06/05/2026
LAMOTRIGINE 25 MG DISPER TAB	0000	0.17249	05/05/2026
LAMOTRIGINE 25 MG TAB	0000	0.03461	12/05/2025
LAMOTRIGINE 25 MG TAB RAPDIS	0000	1.18047	05/05/2026
LAMOTRIGINE 250 MG TAB ER 24	0000	1.41627	08/05/2026
LAMOTRIGINE 300 MG TAB ER 24	0000	1.23305	05/05/2026
LAMOTRIGINE 5 MG DISPER TAB	0000	0.16537	01/05/2026
LAMOTRIGINE 50 MG TAB RAPDIS	0000	1.72083	01/05/2026
LAMOTRIGINE ER 100 MG TABLET	0000	0.68329	02/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LAMOTRIGINE ER 25 MG TAB	0000	0.24208	08/05/2026
LAMOTRIGINE ER 50 MG TABLET	0000	0.51249	08/05/2026
LANSOPRAZOLE 15 MG CAP DR	0000	0.32111	09/05/2025
LANSOPRAZOLE 15 MG TAB RAP DR	0000	1.61610	05/05/2026
LANSOPRAZOLE 30 MG CAP DR	0000	0.10017	04/05/2026
LANSOPRAZOLE 30 MG TAB RAP DR	0000	2.07036	06/05/2026
LANSOPRAZOLE/AMOXICILIN/CLARITH 30-500-500 COMBO. PKG	0000	5.15488	04/05/2025
LATANOPROST 0.005 % DROPS	0000	2.02401	06/05/2026
LEFLUNOMIDE 10 MG TAB	0000	0.34393	05/05/2026
LEFLUNOMIDE 20 MG TAB	0000	0.28653	01/05/2026
LETROZOLE 2.5 MG TAB	0000	0.13384	07/05/2026
LEUCOVORIN CALCIUM 25 MG TAB	0000	2.00095	05/05/2026
LEUCOVORIN CALCIUM 5 MG TAB	0000	0.42022	05/05/2026
LEV/NORGES/ETH/ESTR 90/20 MCG TAB	0000	1.03080	04/05/2026
LEVALBUTEROL HCL 0.31 MG/3 ML VIAL-NEB	0000	0.28992	07/05/2025
LEVALBUTEROL HCL 0.63 MG/3 ML VIAL-NEB	0000	0.27939	08/05/2026
LEVALBUTEROL HCL 1.25MG/3ML VIAL-NEB	0000	0.29140	07/05/2025
LEVETIRACETAM 100 MG/ML SOLN	0000	0.03941	07/05/2026
LEVETIRACETAM 1000 MG TAB	0000	0.17520	02/05/2026
LEVETIRACETAM 250 MG TAB	0000	0.05623	04/05/2026
LEVETIRACETAM 500 MG TAB	0000	0.07670	07/05/2026
LEVETIRACETAM 500 MG TAB.SR 24H	0000	0.16559	02/05/2026
LEVETIRACETAM 500 MG/5 ML VIAL	0000	1.31260	03/05/2015
LEVETIRACETAM 750 MG TAB	0000	0.11887	02/05/2026
LEVETIRACETAM ER 750 MG TAB	0000	0.24580	04/05/2026
LEVOBUNOLOL 0.5% EYE DROPS	0000	2.57433	12/05/2025
LEVOCARNITINE 100 MG/ML SOLN	0000	0.15079	02/05/2026
LEVOCARNITINE 200 MG/ML VIAL	0000	2.78000	04/15/2016
LEVOCARNITINE 330 MG TAB	0000	0.71042	04/05/2026
LEVOCETIRIZINE 2.5 MG/5 ML SOLN	0000	0.20364	05/05/2026
LEVOCETIRIZINE DIHYDROCHLORIDE 5 MG TAB	0000	0.12067	05/05/2026
LEVOFLOXACIN 250 MG TAB	0000	0.12193	05/05/2026
LEVOFLOXACIN 250MG/10ML SOLUTION	0000	1.85970	01/05/2026
LEVOFLOXACIN 500 MG TAB	0000	0.16624	12/05/2025
LEVOFLOXACIN 750 MG TAB	0000	0.25902	07/05/2025
LEVONOR/ETH E 0.15 MG/30 MCG TAB	0000	0.11019	04/05/2026
LEVOTHYROXINE 100 MCG TAB	0000	0.06265	10/05/2025
LEVOTHYROXINE 112 MCG TAB	0000	0.07880	10/05/2025
LEVOTHYROXINE 125 MCG TAB	0000	0.07910	02/05/2026
LEVOTHYROXINE 137 MCG TAB	0000	0.07927	10/05/2025
LEVOTHYROXINE 150 MCG TAB	0000	0.07847	04/05/2026
LEVOTHYROXINE 175 MCG TAB	0000	0.08783	04/05/2026
LEVOTHYROXINE 200 MCG TAB	0000	0.10006	06/05/2026
LEVOTHYROXINE 25 MCG TAB	0000	0.04195	07/05/2026
LEVOTHYROXINE 300 MCG TAB	0000	0.12371	06/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LEVOTHYROXINE 50 MCG TAB	0000	0.05680	09/05/2025
LEVOTHYROXINE 75 MCG TAB	0000	0.05732	06/05/2026
LEVOTHYROXINE 88 MCG TAB	0000	0.06079	10/05/2025
LIDOCAINE 2% VISCOUS SOLN	0000	0.07918	05/05/2026
LIDOCAINE 3% CRM	0000	0.57044	12/05/2025
LIDOCAINE 5 % OINT. (G)	0000	0.18986	09/05/2025
LIDOCAINE 5%(700MG) ADH. PATCH	0000	2.17336	10/05/2025
LIDOCAINE HCL 1% VIAL	0000	0.09663	05/05/2026
LIDOCAINE HCL 40 MG/ML SOLN	0000	0.22744	07/05/2026
LIDOCAINE-HC 2-2% CREAM KIT	0000	106.46625	07/05/2024
LIDOCAINE-HC 3-0.5% CREAM KIT	0000	91.18800	08/05/2025
LIDOCAINE-HC 3-0.5% CRM	0000	1.45518	09/05/2025
LIDOCAINE-HC 3-0.5% CRM/APPL	0000	1.52490	06/05/2015
LIDOCAINE-PRILOCAINE CRM	0000	0.31186	09/05/2025
LIOthyronine SOD 50 MCG TAB	0000	0.39113	12/05/2025
LIOthyronine SODIUM 25 MCG TAB	0000	0.32682	12/05/2025
LIOthyronine SODIUM 5 MCG TAB	0000	0.23320	08/05/2026
LISDEXAMFETAMINE DIMESYLATE 10 MG CAP	0000	3.51735	03/05/2026
LISDEXAMFETAMINE DIMESYLATE 20 MG CAP	0000	2.83330	03/05/2026
LISDEXAMFETAMINE DIMESYLATE 30 MG CAP	0000	2.90098	08/05/2026
LISDEXAMFETAMINE DIMESYLATE 40 MG CAP	0000	3.81147	10/05/2025
LISDEXAMFETAMINE DIMESYLATE 50 MG CAP	0000	3.41413	01/05/2026
LISDEXAMFETAMINE DIMESYLATE 60 MG CAP	0000	3.59803	10/05/2025
LISDEXAMFETAMINE DIMESYLATE 70 MG CAP	0000	3.44836	10/05/2025
LISINOPRIL 10 MG TAB	0000	0.01861	08/05/2025
LISINOPRIL 2.5 MG TAB	0000	0.01588	07/05/2026
LISINOPRIL 20 MG TAB	0000	0.02851	06/05/2026
LISINOPRIL 30 MG TAB	0000	0.05536	05/05/2026
LISINOPRIL 40 MG TAB	0000	0.03970	08/05/2026
LISINOPRIL 5 MG TAB	0000	0.01593	08/05/2026
LISINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.03068	01/05/2026
LISINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.04135	01/05/2026
LISINOPRIL/HCTZ 20/25 MG TAB	0000	0.04281	01/05/2026
LITHIUM CARBONATE 150 MG CAP	0000	0.09187	10/05/2025
LITHIUM CARBONATE 300 MG CAP	0000	0.09741	03/05/2026
LITHIUM CARBONATE 300 MG TAB	0000	0.18796	08/05/2025
LITHIUM CARBONATE 600 MG CAP	0000	0.23283	01/05/2026
LITHIUM CARBONATE ER 300 MG TAB	0000	0.20650	10/05/2025
LITHIUM ER 450 MG TAB	0000	0.27231	04/05/2025
LOPERAMIDE HCL 2 MG CAP	0000	0.08842	11/05/2025
LORATADINE 10MG REDI-TAB	0000	0.65898	04/05/2026
LORATADINE 10MG TAB	0000	0.05822	06/05/2026
LORATADINE 5MG/5ML SYRP	0000	0.04320	05/05/2025
LORATADINE/PSE 10/240MG TAB SA	0000	0.48435	10/05/2025
LORAZEPAM 0.5 MG TAB	0000	0.03293	06/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LORAZEPAM 1 MG TAB	0000	0.04511	04/05/2026
LORAZEPAM 2 MG TAB	0000	0.06855	04/05/2026
LORAZEPAM 2 MG/ML ORAL CONC	0000	0.63309	03/05/2026
LORAZEPAM 2 MG/ML VIAL	0000	1.92538	07/05/2026
LOSARTAN POTASSIUM 100 MG TAB	0000	0.04397	01/05/2026
LOSARTAN POTASSIUM 25 MG TAB	0000	0.02992	01/05/2026
LOSARTAN POTASSIUM 50 MG TAB	0000	0.04338	07/05/2026
LOSARTAN-HCTZ 100-12.5 MG TAB	0000	0.09309	04/05/2026
LOSARTAN-HCTZ 100-25 MG TAB	0000	0.08873	01/05/2026
LOSARTAN-HCTZ 50-12.5 MG TAB	0000	0.07602	08/05/2026
LOVASTATIN 10 MG TAB	0000	0.04376	08/05/2025
LOVASTATIN 20 MG TAB	0000	0.04332	01/05/2026
LOVASTATIN 40 MG TAB	0000	0.05166	08/05/2026
LOXAPINE SUCCINATE 10 MG CAP	0000	0.49052	11/05/2025
LOXAPINE SUCCINATE 25 MG CAP	0000	0.54055	12/05/2025
LOXAPINE SUCCINATE 50 MG CAP	0000	0.89666	09/05/2025
MALATHION 0.5 % LOT	0000	3.18591	08/05/2026
MECLIZINE 12.5 MG TAB	0000	0.04820	08/05/2026
MECLIZINE HCL 25 MG TAB	0000	0.08569	06/05/2025
MEDROXYPROGEST 150 MG/ML SYR	0000	28.30894	08/05/2026
MEDROXYPROGEST 150 MG/ML VIAL	0000	18.50455	08/05/2026
MEDROXYPROGESTERONE 10 MG TAB	0000	0.14871	07/05/2026
MEDROXYPROGESTERONE 2.5 MG TAB	0000	0.11414	12/05/2025
MEDROXYPROGESTERONE 5 MG TAB	0000	0.14485	07/05/2026
MEFENAMIC ACID 250 MG CAP	0000	1.14583	07/05/2026
MEGESTROL 20 MG TAB	0000	0.18064	06/05/2026
MEGESTROL 40 MG TAB	0000	0.20794	04/05/2026
MEGESTROL ACET 40 MG/ML SUSP	0000	0.12633	04/05/2026
MEGESTROL ACETATE 625MG/5ML ORAL SUSP	0000	1.12643	09/05/2025
MELOXICAM 10 MG CAPSULE	0000	10.49537	02/05/2026
MELOXICAM 15 MG TAB	0000	0.02351	07/05/2026
MELOXICAM 5 MG CAPSULE	0000	10.34053	05/05/2026
MELOXICAM 7.5 MG TAB	0000	0.01742	01/05/2026
MEMANTINE HCL 10 MG TAB	0000	0.07809	07/05/2026
MEMANTINE HCL 5 MG TABLET	0000	0.09491	09/05/2025
MEPERIDINE 50 MG TAB	0000	0.65024	10/05/2018
