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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ABACAVIR SULFATE 300 MG TAB	0000	0.64379	06/05/2025
ACAMPROSATE CALCIUM 333 MG TAB DR	0000	0.52412	03/05/2025
ACARBOSE 100 MG TAB	0000	0.23503	03/05/2025
ACARBOSE 25 MG TAB	0000	0.14215	08/05/2024
ACARBOSE 50 MG TAB	0000	0.16519	05/05/2024
ACEBUTOLOL 200 MG CAP	0000	0.64265	06/05/2025
ACEBUTOLOL 400 MG CAP	**0000**	**0.79694**	**07/05/2025**
ACETAMINOPHEN WITH CODEINE 120-12MG/5 SOLUTION	**0000**	**0.43649**	**07/05/2025**
ACETAMINOPHEN/COD 300/15 MG TAB	0000	0.27593	12/05/2024
ACETAMINOPHEN/COD 300/30 MG TAB	0000	0.22405	08/05/2024
ACETAMINOPHEN/COD 300/60 MG TAB	0000	0.43990	04/05/2025
ACETAZOLAMIDE 250 MG TAB	0000	0.15941	09/05/2024
ACETAZOLAMIDE 500 MG CAP	0000	0.31624	04/05/2025
ACETIC ACID 0.25% IRRIG SOLN	0000	0.00460	03/05/2015
ACETIC ACID 2 % SOLN	0000	1.44876	03/05/2025
ACETIC ACID/HYDROCORTISONE 2 %-1 % DROPS	0000	7.24625	03/05/2025
ACETYLCYSTEINE 10% VIAL	**0000**	**0.99113**	**07/05/2025**
ACETYLCYSTEINE 20% VIAL	0000	0.55702	01/05/2025
ACITRETIN 10 MG CAPSULE	0000	4.00793	06/05/2025
ACITRETIN 25 MG CAP	0000	3.72726	06/05/2025
ACYCLOVIR 200 MG CAP	0000	0.09763	03/05/2025
ACYCLOVIR 200 MG/5 ML SUSP	0000	0.07725	01/05/2025
ACYCLOVIR 400 MG TAB	0000	0.08773	03/05/2025
ACYCLOVIR 5 % OINT. (G)	0000	0.61659	10/05/2024
ACYCLOVIR 800 MG TAB	0000	0.14342	03/05/2025
ALBUTEROL 0.83 MG/ML SOLN	**0000**	**0.05918**	**07/05/2025**
ALBUTEROL 2.5 MG/0.5 ML SOL	0000	0.45407	02/05/2025
ALBUTEROL 5 MG/ML SOLN	0000	2.12250	09/05/2019
ALBUTEROL SUL 1.25 MG/3 ML SOLN	0000	0.24173	12/05/2024
ALBUTEROL SULF 2 MG/5 ML SYRP	0000	0.03726	02/05/2025
ALBUTEROL SULFATE 0.63MG/3ML VIAL-NEB	0000	0.21389	12/05/2024
ALBUTEROL SULFATE 2 MG TAB	0000	0.40751	10/05/2024
ALBUTEROL SULFATE 4 MG TAB	0000	0.41877	05/05/2025
ALBUTEROL SULFATE ER 4 MG TAB	0000	1.49416	09/05/2017
ALCLOMETASONE DIP 0.05% CRM	0000	0.89710	11/05/2024
ALCLOMETASONE DIP 0.05% OINT	0000	0.68234	05/05/2025
ALENDRONATE SODIUM 10 MG TAB	0000	0.12078	06/05/2025
ALENDRONATE SODIUM 35 MG TAB	0000	0.30779	02/05/2025
ALENDRONATE SODIUM 5 MG TAB	0000	0.18514	04/05/2019
ALENDRONATE SODIUM 70 MG TAB	0000	0.26107	08/05/2024
ALFUZOSIN HCL 10 MG TAB ER 24H	0000	0.13056	01/05/2025
ALLOPURINOL 100 MG TAB	0000	0.03690	12/05/2024
ALLOPURINOL 300 MG TAB	**0000**	**0.09821**	**07/05/2025**

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ALMOTRIPTAN MALATE 12.5 MG TAB	**0000**	**18.09177**	**07/05/2025**
ALOSETRON HCL 1 MG TAB	0000	5.10814	06/05/2025
ALPRAZOLAM 0.25 MG TAB	0000	0.02296	05/05/2025
ALPRAZOLAM 0.5 MG ODT	**0000**	**1.45035**	**07/05/2025**
ALPRAZOLAM 0.5 MG TAB	0000	0.02370	06/05/2025
ALPRAZOLAM 1 MG ODT	0000	2.48764	10/05/2024
ALPRAZOLAM 1 MG TAB	**0000**	**0.02335**	**07/05/2025**
ALPRAZOLAM 2 MG TAB	**0000**	**0.04268**	**07/05/2025**
ALPRAZOLAM XR 0.5 MG TAB	0000	0.14033	12/05/2024
ALPRAZOLAM XR 1 MG TAB	0000	0.17571	03/05/2025
ALPRAZOLAM XR 2 MG TAB	0000	0.20401	06/05/2025
ALPRAZOLAM XR 3 MG TAB	0000	0.26973	05/05/2025
AMANTADINE 100 MG CAP	0000	0.14186	12/05/2024
AMANTADINE 100 MG TAB	0000	0.46173	09/05/2024
AMANTADINE 50 MG/5 ML SYRP	0000	0.05060	10/05/2024
AMILORIDE HCL 5 MG TAB	0000	0.20804	10/05/2024
AMILORIDE HCL/HCTZ 5/50 MG TAB	0000	0.39563	04/05/2025
AMIODARONE HCL 100 MG TAB	0000	0.69321	04/05/2025
AMIODARONE HCL 200 MG TAB	0000	0.12821	05/05/2025
AMIODARONE HCL 400 MG TAB	0000	0.52126	12/05/2024
AMITRIPTYLINE HCL 10 MG TAB	0000	0.04500	12/05/2024
AMITRIPTYLINE HCL 100 MG TAB	**0000**	**0.16263**	**07/05/2025**
AMITRIPTYLINE HCL 150 MG TAB	0000	0.18624	02/05/2025
AMITRIPTYLINE HCL 25 MG TAB	0000	0.04754	12/05/2024
AMITRIPTYLINE HCL 50 MG TAB	0000	0.08587	04/05/2025
AMITRIPTYLINE HCL 75 MG TAB	**0000**	**0.13220**	**07/05/2025**
AMLODIPINE BESYLATE 10 MG TAB	**0000**	**0.01732**	**07/05/2025**
AMLODIPINE BESYLATE 2.5 MG TAB	0000	0.01088	06/05/2025
AMLODIPINE BESYLATE 5 MG TAB	0000	0.01037	02/05/2025
AMLODIPINE-ATORVAST 5-40 MG TAB	0000	2.12798	05/05/2025
AMLODIPINE-BENAZEPRIL 10-40 MG CAP	0000	0.13556	04/05/2025
AMLODIPINE-BENAZEPRIL 10/20 MG CAP	0000	0.13543	04/05/2025
AMLODIPINE-BENAZEPRIL 2.5/10 MG CAP	0000	0.10404	03/05/2025
AMLODIPINE-BENAZEPRIL 5-40 MG CAP	0000	0.15220	04/05/2025
AMLODIPINE-BENAZEPRIL 5/10 MG CAP	0000	0.09959	03/05/2025
AMLODIPINE-BENAZEPRIL 5/20 MG CAP	0000	0.13091	06/05/2025
AMLODIPINE/ATORVASTATIN 10 MG-10 MG TAB	0000	1.24341	12/05/2024
AMLODIPINE/ATORVASTATIN 10 MG-20 MG TAB	**0000**	**1.23257**	**07/05/2025**
AMLODIPINE/ATORVASTATIN 10 MG-40 MG TAB	0000	1.24604	11/05/2024
AMLODIPINE/ATORVASTATIN 5 MG-10 MG TAB	**0000**	**1.30328**	**07/05/2025**
AMLODIPINE/ATORVASTATIN 5 MG-20 MG TAB	0000	0.59957	06/05/2025
AMMONIUM LACTATE 12% CRM	0000	0.06679	03/05/2025
AMMONIUM LACTATE 12% LOT	0000	0.05653	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AMOX TR-K CLV 200-28.5 MG/5ML SUSP	0000	0.07320	05/05/2025
AMOX TR-K CLV 200-28.5 TAB CHW	0000	2.32040	03/05/2015
AMOX TR-K CLV 250-125 MG TAB	0000	1.30896	01/05/2025
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
AMOX TR-K CLV 400-57 MG/5 ML SUSP	0000	0.08619	08/05/2024
AMOX TR-K CLV 500-125 MG TAB	0000	0.31954	03/05/2025
AMOX TR-K CLV 600-42.9 MG/5 ML SUSP	0000	0.06701	08/05/2024
AMOX TR-K CLV 875-125 MG TAB	0000	0.34183	04/05/2025
AMOXICILLIN 125 MG/5 ML SUSP	0000	0.01931	08/05/2024
AMOXICILLIN 200 MG/5 ML SUSP	0000	0.03870	10/05/2024
AMOXICILLIN 250 MG CAP	0000	0.07689	10/05/2024
AMOXICILLIN 250 MG TAB CHEW	0000	0.26272	08/05/2024
AMOXICILLIN 250 MG/5 ML SUSP	0000	0.02666	09/05/2024
AMOXICILLIN 400 MG/5 ML SUSP	0000	0.03767	01/05/2025
AMOXICILLIN 500 MG CAP	0000	0.09188	04/05/2025
AMOXICILLIN 875 MG TAB	0000	0.16502	03/05/2025
AMOXICILLIN-CLAV ER 1,000-62.5 TAB	0000	5.43955	01/05/2025
AMPHETAMINE SALTS 10 MG TAB	0000	0.79972	11/05/2024
AMPHETAMINE SALTS 12.5 MG TAB	0000	0.37709	06/05/2025
AMPHETAMINE SALTS 15 MG TAB	0000	0.26045	09/05/2024
AMPHETAMINE SALTS 20 MG TAB	0000	0.67938	11/05/2024
AMPHETAMINE SALTS 30 MG TAB	0000	1.05324	05/05/2025
AMPHETAMINE SALTS 5 MG TAB	0000	0.24985	09/05/2024
AMPHETAMINE SALTS 7.5 MG TAB	0000	0.33017	06/05/2025
AMPHETAMINE SULFATE 10 MG TAB	0000	0.41474	01/05/2025
AMPHETAMINE SULFATE 5 MG TAB	0000	5.08654	10/05/2024
AMPICILLIN TR 500 MG CAP	0000	0.47866	05/05/2025
AMPICILLIN-SULBACTAM 3 GM VIAL	0000	5.62800	03/05/2015
ANAGRELIDE HCL 0.5 MG CAP	0000	0.72451	12/05/2024
ANAGRELIDE HCL 1 MG CAP	0000	1.65202	10/05/2024
ANASTROZOLE 1 MG TAB	0000	0.15102	03/05/2025
APAP-BUTALBITAL 325/50 MG TAB	0000	0.66316	04/05/2025
ASA/BUTALB/CAFF/COD 325/50/40/30 MG CAP	0000	1.14252	05/05/2025
ASPIRIN 81 MG TAB CHEW	0000	0.02371	06/05/2024
ASPIRIN 81 MG TAB DR	0000	0.01411	11/05/2024
ATENOLOL 100 MG TAB	0000	0.04137	08/05/2024
ATENOLOL 25 MG TAB	0000	0.02362	06/05/2025
ATENOLOL 50 MG TAB	0000	0.02819	08/05/2024
ATENOLOL/CHLORTHALIDONE 100/25 MG TAB	0000	0.38407	04/05/2025
ATENOLOL/CHLORTHALIDONE 50/25 MG TAB	0000	0.28493	04/05/2025
ATORVASTATIN CALCIUM 10 MG TAB	0000	0.03133	06/05/2025
ATORVASTATIN CALCIUM 20 MG TAB	0000	0.03549	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ATORVASTATIN CALCIUM 40 MG TAB	0000	0.05579	08/05/2024
ATORVASTATIN CALCIUM 80 MG TAB	0000	0.08492	04/05/2025
ATOVAQUONE 750 MG/5ML ORAL SUSP	0000	0.88354	03/05/2025
ATOVAQUONE/PROGUANIL HCL 250 MG-100 MG TAB	0000	1.56337	01/05/2025
AZATHIOPRINE 50 MG TAB	0000	0.17046	12/05/2024
AZELASTINE 137 MCG NASAL SPRY	0000	0.42019	08/05/2024
AZELASTINE HCL 0.05 % DROPS	0000	0.92485	12/05/2024
AZELASTINE HCL 205.5MCG SPRAY/PUMP	0000	0.83075	12/05/2022
AZITHROMYCIN 100 MG/5 ML SUSP	0000	0.45668	12/05/2024
AZITHROMYCIN 200 MG/5 ML SUSP	0000	0.24820	08/05/2024
AZITHROMYCIN 250 MG TAB	0000	0.32433	01/05/2025
AZITHROMYCIN 500 MG TAB	0000	0.67281	04/05/2025
AZITHROMYCIN 600 MG TAB	0000	1.08383	02/05/2025
BACITRACIN-POLYMYXIN OINT	0000	2.44732	01/05/2025
BACLOFEN 10 MG TAB	0000	0.06445	12/05/2024
BACLOFEN 20 MG TAB	0000	0.05841	05/05/2025
BALSALAZIDE DISODIUM 750 MG CAP	0000	0.40611	03/05/2025
BENAZEPRIL HCL 10 MG TAB	0000	0.05334	01/05/2025
BENAZEPRIL HCL 20 MG TAB	0000	0.06815	03/05/2025
BENAZEPRIL HCL 40 MG TAB	0000	0.07788	03/05/2025
BENAZEPRIL HCL 5 MG TAB	0000	0.04388	03/05/2025
BENAZEPRIL/HCTZ 10/12.5 MG TAB	0000	0.23070	03/05/2025
BENAZEPRIL/HCTZ 20/12.5 MG TAB	0000	0.24610	04/05/2025
BENAZEPRIL/HCTZ 20/25 MG TAB	0000	0.26257	04/05/2025
BENAZEPRIL/HCTZ 5/6.25 MG TAB	0000	0.46900	09/05/2024
BENZONATATE 100 MG CAP	0000	0.06535	12/05/2024
BENZOYL PEROXIDE 4 % CLEANSER	0000	0.05042	11/05/2017
BENZTROPINE MES 0.5 MG TAB	0000	0.08677	08/05/2024
BENZTROPINE MES 1 MG TAB	0000	0.07977	08/05/2024
BENZTROPINE MES 2 MG TAB	0000	0.10660	08/05/2024
BETAMET DIPROP/PROP GLY 0.05% LOT	0000	0.60980	10/05/2024
BETAMETHASONE DP 0.05% AUGMTD CRM	0000	0.18124	06/05/2025
BETAMETHASONE DP 0.05% AUGMTD OINT	0000	0.71347	06/05/2025
BETAMETHASONE DP 0.05% CRM	0015	0.54351	01/05/2025
BETAMETHASONE DP 0.05% CRM	0045	0.74733	11/05/2024
BETAMETHASONE DP 0.05% LOT	0000	0.37024	11/05/2024
BETAMETHASONE DP 0.05% OINT	0045	0.55676	05/05/2024
BETAMETHASONE DP 0.05% OINT	0015	0.73035	12/05/2024
BETAMETHASONE VA 0.1% CRM	**0000**	**0.52032**	**07/05/2025**
BETAMETHASONE VA 0.1% LOT	0060	0.49515	03/05/2025
BETAMETHASONE VA 0.1% OINT	0000	0.60118	12/05/2024
BETAMETHASONE VALERATE 0.12 % FOAM	0000	0.74993	05/05/2024
BETHANECHOL 10 MG TAB	0000	0.21055	03/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
BETHANECHOL 25 MG TAB	0000	0.25318	04/05/2025
BETHANECHOL 5 MG TAB	0000	0.14676	06/05/2024
BETHANECHOL CHLORIDE 50 MG TAB	0000	0.31029	02/05/2025
BICALUTAMIDE 50 MG TAB	**0000**	**0.41142**	**07/05/2025**
BISOPROLOL FUMARATE 10 MG TAB	0000	0.20751	01/05/2025
BISOPROLOL FUMARATE 5 MG TAB	0000	0.17748	12/05/2024