MERCAPTOPYRINE 50 MG TAB	0000	1.05484	06/05/2026
MEROPENEM 1 G VIAL	0000	4.95298	08/05/2026
MEROPENEM 500 MG VIAL	0000	4.70953	06/05/2024
MESALAMINE 4G/60 ML RECT SUSP	0000	0.13007	11/05/2025
METAXALONE 800 MG TAB	0000	0.47282	01/05/2026
METFORMIN HCL 1000 MG TAB	0000	0.02366	07/05/2026
METFORMIN HCL 500 MG TAB	0000	0.01706	05/05/2025
METFORMIN HCL 850 MG TAB	0000	0.02337	03/05/2026
METFORMIN HCL ER 1,000 MG OSM-TAB	0000	0.29637	06/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METFORMIN HCL ER 500 MG FILM TAB	0000	0.11801	02/05/2026
METFORMIN HCL ER 500 MG TAB	0000	0.03093	07/05/2026
METFORMIN HCL ER 750 MG TAB	0000	0.05679	03/05/2026
METHADONE HCL 10 MG TAB	0000	0.17275	11/05/2025
METHADONE HCL 5 MG TAB	0000	0.16221	02/05/2026
METHADONE INTENSOL 10 MG/ML CONC	0000	0.55602	08/05/2026
METHAZOLAMIDE 25 MG TAB	0000	0.95154	10/05/2025
METHAZOLAMIDE 50 MG TAB	0000	1.66291	08/05/2025
METHENAMINE HIPP 1 GM TAB	0000	0.37840	01/05/2026
METHIMAZOLE 10 MG TAB	0000	0.12925	10/05/2025
METHIMAZOLE 5 MG TAB	0000	0.08643	09/05/2025
METHOCARBAMOL 500 MG TAB	0000	0.03958	08/05/2026
METHOCARBAMOL 750 MG TAB	0000	0.04639	03/05/2026
METHOTREXATE 2.5 MG TAB	0000	0.15995	09/05/2025
METHOTREXATE 25 MG/ML VIAL	0000	3.08143	11/05/2025
METHOTREXATE 25 MG/ML VIAL-PF	0000	1.41330	11/05/2025
METHSCOPOLAMINE BROM 2.5 MG TAB	0000	0.74044	04/05/2026
METHSCOPOLAMINE BROM 5 MG TAB	0000	1.51812	08/05/2025
METHYLDOPA 250 MG TAB	0000	0.11774	12/05/2019
METHYLDOPA 500 MG TAB	0000	0.16654	03/05/2019
METHYLERGONOVINE MALEATE 0.2 MG TAB	0000	4.55277	08/05/2026
METHYLPHENIDATE 10 MG TAB	0000	0.18409	08/05/2025
METHYLPHENIDATE 10 MG TAB SA	0000	0.41347	11/05/2025
METHYLPHENIDATE 20 MG TAB	0000	0.22018	01/05/2026
METHYLPHENIDATE 5 MG TAB	0000	0.13348	08/05/2026
METHYLPHENIDATE HCL 10 MG CPBP 50-50	0000	2.39863	05/05/2026
METHYLPHENIDATE HCL 20 MG TAB ER	0000	0.55464	01/05/2026
METHYLPRED 4 MG TAB DOSEPAK	0000	0.13032	05/05/2026
METHYLPREDNISOLONE 4 MG TAB	0000	0.12934	05/05/2026
METHYLPREDNISOLONE ACETATE 80 MG/ML VIAL	0000	12.83360	05/05/2026
METOCLOPRAMIDE 10 MG TAB	0000	0.04395	05/05/2026
METOCLOPRAMIDE 5 MG TAB	0000	0.06062	07/05/2026
METOCLOPRAMIDE 5 MG/5 ML SYRP	0000	0.12240	11/05/2025
METOLAZONE 10 MG TAB	0000	0.32807	03/05/2026
METOLAZONE 2.5 MG TAB	0000	0.23538	04/05/2026
METOLAZONE 5 MG TAB	0000	0.29397	07/05/2026
METOPROLOL 100 MG TAB	0000	0.02844	05/05/2026
METOPROLOL 25 MG TAB	0000	0.01778	07/05/2026
METOPROLOL 50 MG TAB	0000	0.02199	05/05/2026
METOPROLOL SUCC ER 100 MG TAB	0000	0.11053	09/05/2025
METOPROLOL SUCC ER 200 MG TAB	0000	0.18205	08/05/2026
METOPROLOL SUCC ER 25 MG TAB	0000	0.07152	02/05/2026
METOPROLOL SUCC ER 50 MG TAB	0000	0.06522	01/05/2026
METOPROLOL-HCTZ 100/25MG TAB	0000	1.16128	09/05/2025
METOPROLOL-HCTZ 50/25MG TAB	0000	0.89551	12/05/2025

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METRONIDAZOLE 0.75% CRM	0000	0.33354	08/05/2026
METRONIDAZOLE 250 MG TAB	0000	0.10700	08/05/2026
METRONIDAZOLE 375 MG CAP	0000	7.51636	02/05/2026
METRONIDAZOLE 500 MG TAB	0000	0.10227	04/05/2026
METRONIDAZOLE 500 MG/100 ML	0000	0.02085	05/05/2016
METRONIDAZOLE TOP 0.75% GEL	0000	0.29482	08/05/2026
METRONIDAZOLE VAG 0.75% GEL	0000	0.20198	03/05/2026
MEXILETINE 150 MG CAP	0000	0.23256	02/05/2026
MEXILETINE 200 MG CAP	0000	0.31746	04/05/2026
MICONAZOLE NITRATE 2 % CRM/APPL	0000	0.11462	07/05/2025
MIDODRINE HCL 10 MG TAB	0000	0.15076	11/05/2025
MIDODRINE HCL 2.5 MG TAB	0000	0.08725	07/05/2026
MIDODRINE HCL 5 MG TAB	0000	0.12840	10/05/2025
MILRINONE LACTATE 1 MG/ML VIAL	0000	0.46553	05/05/2016
MILRINONE LACTATE/D5W 20MG/100ML PIGGYBACK	0000	0.15960	09/05/2014
MILRINONE LACTATE/D5W 40MG/200ML PIGGYBACK	0000	0.16750	06/05/2015
MINOCYCLINE 100 MG CAP	0000	0.37889	11/05/2025
MINOCYCLINE 50 MG CAP	0000	0.18409	08/05/2026
MINOCYCLINE 75 MG CAP	0000	0.39319	08/05/2025
MINOCYCLINE HCL 100 MG TAB	0000	0.59919	08/05/2026
MINOCYCLINE HCL 50 MG TABLET	0000	0.38182	08/05/2026
MINOCYCLINE HCL 75MG TAB	0000	1.98334	04/05/2025
MINOXIDIL 10 MG TAB	0000	0.17972	06/05/2026
MINOXIDIL 2.5 MG TAB	0000	0.10796	05/05/2026
MIRTAZAPINE 15 MG RPD DISLV TAB	0000	0.34887	06/05/2026
MIRTAZAPINE 15 MG TAB	0000	0.07308	05/05/2026
MIRTAZAPINE 30 MG RPD DISLV TAB	0000	0.46041	04/05/2026
MIRTAZAPINE 30 MG TAB	0000	0.10383	07/05/2026
MIRTAZAPINE 45 MG RPD DISLV TAB	0000	0.43624	05/05/2026
MIRTAZAPINE 45 MG TAB	0000	0.20025	07/05/2026
MIRTAZAPINE 7.5 MG TAB	0000	0.38823	02/05/2026
MISOPROSTOL 100 MCG TAB	0000	0.42211	05/05/2026
MISOPROSTOL 200 MCG TAB	0000	0.64441	01/05/2026
MITOMYCIN 20 MG VIAL	0000	15.49200	06/05/2015
MITOMYCIN 5 MG VIAL	0000	16.15900	06/05/2015
MOEXIPRIL HCL 15 MG TAB	0000	0.88243	09/05/2025
MOMETASONE FUROATE 0.1% CRM	0000	0.43539	09/05/2025
MOMETASONE FUROATE 0.1% OINT	0000	0.29942	03/05/2026
MOMETASONE FUROATE 0.1% SOLN	0000	0.36718	09/05/2025
MONTELUKAST SODIUM 10 MG TAB	0000	0.05335	06/05/2026
MONTELUKAST SODIUM 4 MG GRAN PK	0000	1.20763	09/05/2025
MONTELUKAST SODIUM 4 MG TAB CHEW	0000	0.08459	09/05/2025
MONTELUKAST SODIUM 5 MG TAB CHEW	0000	0.09851	07/05/2026
MORPHINE SULF 100 MG TAB SA	0000	0.99703	06/05/2026
MORPHINE SULF 15 MG TAB SA	0000	0.29893	05/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
MORPHINE SULF 200 MG TAB SA	0000	2.25209	08/05/2026
MORPHINE SULF 30 MG TAB SA	0000	0.39671	07/05/2025
MORPHINE SULF 60 MG TAB SA	0000	0.56928	09/05/2025
MORPHINE SULFATE 10 MG/5 ML SOLUTION	0000	0.06377	10/05/2025
MORPHINE SULFATE 100 MG/5 ML (20 MG/ML) SOLN	0000	0.38003	09/05/2025
MORPHINE SULFATE 30 MG TABLET	0000	0.36873	05/05/2026
MORPHINE SULFATE IR 15 MG TAB	0000	0.29840	01/05/2026
MULTIVIT-FLUOR 0.25 MG TAB CHW	0000	0.09017	08/05/2025
MULTIVIT-FLUOR 0.5 MG TAB CHEW	0000	0.12037	08/05/2025
MUPIROCIN 2% OINT	0000	0.24306	04/05/2025
MYCOPHENOLATE 250 MG CAP	0000	0.16646	10/05/2025
MYCOPHENOLATE 500 MG TAB	0000	0.26884	04/05/2026
MYCOPHENOLATE SODIUM 180 MG TABLET DR	0000	0.12487	06/05/2026
MYCOPHENOLATE SODIUM 360 MG TAB DR	0000	0.32149	12/05/2025
NABUMETONE 500 MG TAB	0000	0.13161	05/05/2026
NABUMETONE 750 MG TAB	0000	0.16186	01/05/2026
NADOLOL 20 MG TAB	0000	0.16888	01/05/2026
NADOLOL 40 MG TAB	0000	0.25870	03/05/2026
NADOLOL 80 MG TAB	0000	0.24723	08/05/2026
NALTREXONE 50 MG TAB	0000	1.09821	10/05/2025
NAPROXEN 125 MG/5 ML SUSP	0000	0.21427	04/05/2026
NAPROXEN 250 MG TAB	0000	0.05102	06/05/2026
NAPROXEN 375 MG TAB	0000	0.05984	10/05/2025
NAPROXEN 375 MG TAB EC	0000	2.06544	05/05/2026
NAPROXEN 500 MG TAB	0000	0.06386	06/05/2026
NAPROXEN 500 MG TAB EC	0000	2.01026	08/05/2026
NAPROXEN SODIUM 275 MG TAB	0000	0.17653	07/05/2026
NAPROXEN SODIUM 550 MG TAB	0000	0.22268	07/05/2026
NARATRIPTAN HCL 1 MG TAB	0000	1.75776	07/05/2026
NARATRIPTAN HCL 2.5 MG TAB	0000	1.26517	05/05/2026
NATEGLINIDE 120 MG TAB	0000	0.28204	02/05/2026
NATEGLINIDE 60 MG TAB	0000	0.25655	07/05/2026
NEFAZODONE HCL 100 MG TAB	0000	1.14602	07/05/2024
NEFAZODONE HCL 250 MG TAB	0000	1.45931	08/05/2016
NEO/BAC/POLY 3.5MG-400U-100,00U/GM EYE OINT	0000	5.05581	07/05/2026
NEO/POLY/DEXAMET EYE OINT	0000	2.75783	06/05/2026
NEO/POLYMYXIN/DEXAMETH DROPS	0000	2.07963	08/05/2025
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SOLN	0000	5.39830	07/05/2026
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SUSP	0000	4.36605	02/05/2026
NEOMY-BAC-POLY 3.5-400U-5,000U/GM OINT	0000	0.10302	01/05/2026
NEOMYCIN/POLY/GRAM OPHTH SOL	0000	4.16608	07/05/2026
NEOMYCIN 500 MG TAB	0000	0.81514	07/05/2026
NEOMYCIN/POLY/HC EYE DROPS	0000	18.10618	08/05/2026
NEVIRAPINE 200 MG TAB	0000	0.13570	07/05/2026
NIACIN 1,000 MG TAB ER 24H	0000	0.31399	08/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NIACIN 500 MG TAB ER 24H	0000	0.16016	05/05/2026
NIACIN 750 MG TAB ER 24H	0000	0.37131	03/05/2026
NICARDIPINE HCL 20 MG CAP	0000	1.43745	10/05/2025
NICOTINE 14 MG/24HR PATCH	0000	1.57018	10/05/2025
NICOTINE 21 MG/24HR PATCH	0000	1.50765	10/05/2025
NICOTINE 7 MG/24 HOUR PATCH TD24	0000	1.56631	10/05/2025
NICOTINE POLACRILEX 2 MG GUM	0000	0.21474	02/05/2026
NICOTINE POLACRILEX 4 MG GUM	0000	0.26831	01/05/2026
NIFEDIPINE 10 MG CAP	0000	0.28515	02/05/2026
NIFEDIPINE 20 MG CAP	0000	0.67579	05/05/2025
NIFEDIPINE ER 30 MG TAB - AB1	0000	0.09844	04/05/2026
NIFEDIPINE ER 30 MG TAB - AB2	0000	0.10438	10/05/2025
NIFEDIPINE ER 60 MG TAB - AB1	0000	0.15093	04/05/2026
NIFEDIPINE ER 60 MG TAB - AB2	0000	0.15072	04/05/2026
NIFEDIPINE ER 90 MG TAB - AB1	0000	0.29991	05/05/2026
NIFEDIPINE ER 90 MG TAB - AB2	0000	0.24732	05/05/2026
NISOLDIPINE 17 MG TAB ER 24H	0000	4.31481	09/05/2025
NISOLDIPINE ER 34 MG TAB	0000	6.63441	01/05/2025
NISOLDIPINE ER 8.5 MG TAB	0000	3.12996	03/05/2026
NITROFURANTOIN MCR 100 MG CAP	0000	0.29252	04/05/2026
NITROFURANTOIN MCR 50 MG CAP	0000	0.16016	06/05/2026
NITROFURANTOIN MONOHD 100 MG CAP	0000	0.32469	05/05/2026
NITROGLYCERIN 0.1 MG/HR PATCH	0000	0.48290	02/05/2026
NITROGLYCERIN 0.2 MG/HR PATCH	0000	0.61096	10/05/2025
NITROGLYCERIN 0.4 MG/HR PATCH	0000	0.66595	07/05/2025
NITROGLYCERIN 0.6 MG/HR PATCH	0000	0.90588	08/05/2026
NITROGLYCERIN 2.5 MG CAP ER	0000	0.31657	04/05/2017
NITROGLYCERIN 6.5 MG CAP ER	0000	0.49500	09/05/2014
NITROGLYCERIN LINGUAL 0.4 MG	0000	20.28320	08/05/2026
NIZATIDINE 150 MG CAP	0000	0.76267	11/05/2025
NIZATIDINE 300 MG CAP	0000	0.77820	01/05/2026
NOR/ETH/ESTR/ FE 0.4MG-35MCG (21)/75MG (7) CHEW	0000	0.47031	01/05/2026
NORETH-ETHINYL ESTRADIOL/IRON 0.8-25(24) TAB CHEW	0000	1.32505	06/05/2026
NORETHIND AC/ETH ESTRADIOL 1 MG-5 MCG TAB	0000	0.77567	03/05/2026
NORETHINDRONE 0.35 MG TAB	0000	0.09930	11/05/2025
NORETHINDRONE 5 MG TAB	0000	0.29023	04/05/2026
NORETHINDRONE-E. ESTRADIOL-IRON 1MG-20(24) TABLET	0000	0.25314	01/05/2026
NORTRIPTYLINE HCL 10 MG CAP	0000	0.11664	05/05/2026
NORTRIPTYLINE HCL 25 MG CAP	0000	0.17102	09/05/2025
NORTRIPTYLINE HCL 50 MG CAP	0000	0.17743	12/05/2025
NORTRIPTYLINE HCL 75 MG CAP	0000	0.27348	07/05/2026
NPH, HUMAN INSULIN ISOPHANE 100 UNIT/ML VIAL	0000	4.45848	04/05/2026
NYSTATIN 100,000 UNIT/GM CRM	0000	0.29514	07/05/2026
NYSTATIN 100,000 UNIT/GM OINT	0000	0.34276	03/05/2026
NYSTATIN 100,000 UNIT/GM PWDR	0000	0.33702	07/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NYSTATIN 100,000 UNIT/ML SUSP	0000	0.11710	11/05/2025
NYSTATIN 500,000 UNIT ORAL TAB	0000	0.33243	12/05/2025
NYSTATIN/TRIAMCINOLONE CRM	0000	0.28310	06/05/2026
NYSTATIN/TRIAMCINOLONE OINT	0000	0.30060	06/05/2026
OFLOXACIN 0.3% EAR DROPS	0000	1.34287	06/05/2026
OFLOXACIN 0.3% EYE DROPS	0000	1.38302	04/05/2026
OLANZAPINE 10 MG TAB	0000	0.10583	09/05/2025
OLANZAPINE 10 MG TAB RAPDIS	0000	0.40322	08/05/2026
OLANZAPINE 10 MG VIAL	0000	22.91230	08/05/2026
OLANZAPINE 15 MG TAB	0000	0.15631	03/05/2026
OLANZAPINE 15 MG TAB RAPDIS	0000	0.54916	07/05/2026
OLANZAPINE 2.5 MG TAB	0000	0.07197	02/05/2026
OLANZAPINE 20 MG TAB	0000	0.13069	02/05/2026
OLANZAPINE 20 MG TAB RAPDIS	0000	0.72856	08/05/2026
OLANZAPINE 5 MG TAB	0000	0.08589	08/05/2026
OLANZAPINE 5 MG TAB RAPDIS	0000	0.31353	01/05/2026
OLANZAPINE 7.5 MG TAB	0000	0.07798	04/05/2026
OLOPATADINE 665 MCG NASAL SPRY	0000	0.90551	10/05/2025
OLOPATADINE HCL 0.1 % DROPS	0000	2.18865	01/05/2026
OMEGA-3 ACID ETHYL ESTERS 1 G CAPSULE	0000	0.24350	09/05/2025
OMEPRazole 10 MG CAP DR	0000	0.08208	10/05/2025
OMEPRazole 20 MG CAP	0000	0.03100	09/05/2025
OMEPRazole 20 MG TAB DR	0000	0.41103	07/05/2026
OMEPRazole 40 MG CAP DR	0000	0.06004	02/05/2026
OMEPRazole MAGNESIUM 20 MG TAB DR	0000	0.36731	10/05/2025
OMEPRazole-BICARB 40-1,100 CAP	0000	0.69083	10/05/2025
ONDANSETRON 4 MG/5 ML SOLN	0000	0.30268	10/05/2025
ONDANSETRON HCL 2 MG/ML VIAL	0000	0.18086	12/05/2025
ONDANSETRON HCL 4 MG TAB	0000	0.11390	02/05/2026
ONDANSETRON HCL 4 MG/2 ML VIAL	0000	0.25341	09/05/2025
ONDANSETRON HCL 8 MG TAB	0000	0.14710	02/05/2026
ONDANSETRON ODT 4 MG TAB	0000	0.15835	02/05/2026
ONDANSETRON ODT 8 MG TAB	0000	0.19723	06/05/2026
ORPHENADRINE 100 MG TAB SA	0000	0.38984	10/05/2025
OXAPROZIN 600 MG TAB	0000	0.52908	07/05/2026
OXAZEPAM 10 MG CAP	0000	0.71772	12/05/2025
OXAZEPAM 15 MG CAP	0000	1.07087	03/05/2026
OXAZEPAM 30 MG CAP	0000	1.33080	10/05/2025
OXCARBAZEPINE 150 MG TAB	0000	0.13363	05/05/2026
OXCARBAZEPINE 300 MG TAB	0000	0.18083	04/05/2026
OXCARBAZEPINE 300 MG/5 ML ORAL SUSP	0000	0.13142	05/05/2026
OXCARBAZEPINE 600 MG TAB	0000	0.33757	09/05/2025
OXICONAZOLE NITRATE 1 % CRM (G)	0000	4.30270	07/05/2026
OXICONAZOLE NITRATE 1 % CRM (G)	0030	8.55853	08/05/2019
OXYBUTYNIN 5 MG TAB	0000	0.05483	08/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
OXYBUTYNIN 5 MG/5 ML SYRP	0000	0.02910	12/05/2025
OXYBUTYNIN CL ER 10 MG TAB	0000	0.11167	07/05/2026
OXYBUTYNIN CL ER 15 MG TAB	0000	0.14207	10/05/2025
OXYBUTYNIN CL ER 5 MG TAB	0000	0.09637	07/05/2026
OXYCODON-ACETAMINOPHEN 2.5-325	0000	1.42080	11/05/2025
OXYCODONE 20 MG/ML SOLN	0000	2.16606	06/05/2026
OXYCODONE HCL 10 MG TAB	0000	0.15278	04/05/2026
OXYCODONE HCL 15 MG TAB	0000	0.21749	05/05/2026
OXYCODONE HCL 20 MG TAB	0000	0.25246	08/05/2026
OXYCODONE HCL 30 MG TAB	0000	0.30841	01/05/2026
OXYCODONE HCL 5 MG CAP	0000	0.42696	12/05/2025
OXYCODONE HCL 5 MG TAB	0000	0.08238	06/05/2026
OXYCODONE HCL 5 MG/5 ML SOLUTION	0000	0.07016	09/05/2025
OXYCODONE HCL/ACETAMINOPHEN 10 MG-300 MG TAB	0000	0.21622	07/05/2026
OXYCODONE HCL/ACETAMINOPHEN 2.5 MG-300 MG TABLET	0000	1.42080	11/05/2025
OXYCODONE HCL/ACETAMINOPHEN 5 MG-300 MG TABLET	0000	0.11777	02/05/2026
OXYCODONE HCL/ACETAMINOPHEN 7.5 MG-300 MG TABLET	0000	0.17409	06/05/2026
OXYCODONE/APAP 10/325 MG TAB	0000	0.21622	07/05/2026
OXYCODONE/APAP 5/325 MG TAB	0000	0.11777	02/05/2026
OXYCODONE/APAP 7.5/325 MG TAB	0000	0.17409	06/05/2026
OXYMORPHONE HCL 10 MG TAB	0000	1.44028	12/05/2024
OXYMORPHONE HCL 10 MG TAB ER 12H	0000	8.02871	08/05/2024
OXYMORPHONE HCL 20 MG TAB ER 12H	0000	15.07683	09/05/2024
OXYMORPHONE HCL 30 MG TAB ER 12H	0000	22.60300	11/05/2024
OXYMORPHONE HCL 40 MG TAB ER 12H	0000	24.44566	11/05/2024
OXYMORPHONE HCL 5 MG TAB	0000	0.45781	02/05/2023
OXYMORPHONE HCL 7.5 MG TAB ER 12H	0000	6.64367	09/05/2024
OXYMORPHONE HCL ER 15 MG TAB	0000	11.69958	09/05/2024
PAMIDRONATE DISODIUM 30MG/10ML VIAL	0000	1.64060	12/05/2014
PANTOPRAZOLE SOD 40 MG TAB DR	0000	0.03463	01/05/2026
PANTOPRAZOLE SODIUM 20MG TAB DR	0000	0.05650	08/05/2025
PARICALCITOL 1 MCG CAP	0000	1.21722	05/05/2026
PARICALCITOL 2 MCG CAPSULE	0000	2.24279	06/05/2026