BISOPROLOL/HCTZ 10/6.25 MG TAB	0000	0.18397	01/05/2025
BISOPROLOL/HCTZ 2.5/6.25 MG TAB	0000	0.22405	04/05/2025
BISOPROLOL/HCTZ 5/6.25 MG TAB	0000	0.19145	03/05/2025
BRIMONIDINE 0.2% EYE DROPS	0000	0.56839	02/05/2025
BROMFENAC SODIUM 0.09% EYE DROPS	**0000**	**22.92750**	**07/05/2025**
BROMOCRIPTINE 2.5 MG TAB	0000	1.55230	09/05/2024
BROMOCRIPTINE 5 MG CAP	0000	3.68834	04/05/2025
BUDESONIDE EC 3 MG CAP	0000	0.53566	04/05/2025
BUMETANIDE 0.5 MG TAB	0000	0.16277	06/05/2025
BUMETANIDE 1 MG TAB	0000	0.16290	03/05/2025
BUMETANIDE 2 MG TAB	0000	0.26737	04/05/2025
BUPRENORPHINE HCL 2 MG TAB SL	0000	0.34342	01/05/2025
BUPRENORPHINE HCL 8 MG TAB SL	0000	0.75222	04/05/2025
BUPRENORPHINE HCL/NALOXONE HCL 2 MG-0.5MG TAB SUBL	0000	0.47749	03/05/2025
BUPRENORPHINE HCL/NALOXONE HCL 8 MG-2 MG TAB SUBL	0000	0.64498	12/05/2024
BUPROPION HCL 100 MG TAB	0000	0.14097	12/05/2024
BUPROPION HCL 75 MG TAB	0000	0.10762	07/05/2024
BUPROPION HCL ER 100 MG TAB	0000	0.09253	03/05/2025
BUPROPION HCL ER 200 MG TAB	0000	0.14555	04/05/2025
BUPROPION HCL SR 150 MG TAB - AB1	0000	0.07262	08/05/2024
BUPROPION HCL SR 150 MG TAB - AB2	0000	0.25895	03/05/2025
BUPROPION XL 150MG TAB	0000	0.09969	03/05/2025
BUPROPION XL 300 MG TAB	0000	0.15614	04/05/2025
BUSPIRONE HCL 10 MG TAB	0000	0.04276	12/05/2024
BUSPIRONE HCL 15 MG TAB	0000	0.03766	12/05/2024
BUSPIRONE HCL 30 MG TAB	0000	0.12769	04/05/2025
BUSPIRONE HCL 5 MG TAB	0000	0.02106	12/05/2024
BUSPIRONE HCL 7.5 MG TAB	0000	0.10076	01/05/2025
BUTALBITAL/APAP/CAFF 50/325/40 MG TAB	0000	0.14389	03/05/2025
BUTALBITAL/ASA/CAFF 50/325/40 MG CAP	0000	0.75874	03/05/2025
BUTALBITAL/CAF/APAP/COD 50/40/325/30 MG CAP	0000	0.78677	03/05/2025
BUTORPHANOL 10 MG/ML SPRY	**0000**	**13.25105**	**07/05/2025**
CABERGOLINE 0.5 MG TAB	0000	1.31866	01/05/2025
CALCIPOTRIENE 0.005 % CREAM (G)	0000	1.19914	04/05/2025
CALCIPOTRIENE/BETAMETHASONE 0.005-.064 OINT. (G)	0000	2.62199	08/05/2024
CALCITRIOL 0.25 MCG CAP	0000	0.17881	05/05/2024
CALCITRIOL 0.5 MCG CAP	0000	0.19192	08/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CALCITRIOL 1 MCG/ML SOLN	0000	5.78538	05/05/2025
CALCIUM ACETATE 667 MG CAP	0000	0.18097	03/05/2025
CANDESARTAN CILEXETIL 16 MG TAB	0000	0.63785	04/05/2025
CANDESARTAN CILEXETIL 32 MG TAB	0000	0.74829	01/05/2025
CANDESARTAN CILEXETIL 8 MG TAB	0000	0.63359	09/05/2024
CANDESARTAN/HCTZ 16 MG-12.5 MG TAB	**0000**	**1.14414**	**07/05/2025**
CANDESARTAN/HCTZ 32 MG/12.5 MG TAB	0000	1.05346	01/05/2025
CAPECITABINE 500 MG TABLET	0000	0.58232	06/05/2025
CAPTOPRIL 100 MG TAB	**0000**	**0.36573**	**07/05/2025**
CAPTOPRIL 12.5 MG TAB	**0000**	**0.26794**	**07/05/2025**
CAPTOPRIL 25 MG TAB	0000	0.22680	05/05/2025
CAPTOPRIL 50 MG TAB	**0000**	**0.35031**	**07/05/2025**
CAPTOPRIL/HCTZ 50/15 MG TAB	0000	1.92420	06/05/2016
CARBAMAZEPINE 100 MG CPMP 12HR	0000	1.06988	04/05/2025
CARBAMAZEPINE 100 MG TAB CHEW	0000	0.25402	09/05/2024
CARBAMAZEPINE 100 MG/5 ML SUSP	0000	0.13194	03/05/2025
CARBAMAZEPINE 200 MG CPMP 12HR	0000	1.04348	06/05/2025
CARBAMAZEPINE 200 MG TAB	0000	0.11885	01/05/2025
CARBAMAZEPINE 200 MG TAB SR 12H	0000	0.36495	01/05/2025
CARBAMAZEPINE 400 MG TAB SR 12H	0000	0.77279	12/05/2024
CARBAMAZEPINE ER 300 MG CAP	0000	1.03777	03/05/2025
CARBIDOPA-LEVO 10-100 MG ODT	0000	1.06300	12/05/2014
CARBIDOPA-LEVODOPA-ENTA 100 MG TAB	0000	0.79784	04/05/2025
CARBIDOPA-LEVODOPA-ENTA 150 MG TAB	0000	0.78513	06/05/2025
CARBIDOPA-LEVODOPA-ENTA 200 MG TAB	0000	0.68595	08/05/2024
CARBIDOPA/LEVO 10/100 MG TAB	0000	0.10043	04/05/2025
CARBIDOPA/LEVO 25/100 MG TAB	0000	0.08728	03/05/2025
CARBIDOPA/LEVO 25/100 MG TAB RAPDIS	0000	0.80301	12/05/2022
CARBIDOPA/LEVO 25/100 MG TAB SA	0000	0.13835	03/05/2025
CARBIDOPA/LEVO 25/250 MG TAB	0000	0.12891	03/05/2025
CARBIDOPA/LEVO 50/200 MG TAB SA	0000	0.20839	04/05/2025
CARBINOXAMINE MALEATE 4 MG TAB	0000	0.42227	06/05/2025
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	0.06663	03/05/2025
CARTEOLOL HCL 1% EYE DROPS	0000	1.39801	11/05/2024
CARVEDILOL 12.5 MG TAB	0000	0.02887	05/05/2025
CARVEDILOL 25 MG TAB	0000	0.03412	06/05/2025
CARVEDILOL 3.125 MG TAB	0000	0.02351	03/05/2024
CARVEDILOL 6.25 MG TAB	0000	0.02557	08/05/2024
CDP/AMITRIP 10/25 MG TAB	0000	1.81308	06/05/2025
CDP/AMITRIP 5/12.5 MG TAB	0000	1.17505	01/05/2025
CEFACLOR 500 MG CAP	**0000**	**1.19656**	**07/05/2025**

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CEFADROXIL 250 MG/5 ML SUSP	0000	0.17509	05/05/2024
CEFADROXIL 500 MG CAP	0000	0.30041	07/05/2024
CEFAZOLIN 1 GM VIAL	0000	1.05104	04/05/2025
CEFAZOLIN 10 GM VIAL	0000	11.55000	06/05/2015
CEFDINIR 125 MG/5 ML SUSP	0000	0.14044	10/05/2024
CEFDINIR 250 MG/5 ML SUSP	0000	0.11386	12/05/2024
CEFDINIR 300 MG CAP	0000	0.45141	03/05/2025
CEFEPIME HCL 2 GRAM VIAL	0000	7.22018	01/05/2025
CEFPODOXIME 200 MG TAB	0000	2.00523	09/05/2024
CEFPROZIL 125 MG/5 ML SUSP	0000	0.14000	05/05/2025
CEFPROZIL 250 MG TAB	0000	0.55460	05/05/2024
CEFPROZIL 250 MG/5 ML SUSP	0000	0.21362	12/05/2024
CEFPROZIL 500 MG TAB	0000	1.03033	10/05/2024
CEFTAZIDIME 6 GM VIAL	0000	25.20000	12/05/2014
CEFTAZIDIME PENTAHYDRATE 1 GM VIAL	0000	4.72500	12/05/2014
CEFTRIAXONE 1 GM VIAL	0000	1.53866	02/05/2025
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	0.93715	09/05/2024
CEFTRIAXONE 500 MG VIAL	**0000**	**1.07883**	**07/05/2025**
CEFUROXIME AXETIL 250 MG TAB	0000	0.29664	04/05/2025
CEFUROXIME AXETIL 500 MG TAB	0000	0.74335	12/05/2024
CEPHALEXIN 125 MG/5 ML SUSP	0000	0.06412	11/05/2024
CEPHALEXIN 250 MG CAP	0000	0.09175	03/05/2025
CEPHALEXIN 250 MG/5 ML SUSP	0000	0.06722	03/05/2025
CEPHALEXIN 500 MG CAP	0000	0.12140	03/05/2025
CETIRIZINE 1 MG/ML SOLN	**0000**	**0.03184**	**07/05/2025**
CETIRIZINE 5 MG TAB	0000	0.04947	03/05/2025
CETIRIZINE HCL 10 MG TAB	**0000**	**0.05978**	**07/05/2025**
CETIRIZINE HCL/PSEUDOEPHEDRINE 5-120MG TAB ER 12H	0000	0.55227	02/05/2025
CEVIMELINE HCL 30 MG CAP	0000	0.62675	12/05/2024
CHLORDIAZEPOXIDE 10 MG CAP	**0000**	**0.10899**	**07/05/2025**
CHLORDIAZEPOXIDE 25 MG CAP	0000	0.14085	10/05/2024
CHLORDIAZEPOXIDE 5 MG CAP	0000	0.17941	02/05/2025
CHLORHEXIDINE 0.12% RINSE	0000	0.00953	04/05/2025
CHLORTHALIDONE 25 MG TAB	0000	0.07733	12/05/2024
CHLORZOXAZONE 500 MG TAB	0000	0.21394	04/05/2025
CHOLESTYRAMINE PWDR -QUESTRAN	0000	0.10849	08/05/2024
CHOLESTYRAMINE/SUCROSE 4 GRAM PK	0000	0.95078	05/05/2024
CICLOPIROX 0.77 % GEL	0000	1.04847	09/05/2024
CICLOPIROX 0.77% CRM	0000	0.21576	06/05/2025
CICLOPIROX 1 % SHAMPOO	0000	0.26181	03/05/2025
CICLOPIROX 8% SOLN	0000	1.48117	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CILOSTAZOL 100 MG TAB	0000	0.11720	05/05/2024
CILOSTAZOL 50 MG TAB	0000	0.12854	09/05/2024
CIMETIDINE 200 MG TAB	**0000**	**0.27324**	**07/05/2025**
CIMETIDINE 300 MG TAB	0000	0.26043	06/05/2025
CIMETIDINE 300 MG/5 ML SOLN	0000	0.11165	10/05/2022
CIMETIDINE 400 MG TAB	0000	0.41698	09/05/2024
CIMETIDINE 800 MG TAB	0000	0.98937	10/05/2024
CIPROFLOXACIN 0.3% EYE DROPS	0000	1.80232	12/05/2024
CIPROFLOXACIN HCL 250 MG TAB	0000	0.08777	08/05/2024
CIPROFLOXACIN HCL 500 MG TAB	0000	0.13765	03/05/2025
CIPROFLOXACIN HCL 750 MG TAB	0000	0.27516	09/05/2024
CITALOPRAM 10 MG/5 ML SOLN	0000	0.19567	11/05/2024
CITALOPRAM HBR 10 MG TAB	0000	0.02617	06/05/2025
CITALOPRAM HBR 20 MG TAB	0000	0.02677	12/05/2024
CITALOPRAM HBR 40 MG TAB	0000	0.04179	03/05/2025
CLADRIBINE 10 MG/10ML VIAL	0000	38.59500	06/05/2015
CLARITHROMYCIN 125MG/ML SUSP	0000	0.77077	09/05/2024
CLARITHROMYCIN 250 MG TAB	0000	0.46959	04/05/2025
CLARITHROMYCIN 250MG/ML SUSP	0000	1.43370	12/05/2024
CLARITHROMYCIN 500 MG TAB	0000	0.42806	03/05/2025
CLARITHROMYCIN ER 500 MG TAB	0000	3.36815	06/05/2025
CLEMASTINE FUM 2.68 MG TAB	0000	0.71238	11/05/2024
CLINDAMYCIN 2% VAG CRM	0000	1.48172	03/05/2025
CLINDAMYCIN HCL 150 MG CAP	0000	0.11739	03/05/2024
CLINDAMYCIN HCL 300 MG CAP	0000	0.16738	12/05/2024
CLINDAMYCIN PALM HCL 75 MG/5 ML SOLN RECON	0000	0.17763	03/05/2025
CLINDAMYCIN PH 1% GEL	0000	0.17626	11/05/2024
CLINDAMYCIN PH 1% LOT	0000	0.31096	03/05/2025
CLINDAMYCIN PH 1% SOLN	0000	0.21333	04/05/2025
CLINDAMYCIN PH 150 MG/ML VIAL	0000	0.29828	06/05/2016
CLINDAMYCIN PH/BENZ PEROX 1%-5% GEL	0000	0.71983	04/05/2025
CLINDAMYCIN PHOS/BENZOYL PEROX 1 %-5 % GEL W/PUMP	0050	2.20956	10/05/2019
CLINDAMYCIN PHOSPHATE 1% FOAM	**0000**	**3.27740**	**07/05/2025**
CLOBAZAM 10 MG TABLET	0000	0.25916	12/05/2024
CLOBAZAM 2.5 MG/ML ORAL SUSP	0000	0.21947	09/05/2024
CLOBAZAM 20 MG TABLET	0000	0.50307	11/05/2024
CLOBETASOL 0.05% CRM	0000	0.14890	04/05/2025
CLOBETASOL 0.05% GEL	0000	0.51663	04/05/2025
CLOBETASOL 0.05% OINT	0000	0.17146	03/05/2025
CLOBETASOL 0.05% SOLN	0000	0.24454	12/05/2024
CLOBETASOL EMOLLIENT 0.05% CRM	0000	0.65816	07/05/2024
CLOBETASOL PROPIONATE 0.05 % FOAM	0000	0.35805	04/05/2025
CLOBETASOL PROPIONATE 0.05 % LOTION	0000	0.39952	03/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CLOBETASOL PROPIONATE 0.05 % SHAMPOO	0000	0.23150	12/05/2024
CLOBETASOL PROPIONATE 0.05 % SPRAY	0000	0.27266	02/05/2025
CLOMIPRAMINE 25 MG CAP	0000	0.27881	01/05/2025
CLOMIPRAMINE 50 MG CAP	0000	0.28928	07/05/2024
CLOMIPRAMINE 75 MG CAP	0000	0.40433	03/05/2025
CLONAZEPAM 0.125 MG DIS TAB	0000	0.43766	10/05/2024
CLONAZEPAM 0.25 MG DIS TAB	0000	0.57525	09/05/2024
CLONAZEPAM 0.5 MG DIS TAB	0000	0.43000	12/05/2024
CLONAZEPAM 0.5 MG TAB	0000	0.01935	02/05/2025
CLONAZEPAM 1 MG DIS TAB	0000	0.63268	05/05/2025
CLONAZEPAM 1 MG TAB	0000	0.03072	05/05/2025
CLONAZEPAM 2 MG TAB	0000	0.03448	08/05/2024
CLONIDINE HCL 0.1 MG TAB	0000	0.02756	10/05/2024
CLONIDINE HCL 0.1 MG TAB ER 12H	0000	0.32440	05/05/2025
CLONIDINE HCL 0.2 MG TAB	0000	0.04046	06/05/2025
CLONIDINE HCL 0.3 MG TAB	0000	0.03926	08/05/2024
CLOPIDOGREL BISULFATE 75 MG TAB	0000	0.06355	12/05/2024
CLORAZEPATE 15 MG TAB	0000	1.47544	04/05/2025
CLORAZEPATE 3.75 MG TAB	0000	0.73200	12/05/2024