PAROXETINE 37.5 MG TAB SR 24H	0000	0.43275	04/05/2026
PAROXETINE HCL 10 MG TAB	0000	0.06603	04/05/2026
PAROXETINE HCL 12.5 MG TAB SR 24H	0000	0.46235	12/05/2025
PAROXETINE HCL 20 MG TAB	0000	0.06740	05/05/2026
PAROXETINE HCL 25 MG TAB SR 24H	0000	0.45046	09/05/2025
PAROXETINE HCL 30 MG TAB	0000	0.09483	04/05/2026
PAROXETINE HCL 40 MG TAB	0000	0.12514	05/05/2026
PEG 3350/ELECTROLYTE SOLN (COLYTE)	0000	0.00347	03/05/2026
PEG 3350/ELECTROLYTE SOLN (GOLYTELY)	0000	0.00452	09/05/2025
PEG 3350/FLAVOR PACKS - NULYTELY	0000	0.00694	09/05/2025
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0000	0.04704	10/05/2025
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0100	0.07209	10/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PENICILLIN V POTASSIUM 250MG TAB	0000	0.06767	04/05/2026
PENICILLIN V POTASSIUM 250MG/5ML SOLN	0000	0.05393	06/05/2026
PENICILLIN V POTASSIUM 500MG TAB	0000	0.09945	07/05/2026
PENTAZOCINE HCL/NALOXONE HCL 50-0.5MG TAB	0000	1.69215	01/05/2026
PENTOXIFYLLINE 400 MG TAB SA	0000	0.23191	07/05/2025
PERINDOPRIL ERBUMINE 4 MG TAB	0000	0.48774	07/05/2026
PERINDOPRIL ERBUMINE 8 MG TAB	0000	0.53766	08/05/2025
PERMETHRIN 5% CRM	0000	0.42069	06/05/2026
PERPHEN/AMITRIP 2/25 MG TAB	0000	1.55369	08/05/2016
PERPHEN/AMITRIP 4/25 MG TAB	0000	1.59414	09/05/2015
PERPHENAZINE 16 MG TAB	0000	0.49079	08/05/2026
PERPHENAZINE 2 MG TAB	0000	0.20689	08/05/2026
PERPHENAZINE 4 MG TAB	0000	0.18011	12/05/2025
PERPHENAZINE 8 MG TAB	0000	0.20482	03/05/2026
PHENAZOPYRIDINE HCL 100 MG TABLET	0000	0.17641	08/05/2026
PHENAZOPYRIDINE HCL 200 MG TABLET	0000	0.18370	07/05/2026
PHENYTOIN 125 MG/5 ML SUSP	0000	0.06733	06/05/2025
PHENYTOIN 50 MG CHEW TAB	0000	0.23558	12/05/2025
PHENYTOIN SOD EXT 100 MG CAP	0000	0.47963	02/05/2026
PHENYTOIN SODIUM EXTENDED 30 MG CAP	0000	1.43033	06/05/2026
PILOCARPINE 4% EYE DROPS	0000	3.07143	01/05/2026
PILOCARPINE HCL 5 MG TAB	0000	0.33063	05/05/2026
PILOCARPINE HCL 7.5 MG TAB	0000	0.31765	06/05/2026
PINDOLOL 10 MG TAB	0000	0.79651	08/05/2026
PINDOLOL 5 MG TAB	0000	0.66498	01/05/2026
PIOGLITAZONE - METFORMIN 15 MG-850 MG TAB	0000	0.31113	12/05/2025
PIOGLITAZONE HCL 15 MG TAB	0000	0.07397	07/05/2026
PIOGLITAZONE HCL 30 MG TAB	0000	0.09812	08/05/2025
PIOGLITAZONE HCL 45 MG TAB	0000	0.11903	07/05/2026
PIOGLITAZONE- METFORMIN 15 MG- 500 MG TAB	0000	0.44611	11/05/2025
PIPERACIL-TAZOBACT 2.25 GM VIAL	0000	7.35000	03/05/2015
PIPERACILLIN SODIUM/TAZOBACTAM 3.375 G VIAL	0000	3.57310	10/05/2025
PIPERACILLIN SODIUM/TAZOBACTAM 4.5 G VIAL	0000	11.94967	06/05/2016
PIPERACILLIN SODIUM/TAZOBACTAM 40.5 G VIAL	0000	102.34800	06/05/2016
PIROXICAM 10 MG CAP	0000	0.14266	06/05/2026
PIROXICAM 20 MG CAP	0000	0.22212	08/05/2026
PN85/IRON CB&ASP G/FA/DHA/FISH 40-10-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV #10/FE FUM/FA/DHA 65-1-250MG COMB. PK	0000	0.14000	05/04/2012
PNV #11/FE FUM/FA/OMEGA-3 28-1-200MG CAP	0000	0.14000	05/04/2012
PNV #14/FERROUS FUM/FOLIC ACID 29 MG-1 MG TAB CHEW	0000	0.14000	05/04/2012
PNV #15/FE,CARB./FA/DSS 90-1-50MG TAB	0000	0.14000	05/04/2012
PNV #16/FE FUM & PS COMP/FOLIC ACID/OMEGA-3 CAP	0000	0.14058	06/05/2024
PNV #26/FE POLY/FA/DHA 29-1-200MG CAP	0000	0.14000	05/04/2012
PNV #30/IRON CARB&ASPG/FA/OM3 30-10-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV #34/FE,CARB/FA/DSS/DHA 30-1-50MG CAP	0000	0.14000	05/04/2012

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PNV #47/FE FUM/FA CMB #1/DHA 27-1-300MG CAP	0000	0.14864	07/05/2024
PNV #53/FE B-G HCL SUC-P/FA/OMEGA-3 29-1-400MG COMB. PK	0000	0.14000	05/04/2012
PNV #54/FE B-G HCL SUC-P/FA/OMEGA-3 29-1-430MG COMB. PK	0000	0.14000	05/04/2012
PNV #56/IRON CARB&ASPG/FA/DHA 35-5-1 MG CAPSULE	0000	0.14000	12/05/2012
PNV #69 FE,CARB/FA/DSS/DHA 28-1-50MG CAP	0000	0.14000	05/04/2012
PNV #76/FE,CARB/FA 29-1MG TAB	0000	0.14000	05/04/2012
PNV #78/FE FUM/FA 29-1MG TAB	0000	0.14000	05/04/2012
PNV #78/IRON ASP GLY/FA#1/DHA 18-1-300MG CAPSULE	0000	0.14000	05/29/2015
PNV #83/FE,CARB/FE ASPARTO GLY/FA 30-20-1MG TAB	0000	0.14000	05/04/2012
PNV #86/FE BIS-GLY/FA 32-1MG TAB	0000	0.14000	05/04/2012
PNV #86/IRON POLY/FA/DHA/EPA 32-1-120MG COMBO. PKG	0000	0.14000	09/05/2013
PNV #87/FE BISGLY/FA/DHA 32-1-230MG COMB. PK	0000	0.14000	05/04/2012
PNV - #2/FE B-G SUC-P/FA/OMEGA-3 29-1-250MG COMB. PK	0000	0.14000	05/04/2012
PNV - CA #39/FE FUM/FA/DSS/DHA 30-1.2-55MG CAP	0000	0.14000	05/04/2012
PNV - CA #40/FE FUM/FA CMB#1 27-1MG TAB	0000	0.14000	05/04/2012
PNV - CA #68/FE/FA/DHA 28-1-300MG CAP	0000	0.14000	05/04/2012
PNV - CA #80/FE FUM/FA/DSS/DHA 29-1.2-55MG CAP	0000	0.14000	05/04/2012
PNV 102/IRON/FOLATE/DHA 90-1-200MG CAPSULE	0000	0.14000	04/05/2020
PNV 112/IRON/FA/OM-3S/DHA/EPA 3.33 MG IRON-0.33 MG-34.83 MG (25 MG-5.1 MG-4.73 MG) TAB CHEW	0000	0.14000	10/05/2016
PNV 119/IRON FUM/FOLIC ACID 29 MG-1 MG TABLET	0000	0.14000	01/05/2020
PNV 12/IRON/LEVOMEFOLATE CALC 29 MG-1700 TABLET DR	0000	0.14000	08/05/2023
PNV 12/IRON/METHYLFOL CALC/DHA 29 MG-1700 CMPKTBCPDR	0000	0.14000	08/05/2023
PNV CMB#21/IRON/FOLIC ACID 14 MG-400 TABLET	0000	0.14000	05/04/2012
PNV NO.100/IRON/FA/DHA/EPA 27 MG IRON-1,000 MCG-300 MG-30 MG CAPSULE	0000	0.14000	10/05/2016
PNV NO.111/IRON/FOLATE/DHA 38-1-225MG CAPSULE	0000	0.14000	08/05/2021
PNV NO.115/IRON FUMARATE/FA 29 MG-1 MG TAB CHEW	0000	0.14000	09/05/2013
PNV NO.118/IRON FUMARATE/FA 29 MG-1 MG TAB CHEW	0000	0.14000	05/29/2015
PNV NO.121/IRON/FOLIC ACID 28MG-0.8MG TABLET	0000	0.14000	09/05/2017
PNV NO.122/IRON/FOLIC ACID 27MG-0.8MG TABLET	0000	0.14000	05/29/2015
PNV NO.143/IRON/METHYLFOLATE 29 MG-1 MG TABLET	0000	0.14000	06/05/2019
PNV NO.15/IRON FUM & PS CMP/FA 85 MG-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV NO.153/FA/OM3/DHA/EPA/FISH 400-35-25 TAB CHEW	0000	0.14000	07/05/2019
PNV NO.154/IRON FUM/FOLIC ACID 27 MG-1 MG TABLET	0000	0.14000	08/05/2021
PNV NO.159/IRON/FOLIC ACID 28MG-0.8MG TABLET	0000	0.14000	10/05/2023
PNV NO.162/IRON GLU/FOLIC ACID 12 MG-1 MG TABLET	0000	0.14000	10/05/2019
PNV NO.163/IRON/FOLATE NO.10 20 MG-1 MG TABLET	0000	0.14000	11/05/2019
PNV NO.164/IRON/FOLATE NO.6 6 MG-833.5 TABLET	0000	0.14000	07/05/2023
PNV NO.173/IRON/FOLATE NO.11 6MG-160MCG CAPSULE	0000	0.14000	11/05/2023
PNV NO.175/IRON FUM/FOLIC ACID 29 MG-1 MG TABLET	0000	0.14000	08/05/2021
PNV NO.175/IRON/FA/DHA/ALGAL 29-1-200MG COMBO. PKG	0000	0.14000	07/05/2021
PNV NO.178/FA/OM3/DHA/EPA/FISH 180-35-25 TAB CHEW	0000	0.14000	02/05/2022
PNV NO.178/IRON BG/FOLIC ACID 6.5 MG-500 CAPSULE	0000	0.14000	09/05/2025
PNV NO.197/IRON/FOLATE NO.10 20 MG-1670 TABLET	0000	0.14000	08/05/2025
PNV NO.200/IRON/LMEFOLATE CAL 4.25-333.5 CAPSULE	0000	0.14000	11/05/2025
PNV NO.203/IRON/METHYLFOLATE 27 MG-1000 CAPSULE DR	0000	0.14000	01/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PNV NO.207/IRON GLU/FOLIC ACID 13 MG-1 MG TABLET	0000	0.14000	08/05/2026
PNV NO.28/FERROUS FUMARATE/FA 27 MG-1 MG TABLET	0000	0.14000	05/04/2012
PNV NO.63/IRON,CARBONYL/FA/DHA 27-800-200 CAPSULE	0000	0.14000	05/29/2015
PNV NO.66/IRON,CARBONYL/FA/DHA 20-1-320MG CAPSULE	0000	0.14000	09/05/2013
PNV NO.74/IRON FUM/FA/COQ10 18-1-125MG COMBO. PKG	0000	0.14000	05/29/2015
PNV NO.74/IRON FUM/FA/DHA 27-1-300MG COMBO. PKG	0000	0.14000	05/29/2015
PNV NO.81/IRON CBN&GLUC/FA/DSS 27-1-50 MG TABLET	0000	0.14000	05/29/2015
PNV NO12/IRON,CARB/FA/DSS/OM-3 29-1-50 MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV W-O CA NO5/FE FUMARATE/FA 106.5-1MG CAPSULE	0000	0.14000	05/04/2012
PNV WITH CA NO.65/IRON POLY/FA 60 MG-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV WITH CA,NO.61/IRON/FA/DHA 28-975-200 COMBO. PKG	0000	0.14000	05/04/2012
PNV WITH CA,NO.72/IRON,CARB/FA 29 MG-1 MG TABLET	0000	0.14000	03/05/2013
PNV WITH CA,NO.72/IRON/FA 27 MG-1 MG TAB	0000	0.14000	05/04/2012
PNV WITH FE FUM/FA 28-0.8MG TAB	0000	0.14000	05/04/2012
PNV#102/IRON/FA/DHA/LUTEIN 27-800-200 COMBO. PKG	0000	0.14000	06/05/2012
PNV#67/IRON PS/FA CMB#1/DHA 29-1-200MG CAPSULE	0000	0.14000	12/05/2013
PNV#71/IRON/FOLIC ACID/DHA 30-1.4-200 CAP IR DR	0000	0.14000	06/05/2014
PNV#75/IRON FUM/FA/OM3/DHA/EPA 28-800-223 COMBO. PKG	0000	0.14000	05/29/2015
PNV#75/IRON FUM/FA/OM3/DHA/EPA 28-800-440 COMBO. PKG	0000	0.14000	05/04/2012
PNV-DHA + DOCUSATE SOFTGEL	0000	0.14000	05/04/2012
PNV/FA/B6/CALCIUM PHOS/GINGER 1.2-40-100 TABLET	0000	0.14000	05/04/2012
PNV/FERROUS FUMARATE/DOSS/FA 90-50-1MG TABLET ER	0000	0.14000	05/04/2012
PNV/IRON,CARBONYL/DOCUSATE/FA 90-50-1MG TABLET	0000	0.14000	05/04/2012
PNV100/IRON EDTA&PS/FA/OMEGA3 27-1-374MG CMBPKGDRCP	0000	0.14000	06/05/2012
PNV103/FA/OMEGA3/DHA/FISH OIL 400 MCG-32.5 MG (25 MG-7.5 MG) TAB CHEW	0000	0.14000	10/05/2016
PNV106/IRON/FA/OM3/DHA/EPA 25-1-400MG COMBO. PKG	0000	0.14000	08/03/2012
PNV115/IRON FUMARATE/FA/DSS 29-1-25 MG TABLET	0000	0.14000	09/05/2013
PNV133/FERROUS FUMARATE/FA 28 MG IRON-800 MCG TABLET	0000	0.14000	10/05/2016
PNV151/IRON/FA/O3/DHA/EPA/FISH 27-800-260 CAPSULE	0000	0.14000	05/05/2019
PNV157/IRON/FA/O3/DHA/EPA/FISH 4-0.5-150 CAPSULE	0000	0.14000	08/05/2019
PNV158/IRON/FA/O3/DHA/EPA/FISH 13.5-0.5MG CAPSULE	0000	0.14000	08/05/2019
PNV166/IRON/FA/O3/DHA/EPA/FISH 27MG-0.8MG CAPSULE	0000	0.14000	09/05/2025
PNV168/FE/FA/CHOL/O3/DH/EP/FSH 27-800-110 COMBO. PKG	0000	0.14000	03/05/2026
PNV174/IRON/FA/O3/DHA/EPA/FISH 28-1-35 MG CAPSULE	0000	0.14000	05/05/2021
PNV19/IRON BG HC&SUCC-P/FA/OM3 29-1-400MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV55/IRON BG HC&SUCC-P/FA/OM3 29-1-430MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV55/IRON FUM & BISGLY/FA 28 MG-1 MG TAB CHEW	0000	0.14000	12/05/2012
PNV59/IRON,CARB&FUM/FA/DSS/DHA 27-1-50 MG CAPSULE	0000	0.14000	06/05/2014
PNV72/IRON,CARB&GLU/FA/DSS/DHA 90-1-300MG COMBO. PKG	0000	0.14000	05/29/2015
PNV73/IRON,CARB&GLU/FA/DSS/DHA 35-1-50 MG COMBO. PKG	0000	0.14000	05/29/2015
PNV76/IRON,CARB&GLU/FA/DSS/DHA 27-1-50 MG COMBO. PKG	0000	0.14000	05/29/2015
PNV81/SOD IRON EDTA& PS/FA/OM3 27-1-430MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV95/FERROUS FUMARATE/FA 28MG-0.8MG TABLET	0000	0.14000	05/04/2012
PODOFILOX 0.5 % SOLN	0000	15.64440	04/05/2026
POLYETHYLENE GLYCOL 3350 17 GM PWD BTL	0000	0.02322	06/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
POLYETHYLENE GLYCOL 3350 17 GM PWD PKT	0000	1.26523	04/05/2026
POLYMYXIN B/TMP EYE DROPS	0000	0.43581	06/05/2026
POTASSIUM BICARBONATE/CIT AC 25MEQ TAB EFF	0000	0.37315	02/05/2026
POTASSIUM CHLORIDE 20 MEQ PK	0000	0.84228	03/05/2026
POTASSIUM CHLORIDE 8 MEQ CAP SA	0000	0.11603	04/05/2026
POTASSIUM CITRATE 15 MEQ TABLET ER	0000	0.26682	12/05/2025
POTASSIUM CITRATE ER 10 MEQ TAB	0000	0.19507	08/05/2025
POTASSIUM CL 10 MEQ CAP SA	0000	0.13058	03/05/2026
POTASSIUM CL 10 MEQ TAB SA	0000	0.13369	06/05/2026
POTASSIUM CL 10 MEQ TAB SA PRT	0000	0.13588	02/05/2026
POTASSIUM CL 10% LIQUID	0000	0.03957	07/05/2026
POTASSIUM CL 20 MEQ TAB SA	0000	0.18719	06/05/2026
POTASSIUM CL 20% LIQUID	0000	0.05814	08/05/2026
POTASSIUM CL 8 MEQ TAB SA	0000	0.13569	12/05/2025
PRAMIPEXOLE DI-HCL 0.125 MG TAB	0000	0.04497	04/05/2026
PRAMIPEXOLE DI-HCL 0.25 MG TAB	0000	0.04907	06/05/2026
PRAMIPEXOLE DI-HCL 0.5 MG TAB	0000	0.08512	09/05/2025
PRAMIPEXOLE DI-HCL 0.75 MG TAB	0000	0.08104	05/05/2026
PRAMIPEXOLE DI-HCL 1 MG TAB	0000	0.06918	07/05/2026
PRAMIPEXOLE DI-HCL 1.5 MG TAB	0000	0.07275	11/05/2025
PRAVASTATIN SODIUM 10 MG TAB	0000	0.06128	05/05/2026
PRAVASTATIN SODIUM 20 MG TAB	0000	0.06371	05/05/2026
PRAVASTATIN SODIUM 40 MG TAB	0000	0.08711	01/05/2026
PRAVASTATIN SODIUM 80 MG TAB	0000	0.15408	04/05/2026
PRAZOSIN 1 MG CAP	0000	0.09688	01/05/2026
PRAZOSIN 2 MG CAP	0000	0.08914	03/05/2026
PRAZOSIN HCL 5 MG CAP	0000	0.17122	04/05/2026
PREDNISOLONE 15 MG/5 ML SOLN	0000	0.12726	10/05/2025
PREDNISOLONE 15 MG/5 ML SYRP	0000	0.58489	03/05/2026
PREDNISOLONE 5 MG/5 ML SOLN	0000	0.53604	08/05/2026
PREDNISOLONE AC 1% EYE DROPS	0000	4.65547	10/05/2025
PREDNISOLONE SOD 1% DROPS	0000	4.39975	03/05/2026
PREDNISON 1 MG TAB	0000	0.04092	01/05/2026
PREDNISON 10 MG TAB	0000	0.05399	03/05/2025
PREDNISON 10 MG TAB - UNIPAK	0000	0.49298	04/05/2026
PREDNISON 2.5 MG TAB	0000	0.08255	08/05/2026
PREDNISON 20 MG TAB	0000	0.08150	05/05/2026
PREDNISON 5 MG TAB	0000	0.04390	12/05/2025
PREDNISON 5 MG TAB - UNIPAK	0000	0.37329	04/05/2026
PREDNISON 50 MG TAB	0000	0.19282	05/05/2026
PREGABALIN 100 MG CAP	0000	0.06013	04/05/2026
PREGABALIN 150 MG CAP	0000	0.06344	04/05/2026
PREGABALIN 165 MG TAB ER 24H	0000	3.97156	01/05/2026
PREGABALIN 200 MG CAP	0000	0.07833	07/05/2026
PREGABALIN 225 MG CAP	0000	0.06423	04/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PREGABALIN 25 MG CAP	0000	0.04473	03/05/2026
PREGABALIN 300 MG CAP	0000	0.09744	08/05/2026
PREGABALIN 330 MG TAB ER 24H	0000	2.47465	08/05/2026
PREGABALIN 50 MG CAP	0000	0.05010	02/05/2026
PREGABALIN 75 MG CAP	0000	0.06032	04/05/2026
PREGABALIN 82.5 MG TAB ER 24H	0000	4.34863	08/05/2026
PRENATAL #103/IRON FUMARATE/FA 27 MG-1 MG TABLET	0000	0.14000	07/05/2012
PRENATAL #108/IRON,CARBONYL/FA 30 MG IRON-1 MG TABLET	0000	0.14000	10/05/2016
PRENATAL #48/IRON CB&GLU/FA/B6 20-1-25 MG TABLET SEQ	0000	0.14000	07/05/2012
PRENATAL #79/IRON ASP GLY/FA#1 20 MG-1 MG TABLET	0000	0.14000	05/29/2015
PRENATAL #92/IRON/FA #8/PS-DHA 1.5-8.73MG CAP IR DR	0000	0.14000	05/29/2015
PRENATAL 147/IRON/FOLIC ACID 13 MG-1 MG TABLET	0000	0.14000	05/05/2019
PRENATAL 148/IRON/FOLATE 6/DHA 27-1-205 CAPSULE	0000	0.14000	04/05/2019
PRENATAL 168/IRON/FOLIC/OMEGA3 27-800-235 CAPSULE	0000	0.14000	10/05/2020
PRENATAL 181/IRON FUM/FOLATE 15 MG-1750 TABLET	0000	0.14000	06/05/2022
PRENATAL 199/IRON/FOLATE NO.10 20 MG-1670 TABLET	0000	0.14000	10/05/2025
PRENATAL CMB#95/IRON/FA/DHA 28-800-200 COMBO. PKG	0000	0.14000	05/29/2015
PRENATAL COMB NO.42/FOLIC ACID 1.4 MG TAB CH BPH	0000	0.14000	05/29/2015
PRENATAL NO.123/IRON/FOLIC AC 50-1.25 MG TABLET	0000	0.14000	09/05/2017
PRENATAL NO.13/IRON PS/FA CB#1 29 MG-1 MG TAB CHEW	0000	0.14000	05/29/2015
PRENATAL NO.137/IRON/FOLIC ACD 27MG-0.8MG TABLET	0000	0.14000	08/05/2018
PRENATAL NO.144/FOLIC ACID 400 MCG TAB CHEW	0000	0.14000	04/05/2019
PRENATAL NO.167/FOLIC ACID/DHA 0.4MG-25MG TAB CHEW	0000	0.14000	04/05/2023
PRENATAL NO.25/IRON/FA #6/DHA 30-1-200MG CAPSULE	0000	0.14000	05/04/2012
PRENATAL NO.40/IRON/FA/DHA 27-0.8-250 CAPSULE	0000	0.14000	05/04/2012
PRENATAL NO.77/IRON ASP GLY/FA 20 MG-1 MG TABLET	0000	0.14000	05/29/2015