CLORAZEPATE 7.5 MG TAB	0000	1.38530	10/05/2024
CLOTRIMAZOLE 1% CRM	0000	0.43261	08/05/2024
CLOTRIMAZOLE 1% SOLN	0000	1.72186	07/05/2024
CLOTRIMAZOLE 10 MG TROCHE	0000	0.46351	05/05/2025
CLOTRIMAZOLE-BETAMETH CRM	0000	0.23715	12/05/2024
CLOTRIMAZOLE-BETAMETH CRM	0015	0.26639	12/05/2024
CLOTRIMAZOLE-BETAMETH LOT	0000	2.38972	10/05/2024
CLOZAPINE 100 MG TAB	0000	0.55842	12/05/2024
CLOZAPINE 200 MG TAB	0000	1.33431	09/05/2024
CLOZAPINE 25 MG TAB	0000	0.26149	10/05/2024
CLOZAPINE 50 MG TAB	0000	0.55962	04/05/2025
COLCHICINE/PROBENECID 0.5 MG-500 MG TAB	0000	0.97613	09/05/2024
COLESTIPOL HCL 1 GM TAB	0000	0.72893	08/05/2024
COLISTIMETHATE 150 MG VIAL	0000	20.66166	06/05/2019
CROMOLYN SODIUM 20 MG/ML ORAL CONC	0000	0.23545	01/05/2025
CROMOLYN SODIUM 4% EYE DROPS	0000	0.58340	10/05/2024
CYANOCOBALAMIN 1,000 MCG/ML VIAL	0000	2.14893	06/05/2025
CYCLOBENZAPRINE 10 MG TAB	**0000**	**0.01913**	**07/05/2025**
CYCLOBENZAPRINE 5 MG TAB	0000	0.01904	06/05/2025
CYCLOPENTOLATE 1% EYE DROPS	0000	1.13267	12/05/2024
CYCLOPENTOLATE 1% EYE DROPS	0002	2.19594	01/05/2025
CYCLOSPORINE 100 MG CAP	0000	7.95830	06/05/2025
CYCLOSPORINE 100 MG/ML SOLN	0000	3.89245	09/05/2024
CYCLOSPORINE 25 MG CAP	0000	2.39370	01/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CYCLOSPORINE MODIFIED 25 MG	0000	0.50895	09/05/2024
CYCLOSPORINE, MODIFIED 100 MG CAP	0000	2.15010	04/05/2025
CYCLOSPORINE, MODIFIED 50 MG CAPSULE	0000	0.93650	01/05/2025
CYPROHEPTADINE 2 MG/5 ML SYRP	0000	0.06036	03/05/2024
CYPROHEPTADINE 4 MG TAB	0000	0.08105	04/05/2025
D-AMPHETAMINE 10 MG TAB	0000	0.46783	03/05/2025
D-AMPHETAMINE 15 MG CAP SA	0000	1.47343	11/05/2024
D-AMPHETAMINE 5 MG TAB	0000	0.56764	05/05/2025
DANAZOL 200 MG CAP	0000	4.56008	09/05/2024
DANTROLENE SODIUM 100 MG CAP	0000	0.99380	11/05/2024
DANTROLENE SODIUM 25 MG CAP	**0000**	**0.41456**	**07/05/2025**
DANTROLENE SODIUM 50 MG CAP	**0000**	**0.75103**	**07/05/2025**
DAPSONE 100 MG TAB	0000	0.96914	09/05/2024
DAPSONE 25 MG TAB	0000	0.49889	12/05/2024
DEFEROXAMINE 2 GM VIAL	0000	43.26000	12/05/2014
DEMECLOCYCLINE 150 MG TAB	0000	3.61483	10/05/2024
DESIPRAMINE 10 MG TAB	0000	0.11657	12/05/2024
DESIPRAMINE 100 MG TAB	0000	0.79733	07/05/2024
DESIPRAMINE 25 MG TAB	0000	0.15902	12/05/2024
DESIPRAMINE 50 MG TAB	0000	0.31060	01/05/2025
DESIPRAMINE HCL 75 MG TAB	0000	0.40789	10/05/2024
DESLORATADINE 5 MG TAB	0000	0.30321	03/05/2025
DESMOPRESSIN 10 MCG/0.1ML SPRY	0000	12.20686	04/05/2025
DESMOPRESSIN ACET 0.1 MG TAB	0000	0.33265	07/05/2024
DESMOPRESSIN ACET 0.2 MG TAB	0000	0.49581	05/05/2024
DESONIDE 0.05% CRM	0000	0.31270	03/05/2025
DESONIDE 0.05% LOT	0000	0.64147	03/05/2025
DESONIDE 0.05% OINT	0000	0.38244	12/05/2024
DESOXIMETASONE 0.05% CRM	0060	1.62923	06/05/2024
DESOXIMETASONE 0.05% GEL	0060	2.97240	08/05/2024
DESOXIMETASONE 0.05% GEL	0015	3.69445	09/05/2024
DESOXIMETASONE 0.25% CRM	0060	0.29621	03/05/2025
DESOXIMETASONE 0.25% CRM	**0015**	**0.41618**	**07/05/2025**
DESOXIMETASONE 0.25% OINT	0060	0.28687	11/05/2024
DESOXIMETASONE 0.25% OINT	0015	0.49518	06/05/2025
DESOXIMETASONE 0.25% OINT	0000	3.72913	08/05/2024
DEXAMETHASONE 0.1% EYE DROPS	0000	6.84048	03/05/2025
DEXAMETHASONE 0.5 MG/5 ML ELX	0000	0.08922	04/05/2025
DEXAMETHASONE 1.5 MG TAB	**0000**	**0.24828**	**07/05/2025**
DEXAMETHASONE SP 4 MG/ML VIAL	0000	0.75087	06/05/2024
DIAZEPAM 10 MG TAB	0000	0.02924	03/05/2025
DIAZEPAM 2 MG TAB	0000	0.02293	06/05/2025
DIAZEPAM 5 MG TAB	0000	0.02160	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DICLOFENAC EPOLAMINE 1.3% PTCH	0000	4.80572	03/05/2025
DICLOFENAC POT 50 MG TAB	0000	0.12741	01/05/2025
DICLOFENAC SOD 50 MG TAB EC	0000	0.09218	04/05/2025
DICLOFENAC SOD 75 MG TAB EC	0000	0.09276	04/05/2025
DICLOFENAC SOD ER 100 MG TAB	0000	0.71869	04/05/2025
DICLOFENAC SODIUM 0.1% DROPS	**0000**	**1.86344**	**07/05/2025**
DICLOFENAC SODIUM 1 % GEL	0000	0.10000	11/05/2024
DICLOFENAC SODIUM 1.5 % DROPS	0000	0.13562	02/05/2025
DICLOFENAC SODIUM 25 MG TABLET DR	0000	0.80216	07/05/2024
DICLOFENAC SODIUM 3 % GEL (GRAM)	0000	0.39876	10/05/2024
DICLOFENAC SODIUM/MISOPROSTOL 75 MG-200 TAB IR DR	0000	1.15502	06/05/2025
DICLOFENAC-MISOPROST 50 MG-200 MCG TAB	0000	0.91383	03/05/2025
DICLOXACILLIN 250 MG CAP	**0000**	**0.51125**	**07/05/2025**
DICLOXACILLIN 500 MG CAP	0000	0.94849	05/05/2025
DICYCLOMINE 10 MG CAP	0000	0.07257	12/05/2024
DICYCLOMINE 20 MG TAB	0000	0.12113	06/05/2025
DIFLUNISAL 500 MG TAB	0000	0.92724	12/05/2024
DIGOXIN 125 MCG TAB	**0000**	**0.11614**	**07/05/2025**
DIGOXIN 250 MCG TAB	0000	0.15466	03/05/2025
DILTIAZEM 120 MG TAB	0000	0.12064	06/05/2025
DILTIAZEM 30 MG TAB	0000	0.06732	12/05/2024
DILTIAZEM 60 MG TAB	0000	0.07868	06/05/2025
DILTIAZEM 90 MG TAB	0000	0.14281	06/05/2025
DILTIAZEM ER 120 MG CAP SA	0000	2.37203	03/05/2025
DILTIAZEM ER 90 MG CAP SA	0000	1.90842	10/05/2024
DILTIAZEM HCL 120 MG CAP SA - AB2	0000	0.35180	01/05/2025
DILTIAZEM HCL 120 MG CAP SA - AB3	0000	0.12950	12/05/2024
DILTIAZEM HCL 120 MG CAP SA - AB4	0000	0.22314	03/05/2025
DILTIAZEM HCL 180 MG CAP SA - AB2	0000	0.50289	06/05/2025
DILTIAZEM HCL 180 MG CAP SA - AB3	0000	0.15592	12/05/2024
DILTIAZEM HCL 180 MG CAP SA - AB4	0000	0.29985	09/05/2024
DILTIAZEM HCL 240 MG CAP SA - AB2	0000	0.58166	03/05/2025
DILTIAZEM HCL 240 MG CAP SA - AB3	0000	0.20989	08/05/2024
DILTIAZEM HCL 240 MG CAP SA - AB4	0000	0.40496	03/05/2025
DILTIAZEM HCL 300 MG CAP SA - AB3	0000	0.26542	12/05/2024
DILTIAZEM HCL 300 MG CAP SA - AB4	0000	0.56420	03/05/2025
DILTIAZEM HCL 360 MG CAP ER 24H	0000	0.33019	09/05/2024
DILTIAZEM HCL 360 MG CAP SA - AB4	0000	0.59299	08/05/2024
DILTIAZEM HCL 420 MG CAP SA	0000	1.12258	10/05/2024
DIPHENHYDRAMINE 25 MG CAP	0000	0.04182	04/05/2025
DIPHENHYDRAMINE 50 MG CAP	0000	0.02215	08/05/2024
DIPHENHYDRAMINE 50 MG/ML VIAL	0000	0.90220	01/05/2025
DIPHENHYDRAMINE HCL 12.5 MG/5 ML LIQ	0000	0.01298	09/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DIPHENHYDRAMINE HCL 25 MG TAB (ALLERGY)	0000	0.03396	04/05/2025
DIPHENOXYLATE-ATROPINE LIQ	0000	1.08450	03/05/2018
DIPHENOXYLATE/ATROPINE 2.5/0.025 MG TAB	0000	0.17255	03/05/2025
DIPYRIDAMOLE 25 MG TAB	0000	0.18135	06/05/2025
DIPYRIDAMOLE 50 MG TAB	**0000**	**0.38229**	**07/05/2025**
DIPYRIDAMOLE 75 MG TAB	0000	0.52239	04/05/2025
DISOPYRAMIDE 150 MG CAP	**0000**	**1.43667**	**07/05/2025**
DISOPYRAMIDE PHOSPHATE 100 MG CAP	0000	0.98676	12/05/2024
DISULFIRAM 250 MG TAB	0000	1.76490	03/05/2025
DIVALPROEX SODIUM 125 MG CAP	0000	0.34320	08/05/2024
DIVALPROEX SODIUM 125 MG TAB DR	0000	0.05990	06/05/2025
DIVALPROEX SODIUM 250 MG TAB DR	0000	0.09623	07/05/2024
DIVALPROEX SODIUM 500 MG TAB DR	0000	0.14390	12/05/2024
DIVALPROEX SODIUM ER 250 MG TAB	0000	0.14861	03/05/2025
DIVALPROEX SODIUM ER 500 MG TAB	0000	0.16920	06/05/2025
DOCUSATE SODIUM 50 MG/5 ML LIQ	**0000**	**0.02118**	**07/05/2025**
DONEPEZIL HCL 10 MG TAB	0000	0.05076	06/05/2025
DONEPEZIL HCL 10 MG TAB RAPDIS	0000	0.30440	05/05/2025
DONEPEZIL HCL 23 MG TAB	0000	0.70158	02/05/2025
DONEPEZIL HCL 5 MG TAB	0000	0.04573	06/05/2025
DORZOLAMIDE HCL 2% EYE DROPS	0000	1.41083	01/05/2025
DORZOLAMIDE-TIMOLOL EYE DROPS	0000	1.04686	05/05/2024
DOXAZOSIN MESYLATE 1 MG TAB	0000	0.07418	05/05/2025
DOXAZOSIN MESYLATE 2 MG TAB	0000	0.05624	12/05/2024
DOXAZOSIN MESYLATE 4 MG TAB	**0000**	**0.08937**	**07/05/2025**
DOXAZOSIN MESYLATE 8 MG TAB	0000	0.09480	04/05/2025
DOXEPIN 10 MG CAP	0000	0.08341	03/05/2025
DOXEPIN 100 MG CAP	0000	0.23878	12/05/2024
DOXEPIN 150 MG CAP	0000	0.46756	09/05/2024
DOXEPIN 25 MG CAP	0000	0.12160	12/05/2024
DOXEPIN 50 MG CAP	0000	0.18512	06/05/2025
DOXEPIN 75 MG CAP	0000	0.21209	11/05/2024
DOXEPIN HCL 10 MG/ML ORAL CONC	0000	0.22495	08/05/2024
DOXYCYCLINE 50 MG TAB	0000	0.16442	12/05/2024
DOXYCYCLINE HYCLATE 100 MG CAP	0000	0.11870	03/05/2025
DOXYCYCLINE HYCLATE 100 MG TAB	0000	0.12511	04/05/2025
DOXYCYCLINE HYCLATE 20 MG TAB	0000	0.10427	03/05/2025
DOXYCYCLINE HYCLATE 50 MG CAP	0000	0.15077	03/05/2025
DOXYCYCLINE MONO 100MG CAP	0000	0.25800	12/05/2024
DOXYCYCLINE MONO 50 MG CAP	0000	0.14118	08/05/2024
DOXYCYCLINE MONOHYDRATE 100 MG TAB	0000	0.26452	03/05/2025
DRONABINOL 10 MG CAP	0000	5.08143	02/05/2025
DRONABINOL 2.5 MG CAP	0000	1.34971	10/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DRONABINOL 5 MG CAP	0000	2.71743	12/05/2024
DULOXETINE HCL 20 MG CAP DR	0000	0.11020	04/05/2025
DULOXETINE HCL 30 MG CAP DR	0000	0.07488	05/05/2024
DULOXETINE HCL 40 MG CAPSULE DR	0000	1.34678	01/05/2025
DULOXETINE HCL 60 MG CAP DR	**0000**	**0.09781**	**07/05/2025**
DUTASTERIDE 0.5 MG CAP	0000	0.18595	03/05/2025
ECONAZOLE NITRATE 1% CRM	0000	0.32253	12/05/2024
ENALAPRIL MALEATE 10 MG TAB	0000	0.08672	04/05/2025
ENALAPRIL MALEATE 2.5 MG TAB	0000	0.06663	04/05/2025
ENALAPRIL MALEATE 20 MG TAB	0000	0.12572	05/05/2025
ENALAPRIL MALEATE 5 MG TAB	0000	0.08773	07/05/2024
ENALAPRIL/HCTZ 10/25 MG TAB	0000	0.12704	09/05/2024
ENALAPRIL/HCTZ 5/12.5 MG TAB	0000	0.20992	04/05/2025
ENALAPRILAT DIHYDRATE 1.25 MG/ML VIAL	0000	3.15000	03/05/2015
ENOXAPARIN SOD 100 MG/ML DISP SYRN	0000	8.98988	04/05/2025
ENOXAPARIN SOD 40 MG/0.4 ML DISP SYRN	**0000**	**9.85165**	**07/05/2025**
ENOXAPARIN SOD 60 MG/0.6 ML DISP SYRN	**0000**	**9.33033**	**07/05/2025**
ENOXAPARIN SOD 80 MG/0.8 ML DISP SYRN	0000	9.57129	05/05/2025
ENOXAPARIN SODIUM 120MG/.8ML SYRINGE	**0000**	**12.92144**	**07/05/2025**
ENOXAPARIN SODIUM 150 MG/ML SYRINGE	**0000**	**12.82580**	**07/05/2025**
ENOXAPARIN SODIUM 30 MG/0.3 ML DISP SYR	0000	9.66777	03/05/2025
ENTACAPONE 200 MG TAB	0000	0.33778	03/05/2025
EPINASTINE HCL 0.05 % DROPS	0000	14.22188	04/05/2025
EPIRUBICIN HCL 200MG/0.1L VIAL	0000	1.96880	06/05/2015
EPLERENONE 25 MG TAB	0000	0.48527	04/05/2025
EPLERENONE 50 MG TAB	0000	0.57633	01/05/2025
ERYTHROMYCIN 2% SOLN	0000	0.36914	07/05/2024
ERYTHROMYCIN EYE OINT	0000	4.68447	04/05/2025