PRENATAL NO.93/IRON/FA #9/DHA 31 MG IRON-1 MG-200 MG CAPSULE	0000	0.14000	08/05/2015
PRENATAL VIT #105/IRON/FA/DHA 30 MG IRON-1.4 MG-300 MG COMBO. PKG	0000	0.14000	10/05/2016
PRENATAL VIT #49/IRON FUM/FA 6.75-0.2MG TABLET	0000	0.14000	07/05/2012
PRENATAL VIT #68/IRON/FA#6/DHA 28-1-400MG CAPSULE	0000	0.14000	12/05/2013
PRENATAL VIT #69/IRON/FA#6/DHA 27-1-400MG CAPSULE	0000	0.14000	12/05/2013
PRENATAL VIT #83/IRON/FA#6/DHA 29-1-150MG CAPSULE	0000	0.14000	05/29/2015
PRENATAL VIT #91/FE FUM/FA/DHA 28-975-200 COMBO. PKG	0000	0.14000	05/29/2015
PRENATAL VIT COMB.10/IRON/FA 65 MG-1 MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.112/FOLIC ACID 1 MG TAB CHEW	0000	0.14000	03/05/2013
PRENATAL VIT NO.124/IRON/FA 27MG-0.8MG TABLET	0000	0.14000	05/29/2015
PRENATAL VIT NO.126/IRON/FA 28MG-0.8MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.129/IRON/FA 27MG-0.8MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.130/IRON/FA 27MG-0.8MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.170/IRON/FOLIC 27 MG-1 MG TABLET	0000	0.14000	03/05/2021
PRENATAL VIT NO.179/IRON/FOLIC 28MG-0.8MG TABLET	0000	0.14000	05/05/2022
PRENATAL VIT NO.180/IRON/FOLIC 27 MG-1 MG TABLET	0000	0.14000	05/05/2022
PRENATAL VIT NO.204/IRON/FOLIC 27 MG-1 MG TABLET	0000	0.14000	04/05/2026
PRENATAL VIT NO.73/IRON/FA 28 MG-1 MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.87/IRON/FA/DHA 18-1-350MG CAPSULE	0000	0.14000	05/29/2015

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PRENATAL VIT#118/IRON/FA#6/DHA 30 MG IRON-1 MG-300 MG CAPSULE	0000	0.14000	04/05/2017
PRENATAL VIT#65/IRON FUM&PS/FA 40-1.25 MG CAPSULE	0000	0.14000	09/05/2013
PRENATAL VIT#84/IRON/FA#1/DHA 18-1-300MG CAPSULE	0000	0.14000	05/29/2015
PRENATAL VIT#85/IRON/FA#1/DHA 10-1-200MG CAPSULE	0000	0.14000	05/29/2015
PRENATAL VIT#98/FERROUS FUM/FA 9MG-267MCG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT/IRON FUMARATE/FA 65 MG-1 MG CAPSULE	0000	0.14000	05/04/2012
PRENATAL VIT/IRON FUMARATE/FA 65 MG-1 MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT116/IRON/FOLIC/DHA 28 MG IRON-800 MCG-200 MG CAPSULE	0000	0.14000	04/05/2017
PRENATAL VIT27&CALCIUM/IRON/FA 60 MG-1 MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT37/IRON/FOLIC ACID 29 MG-1 MG TAB CHEW	0000	0.14000	05/04/2012
PRENATAL VITS #32/IRON/FA/DHA 27-1-150MG COMBO. PKG	0000	0.14000	05/04/2012
PRENATAL VITS #33/IRON/FA/DHA 29-1-250MG COMBO. PKG	0000	0.14000	05/04/2012
PRENATAL VITS #93/IRON FUM/FA 9MG-267MCG TABLET	0000	0.14000	05/04/2012
PRENATAL72/IRON FUM/FA/OM3/DHA 27 MG IRON-1 MG-312 MG-250 MG COMBO. PKG	0000	0.14000	04/05/2017
PRIMIDONE 250 MG TAB	0000	0.24507	07/05/2026
PRIMIDONE 50 MG TAB	0000	0.11590	09/05/2025
PROBENECID 500 MG TAB	0000	0.77195	10/05/2025
PROCHLORPERAZINE 10 MG TAB	0000	0.18874	02/05/2026
PROCHLORPERAZINE 25 MG SUPP	0000	5.30587	07/05/2026
PROCHLORPERAZINE 5 MG TAB	0000	0.12148	04/05/2026
PROGESTERONE OIL 50 MG/ML VL	0000	1.54009	05/05/2026
PROGESTERONE,MICRONIZED 100 MG CAP	0000	0.23786	04/05/2026
PROGESTERONE,MICRONIZED 200 MG CAP	0000	0.40245	04/05/2026
PROMETHAZINE 25 MG SUPP	0000	2.26814	07/05/2025
PROMETHAZINE 25 MG TAB	0000	0.04573	04/05/2026
PROMETHAZINE 25 MG/ML AMP	0000	1.67412	08/05/2026
PROMETHAZINE 25 MG/ML VIAL	0000	1.69472	08/05/2025
PROMETHAZINE 50 MG TAB	0000	0.07842	03/05/2026
PROMETHAZINE 6.25/5 ML SYRP	0000	0.03799	06/05/2026
PROMETHAZINE HCL 12.5 MG SUPP	0000	1.83122	04/05/2026
PROMETHAZINE HCL 12.5 MG TAB	0000	0.04665	04/05/2026
PROMETHAZINE HCL 50 MG/ML AMP	0000	3.17933	12/05/2025
PROMETHAZINE VC SYRP	0000	0.22293	06/05/2019
PROPAFENONE HCL 150 MG TAB	0000	0.16445	07/05/2026
PROPAFENONE HCL 225 MG TAB	0000	0.18505	01/05/2026
PROPAFENONE HCL 300 MG TAB	0000	0.42903	10/05/2025
PROPRANOLOL 10 MG TAB	0000	0.05338	10/05/2025
PROPRANOLOL 120 MG CAP SA	0000	0.25988	11/05/2025
PROPRANOLOL 160 MG CAP SA	0000	0.30930	09/05/2025
PROPRANOLOL 20 MG TAB	0000	0.06061	08/05/2025
PROPRANOLOL 40 MG TAB	0000	0.09346	08/05/2025
PROPRANOLOL 60 MG CAP SA	0000	0.19464	10/05/2025
PROPRANOLOL 60 MG TAB	0000	0.15458	09/05/2025
PROPRANOLOL 80 MG CAP SA	0000	0.21310	08/05/2026
PROPRANOLOL 80 MG TAB	0000	0.19409	08/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PROPYLTHIOURACIL 50 MG TAB	0000	0.29183	11/05/2025
PROTRIPTYLINE HCL 10 MG TAB	0000	2.21931	08/05/2025
PV W-O CAL/FE,CARBONYL/DOSS/FA 29-50-1MG TABLET DR	0000	0.14000	05/04/2012
PV W-O CAL/IRON PS CPLX/FA 29 MG-1 MG TAB CHEW	0000	0.14000	05/04/2012
PYRIDOSTIGMINE BR 60 MG TAB	0000	0.24712	04/05/2026
PYRIDOSTIGMINE BROMIDE 180 MG TAB ER	0000	4.40500	07/05/2026
QUETIAPINE FUMARATE 100 MG TAB	0000	0.05473	07/05/2026
QUETIAPINE FUMARATE 200 MG TAB	0000	0.09878	05/05/2026
QUETIAPINE FUMARATE 25 MG TAB	0000	0.03162	07/05/2026
QUETIAPINE FUMARATE 300 MG TAB	0000	0.14646	06/05/2026
QUETIAPINE FUMARATE 400 MG TAB	0000	0.17295	07/05/2026
QUETIAPINE FUMARATE 50 MG TAB	0000	0.03712	01/05/2026
QUINAPRIL HCL 5 MG TAB	0000	0.07534	02/05/2023
QUINAPRIL HCL 10 MG TAB	0000	0.09676	02/05/2023
QUINAPRIL HCL 20 MG TAB	0000	0.14896	12/05/2021
QUINAPRIL HCL 40 MG TAB	0000	0.16832	02/05/2023
QUINAPRIL/HCTZ 10/12.5 MG TAB	0000	0.31182	03/05/2022
QUINAPRIL/HCTZ 20/12.5 MG TAB	0000	0.37590	08/05/2022
QUINAPRIL/HCTZ 20/25 MG TAB	0000	0.31644	06/05/2022
QUININE SULFATE 324 MG CAP	0000	0.72036	02/05/2026
RABEPRAZOLE SODIUM 20 MG TABLET DR	0000	0.24909	05/05/2026
RALOXIFENE HCL 60 MG TAB	0000	0.35800	02/05/2026
RAMIPRIL 1.25 MG CAP	0000	0.09673	12/05/2025
RAMIPRIL 10 MG CAP	0000	0.07152	04/05/2026
RAMIPRIL 2.5 MG CAP	0000	0.05526	04/05/2026
RAMIPRIL 5 MG CAP	0000	0.04623	07/05/2025
REPREXAIN 10-200 MG TAB	0000	2.95930	02/05/2026
RIBAVIRIN 200 MG CAP	0000	1.64757	07/05/2016
RIBAVIRIN 200 MG TAB	0000	0.70458	11/05/2015
RIFAMPIN 150 MG CAP	0000	0.75871	04/05/2026
RIFAMPIN 300 MG CAP	0000	0.69920	04/05/2026
RILUZOLE 50 MG TAB	0000	0.31047	10/05/2025
RISEDRONATE SODIUM 150 MG TABLET	0000	13.88856	07/05/2026
RISPERIDONE 0.25MG TAB	0000	0.03891	07/05/2026
RISPERIDONE 0.5 MG TAB ODT	0000	0.93297	03/05/2026
RISPERIDONE 0.5MG TAB	0000	0.04116	11/05/2025
RISPERIDONE 1 MG TAB RAPDIS	0000	1.11137	08/05/2025
RISPERIDONE 1MG TAB	0000	0.04431	05/05/2026
RISPERIDONE 1MG/ML SOLN	0000	0.59079	04/05/2026
RISPERIDONE 2 MG TAB ODT	0000	1.25959	06/05/2025
RISPERIDONE 2MG TAB	0000	0.05143	12/05/2025
RISPERIDONE 3 MG TAB RAPDIS	0000	1.58527	07/05/2026
RISPERIDONE 3MG TAB	0000	0.06820	09/05/2025
RISPERIDONE 4MG TAB	0000	0.09346	10/05/2025
RISPERIDONE M-TAB 4 MG ODT	0000	1.99613	09/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
RIVASTIGMINE TARTRATE 1.5 MG CAP	0000	0.16833	12/05/2025
RIVASTIGMINE TARTRATE 3 MG CAP	0000	0.18697	08/05/2026
RIVASTIGMINE TARTRATE 4.5 MG CAP	0000	0.22044	08/05/2026
RIVASTIGMINE TARTRATE 6 MG CAP	0000	0.19583	11/05/2025
RIZATRIPTAN BENZOATE 10 MG TAB	0000	0.38951	07/05/2026
RIZATRIPTAN BENZOATE 10 MG TAB RAPDIS	0000	0.55230	07/05/2026
RIZATRIPTAN BENZOATE 5 MG TAB	0000	0.35907	07/05/2026
RIZATRIPTAN BENZOATE 5 MG TAB RAPDIS	0000	0.57790	04/05/2026
ROPINIROLE HCL 0.25 MG TAB	0000	0.04732	01/05/2026
ROPINIROLE HCL 0.5 MG TAB	0000	0.06424	02/05/2026
ROPINIROLE HCL 1 MG TAB	0000	0.05558	12/05/2024