ESCITALOPRAM OXALATE 10 MG TAB	0000	0.04621	12/05/2024
ESCITALOPRAM OXALATE 20 MG TAB	0000	0.07321	03/05/2025
ESCITALOPRAM OXALATE 5 MG TAB	**0000**	**0.04744**	**07/05/2025**
ESCITALOPRAM OXALATE 5 MG/5 ML SOLN	0000	0.18321	06/05/2025
ESLICARBAZEPINE 200 MG TABLET	0000	7.03083	06/05/2025
ESLICARBAZEPINE 400 MG TABLET	0000	7.03083	06/05/2025
ESLICARBAZEPINE 600 MG TABLET	0000	7.00333	06/05/2025
ESLICARBAZEPINE 800 MG TABLET	0000	7.03083	06/05/2025
ESTAZOLAM 2 MG TAB	0000	0.80132	12/05/2024
ESTRADIOL 0.025 MG/DAY PATCH	**0000**	**11.70299**	**07/05/2025**
ESTRADIOL 0.0375 MG/DAY PATCH	**0000**	**10.82163**	**07/05/2025**
ESTRADIOL 0.05 MG/DAY PATCH - AB2	0000	11.82523	04/05/2025
ESTRADIOL 0.06 MG/24 DAY PATCH	**0000**	**11.14196**	**07/05/2025**
ESTRADIOL 0.075 MG/DAY PATCH	**0000**	**13.46241**	**07/05/2025**
ESTRADIOL 0.1 MG/DAY PATCH - AB2	**0000**	**11.57279**	**07/05/2025**

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ESTRADIOL 0.5 MG TAB	0000	0.07209	04/05/2025
ESTRADIOL 1 MG TAB	0000	0.05738	12/05/2024
ESTRADIOL 2 MG TAB	0000	0.09153	04/05/2025
ESTRADIOL/NORETH AC 0.5 MG-0.1 MG TAB	0000	0.59969	05/05/2025
ESTRADIOL/NORETH AC 1 MG-0.5 MG TAB	0000	0.57428	01/05/2025
ESZOPICLONE 1 MG TAB	0000	0.12854	12/05/2024
ESZOPICLONE 2 MG TAB	0000	0.10495	04/05/2025
ESZOPICLONE 3 MG TAB	0000	0.08536	12/05/2024
ETH E/DESOG 25/25/25MCG-0.1/.125/.15MG TAB	0000	0.67111	01/05/2025
ETH E/LEVONOR 30/40/30MCG - 0.05/0.075/0.125MG TAB	0000	0.34029	03/05/2025
ETH E/NOR 25/25/25MCG-0.18/.215/.25MG TAB	0000	0.17371	06/05/2025
ETH E/NOR 30MCG/0.15MG(84)-ETH E 10MCG(7) TAB	**0000**	**0.19607**	**07/05/2025**
ETH E/NOR 35/35/35MCG-0.18/.215/.25MG TAB	0000	0.21775	08/05/2024
ETH E/NOR 35/35/35MCG-0.5/.75/1MG TAB	0000	0.25175	03/05/2025
ETH E/NOR 35/35MCG-0.5/1MG (7-9-5) TAB	0000	0.51314	09/05/2024
ETH E/NORETH 20/30/35MCG-1/1/1MG FE TAB	0000	1.06607	10/05/2024
ETH ESTRADIOL/DESOGEST 20/0.15 TAB	0000	0.16723	09/05/2024
ETH ESTRADIOL/DESOGEST 30 MCG/0.15MG TAB	0000	0.20957	06/05/2025
ETH ESTRADIOL/DROSPIRENONE 0.02/3MG TAB	0000	0.13708	12/05/2024
ETH ESTRADIOL/DROSPIRENONE 0.03-3MG TAB	0000	0.16710	08/05/2024
ETH ESTRADIOL/ETHYN 35MCG/1MG TAB	**0000**	**0.38809**	**07/05/2025**
ETH ESTRADIOL/ETHYN 50MCG/1MG TAB	**0000**	**0.56990**	**07/05/2025**
ETH ESTRADIOL/LEVONOR 20MCG/0.1MG TAB	0000	0.16019	09/05/2024
ETH ESTRADIOL/NORETH 20MCG/1MG TAB	0000	0.16192	12/05/2024
ETH ESTRADIOL/NORETH 30MCG/1.5MG TAB	**0000**	**0.40966**	**07/05/2025**
ETH ESTRADIOL/NORETH 35MCG/0.4MG TAB	0000	0.33243	04/05/2025
ETH ESTRADIOL/NORETH 35MCG/0.5MG TAB	0000	0.50938	03/05/2025
ETH ESTRADIOL/NORETH 35MCG/1MG TAB	0000	0.25312	11/05/2024
ETH ESTRADIOL/NORETH FE 20MCG/1MG TAB	0000	0.16335	05/05/2025
ETH ESTRADIOL/NORETH FE 30MCG/1.5MG TAB	0000	0.15130	07/05/2024
ETH ESTRADIOL/NORGEST 30MCG/0.3MG TAB	0000	0.43785	08/05/2024
ETH ESTRADIOL/NORGEST 35MCG/0.25MG TAB	0000	0.16323	11/05/2024
ETHAMBUTOL HCL 400 MG TAB	0000	0.47813	03/05/2025
ETHOSUXIMIDE 250 MG CAP	0000	0.26280	03/05/2025
ETHOSUXIMIDE 250 MG/5 ML SYRP	0000	0.08633	10/05/2024
ETODOLAC 200 MG CAP	0000	0.33059	04/05/2025
ETODOLAC 300 MG CAP	0000	0.32689	12/05/2024
ETODOLAC 400 MG TAB	0000	0.22211	12/05/2024
ETODOLAC 400 MG TAB SA	0000	1.13236	11/05/2024
ETODOLAC 500 MG TAB	0000	0.33451	03/05/2025
ETODOLAC 500 MG TAB SA	0000	0.93741	08/05/2024
ETODOLAC 600 MG TAB	0000	1.08901	08/05/2024
ETOPOSIDE 50 MG CAP	0000	87.08040	06/05/2016

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
EXEMESTANE 25 MG TAB	0000	0.77103	09/05/2024
FAMCICLOVIR 250 MG TAB	0000	0.41561	03/05/2025
FAMCICLOVIR 500 MG TAB	0000	0.76553	05/05/2024
FAMOTIDINE 20 MG TAB	0000	0.07709	05/05/2025
FAMOTIDINE 40 MG TAB	0000	0.05745	05/05/2024
FAMOTIDINE 40 MG/5 ML SUSP	0000	0.27597	12/05/2024
FAMOTIDINE/CA CARB/MAG HYDROX 10-800-165MG TAB CHEW	0000	0.27569	06/05/2025
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	0.16313	03/05/2025
FELODIPINE ER 2.5 MG TAB	0000	0.15948	04/05/2025
FELODIPINE ER 5 MG TAB	0000	0.15016	01/05/2025
FENOFIBRATE 134 MG CAP	0000	0.13530	04/05/2025
FENOFIBRATE 160 MG TAB	0000	0.13822	11/05/2024
FENOFIBRATE 200 MG CAP	0000	0.16146	11/05/2024
FENOFIBRATE 54 MG TAB	0000	0.11698	12/05/2024
FENOFIBRATE,MICRONIZED 130 MG CAP	0000	0.72546	11/05/2024
FENOFIBRATE,MICRONIZED 43 MG CAPSULE	0000	0.29599	02/05/2025
FENOFIBRATE,MICRONIZED 67 MG CAP	0000	0.08589	05/05/2025
FENOPROFEN 600 MG TAB	0000	3.45792	09/05/2015
FENTANYL 100 MCG/HR PATCH	0000	18.74356	05/05/2025
FENTANYL 12MCG/HR PATCH	**0000**	**10.09570**	**07/05/2025**
FENTANYL 25 MCG/HR PATCH	0000	5.37556	03/05/2025
FENTANYL 50 MCG/HR PATCH	0000	9.81482	04/05/2025
FENTANYL 75 MCG/HR PATCH	0000	13.31403	04/05/2025
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	0.27225	04/05/2025
FEXOFENADINE HCL 30 MG/5 ML ORAL SUSP	0000	0.06164	06/05/2024
FEXOFENADINE HCL 60 MG TAB	0000	0.17890	09/05/2024
FINASTERIDE 5 MG TAB	0000	0.07167	04/05/2025
FLAVOXATE HCL 100 MG TAB	0000	0.76075	06/05/2025
FLECAINIDE ACETATE 100 MG TAB	0000	0.16196	08/05/2024
FLECAINIDE ACETATE 150 MG TAB	0000	0.32020	06/05/2025
FLECAINIDE ACETATE 50 MG TAB	0000	0.13446	10/05/2024
FLUCONAZOLE 10 MG/ML SUSP	0000	0.28102	04/05/2025
FLUCONAZOLE 100 MG TAB	0000	0.27134	03/05/2025
FLUCONAZOLE 150 MG TAB	0000	0.58782	06/05/2025
FLUCONAZOLE 200 MG TAB	0000	0.43388	04/05/2025
FLUCONAZOLE 40 MG/ML SUSP	0000	0.59032	09/05/2024
FLUCONAZOLE-NS 400 MG/200 ML PB	0000	0.06040	09/05/2014

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FLUDROCORTISONE 0.1 MG TAB	0000	0.35372	02/05/2025
FLUNISOLIDE 0.025% SPRY	0000	1.71068	07/05/2024
FLUOCINOLONE 0.01% SOLN	0000	0.25690	05/05/2025
FLUOCINOLONE 0.025% CRM	0000	1.40357	09/05/2024
FLUOCINOLONE 0.025% OINT	0000	0.99761	10/05/2024
FLUOCINOLONE ACETONIDE 0.01 % CRM	0000	1.56162	03/05/2024
FLUOCINOLONE ACETONIDE OIL 0.01 % DROPS	0000	1.31236	01/05/2024
FLUOCINONIDE 0.05% CRM	0000	0.45079	06/05/2025
FLUOCINONIDE 0.05% GEL	0000	0.93885	10/05/2024
FLUOCINONIDE 0.05% OINT	0000	0.30804	07/05/2024
FLUOCINONIDE 0.05% SOLN	0000	0.26833	11/05/2024
FLUOCINONIDE 0.1 % CREAM (G)	0000	0.29260	11/05/2024
FLUOCINONIDE-E 0.05% CRM	0000	0.86971	06/05/2025
FLUOROMETHOLONE 0.1% DROPS	0000	13.16167	04/05/2025
FLUOROURACIL 2,500 MG/50 ML VL	0000	0.40740	06/05/2015
FLUOROURACIL 5 % SOLN	0000	3.79595	12/05/2024
FLUOROURACIL 5% CRM	0000	0.64883	02/05/2025
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	0.03512	06/05/2025
FLUOXETINE 10 MG TAB	0000	0.11996	06/05/2025
FLUOXETINE 20 MG CAP	0000	0.03206	04/05/2025
FLUOXETINE 20 MG/5 ML SOLN	0000	0.19599	01/05/2025
FLUOXETINE 40 MG CAP	0000	0.05938	01/05/2025
FLUOXETINE HCL 90 MG CAP DR	0000	30.18102	06/05/2025
FLUPHENAZINE DEC 25 MG/ML VIAL	0000	13.32200	06/05/2025
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	10.95772	04/05/2025
FLURBIPROFEN 100 MG TAB	0000	0.32595	02/05/2025
FLUTICASONE 50 MCG NASAL SPRY	0000	0.43233	02/05/2025
FLUTICASONE PROP 0.005% OINT	0000	0.53151	12/05/2024
FLUTICASONE PROP 0.05% CRM	0000	0.33710	05/05/2024
FLUVASTATIN SODIUM 20 MG CAP	**0000**	**3.37673**	**07/05/2025**
FLUVASTATIN SODIUM 40 MG CAP	0000	3.01121	05/05/2025
FLUVOXAMINE MAL 100 MG TAB	0000	0.31753	05/05/2024
FLUVOXAMINE MAL 25 MG TAB	0000	0.15957	12/05/2024
FLUVOXAMINE MAL 50 MG TAB	0000	0.22161	03/05/2025
FLUVOXAMINE MALEATE 100 MG CAP ER 24H	0000	5.41728	06/05/2025
FLUVOXAMINE MALEATE 150 MG CAP ER 24H	0000	5.37989	03/05/2025
FOLIC ACID 1 MG TAB	0000	0.02168	06/05/2024
FONDAPARINUX 7.5 MG/0.6 ML SYR	0000	33.96347	06/05/2025
FOSINOPRIL SODIUM 10 MG TAB	0000	0.14393	06/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FOSINOPRIL SODIUM 20 MG TAB	0000	0.15812	11/05/2024
FOSINOPRIL SODIUM 40 MG TAB	0000	0.18216	06/05/2025
FOSINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.54185	12/05/2024
FOSINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.56891	01/05/2025
FUROSEMIDE 10 MG/ML SOLN	**0000**	**0.09366**	**07/05/2025**
FUROSEMIDE 10 MG/ML VIAL	0000	0.57031	01/05/2025
FUROSEMIDE 20 MG TAB	0000	0.01996	12/05/2024
FUROSEMIDE 40 MG TAB	**0000**	**0.03093**	**07/05/2025**
FUROSEMIDE 80 MG TAB	0000	0.05178	03/05/2025
GABAPENTIN 100 MG CAP	0000	0.02120	12/05/2024
GABAPENTIN 250 MG/5 ML SOLN	**0000**	**0.12336**	**07/05/2025**
GABAPENTIN 300 MG CAP	0000	0.04447	06/05/2025
GABAPENTIN 400 MG CAP	0000	0.03995	12/05/2024
GABAPENTIN 600 MG TAB	0000	0.07592	05/05/2025
GABAPENTIN 800 MG TAB	0000	0.10043	03/05/2025
GALANTAMINE 12MG TAB	0000	0.67333	09/05/2024
GALANTAMINE 4MG TAB	**0000**	**0.31150**	**07/05/2025**
GALANTAMINE 8MG TAB	0000	0.36964	12/05/2024
GALANTAMINE ER 16MG CAP	0000	0.84624	01/05/2025
GALANTAMINE ER 24MG CAP	0000	0.90216	02/05/2025
GALANTAMINE ER 8MG CAP	0000	0.92203	07/05/2024
GATIFLOXACIN 0.5 % DROPS	**0000**	**12.03473**	**07/05/2025**
GEMCITABINE HCL 1 GRAM VIAL	0000	19.99600	03/05/2025
GEMFIBROZIL 600 MG TAB	0000	0.09552	02/05/2025
GENTAMICIN 0.1% CRM	0000	0.86617	03/05/2025
GENTAMICIN 0.1% OINT	0000	1.01404	04/05/2025
GENTAMICIN 3 MG/GM EYE OINT	0000	8.45714	10/05/2021
GENTAMICIN 3 MG/ML EYE DROPS	0000	0.67162	04/05/2025
GENTAMICIN 40 MG/ML VIAL	0000	1.50596	12/05/2024
GLIMEPIRIDE 1 MG TAB	**0000**	**0.02491**	**07/05/2025**
GLIMEPIRIDE 2 MG TAB	0000	0.02970	08/05/2024
GLIMEPIRIDE 4 MG TAB	0000	0.03467	02/05/2025
GLIPIZIDE 10 MG TAB	0000	0.03897	12/05/2024
GLIPIZIDE 5 MG TAB	0000	0.03398	09/05/2024
GLIPIZIDE ER 10 MG TAB	0000	0.20529	10/05/2024
GLIPIZIDE ER 2.5 MG TAB	0000	0.12460	08/05/2024
GLIPIZIDE ER 5 MG TAB	0000	0.11437	08/05/2024
GLIPIZIDE/METFORMIN 2.5/250 MG TAB	0000	0.26962	10/05/2024
GLIPIZIDE/METFORMIN 2.5/500 MG TAB	0000	0.29850	09/05/2024
GLIPIZIDE/METFORMIN 5/500 MG TAB	0000	0.27254	06/05/2025
GLYBURIDE 1.25 MG TAB	0000	0.08016	10/05/2024
GLYBURIDE 2.5 MG TAB	0000	0.07594	03/05/2025
GLYBURIDE 5 MG TAB	0000	0.05783	06/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
GLYBURIDE MICRO 3 MG TAB	0000	0.14952	08/05/2024
GLYBURIDE MICRO 6 MG TAB	0000	0.18420	07/05/2024
GLYBURIDE/METFORMIN 1.25/250 MG TAB	0000	0.04220	09/05/2024
GLYBURIDE/METFORMIN 2.5/500 MG TAB	**0000**	**0.09227**	**07/05/2025**
GLYBURIDE/METFORMIN 5/500 MG TAB	0000	0.18542	03/05/2025
GLYCOPYRROLATE 1 MG TAB	0000	0.10702	07/05/2024
GLYCOPYRROLATE 2 MG TAB	0000	0.20760	03/05/2025
GRANISETRON HCL 1 MG TAB	0000	1.45353	12/05/2024
GRANISETRON HCL 1 MG/ML VIAL	0000	8.20320	06/05/2015
GRISEOFULVIN 125 MG/5 ML SUSP	0000	0.49566	12/05/2024
GRISEOFULVIN 500 MG TAB	0000	6.48390	01/05/2025
GUAIFENESIN 100 MG/5 ML LIQ	0000	0.01651	04/05/2025
GUAIFENESIN/DEXTROMETHORPHAN 100-10MG/5ML SF LIQ	0000	0.01105	06/05/2024
GUANFACINE HCL 1 MG TAB ER 24H	0000	0.22327	08/05/2024
GUANFACINE HCL 2 MG TAB ER 24H	0000	0.28019	11/05/2024
GUANFACINE HCL 3 MG TAB ER 24H	0000	0.19900	12/05/2024
GUANFACINE HCL 4 MG TAB ER 24H	0000	0.16612	12/05/2024
HALOBETASOL PROP 0.05% CRM	**0000**	**0.81984**	**07/05/2025**
HALOBETASOL PROP 0.05% OINT	0000	0.82217	08/05/2024
HALOPERIDOL 0.5 MG TAB	0000	0.11781	02/05/2025
HALOPERIDOL 1 MG TAB	0000	0.17283	03/05/2025
HALOPERIDOL 10 MG TAB	0000	0.26621	05/05/2025
HALOPERIDOL 2 MG TAB	**0000**	**0.18521**	**07/05/2025**
HALOPERIDOL 20 MG TAB	0000	0.46025	06/05/2025
HALOPERIDOL 5 MG TAB	0000	0.29969	10/05/2024
HALOPERIDOL DEC 100 MG/ML AMP	0000	33.63937	06/05/2025
HALOPERIDOL DEC 100 MG/ML VIAL	**0000**	**16.10539**	**07/05/2025**
HALOPERIDOL DECAN 50 MG/ML AMP	**0000**	**18.05445**	**07/05/2025**
HALOPERIDOL LAC 2 MG/ML CONC	0120	0.17811	04/05/2025
HALOPERIDOL LAC 2 MG/ML CONC	0000	1.04017	11/05/2024
HALOPERIDOL LAC 5 MG/ML VIAL	**0000**	**1.11449**	**07/05/2025**
HEPARIN NA 10,000 UNIT/ML VIAL	0000	2.13419	09/05/2024
HEPARIN NA 5,000 UNITS/ML VIAL	0000	1.16767	06/05/2025
HYDRALAZINE 10 MG TAB	0000	0.02675	12/05/2024
HYDRALAZINE 100 MG TAB	0000	0.08035	03/05/2025
HYDRALAZINE 25 MG TAB	0000	0.02934	12/05/2024
HYDRALAZINE 50 MG TAB	0000	0.03836	12/05/2024
HYDROCHLOROTHIAZIDE 12.5 MG CAP	0000	0.02806	02/05/2025
HYDROCHLOROTHIAZIDE 12.5 MG TAB	0000	0.04085	12/05/2024
HYDROCHLOROTHIAZIDE 25 MG TAB	0000	0.00966	12/05/2024
HYDROCHLOROTHIAZIDE 50 MG TAB	0000	0.03397	12/05/2024
HYDROCODON-ACETAMINOPHN 10-300	0000	0.23294	04/05/2025
HYDROCODONE BT/IBU 7.5/200 MG TAB	0000	0.46179	07/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HYDROCODONE/APAP 10/325 MG TAB	0000	0.14169	08/05/2024
HYDROCODONE/APAP 5/300 MG TAB	0000	0.15657	03/05/2025
HYDROCODONE/APAP 5/325 MG TAB	0000	0.12867	06/05/2025
HYDROCODONE/APAP 7.5-325 MG / 5ML SOLN	0000	0.25219	03/05/2025
HYDROCODONE/APAP 7.5/300 MG TAB	0000	0.19769	10/05/2024
HYDROCODONE/APAP 7.5/325 MG TAB	0000	0.13717	04/05/2024
HYDROCORTISONE 0.2% CRM	0000	0.34740	05/05/2024
HYDROCORTISONE 1% CRM	0000	0.09012	06/05/2025
HYDROCORTISONE 1% LOT	0000	0.06844	02/05/2018
HYDROCORTISONE 1% OINT	**0000**	**0.17093**	**07/05/2025**
HYDROCORTISONE 10 MG TAB	0000	0.23763	11/05/2024
HYDROCORTISONE 100 MG ENEMA	0000	0.18002	11/05/2024
HYDROCORTISONE 2.5 % CREAM/APPL	0000	0.57197	08/05/2024
HYDROCORTISONE 2.5% CRM	0000	0.09592	06/05/2025
HYDROCORTISONE 2.5% LOT	0000	0.20567	04/05/2024
HYDROCORTISONE 2.5% OINT	**0000**	**0.10609**	**07/05/2025**
HYDROCORTISONE 20 MG TAB	**0000**	**0.44816**	**07/05/2025**
HYDROCORTISONE 5 MG TAB	0000	0.17179	02/05/2025
HYDROCORTISONE BUTYR 0.1% CRM	**0000**	**2.40304**	**07/05/2025**
HYDROCORTISONE BUTYR 0.1% OINT	0000	2.77345	06/05/2024
HYDROCORTISONE VAL 0.2% OINT	0000	1.71085	12/05/2024
HYDROMORPHONE 2 MG TAB	0000	0.16470	06/05/2025
HYDROMORPHONE 4 MG TAB	0000	0.20207	06/05/2025
HYDROMORPHONE HCL 1 MG/ML LIQUID	0000	0.28646	10/05/2024
HYDROMORPHONE HCL 12 MG TAB ER 24H	**0000**	**9.51990**	**07/05/2025**
HYDROMORPHONE HCL 16 MG TAB ER 24H	0000	8.84401	11/05/2024
HYDROMORPHONE HCL 8 MG TAB	0000	0.50971	04/05/2025
HYDROMORPHONE HCL 8 MG TAB ER 24H	0000	6.49944	06/05/2025
HYDROQUINONE 4 % CRM	0000	0.47375	12/05/2024
HYDROXYCHLOROQUINE 200 MG TAB	0000	0.25021	05/05/2025
HYDROXYUREA 500 MG CAP	0000	0.35655	10/05/2024
HYDROXYZINE 10 MG/5 ML SYRP	0000	0.16929	01/05/2025
HYDROXYZINE HCL 10 MG TAB	0000	0.03134	12/05/2024
HYDROXYZINE HCL 25 MG TAB	0000	0.03406	12/05/2024
HYDROXYZINE HCL 50 MG TAB	0000	0.06182	03/05/2025
HYDROXYZINE PAM 25 MG CAP	0000	0.07267	06/05/2024
HYDROXYZINE PAM 50 MG CAP	**0000**	**0.06882**	**07/05/2025**
HYOSCYAMINE 0.125 MG/ML DROP	0000	1.12648	02/05/2018
HYOSCYAMINE SULFATE 0.125MG TAB	0000	0.20002	04/05/2025
IBANDRONATE SODIUM 150 MG TAB	0000	3.56626	03/05/2025
IBUPROFEN 100 MG/5 ML SUSP	0000	0.04566	08/05/2024
IBUPROFEN 200 MG TAB	0000	0.03128	06/05/2025
IBUPROFEN 400 MG TAB	0000	0.04497	05/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
IBUPROFEN 600 MG TAB	**0000**	**0.04661**	**07/05/2025**
IBUPROFEN 800 MG TAB	0000	0.05134	12/05/2024
IMATINIB MESYLATE 400 MG TAB	0000	2.56991	11/05/2024
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	0.07828	03/05/2025
IMIPRAMINE HCL 25 MG TAB	0000	0.09437	04/05/2025
IMIPRAMINE HCL 50 MG TAB	0000	0.12248	04/05/2025
IMIPRAMINE PAMOATE 100 MG CAP	0000	3.38262	05/05/2025
IMIPRAMINE PAMOATE 75 MG CAP	0000	5.16865	04/05/2025
INDAPAMIDE 1.25 MG TAB	0000	0.10604	04/05/2025
INDAPAMIDE 2.5 MG TAB	0000	0.11530	04/05/2025
INDOMETHACIN 25 MG CAP	0000	0.10134	08/05/2024
INDOMETHACIN 50 MG CAP	0000	0.12745	06/05/2025
INDOMETHACIN 75 MG CAP SA	0000	0.19699	03/05/2025
INSULIN NPH HUM/REG INSULIN HM 70-30/ML INSULN PEN	0000	7.43905	02/05/2025
INSULIN NPH HUMAN ISOPHANE 100/ML (3) INSULN PEN	0000	7.43969	02/05/2025
IPRATR-ALBUTEROL 0.5-3 MG/3 ML SOLN	0000	0.08223	08/05/2024
IPRATROPIUM 0.03% SPRAY	0000	0.63086	10/05/2024
IPRATROPIUM 0.06% SPRAY	0000	1.13577	06/05/2025
IPRATROPIUM BR 0.02% SOLN	0000	0.10034	05/05/2025
IRBESARTAN 150 MG TAB	**0000**	**0.12810**	**07/05/2025**
IRBESARTAN 300 MG TAB	0000	0.15478	12/05/2024
IRBESARTAN 75 MG TAB	0000	0.13111	08/05/2024
IRBESARTAN/HCTZ 150 MG-12.5 MG TAB	0000	0.16663	03/05/2025
IRBESARTAN/HCTZ 300 MG-12.5 MG TAB	0000	0.25126	05/05/2024
ISONIAZID 300 MG TAB	**0000**	**3.14031**	**07/05/2025**
ISOSORBIDE DN 10 MG TAB	0000	0.20286	12/05/2024
ISOSORBIDE DN 20 MG TAB	0000	0.22293	12/05/2024
ISOSORBIDE DN 30 MG TAB	0000	0.31096	12/05/2024
ISOSORBIDE DN 5 MG TAB	0000	0.20849	02/05/2025
ISOSORBIDE MN 10 MG TAB	0000	2.37961	06/05/2025
ISOSORBIDE MN 120 MG TAB SA	0000	0.17203	04/05/2025
ISOSORBIDE MN 20 MG TAB	0000	3.12033	06/05/2025
ISOSORBIDE MN 30 MG TAB SA	0000	0.07349	04/05/2025
ISOSORBIDE MN 60 MG TAB SA	0000	0.09590	12/05/2024
ISOTRETINOIN 20 MG CAP	**0000**	**5.14580**	**07/05/2025**
ISOTRETINOIN 30 MG CAP	0000	6.39604	01/05/2025
ISOTRETINOIN 40 MG CAP	**0000**	**6.62025**	**07/05/2025**
ISRADIPINE 5 MG CAP	0000	2.52389	01/05/2025
ITRACONAZOLE 100 MG CAP	0000	0.84743	04/05/2025
IVERMECTIN 3 MG TAB	0000	3.27744	12/05/2024
KETOCONAZOLE 2 % FOAM	0000	4.95090	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
KETOCONAZOLE 2% CRM	0000	0.69312	12/05/2024
KETOCONAZOLE 2% SHAMPOO	**0000**	**0.09005**	**07/05/2025**
KETOCONAZOLE 200 MG TAB	0000	0.66722	09/05/2024
KETOPROFEN 200 MG CAP SA	0000	8.59209	06/05/2025
KETOPROFEN 50 MG CAP	0000	0.49872	07/05/2016
KETOPROFEN 75 MG CAP	0000	0.66393	12/05/2015
KETOROLAC 0.4% OPHTH SOLN	0000	11.20593	12/05/2024
KETOROLAC 0.5% OPHTH SOLN	0000	1.35353	11/05/2024
KETOROLAC 10 MG TAB	0000	0.28051	12/05/2024
KETOROLAC 30 MG/ML VIAL	0000	1.38490	01/05/2025
KETOROLAC 60 MG/2ML VIAL	0000	0.68735	08/05/2024
L-NORG-E EST 0.15 MG-30 MCG 3 MONTH DOSE PK	0000	0.17727	06/05/2025
L-NORG-E EST/E EST 0.10 MG-20 MCG (84)/10 MCG 3 MONTH	0000	0.20252	09/05/2024
LABETALOL HCL 100 MG TAB	0000	0.08978	08/05/2024
LABETALOL HCL 200 MG TAB	0000	0.12225	12/05/2024
LABETALOL HCL 300 MG TAB	0000	0.19871	12/05/2024
LACTULOSE 10 GM/15 ML SOLN-CON	0000	0.02561	05/05/2025
LACTULOSE 10 GM/15 ML SOLN-ENU	0000	0.01379	06/05/2024
LAMIVUDINE 150 MG TAB	**0000**	**0.51591**	**07/05/2025**
LAMIVUDINE/ZIDOVUDINE 150 MG-300 MG TAB	0000	0.73830	06/05/2024
LAMOTRIGINE 100 MG TAB	0000	0.03787	12/05/2024
LAMOTRIGINE 100 MG TAB RAPDIS	0000	2.04682	10/05/2024
LAMOTRIGINE 150 MG TAB	0000	0.05595	12/05/2024
LAMOTRIGINE 200 MG TAB	0000	0.08067	04/05/2025
LAMOTRIGINE 200 MG TAB ER 24	0000	0.81224	05/05/2025
LAMOTRIGINE 25 MG DISPER TAB	0000	0.18365	03/05/2025
LAMOTRIGINE 25 MG TAB	0000	0.03486	11/05/2024
LAMOTRIGINE 25 MG TAB RAPDIS	0000	1.32278	03/05/2025
LAMOTRIGINE 250 MG TAB ER 24	**0000**	**1.44158**	**07/05/2025**
LAMOTRIGINE 300 MG TAB ER 24	0000	1.26633	01/05/2025
LAMOTRIGINE 5 MG DISPER TAB	0000	0.16118	12/05/2024
LAMOTRIGINE 50 MG TAB RAPDIS	0000	1.78877	12/05/2024
LAMOTRIGINE ER 100 MG TABLET	0000	0.70630	01/05/2025
LAMOTRIGINE ER 25 MG TAB	0000	0.42371	01/05/2025
LAMOTRIGINE ER 50 MG TABLET	0000	0.62123	01/05/2025
LANSOPRAZOLE 15 MG CAP DR	0000	0.32056	08/05/2024
LANSOPRAZOLE 15 MG TAB RAP DR	0000	1.88193	02/05/2025
LANSOPRAZOLE 30 MG CAP DR	0000	0.09748	03/05/2025
LANSOPRAZOLE 30 MG TAB RAP DR	0000	2.73759	05/05/2025
LANSOPRAZOLE/AMOXICILN/CLARITH 30-500-500 COMBO. PKG	0000	5.15488	04/05/2025
LATANOPROST 0.005 % DROPS	0000	2.03144	05/05/2025
LEFLUNOMIDE 10 MG TAB	0000	0.34164	04/05/2025
LEFLUNOMIDE 20 MG TAB	0000	0.28557	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LETROZOLE 2.5 MG TAB	0000	0.13090	06/05/2025
LEUCOVORIN CALCIUM 25 MG TAB	0000	3.21673	05/05/2025
LEUCOVORIN CALCIUM 5 MG TAB	0000	0.50317	09/05/2024
LEV/NORGES/ETH/ESTR 90/20 MCG TAB	0000	1.02210	03/05/2025
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**	**0.28503**	**07/05/2025**
LEVALBUTEROL HCL 1.25MG/3ML VIAL-NEB	**0000**	**0.29140**	**07/05/2025**
LEVETIRACETAM 100 MG/ML SOLN	0000	0.03972	05/05/2025