ROPINIROLE HCL 12 MG TAB ER 24H	0000	2.61333	01/05/2026
ROPINIROLE HCL 2 MG TAB	0000	0.08394	10/05/2025
ROPINIROLE HCL 2 MG TAB ER 24H	0000	0.46065	04/05/2026
ROPINIROLE HCL 3 MG TAB	0000	0.07346	04/05/2026
ROPINIROLE HCL 4 MG TAB	0000	0.08377	01/05/2026
ROPINIROLE HCL 4 MG TAB ER 24H	0000	0.58153	01/05/2026
ROPINIROLE HCL 5 MG TAB	0000	0.08354	06/05/2025
ROPINIROLE HCL 6 MG TAB ER 24H	0000	1.23193	07/05/2026
ROPINIROLE HCL 8 MG TAB ER 24H	0000	0.95677	12/05/2025
ROSUVASTATIN CALCIUM 10 MG TAB	0000	0.04686	08/05/2026
ROSUVASTATIN CALCIUM 20 MG TAB	0000	0.05379	02/05/2026
ROSUVASTATIN CALCIUM 40 MG TAB	0000	0.07570	01/05/2026
ROSUVASTATIN CALCIUM 5 MG TAB	0000	0.04627	07/05/2026
SACUBITRIL/VALSARTAN 24 MG-26 MG TABLET	0000	1.74783	08/05/2026
SACUBITRIL/VALSARTAN 49 MG-51 MG TABLET	0000	2.47448	03/05/2026
SACUBITRIL/VALSARTAN 97 MG-103 MG TABLET	0000	2.64613	03/05/2026
SALICYLIC ACID 6% SHAMPOO	0000	0.16692	04/05/2016
SALSALATE 500MG TAB	0000	0.25707	07/05/2025
SELEGILINE HCL 5 MG CAP	0000	0.63597	10/05/2025
SELEGILINE HCL 5 MG TAB	0000	0.79372	11/05/2025
SERTRALINE 20 MG/ML ORAL CONC	0000	0.48745	06/05/2026
SERTRALINE HCL 100 MG TAB	0000	0.05160	05/05/2026
SERTRALINE HCL 25 MG TAB	0000	0.03177	04/05/2026
SERTRALINE HCL 50 MG TAB	0000	0.03257	11/05/2025
SILDENAFIL 10 MG/ML ORAL SUSP	0000	5.62931	08/05/2026
SILDENAFIL CITRATE 20 MG TAB	0000	0.05461	01/05/2026
SILVER SULFADIAZINE 1% CRM	0000	0.25220	04/05/2026
SIMVASTATIN 10 MG TAB	0000	0.02536	01/05/2026
SIMVASTATIN 20 MG TAB	0000	0.03755	02/05/2026
SIMVASTATIN 40 MG TAB	0000	0.04837	01/05/2026
SIMVASTATIN 5 MG TAB	0000	0.03387	11/05/2025
SIMVASTATIN 80 MG TAB	0000	0.09446	05/05/2026
SODIUM BICARBONATE 650 MG TAB	0000	0.01369	06/05/2025
SODIUM CHLORIDE 0.9% IRRIG	0000	0.00264	11/05/2015

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
SODIUM CHLORIDE 0.9% SOLN	0000	0.00319	11/05/2015
SODIUM CHLORIDE 0.9% SOLN	1000	0.00446	12/05/2025
SODIUM CHLORIDE 0.9% SOLN	0500	0.00805	03/05/2016
SODIUM CHLORIDE 0.9% SOLN	0250	0.01024	03/05/2016
SODIUM CHLORIDE 0.9% SOLN	0150	0.01340	06/05/2015
SODIUM CHLORIDE 0.9% SOLN	0050	0.03300	01/01/2014
SODIUM CHLORIDE 0.9% SOLN	0025	0.08010	09/05/2014
SODIUM CHLORIDE 0.9% VIAL	0000	0.07891	12/05/2025
SODIUM FLUORIDE 0.25MG TAB CHEW	0000	0.06745	10/05/2025
SODIUM FLUORIDE 0.5 MG/ML DROPS	0000	0.17960	11/05/2025
SODIUM FLUORIDE 0.5MG TAB CHEW	0000	0.06968	08/05/2025
SODIUM FLUORIDE 1.1 % CRM	0000	0.07329	07/05/2025
SODIUM FLUORIDE 1MG TAB CHEW	0000	0.07481	08/05/2025
SODIUM POLYSTYRENE SULF PWDR	0000	0.13450	07/05/2026
SOTALOL HCL 120 MG TAB	0000	0.09623	05/05/2026
SOTALOL HCL 160 MG TAB	0000	0.13374	01/05/2026
SOTALOL HCL 80 MG TAB	0000	0.07492	05/05/2026
SPIRONOLACT/HCTZ 25/25 MG TAB	0000	0.50860	04/05/2026
SPIRONOLACTONE 100 MG TAB	0000	0.18562	04/05/2026
SPIRONOLACTONE 25 MG TAB	0000	0.06152	10/05/2025
SPIRONOLACTONE 50 MG TAB	0000	0.10409	07/05/2026
STAVUDINE 40 MG CAP	0000	0.91474	09/05/2015
SUCRALFATE 1 GM TAB	0000	0.17092	01/05/2026
SULFACETAMIDE 10% EYE DROPS	0000	1.78192	02/05/2026
SULFACETAMIDE/PREDNISOLONE SP 10%-0.23% EYE DROPS	0000	2.49040	06/05/2026
SULFAMETHOXAZOLE/TMP DS TAB	0000	0.04533	08/05/2026
SULFAMETHOXAZOLE/TMP SS TAB	0000	0.04589	08/05/2025
SULFAMETHOXAZOLE/TMP SUSP	0000	0.05642	05/05/2026
SULFASALAZINE 500 MG TAB	0000	0.18900	02/05/2026
SULFASALAZINE DR 500 MG TAB	0000	0.18936	10/05/2025
SULINDAC 150 MG TAB	0000	0.15817	12/05/2025
SULINDAC 200 MG TAB	0000	0.23643	06/05/2026
SUMATRIPTAN 20 MG NASAL SPRY	0000	16.51528	08/05/2026
SUMATRIPTAN 4 MG/0.5 ML KIT	0000	133.27462	10/05/2024
SUMATRIPTAN 5 MG NASAL SPRAY	0000	19.24932	05/05/2026
SUMATRIPTAN SUCC 100 MG TAB	0000	0.44280	11/05/2025
SUMATRIPTAN SUCC 25 MG TAB	0000	0.36084	12/05/2025
SUMATRIPTAN SUCC 50 MG TAB	0000	0.38091	07/05/2026
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML KIT-REFILL	0000	123.94100	09/05/2024
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML PEN IJ KIT	0000	62.96516	08/05/2026
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML VIAL	0000	15.04450	04/05/2026
TACROLIMUS 0.03 % OINT. (G)	0000	0.74088	12/05/2025
TACROLIMUS 0.1 % OINT. (G)	0000	0.88392	07/05/2026
TACROLIMUS 0.5 MG CAP	0000	0.14679	04/05/2026
TACROLIMUS 1 MG CAP	0000	0.17904	07/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TAMOXIFEN 10 MG TAB	0000	0.17599	10/05/2025
TAMOXIFEN 20 MG TAB	0000	0.29688	08/05/2025
TAMSULOSIN HCL 0.4 MG CAP SR 24H	0000	0.05396	09/05/2025
TELMISARTAN 20 MG TAB	0000	0.12503	01/05/2026
TELMISARTAN 40 MG TAB	0000	0.15998	07/05/2026
TELMISARTAN 80 MG TAB	0000	0.15351	08/05/2026
TELMISARTAN/HCTZ 40 MG-12.5 MG TAB	0000	0.37597	10/05/2025
TELMISARTAN/HCTZ 80 MG-12.5 MG TAB	0000	0.41214	09/05/2025
TELMISARTAN/HCTZ 80 MG-25 MG TAB	0000	0.40283	10/05/2025
TEMAZEPAM 15 MG CAP	0000	0.07085	04/05/2026
TEMAZEPAM 22.5 MG CAP	0000	1.99489	07/05/2026
TEMAZEPAM 30 MG CAP	0000	0.09484	02/05/2026
TEMAZEPAM 7.5 MG CAP	0000	0.88962	03/05/2026
TEMOZOLOMIDE 100 MG CAPSULE	0000	4.96052	08/05/2026
TERAZOSIN 1 MG CAP	0000	0.13255	10/05/2025
TERAZOSIN 10 MG CAP	0000	0.15443	03/05/2026
TERAZOSIN 2 MG CAP	0000	0.14143	10/05/2025
TERAZOSIN 5 MG CAP	0000	0.14013	11/05/2025
TERBINAFINE HCL 250 MG TAB	0000	0.12784	09/05/2025
TERBUTALINE SULFATE 2.5 MG TAB	0000	0.89314	03/05/2026
TERBUTALINE SULFATE 5 MG TAB	0000	0.91472	08/05/2026
TERCONAZOLE 0.4% CRM	0000	0.59233	08/05/2026
TERCONAZOLE 0.8% VAG CRM	0000	1.18644	06/05/2026
TERCONAZOLE 80 MG VAG SUPP	0000	18.96634	08/05/2026
TESTOSTERONE 20.25/1.25 GEL MD PMP	0000	0.44198	04/05/2026
TESTOSTERONE 50 MG/5 GRAM (1 %) UD TUBE	0000	0.81732	04/05/2026
TESTOSTERONE CYP 200 MG/ML VIAL	0010	6.65850	04/24/2016
TESTOSTERONE ENAN 200 MG/ML VIAL	0000	13.77369	08/05/2025
TETRACYCLINE 250 MG CAP	0000	0.26913	07/05/2026
TETRACYCLINE 500 MG CAP	0000	0.64741	04/05/2026
THEOPHYLLINE 100 MG TAB SA	0000	0.52445	08/05/2015
THEOPHYLLINE 200 MG TAB SA	0000	0.46290	08/05/2015
THEOPHYLLINE 300 MG TAB SA	0000	0.47556	03/05/2026
THEOPHYLLINE ER 400 MG TAB	0000	0.81684	10/05/2025
THIORIDAZINE 10 MG TAB	0000	0.46601	02/05/2026
THIORIDAZINE 100 MG TAB	0000	0.78795	08/05/2025
THIORIDAZINE 25 MG TAB	0000	0.57683	07/05/2026
THIORIDAZINE 50 MG TAB	0000	0.70493	08/05/2026
THIOTHIXENE 1 MG CAP	0000	0.67348	11/05/2025
THIOTHIXENE 10 MG CAP	0000	2.19793	05/05/2026
THIOTHIXENE 2 MG CAP	0000	0.94654	09/05/2025
THIOTHIXENE 5 MG CAP	0000	1.60920	08/05/2025
TIMOLOL 0.25% EYE DROPS	0000	0.62031	09/05/2025
TIMOLOL 0.25% GEL /SOLN	0000	8.04857	08/05/2026
TIMOLOL 0.5% GEL /SOLN	0000	11.71076	08/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TIMOLOL MALEATE 0.5% EYE DROPS	0000	1.00558	09/05/2025
TINIDAZOLE 500 MG TAB	0000	2.25048	01/05/2026
TIZANIDINE HCL 2 MG CAP	0000	0.09346	07/05/2026
TIZANIDINE HCL 2 MG TAB	0000	0.04144	08/05/2025
TIZANIDINE HCL 4 MG CAP	0000	0.10189	03/05/2026
TIZANIDINE HCL 4 MG TAB	0000	0.03861	01/05/2026
TIZANIDINE HCL 6 MG CAP	0000	0.17831	12/05/2025
TOBRAMYCIN 0.3% OPTH SOLN	0000	0.94368	01/05/2026
TOBRAMYCIN IN 0.225% NACL 300 MG/5ML AMPUL-NEB	0000	1.13854	04/05/2026
TOBRAMYCIN SULFATE 1.2 G VIAL	0000	81.54250	01/18/2019