LEVETIRACETAM 1000 MG TAB	0000	0.17879	12/05/2024
LEVETIRACETAM 250 MG TAB	0000	0.05710	03/05/2025
LEVETIRACETAM 500 MG TAB	0000	0.07844	03/05/2025
LEVETIRACETAM 500 MG TAB.SR 24H	0000	0.16108	01/05/2025
LEVETIRACETAM 500 MG/5 ML VIAL	0000	1.31260	03/05/2015
LEVETIRACETAM 750 MG TAB	0000	0.11968	12/05/2024
LEVETIRACETAM ER 750 MG TAB	0000	0.24128	03/05/2025
LEVOBUNOLOL 0.5% EYE DROPS	0000	2.00286	04/05/2025
LEVOCARNITINE 100 MG/ML SOLN	0000	0.15490	09/05/2024
LEVOCARNITINE 200 MG/ML VIAL	0000	2.78000	04/15/2016
LEVOCARNITINE 330 MG TAB	0000	0.70808	02/05/2025
LEVOCETIRIZINE 2.5 MG/5 ML SOLN	0000	0.21345	03/05/2025
LEVOCETIRIZINE DIHYDROCHLORIDE 5 MG TAB	0000	0.12035	04/05/2025
LEVOFLOXACIN 250 MG TAB	0000	0.12377	03/05/2025
LEVOFLOXACIN 250MG/10ML SOLUTION	**0000**	**1.75344**	**07/05/2025**
LEVOFLOXACIN 500 MG TAB	0000	0.16675	10/05/2024
LEVOFLOXACIN 750 MG TAB	**0000**	**0.25902**	**07/05/2025**
LEVONOR/ETH E 0.15 MG/30 MCG TAB	0000	0.10957	03/05/2025
LEVOTHYROXINE 100 MCG TAB	0000	0.06293	09/05/2024
LEVOTHYROXINE 112 MCG TAB	0000	0.08051	09/05/2024
LEVOTHYROXINE 125 MCG TAB	0000	0.08172	11/05/2024
LEVOTHYROXINE 137 MCG TAB	0000	0.08052	09/05/2024
LEVOTHYROXINE 150 MCG TAB	0000	0.07890	03/05/2025
LEVOTHYROXINE 175 MCG TAB	0000	0.09185	03/05/2025
LEVOTHYROXINE 200 MCG TAB	0000	0.10149	04/05/2025
LEVOTHYROXINE 25 MCG TAB	0000	0.04321	06/05/2025
LEVOTHYROXINE 300 MCG TAB	0000	0.12471	04/05/2025
LEVOTHYROXINE 50 MCG TAB	0000	0.05707	08/05/2024
LEVOTHYROXINE 75 MCG TAB	0000	0.05769	04/05/2025
LEVOTHYROXINE 88 MCG TAB	0000	0.06368	09/05/2024
LIDOCAINE 2% VISCOUS SOLN	0000	0.10701	05/05/2025
LIDOCAINE 3% CRM	0000	0.57383	08/05/2024
LIDOCAINE 5 % OINT. (G)	0000	0.19081	08/05/2024
LIDOCAINE 5%(700MG) ADH. PATCH	0000	2.27809	08/05/2024
LIDOCAINE HCL 1% VIAL	0000	0.09726	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LIDOCAINE HCL 40 MG/ML SOLN	0000	0.24656	12/05/2024
LIDOCAINE-HC 2-2% CREAM KIT	0000	106.46625	07/05/2024
LIDOCAINE-HC 3-0.5% CREAM KIT	**0000**	**99.78257**	**07/05/2025**
LIDOCAINE-HC 3-0.5% CRM	0000	1.48359	08/05/2024
LIDOCAINE-HC 3-0.5% CRM/APPL	0000	1.52490	06/05/2015
LIDOCAINE-PRILOCAINE CRM	0000	0.30596	08/05/2024
LIOTHYRONINE SOD 50 MCG TAB	0000	0.53271	05/05/2025
LIOTHYRONINE SODIUM 25 MCG TAB	0000	0.34485	11/05/2024
LIOTHYRONINE SODIUM 5 MCG TAB	**0000**	**0.24106**	**07/05/2025**
LISDEXAMFETAMINE DIMESYLATE 10 MG CAP	0000	4.21309	03/05/2025
LISDEXAMFETAMINE DIMESYLATE 20 MG CAP	0000	4.13384	05/05/2025
LISDEXAMFETAMINE DIMESYLATE 30 MG CAP	0000	4.44837	03/05/2025
LISDEXAMFETAMINE DIMESYLATE 40 MG CAP	0000	4.04019	09/05/2024
LISDEXAMFETAMINE DIMESYLATE 50 MG CAP	**0000**	**4.55448**	**07/05/2025**
LISDEXAMFETAMINE DIMESYLATE 60 MG CAP	**0000**	**4.47333**	**07/05/2025**
LISDEXAMFETAMINE DIMESYLATE 70 MG CAP	**0000**	**4.56980**	**07/05/2025**
LISINOPRIL 10 MG TAB	0000	0.01853	05/05/2024
LISINOPRIL 2.5 MG TAB	0000	0.01595	05/05/2025
LISINOPRIL 20 MG TAB	0000	0.02853	05/05/2025
LISINOPRIL 30 MG TAB	0000	0.05414	04/05/2025
LISINOPRIL 40 MG TAB	0000	0.03968	06/05/2025
LISINOPRIL 5 MG TAB	**0000**	**0.01606**	**07/05/2025**
LISINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.02718	12/05/2024
LISINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.03836	12/05/2024
LISINOPRIL/HCTZ 20/25 MG TAB	0000	0.03429	12/05/2024
LITHIUM CARBONATE 150 MG CAP	0000	0.09392	09/05/2024
LITHIUM CARBONATE 300 MG CAP	0000	0.10429	02/05/2025
LITHIUM CARBONATE 300 MG TAB	0000	0.18755	07/05/2024
LITHIUM CARBONATE 600 MG CAP	0000	0.23024	12/05/2024
LITHIUM CARBONATE ER 300 MG TAB	0000	0.21735	09/05/2024
LITHIUM ER 450 MG TAB	0000	0.27231	04/05/2025
LOPERAMIDE HCL 2 MG CAP	0000	0.14947	12/05/2024
LORATADINE 10MG REDI-TAB	0000	0.66550	03/05/2025
LORATADINE 10MG TAB	0000	0.05851	05/05/2025
LORATADINE 5MG/5ML SYRP	0000	0.04320	05/05/2025
LORATADINE/PSE 10/240MG TAB SA	0000	0.48431	08/05/2024
LORAZEPAM 0.5 MG TAB	0000	0.04430	06/05/2025
LORAZEPAM 1 MG TAB	0000	0.04658	03/05/2025
LORAZEPAM 2 MG TAB	0000	0.06746	03/05/2025
LORAZEPAM 2 MG/ML ORAL CONC	0000	0.63540	01/05/2025
LORAZEPAM 2 MG/ML VIAL	0000	1.89450	05/05/2016
LOSARTAN POTASSIUM 100 MG TAB	0000	0.04444	12/05/2024
LOSARTAN POTASSIUM 25 MG TAB	0000	0.03144	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LOSARTAN POTASSIUM 50 MG TAB	0000	0.04422	05/05/2025
LOSARTAN-HCTZ 100-12.5 MG TAB	0000	0.09594	03/05/2025
LOSARTAN-HCTZ 100-25 MG TAB	0000	0.09223	12/05/2024
LOSARTAN-HCTZ 50-12.5 MG TAB	**0000**	**0.07853**	**07/05/2025**
LOVASTATIN 10 MG TAB	0000	0.04421	05/05/2024
LOVASTATIN 20 MG TAB	0000	0.04303	12/05/2024
LOVASTATIN 40 MG TAB	0000	0.05121	06/05/2025
LOXAPINE SUCCINATE 10 MG CAP	0000	0.48336	09/05/2024
LOXAPINE SUCCINATE 25 MG CAP	0000	0.72689	04/05/2025
LOXAPINE SUCCINATE 50 MG CAP	0000	0.90868	08/05/2024
MALATHION 0.5 % LOT	**0000**	**3.19633**	**07/05/2025**
MECLIZINE 12.5 MG TAB	0000	0.04823	06/05/2025
MECLIZINE HCL 25 MG TAB	0000	0.08569	06/05/2025
MEDROXYPROGEST 150 MG/ML SYR	**0000**	**33.78854**	**07/05/2025**
MEDROXYPROGEST 150 MG/ML VIAL	**0000**	**20.09707**	**07/05/2025**
MEDROXYPROGESTERONE 10 MG TAB	0000	0.14944	03/05/2025
MEDROXYPROGESTERONE 2.5 MG TAB	0000	0.11351	11/05/2024
MEDROXYPROGESTERONE 5 MG TAB	0000	0.14210	06/05/2025
MEFENAMIC ACID 250 MG CAP	0000	1.18278	05/05/2025
MEGESTROL 20 MG TAB	0000	0.18679	04/05/2025
MEGESTROL 40 MG TAB	0000	0.19911	03/05/2025
MEGESTROL ACET 40 MG/ML SUSP	0000	0.12513	02/05/2025
MEGESTROL ACETATE 625MG/5ML ORAL SUSP	0000	1.11588	08/05/2024
MELOXICAM 10 MG CAPSULE	**0000**	**11.72133**	**07/05/2025**
MELOXICAM 15 MG TAB	0000	0.02390	06/05/2025
MELOXICAM 5 MG CAPSULE	**0000**	**14.41055**	**07/05/2025**
MELOXICAM 7.5 MG TAB	0000	0.01555	12/05/2024
MEMANTINE HCL 10 MG TAB	0000	0.07946	06/05/2025
MEMANTINE HCL 5 MG TABLET	0000	0.09701	08/05/2024
MEPERIDINE 50 MG TAB	0000	0.65024	10/05/2018
MERCAPTOPURINE 50 MG TAB	0000	1.09746	05/05/2025
MEROPENEM 1 G VIAL	0000	5.50560	06/05/2025
MEROPENEM 500 MG VIAL	0000	4.70953	06/05/2024
MESALAMINE 4G/60 ML RECT SUSP	0000	0.12828	08/05/2024
METAXALONE 800 MG TAB	0000	0.47535	12/05/2024
METFORMIN HCL 1000 MG TAB	0000	0.02412	06/05/2025
METFORMIN HCL 500 MG TAB	0000	0.01706	05/05/2025
METFORMIN HCL 850 MG TAB	0000	0.02290	02/05/2025
METFORMIN HCL ER 1,000 MG OSM-TAB	0000	0.41281	06/05/2025
METFORMIN HCL ER 500 MG FILM TAB	0000	0.16394	10/05/2024
METFORMIN HCL ER 500 MG TAB	0000	0.03104	05/05/2025
METFORMIN HCL ER 750 MG TAB	0000	0.05697	12/05/2024
METHADONE HCL 10 MG TAB	0000	0.17205	09/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METHADONE HCL 5 MG TAB	0000	0.15894	12/05/2024
METHADONE INTENSOL 10 MG/ML CONC	**0000**	**0.55395**	**07/05/2025**
METHAZOLAMIDE 25 MG TAB	0000	0.88370	06/05/2025
METHAZOLAMIDE 50 MG TAB	0000	1.69131	07/05/2024
METHENAMINE HIPP 1 GM TAB	0000	0.38230	12/05/2024
METHIMAZOLE 10 MG TAB	0000	0.12865	08/05/2024
METHIMAZOLE 5 MG TAB	0000	0.07227	12/05/2024
METHOCARBAMOL 500 MG TAB	0000	0.03917	06/05/2025
METHOCARBAMOL 750 MG TAB	0000	0.04701	08/05/2024
METHOTREXATE 2.5 MG TAB	0000	0.15507	08/05/2024
METHOTREXATE 25 MG/ML VIAL	0000	3.04977	10/05/2024
METHOTREXATE 25 MG/ML VIAL-PF	0000	1.89287	11/05/2024
METHSCOPOLAMINE BROM 2.5 MG TAB	0000	0.78408	03/05/2025
METHSCOPOLAMINE BROM 5 MG TAB	0000	1.46212	07/05/2024
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	6.56881	05/05/2025
METHYLPHENIDATE 10 MG TAB	0000	0.14923	12/05/2024
METHYLPHENIDATE 10 MG TAB SA	0000	0.40684	09/05/2024
METHYLPHENIDATE 20 MG TAB	0000	0.21525	12/05/2024
METHYLPHENIDATE 5 MG TAB	0000	0.13401	06/05/2025
METHYLPHENIDATE HCL 10 MG CPBP 50-50	0000	3.96903	06/05/2025
METHYLPHENIDATE HCL 20 MG TAB ER	0000	0.56823	11/05/2024
METHYLPRED 4 MG TAB DOSEPAK	0000	0.13230	03/05/2025
METHYLPREDNISOLONE 4 MG TAB	0000	0.14131	04/05/2025
METHYLPREDNISOLONE ACETATE 80 MG/ML VIAL	0000	12.92401	02/05/2025
METOCLOPRAMIDE 10 MG TAB	0000	0.04472	02/05/2025
METOCLOPRAMIDE 5 MG TAB	0000	0.06145	05/05/2025
METOCLOPRAMIDE 5 MG/5 ML SYRP	**0000**	**0.05555**	**07/05/2025**
METOLAZONE 10 MG TAB	0000	0.44171	06/05/2024
METOLAZONE 2.5 MG TAB	0000	0.23862	11/05/2024
METOLAZONE 5 MG TAB	0000	0.29049	04/05/2025
METOPROLOL 100 MG TAB	0000	0.02759	03/05/2025
METOPROLOL 25 MG TAB	0000	0.01791	04/05/2025
METOPROLOL 50 MG TAB	0000	0.02212	04/05/2025
METOPROLOL SUCC ER 100 MG TAB	0000	0.12306	04/05/2025
METOPROLOL SUCC ER 200 MG TAB	0000	0.16785	03/05/2025
METOPROLOL SUCC ER 25 MG TAB	0000	0.07186	12/05/2024
METOPROLOL SUCC ER 50 MG TAB	0000	0.06673	11/05/2024
METOPROLOL-HCTZ 100/25MG TAB	0000	1.13310	06/05/2024
METOPROLOL-HCTZ 50/25MG TAB	0000	0.87448	11/05/2024
METRONIDAZOLE 0.75% CRM	**0000**	**0.35420**	**07/05/2025**
METRONIDAZOLE 250 MG TAB	0000	0.10891	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METRONIDAZOLE 375 MG CAP	0000	7.84084	03/05/2025
METRONIDAZOLE 500 MG TAB	0000	0.09996	03/05/2025
METRONIDAZOLE 500 MG/100 ML	0000	0.02085	05/05/2016
METRONIDAZOLE TOP 0.75% GEL	0000	0.35987	12/05/2024
METRONIDAZOLE VAG 0.75% GEL	0000	0.20438	01/05/2025
MEXILETINE 150 MG CAP	0000	0.22928	12/05/2024
MEXILETINE 200 MG CAP	0000	0.32162	03/05/2025
MICONAZOLE NITRATE 2 % CRM/APPL	**0000**	**0.11462**	**07/05/2025**
MIDODRINE HCL 10 MG TAB	0000	0.20527	12/05/2024
MIDODRINE HCL 2.5 MG TAB	0000	0.08994	03/05/2025
MIDODRINE HCL 5 MG TAB	0000	0.14494	04/05/2025
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	0.38174	10/05/2024
MINOCYCLINE 50 MG CAP	**0000**	**0.18560**	**07/05/2025**
MINOCYCLINE 75 MG CAP	0000	0.30898	08/05/2024
MINOCYCLINE HCL 100 MG TAB	0000	0.60760	06/05/2025
MINOCYCLINE HCL 50 MG TABLET	**0000**	**0.40430**	**07/05/2025**
MINOCYCLINE HCL 75MG TAB	0000	1.98334	04/05/2025
MINOXIDIL 10 MG TAB	0000	0.19097	04/05/2025
MINOXIDIL 2.5 MG TAB	0000	0.10863	04/05/2025
MIRTAZAPINE 15 MG RPD DISLV TAB	0000	0.36422	04/05/2025
MIRTAZAPINE 15 MG TAB	0000	0.07406	04/05/2025
MIRTAZAPINE 30 MG RPD DISLV TAB	0000	0.42669	03/05/2025
MIRTAZAPINE 30 MG TAB	0000	0.10628	06/05/2025
MIRTAZAPINE 45 MG RPD DISLV TAB	0000	0.43214	04/05/2025
MIRTAZAPINE 45 MG TAB	0000	0.20309	05/05/2025
MIRTAZAPINE 7.5 MG TAB	0000	0.39852	01/05/2025
MISOPROSTOL 100 MCG TAB	0000	0.40895	12/05/2024
MISOPROSTOL 200 MCG TAB	0000	0.61046	12/05/2024
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	0.87174	08/05/2024
MOMETASONE FUROATE 0.1% CRM	0000	0.44314	08/05/2024
MOMETASONE FUROATE 0.1% OINT	0000	0.30055	12/05/2024
MOMETASONE FUROATE 0.1% SOLN	0000	0.35250	08/05/2024
MONTELUKAST SODIUM 10 MG TAB	0000	0.05461	04/05/2025
MONTELUKAST SODIUM 4 MG GRAN PK	0000	1.14891	04/05/2024
MONTELUKAST SODIUM 4 MG TAB CHEW	0000	0.08455	05/05/2024
MONTELUKAST SODIUM 5 MG TAB CHEW	0000	0.09978	05/05/2025
MORPHINE SULF 100 MG TAB SA	0000	0.99887	05/05/2025
MORPHINE SULF 15 MG TAB SA	0000	0.27997	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
MORPHINE SULF 200 MG TAB SA	**0000**	**2.32992**	**07/05/2025**
MORPHINE SULF 30 MG TAB SA	**0000**	**0.39671**	**07/05/2025**
MORPHINE SULF 60 MG TAB SA	0000	0.55989	08/05/2024
MORPHINE SULFATE 10 MG/5 ML SOLUTION	0000	0.06375	06/05/2024
MORPHINE SULFATE 100 MG/5 ML (20 MG/ML) SOLN	0000	0.37843	07/05/2024
MORPHINE SULFATE 30 MG TABLET	0000	0.36371	03/05/2025
MORPHINE SULFATE IR 15 MG TAB	0000	0.23456	03/05/2025
MULTIVIT-FLUOR 0.25 MG TAB CHW	0000	0.08985	07/05/2024
MULTIVIT-FLUOR 0.5 MG TAB CHEW	0000	0.12083	07/05/2024
MUPIROCIN 2% OINT	0000	0.24306	04/05/2025
MYCOPHENOLATE 250 MG CAP	0000	0.17679	09/05/2024
MYCOPHENOLATE 500 MG TAB	0000	0.27006	03/05/2025
MYCOPHENOLATE SODIUM 180 MG TABLET DR	0000	0.17191	07/05/2024
MYCOPHENOLATE SODIUM 360 MG TAB DR	0000	0.32305	11/05/2024
NABUMETONE 500 MG TAB	0000	0.12991	04/05/2025
NABUMETONE 750 MG TAB	0000	0.15530	11/05/2024
NADOLOL 20 MG TAB	0000	0.12961	02/05/2025
NADOLOL 40 MG TAB	0000	0.24949	02/05/2025
NADOLOL 80 MG TAB	0000	0.26981	03/05/2025
NALTREXONE 50 MG TAB	0000	1.09587	09/05/2024
NAPROXEN 125 MG/5 ML SUSP	0000	0.33052	12/05/2024
NAPROXEN 250 MG TAB	0000	0.05176	04/05/2025
NAPROXEN 375 MG TAB	0000	0.06216	09/05/2024
NAPROXEN 375 MG TAB EC	0000	1.10590	01/05/2025
NAPROXEN 500 MG TAB	0000	0.06459	05/05/2025
NAPROXEN 500 MG TAB EC	0000	2.08868	04/05/2025
NAPROXEN SODIUM 275 MG TAB	**0000**	**0.21686**	**07/05/2025**
NAPROXEN SODIUM 550 MG TAB	0000	0.19325	12/05/2024
NARATRIPTAN HCL 1 MG TAB	0000	1.78411	11/05/2024
NARATRIPTAN HCL 2.5 MG TAB	0000	1.31062	04/05/2025
NATEGLINIDE 120 MG TAB	0000	0.28773	12/05/2024
NATEGLINIDE 60 MG TAB	0000	0.25809	06/05/2025
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	5.53043	12/05/2024
NEO/POLY/DEXAMET EYE OINT	0000	2.75327	03/05/2025
NEO/POLYMYXIN/DEXAMETH DROPS	0000	1.66357	12/05/2024
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SOLN	0000	5.41923	04/05/2025
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SUSP	0000	4.41707	01/05/2025
NEOMY-BAC-POLY 3.5-400U-5,000U/GM OINT	0000	0.10091	12/05/2024
NEOMYCI/POLY/GRAM OPHTH SOL	0000	4.10975	06/05/2025
NEOMYCIN 500 MG TAB	0000	0.80305	06/05/2025
NEOMYCIN/POLY/HC EYE DROPS	**0000**	**17.16515**	**07/05/2025**

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NEVIRAPINE 200 MG TAB	0000	0.13463	06/05/2025
NIACIN 1,000 MG TAB ER 24H	0000	0.27794	04/05/2025
NIACIN 500 MG TAB ER 24H	0000	0.16558	04/05/2025
NIACIN 750 MG TAB ER 24H	0000	0.35393	12/05/2024
NICARDIPINE HCL 20 MG CAP	0000	2.43689	04/05/2025
NICOTINE 14 MG/24HR PATCH	0000	1.57268	09/05/2024
NICOTINE 21 MG/24HR PATCH	0000	1.52355	09/05/2024
NICOTINE 7 MG/24 HOUR PATCH TD24	0000	1.60404	09/05/2024
NICOTINE POLACRILEX 2 MG GUM	0000	0.21131	12/05/2024
NICOTINE POLACRILEX 4 MG GUM	0000	0.26161	12/05/2024
NIFEDIPINE 10 MG CAP	0000	0.28205	01/05/2025
NIFEDIPINE 20 MG CAP	0000	0.67579	05/05/2025
NIFEDIPINE ER 30 MG TAB - AB1	0000	0.09701	03/05/2025
NIFEDIPINE ER 30 MG TAB - AB2	0000	0.10396	05/05/2024
NIFEDIPINE ER 60 MG TAB - AB1	0000	0.14851	03/05/2025
NIFEDIPINE ER 60 MG TAB - AB2	0000	0.13975	03/05/2025
NIFEDIPINE ER 90 MG TAB - AB1	0000	0.22560	04/05/2025
NIFEDIPINE ER 90 MG TAB - AB2	0000	0.24041	04/05/2025
NISOLDIPINE 17 MG TAB ER 24H	**0000**	**3.89897**	**07/05/2025**
NISOLDIPINE ER 34 MG TAB	0000	6.63441	01/05/2025
NISOLDIPINE ER 8.5 MG TAB	0000	3.10867	01/05/2025
NITROFURANTOIN MCR 100 MG CAP	0000	0.30016	01/05/2025
NITROFURANTOIN MCR 50 MG CAP	0000	0.23227	08/05/2024
NITROFURANTOIN MONOHYD 100 MG CAP	0000	0.32693	04/05/2025
NITROGLYCERIN 0.1 MG/HR PATCH	0000	0.48368	12/05/2024
NITROGLYCERIN 0.2 MG/HR PATCH	0000	0.63817	09/05/2024
NITROGLYCERIN 0.4 MG/HR PATCH	**0000**	**0.66595**	**07/05/2025**
NITROGLYCERIN 0.6 MG/HR PATCH	**0000**	**0.90093**	**07/05/2025**
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**	**21.06463**	**07/05/2025**
NIZATIDINE 150 MG CAP	0000	0.78478	08/05/2024
NIZATIDINE 300 MG CAP	0000	0.59360	12/05/2019
NOR/ETH/ESTR/ FE 0.4MG-35MCG (21)/75MG (7) CHEW	0000	0.46685	12/05/2024
NORETH-ETHINYL ESTRADIOL/IRON 0.8-25(24) TAB CHEW	0000	1.68613	10/05/2024
NORETHIND AC/ETH ESTRADIOL 1 MG-5 MCG TAB	0000	1.13146	05/05/2025
NORETHINDRONE 0.35 MG TAB	0000	0.10061	08/05/2024
NORETHINDRONE 5 MG TAB	0000	0.29538	03/05/2025
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) TABLET	0000	0.25354	09/05/2024
NORTRIPTYLINE HCL 10 MG CAP	0000	0.11187	04/05/2025
NORTRIPTYLINE HCL 25 MG CAP	0000	0.13623	03/05/2025
NORTRIPTYLINE HCL 50 MG CAP	0000	0.17203	11/05/2024
NORTRIPTYLINE HCL 75 MG CAP	0000	0.28239	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NPH, HUMAN INSULIN ISOPHANE 100 UNIT/ML VIAL	0000	4.45860	02/05/2025
NYSTATIN 100,000 UNIT/GM CRM	0000	0.29806	06/05/2025
NYSTATIN 100,000 UNIT/GM OINT	0000	0.34281	01/05/2025
NYSTATIN 100,000 UNIT/GM PWDR	0000	0.33817	04/05/2025
NYSTATIN 100,000 UNIT/ML SUSP	0000	0.11634	10/05/2024
NYSTATIN 500,000 UNIT ORAL TAB	0000	0.32934	11/05/2024
NYSTATIN/TRIAMCINOLONE CRM	0000	0.28696	03/05/2025
NYSTATIN/TRIAMCINOLONE OINT	0000	0.31387	04/05/2025
OFLOXACIN 0.3% EAR DROPS	0000	1.36917	05/05/2025
OFLOXACIN 0.3% EYE DROPS	0000	1.41098	03/05/2025
OLANZAPINE 10 MG TAB	0000	0.10597	08/05/2024
OLANZAPINE 10 MG TAB RAPDIS	**0000**	**0.42982**	**07/05/2025**
OLANZAPINE 10 MG VIAL	**0000**	**26.94217**	**07/05/2025**
OLANZAPINE 15 MG TAB	0000	0.15640	10/05/2024
OLANZAPINE 15 MG TAB RAPDIS	0000	0.59589	12/05/2024
OLANZAPINE 2.5 MG TAB	0000	0.06968	12/05/2024
OLANZAPINE 20 MG TAB	0000	0.12949	12/05/2024
OLANZAPINE 20 MG TAB RAPDIS	0000	0.75930	03/05/2025
OLANZAPINE 5 MG TAB	**0000**	**0.08695**	**07/05/2025**
OLANZAPINE 5 MG TAB RAPDIS	0000	0.29609	12/05/2024
OLANZAPINE 7.5 MG TAB	0000	0.07395	12/05/2024
OLOPATADINE 665 MCG NASAL SPRY	0000	1.00808	07/05/2024
OLOPATADINE HCL 0.1 % DROPS	0000	2.20747	12/05/2024
OMEGA-3 ACID ETHYL ESTERS 1 G CAPSULE	0000	0.24489	08/05/2024
OMEPRAZOLE 10 MG CAP DR	0000	0.08501	09/05/2024
OMEPRAZOLE 20 MG CAP	0000	0.03071	05/05/2024
OMEPRAZOLE 20 MG TAB DR	0000	0.41329	06/05/2025
OMEPRAZOLE 40 MG CAP DR	0000	0.06053	12/05/2024
OMEPRAZOLE MAGNESIUM 20 MG TAB DR	0000	0.39957	09/05/2024
OMEPRAZOLE-BICARB 40-1,100 CAP	0000	0.76100	09/05/2024
ONDANSETRON 4 MG/5 ML SOLN	0000	0.31950	09/05/2024
ONDANSETRON HCL 2 MG/ML VIAL	0000	0.18436	11/05/2024
ONDANSETRON HCL 4 MG TAB	0000	0.11730	11/05/2024
ONDANSETRON HCL 4 MG/2 ML VIAL	0000	0.25470	06/05/2024
ONDANSETRON HCL 8 MG TAB	0000	0.15212	10/05/2024
ONDANSETRON ODT 4 MG TAB	0000	0.15648	01/05/2025
ONDANSETRON ODT 8 MG TAB	0000	0.19752	05/05/2025
ORPHENADRINE 100 MG TAB SA	0000	0.38905	08/05/2024
OXAPROZIN 600 MG TAB	0000	0.55971	05/05/2025
OXAZEPAM 10 MG CAP	0000	0.71170	06/05/2024
OXAZEPAM 15 MG CAP	0000	1.07419	02/05/2025
OXAZEPAM 30 MG CAP	0000	1.34564	06/05/2024
OXCARBAZEPINE 150 MG TAB	0000	0.13463	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
OXCARBAZEPINE 300 MG TAB	0000	0.18222	03/05/2025
OXCARBAZEPINE 300 MG/5 ML ORAL SUSP	0000	0.21916	12/05/2024
OXCARBAZEPINE 600 MG TAB	0000	0.33903	08/05/2024
OXICONAZOLE NITRATE 1 % CRM (G)	0000	5.17068	03/05/2025
OXICONAZOLE NITRATE 1 % CRM (G)	0030	8.55853	08/05/2019
OXYBUTYNIN 5 MG TAB	**0000**	**0.05532**	**07/05/2025**
OXYBUTYNIN 5 MG/5 ML SYRP	0000	0.02906	10/05/2024
OXYBUTYNIN CL ER 10 MG TAB	0000	0.11205	04/05/2025
OXYBUTYNIN CL ER 15 MG TAB	0000	0.14966	09/05/2024
OXYBUTYNIN CL ER 5 MG TAB	0000	0.09871	06/05/2025
OXYCODON-ACETAMINOPHEN 2.5-325	0000	1.48398	01/05/2025
OXYCODONE 20 MG/ML SOLN	0000	2.65752	12/05/2024
OXYCODONE HCL 10 MG TAB	0000	0.15153	03/05/2025
OXYCODONE HCL 15 MG TAB	0000	0.21858	04/05/2025
OXYCODONE HCL 20 MG TAB	0000	0.25748	04/05/2025
OXYCODONE HCL 30 MG TAB	0000	0.30575	12/05/2024
OXYCODONE HCL 5 MG CAP	0000	0.43255	11/05/2024
OXYCODONE HCL 5 MG TAB	0000	0.08144	12/05/2024
OXYCODONE HCL 5 MG/5 ML SOLUTION	0000	0.06991	08/05/2024
OXYCODONE HCL/ACETAMINOPHEN 10 MG-300 MG TAB	0000	0.21482	05/05/2025
OXYCODONE HCL/ACETAMINOPHEN 2.5 MG-300 MG TABLET	0000	1.48398	01/05/2025
OXYCODONE HCL/ACETAMINOPHEN 5 MG-300 MG TABLET	0000	0.11695	01/05/2025
OXYCODONE HCL/ACETAMINOPHEN 7.5 MG-300 MG TABLET	0000	0.17216	01/05/2025
OXYCODONE/APAP 10/325 MG TAB	0000	0.21482	05/05/2025
OXYCODONE/APAP 5/325 MG TAB	0000	0.11695	01/05/2025
OXYCODONE/APAP 7.5/325 MG TAB	0000	0.17216	01/05/2025
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	0.03459	12/05/2024
PANTOPRAZOLE SODIUM 20MG TAB DR	0000	0.05696	05/05/2024
PARICALCITOL 1 MCG CAP	0000	0.86849	06/05/2024
PARICALCITOL 2 MCG CAPSULE	**0000**	**1.77835**	**07/05/2025**
PAROXETINE 37.5 MG TAB SR 24H	0000	0.48717	03/05/2025
PAROXETINE HCL 10 MG TAB	0000	0.06669	03/05/2025
PAROXETINE HCL 12.5 MG TAB SR 24H	0000	0.52843	10/05/2024