TOLTERODINE TARTRATE 1 MG TAB	0000	0.23421	05/05/2026
TOLTERODINE TARTRATE 2 MG CAP ER 24H	0000	0.31930	02/05/2026
TOLTERODINE TARTRATE 2 MG TAB	0000	0.25595	08/05/2025
TOLTERODINE TARTRATE 4 MG CAP ER 24H	0000	0.27062	03/05/2026
TOPIRAMATE 100 MG TAB	0000	0.07789	10/05/2025
TOPIRAMATE 15 MG SPRINKLE CAP	0000	0.25566	05/05/2026
TOPIRAMATE 200 MG TAB	0000	0.09911	08/05/2026
TOPIRAMATE 25 MG SPRINKLE CAP	0000	0.27860	08/05/2026
TOPIRAMATE 25 MG TAB	0000	0.02470	11/05/2025
TOPIRAMATE 50 MG TAB	0000	0.06677	12/05/2025
TORSEMIDE 10 MG TAB	0000	0.08830	06/05/2025
TORSEMIDE 100 MG TAB	0000	0.20904	05/05/2026
TORSEMIDE 20 MG TAB	0000	0.07528	01/05/2026
TORSEMIDE 5 MG TAB	0000	0.07971	12/05/2025
TRAMADOL HCL 100 MG TBMP 24HR	0000	1.41567	07/05/2020
TRAMADOL HCL 200 MG TAB.SR 24H	0000	1.46628	04/05/2026
TRAMADOL HCL 300 MG TBMP 24HR	0000	3.69250	08/05/2020
TRAMADOL HCL 50 MG TAB	0000	0.02783	12/05/2025
TRAMADOL HCL ER 100 MG TAB	0000	0.97448	09/05/2025
TRAMADOL HCL ER 300 MG TAB	0000	2.19694	01/05/2026
TRAMADOL/APAP 37.5/325 MG TAB	0000	0.10574	04/05/2026
TRANDOLAPRIL 1 MG TAB	0000	0.15495	04/05/2026
TRANDOLAPRIL 2 MG TAB	0000	0.18506	07/05/2025
TRANDOLAPRIL 4 MG TAB	0000	0.20323	10/05/2025
TRANEXAMIC ACID 650 MG TABLET	0000	1.07046	03/05/2026
TRANLYCYPROMINE SULFATE 10 MG TAB	0000	0.68819	01/05/2026
TRAZODONE 100 MG TAB	0000	0.05459	01/05/2026
TRAZODONE 150 MG TAB	0000	0.08889	03/05/2026
TRAZODONE 300 MG TAB	0000	0.64842	09/05/2025
TRAZODONE 50 MG TAB	0000	0.04150	07/05/2026
TRETINOIN 0.01% GEL	0000	3.68491	11/05/2025
TRETINOIN 0.025% CRM	0000	0.81158	06/05/2026
TRETINOIN 0.025% GEL	0000	3.36030	02/05/2026
TRETINOIN 0.05% CRM	0000	1.28030	08/05/2026
TRETINOIN 0.1% CRM	0000	1.02646	12/05/2025

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TRETINOIN MICROSPHERES 0.04 % GEL (GRAM)	0000	9.45909	06/05/2019
TRETINOIN MICROSPHERES 0.04 % GEL W/PUMP	0000	10.82694	05/05/2025
TRETINOIN MICROSPHERES 0.1 % GEL (GRAM)	0000	8.86935	11/05/2019
TRETINOIN MICROSPHERES 0.1 % GEL W/PUMP	0000	9.73959	10/05/2024
TRIAMCINOLONE 0.025% CRM	0000	0.03426	08/05/2025
TRIAMCINOLONE 0.025% CRM	0080	0.05584	06/05/2026
TRIAMCINOLONE 0.025% CRM	0015	0.11686	02/05/2026
TRIAMCINOLONE 0.025% LOT	0000	0.41234	05/05/2026
TRIAMCINOLONE 0.025% OINT	0080	0.08434	06/05/2025
TRIAMCINOLONE 0.025% OINT	0000	0.16096	01/05/2026
TRIAMCINOLONE 0.1% CRM	0000	0.06777	04/05/2026
TRIAMCINOLONE 0.1% LOT	0000	0.30013	08/05/2025
TRIAMCINOLONE 0.1% OINT	0000	0.08603	08/05/2026
TRIAMCINOLONE 0.1% PASTE	0000	3.24547	05/05/2026
TRIAMCINOLONE 0.5% CRM	0000	0.29738	07/05/2026
TRIAMCINOLONE 0.5% OINT	0000	0.30645	03/05/2026
TRIAMTERENE/HCTZ 37.5/25 MG CAP	0000	0.11839	05/05/2026
TRIAMTERENE/HCTZ 37.5/25 MG TAB	0000	0.09704	06/05/2026
TRIAMTERENE/HCTZ 75/50 MG TAB	0000	0.11991	02/05/2026
TRIAZOLAM 0.125 MG TAB	0000	0.34346	07/05/2026
TRIAZOLAM 0.25 MG TAB	0000	0.32693	05/05/2026
TRIFLUOPERAZINE 10 MG TAB	0000	1.42849	10/05/2025
TRIFLUOPERAZINE 2 MG TAB	0000	0.89415	08/05/2026
TRIFLUOPERAZINE 5 MG TAB	0000	0.75328	09/05/2025
TRIFLURIDINE 1% EYE DROPS	0000	23.68668	07/05/2026
TRIHEXYPHENIDYL 2 MG TAB	0000	0.08168	04/05/2026
TRIHEXYPHENIDYL 5 MG TAB	0000	0.15021	10/05/2025
TRIMETHOBENZAMIDE 300 MG CAP	0000	1.21159	03/05/2020
TRIMETHOPRIM 100 MG TAB	0000	1.17526	03/05/2026
TROSPIMUM CHLORIDE 20 MG TAB	0000	0.24560	12/05/2025
TROSPIMUM CHLORIDE 60 MG CAP ER 24H	0000	1.84935	03/05/2026
URSODIOL 250 MG TAB	0000	0.37569	04/05/2026
URSODIOL 300 MG CAP	0000	0.46426	07/05/2026
URSODIOL 500 MG TAB	0000	0.66072	12/05/2025
VALACYCLOVIR HCL 1,000 MG TAB	0000	0.41144	11/05/2025
VALACYCLOVIR HCL 500 MG TAB	0000	0.23407	10/05/2025
VALGANCICLOVIR HYDROCHLORIDE 450 MG TAB	0000	2.28125	04/05/2026
VALPROIC ACID 250 MG CAP	0000	0.22607	07/05/2025
VALPROIC ACID 250 MG/5 ML SYRP	0000	0.03328	12/05/2025
VANCOMYCIN 1 GM VIAL	0000	2.56117	10/05/2024
VANCOMYCIN 5 GM VIAL	0000	39.31587	11/05/2024
VANCOMYCIN 500 MG VIAL	0000	2.44475	11/05/2024
VANCOMYCIN HCL 10 GM VIAL	0000	42.17000	05/05/2016
VANCOMYCIN HCL 125 MG CAP	0000	1.30693	04/05/2026
VANCOMYCIN HCL 250 MG CAPSULE	0000	2.59265	06/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
VENLAFAXINE HCL 100 MG TAB	0000	0.10179	04/05/2026
VENLAFAXINE HCL 150 MG CAP ER 24H	0000	0.11385	01/05/2026
VENLAFAXINE HCL 150 MG TAB ER 24	0000	0.21534	08/05/2026
VENLAFAXINE HCL 25 MG TAB	0000	0.07849	07/05/2026
VENLAFAXINE HCL 37.5 MG CAP ER 24H	0000	0.08921	07/05/2026
VENLAFAXINE HCL 37.5 MG TAB	0000	0.07370	10/05/2025
VENLAFAXINE HCL 37.5 MG TAB ER 24	0000	0.49381	07/05/2026
VENLAFAXINE HCL 50 MG TAB	0000	0.08102	01/05/2026
VENLAFAXINE HCL 75 MG CAP ER 24H	0000	0.09315	05/05/2026
VENLAFAXINE HCL 75 MG TAB	0000	0.09963	02/05/2026
VENLAFAXINE HCL 75 MG TAB ER 24	0000	0.28873	04/05/2026
VERAPAMIL 120 MG CAP PELLET	0000	1.69168	08/05/2026
VERAPAMIL 120 MG TAB	0000	0.07441	06/05/2026
VERAPAMIL 120 MG TAB SA	0000	0.21844	11/05/2025
VERAPAMIL 180 MG CAP PELLET	0000	1.25516	06/05/2026
VERAPAMIL 180 MG TAB SA	0000	0.23977	07/05/2026
VERAPAMIL 240 MG CAP PELLET	0000	1.53966	08/05/2026
VERAPAMIL 240 MG TAB SA	0000	0.16728	07/05/2025
VERAPAMIL 360 MG CAP PELLET	0000	7.13462	01/05/2026
VERAPAMIL 40 MG TAB	0000	0.10661	09/05/2025
VERAPAMIL 80 MG TAB	0000	0.08026	06/05/2026
VINCRISTINE SULFATE 1 MG/ML VIAL	0000	6.13200	06/05/2015
VITAFOL FE+ DOCUSATE COMBO PCK	0000	0.14000	04/05/2016
VITAMIN D 50,000 UNITS SOFTGEL	0000	0.11845	05/05/2026
VORICONAZOLE 200 MG TAB	0000	1.58956	12/05/2025
VORICONAZOLE 200 MG VIAL	0000	47.61951	06/05/2025
WARFARIN SODIUM 1 MG TAB	0000	0.09182	11/05/2025
WARFARIN SODIUM 10 MG TAB	0000	0.11176	07/05/2026
WARFARIN SODIUM 2 MG TAB	0000	0.08153	07/05/2025
WARFARIN SODIUM 2.5 MG TAB	0000	0.08948	07/05/2025
WARFARIN SODIUM 3 MG TAB	0000	0.09145	03/05/2026
WARFARIN SODIUM 4 MG TAB	0000	0.08455	08/05/2026
WARFARIN SODIUM 5 MG TAB	0000	0.08809	09/05/2025
WARFARIN SODIUM 6 MG TAB	0000	0.11004	02/05/2026
WARFARIN SODIUM 7.5 MG TAB	0000	0.09299	03/05/2026
WATER FOR INJECTION VIAL	0000	0.15025	03/05/2026
ZAFIRLUKAST 10 MG TAB	0000	0.64340	08/05/2026
ZAFIRLUKAST 20 MG TAB	0000	0.63613	05/05/2026
ZALEPLON 10 MG CAP	0000	0.18122	06/05/2026
ZALEPLON 5 MG CAP	0000	0.15607	05/05/2026
ZIDOVUDINE 100 MG CAP	0000	1.11600	12/05/2014
ZIDOVUDINE 300 MG TAB	0000	0.45329	08/05/2025
ZIPRASIDONE HCL 20 MG CAP	0000	0.27845	09/05/2025
ZIPRASIDONE HCL 40 MG CAP	0000	0.30876	11/05/2025
ZIPRASIDONE HCL 60 MG CAP	0000	0.31587	05/05/2026

**North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs**

Updates Effective August 5, 2026

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ZIPRASIDONE HCL 80 MG CAP	0000	0.36860	11/05/2025
ZOLMITRIPTAN 2.5 MG TAB	0000	1.24856	07/05/2026
ZOLMITRIPTAN 5 MG TAB	0000	1.27787	11/05/2025
ZOLMITRIPTAN 5 MG TAB RAPDIS	0000	3.03675	04/05/2026
ZOLPIDEM TART ER 12.5 MG TAB	0000	0.11944	04/05/2026
ZOLPIDEM TARTRATE 10 MG TAB	0000	0.03193	09/05/2025
ZOLPIDEM TARTRATE 5 MG TAB	0000	0.03481	01/05/2026
ZOLPIDEM TARTRATE 6.25 MG ER TAB	0000	0.14159	04/05/2026
ZONISAMIDE 100 MG CAP	0000	0.11192	08/05/2026
ZONISAMIDE 25 MG CAP	0000	0.06732	10/05/2025
ZONISAMIDE 50 MG CAP	0000	0.09284	04/05/2026