PAROXETINE HCL 20 MG TAB	0000	0.06719	02/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PAROXETINE HCL 25 MG TAB SR 24H	0000	0.35837	12/05/2024
PAROXETINE HCL 30 MG TAB	0000	0.09368	03/05/2025
PAROXETINE HCL 40 MG TAB	0000	0.12683	03/05/2025
PEG 3350/ELECTROLYTE SOLN (COLYTE)	0000	0.00343	02/05/2025
PEG 3350/ELECTROLYTE SOLN (GOLYTELY)	0000	0.00454	07/05/2024
PEG 3350/FLAVOR PACKS - NULYTELY	0000	0.00717	08/05/2024
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0000	0.04841	09/05/2024
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0100	0.07411	09/05/2024
PENICILLIN V POTASSIUM 250MG TAB	0000	0.07064	03/05/2025
PENICILLIN V POTASSIUM 250MG/5ML SOLN	0000	0.05391	05/05/2025
PENICILLIN V POTASSIUM 500MG TAB	0000	0.09899	03/05/2025
PENTAZOCINE HCL/NALOXONE HCL 50-0.5MG TAB	0000	1.68969	12/05/2024
PENTOXIFYLLINE 400 MG TAB SA	**0000**	**0.23191**	**07/05/2025**
PERINDOPRIL ERBUMINE 4 MG TAB	0000	0.48711	06/05/2025
PERINDOPRIL ERBUMINE 8 MG TAB	0000	0.53258	07/05/2024
PERMETHRIN 5% CRM	0000	0.42219	05/05/2025
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**	**0.43725**	**07/05/2025**
PERPHENAZINE 2 MG TAB	0000	0.17785	02/05/2025
PERPHENAZINE 4 MG TAB	0000	0.20056	12/05/2024
PERPHENAZINE 8 MG TAB	0000	0.22449	09/05/2024
PHENAZOPYRIDINE HCL 100 MG TABLET	0000	0.17712	04/05/2025
PHENAZOPYRIDINE HCL 200 MG TABLET	0000	0.18322	03/05/2025
PHENYTOIN 125 MG/5 ML SUSP	0000	0.06733	06/05/2025
PHENYTOIN 50 MG CHEW TAB	0000	0.31845	07/05/2024
PHENYTOIN SOD EXT 100 MG CAP	0000	0.47836	01/05/2025
PHENYTOIN SODIUM EXTENDED 30 MG CAP	0000	1.42965	02/05/2025
PILOCARPINE 4% EYE DROPS	0000	3.04020	12/05/2024
PILOCARPINE HCL 5 MG TAB	0000	0.35110	04/05/2025
PILOCARPINE HCL 7.5 MG TAB	0000	0.34838	12/05/2024
PINDOLOL 10 MG TAB	**0000**	**0.78209**	**07/05/2025**
PINDOLOL 5 MG TAB	0000	0.65364	10/05/2024
PIOGLITAZONE - METFORMIN 15 MG-850 MG TAB	0000	0.31380	10/05/2024
PIOGLITAZONE HCL 15 MG TAB	0000	0.07521	03/05/2025
PIOGLITAZONE HCL 30 MG TAB	0000	0.09926	05/05/2024
PIOGLITAZONE HCL 45 MG TAB	0000	0.12444	03/05/2025
PIOGLITAZONE- METFORMIN 15 MG- 500 MG TAB	0000	0.61779	10/05/2024
PIPERACIL-TAZOBACT 2.25 GM VIAL	0000	7.35000	03/05/2015
PIPERACILLIN SODIUM/TAZOBACTAM 3.375 G VIAL	0000	3.34641	02/05/2025
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	0.19396	05/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PIROXICAM 20 MG CAP	0000	0.22941	06/05/2025
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
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 12/IRON/METHYLFOLATE/DHA 29-1-350MG CMPKTBCPDR	0000	0.14000	09/05/2018
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

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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.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.36/IRON/FA 13.5-0.4MG 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
PNV117/IRON/FA/OM3/DHA/EPA 25 MG-1 MG COMBO. PKG	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 23MG-0.8MG CAPSULE	0000	0.14000	07/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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**	**15.65803**	**07/05/2025**
POLYETHYLENE GLYCOL 3350 17 GM PWD BTL	0000	0.02322	06/05/2025
POLYETHYLENE GLYCOL 3350 17 GM PWD PKT	0000	1.29135	03/05/2025
POLYMYXIN B/TMP EYE DROPS	0000	0.43544	02/05/2025
POTASSIUM BICARBONATE/CIT AC 25MEQ TAB EFF	0000	0.37270	01/05/2025
POTASSIUM CHLORIDE 20 MEQ PK	0000	1.22169	09/05/2024
POTASSIUM CHLORIDE 8 MEQ CAP SA	0000	0.15547	05/05/2025
POTASSIUM CITRATE 15 MEQ TABLET ER	0000	0.26921	10/05/2024
POTASSIUM CITRATE ER 10 MEQ TAB	0000	0.21524	03/05/2025
POTASSIUM CL 10 MEQ CAP SA	0000	0.12913	11/05/2024
POTASSIUM CL 10 MEQ TAB SA	0000	0.13206	04/05/2025
POTASSIUM CL 10 MEQ TAB SA PRT	0000	0.14238	12/05/2024
POTASSIUM CL 10% LIQUID	0000	0.03937	06/05/2025
POTASSIUM CL 20 MEQ TAB SA	0000	0.18754	04/05/2025
POTASSIUM CL 20% LIQUID	0000	0.06220	11/05/2024
POTASSIUM CL 8 MEQ TAB SA	0000	0.13478	11/05/2024
PRAMIPEXOLE DI-HCL 0.125 MG TAB	0000	0.04538	03/05/2025
PRAMIPEXOLE DI-HCL 0.25 MG TAB	0000	0.04929	04/05/2025
PRAMIPEXOLE DI-HCL 0.5 MG TAB	0000	0.08643	08/05/2024
PRAMIPEXOLE DI-HCL 0.75 MG TAB	0000	0.08110	03/05/2025
PRAMIPEXOLE DI-HCL 1 MG TAB	0000	0.06971	05/05/2025
PRAMIPEXOLE DI-HCL 1.5 MG TAB	0000	0.07305	10/05/2024
PRAVASTATIN SODIUM 10 MG TAB	0000	0.06193	04/05/2025
PRAVASTATIN SODIUM 20 MG TAB	0000	0.06502	04/05/2025
PRAVASTATIN SODIUM 40 MG TAB	0000	0.08645	12/05/2024
PRAVASTATIN SODIUM 80 MG TAB	0000	0.15693	03/05/2025
PRAZOSIN 1 MG CAP	0000	0.10210	12/05/2024
PRAZOSIN 2 MG CAP	0000	0.08890	02/05/2025
PRAZOSIN HCL 5 MG CAP	0000	0.17272	01/05/2025
PREDNISOLONE 15 MG/5 ML SOLN	0000	0.12952	07/05/2024
PREDNISOLONE 15 MG/5 ML SYRP	0000	0.57931	12/05/2024
PREDNISOLONE 5 MG/5 ML SOLN	0000	0.52948	05/05/2025
PREDNISOLONE AC 1% EYE DROPS	0000	4.93025	03/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PREDNISOLONE SOD 1% DROPS	0000	4.19594	02/05/2025
PREDNISONE 1 MG TAB	0000	0.03996	12/05/2024
PREDNISONE 10 MG TAB	0000	0.05399	03/05/2025
PREDNISONE 10 MG TAB - UNIPAK	0000	0.49100	03/05/2025
PREDNISONE 2.5 MG TAB	**0000**	**0.08279**	**07/05/2025**
PREDNISONE 20 MG TAB	0000	0.08187	04/05/2025
PREDNISONE 5 MG TAB	0000	0.04738	11/05/2024
PREDNISONE 5 MG TAB - UNIPAK	0000	0.36834	03/05/2025
PREDNISONE 50 MG TAB	0000	0.19505	04/05/2025
PREGABALIN 100 MG CAP	0000	0.06095	03/05/2025
PREGABALIN 150 MG CAP	0000	0.06407	03/05/2025
PREGABALIN 165 MG TAB ER 24H	0000	4.10498	09/05/2024
PREGABALIN 200 MG CAP	0000	0.07849	06/05/2025
PREGABALIN 225 MG CAP	0000	0.06666	03/05/2025
PREGABALIN 25 MG CAP	0000	0.04529	01/05/2025
PREGABALIN 300 MG CAP	0000	0.09950	06/05/2025
PREGABALIN 330 MG TAB ER 24H	**0000**	**3.16011**	**07/05/2025**
PREGABALIN 50 MG CAP	0000	0.05101	01/05/2025
PREGABALIN 75 MG CAP	0000	0.06045	03/05/2025
PREGABALIN 82.5 MG TAB ER 24H	0000	7.54463	03/05/2025
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 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.52/IRON/FA/DHA 28-1-200MG CAPSULE	0000	0.14000	09/05/2012
PRENATAL NO.75/IRON/FOLATE #1 18 MG-1 MG TABLET	0000	0.14000	05/29/2015
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

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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.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
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	0.25368	04/05/2025
PRIMIDONE 50 MG TAB	0000	0.11793	08/05/2024
PROBENECID 500 MG TAB	0000	0.83245	09/05/2024
PROCHLORPERAZINE 10 MG TAB	0000	0.18855	01/05/2025
PROCHLORPERAZINE 25 MG SUPP	**0000**	**5.45425**	**07/05/2025**
PROCHLORPERAZINE 5 MG TAB	0000	0.16884	04/05/2025
PROGESTERONE OIL 50 MG/ML VL	0000	1.65973	04/05/2025
PROGESTERONE,MICRONIZED 100 MG CAP	0000	0.24029	03/05/2025
PROGESTERONE,MICRONIZED 200 MG CAP	0000	0.40063	03/05/2025
PROMETHAZINE 25 MG SUPP	**0000**	**2.26814**	**07/05/2025**
PROMETHAZINE 25 MG TAB	0000	0.04512	03/05/2025
PROMETHAZINE 25 MG/ML AMP	0000	1.91183	10/05/2024
PROMETHAZINE 25 MG/ML VIAL	0000	1.68982	07/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PROMETHAZINE 50 MG TAB	0000	0.07797	12/05/2024
PROMETHAZINE 6.25/5 ML SYRP	0000	0.03754	02/05/2025
PROMETHAZINE HCL 12.5 MG SUPP	0000	2.44237	04/05/2025
PROMETHAZINE HCL 12.5 MG TAB	0000	0.04576	03/05/2025
PROMETHAZINE HCL 50 MG/ML AMP	0000	3.19998	11/05/2024
PROMETHAZINE VC SYRP	0000	0.22293	06/05/2019
PROPAFENONE HCL 150 MG TAB	0000	0.16838	05/05/2025
PROPAFENONE HCL 225 MG TAB	0000	0.18341	10/05/2024
PROPAFENONE HCL 300 MG TAB	**0000**	**0.30909**	**07/05/2025**
PROPRANOLOL 10 MG TAB	0000	0.05590	09/05/2024
PROPRANOLOL 120 MG CAP SA	0000	0.26790	06/05/2024
PROPRANOLOL 160 MG CAP SA	0000	0.30932	08/05/2024
PROPRANOLOL 20 MG TAB	0000	0.06081	07/05/2024
PROPRANOLOL 40 MG TAB	0000	0.09427	07/05/2024
PROPRANOLOL 60 MG CAP SA	0000	0.19732	09/05/2024
PROPRANOLOL 60 MG TAB	0000	0.16774	04/05/2025
PROPRANOLOL 80 MG CAP SA	0000	0.21399	04/05/2025
PROPRANOLOL 80 MG TAB	0000	0.19503	07/05/2024
PROPYLTHIOURACIL 50 MG TAB	0000	0.30653	10/05/2024
PROTRIPTYLINE HCL 10 MG TAB	0000	2.11446	07/05/2024
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	0.24367	01/05/2025
PYRIDOSTIGMINE BROMIDE 180 MG TAB ER	0000	4.69348	06/05/2025
QUETIAPINE FUMARATE 100 MG TAB	0000	0.05618	04/05/2025
QUETIAPINE FUMARATE 200 MG TAB	0000	0.09977	03/05/2025
QUETIAPINE FUMARATE 25 MG TAB	0000	0.03295	06/05/2025
QUETIAPINE FUMARATE 300 MG TAB	0000	0.14588	03/05/2025
QUETIAPINE FUMARATE 400 MG TAB	0000	0.18466	06/05/2025
QUETIAPINE FUMARATE 50 MG TAB	0000	0.04106	04/05/2025
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	0.70774	12/05/2024
RABEPRAZOLE SODIUM 20 MG TABLET DR	0000	0.24972	04/05/2025
RALOXIFENE HCL 60 MG TAB	0000	0.35871	11/05/2024
RAMIPRIL 1.25 MG CAP	0000	0.09658	09/05/2024
RAMIPRIL 10 MG CAP	0000	0.07050	03/05/2025
RAMIPRIL 2.5 MG CAP	0000	0.05368	02/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
RAMIPRIL 5 MG CAP	**0000**	**0.04623**	**07/05/2025**
REPREXAIN 10-200 MG TAB	0000	2.91363	12/05/2024
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	0.77707	03/05/2025
RIFAMPIN 300 MG CAP	0000	0.70363	03/05/2025
RILUZOLE 50 MG TAB	0000	0.31289	09/05/2024
RISEDRONATE SODIUM 150 MG TABLET	0000	18.12989	06/05/2025
RISPERIDONE 0.25MG TAB	0000	0.04006	05/05/2025
RISPERIDONE 0.5 MG TAB ODT	0000	0.71047	03/05/2025
RISPERIDONE 0.5MG TAB	0000	0.04155	10/05/2024
RISPERIDONE 1 MG TAB RAPDIS	0000	0.85484	12/05/2024
RISPERIDONE 1MG TAB	0000	0.04594	04/05/2025
RISPERIDONE 1MG/ML SOLN	0000	0.59108	03/05/2025
RISPERIDONE 2 MG TAB ODT	0000	1.25959	06/05/2025
RISPERIDONE 2MG TAB	0000	0.05223	10/05/2024
RISPERIDONE 3 MG TAB RAPDIS	0000	1.31724	09/05/2024
RISPERIDONE 3MG TAB	0000	0.06528	07/05/2024
RISPERIDONE 4MG TAB	0000	0.09441	07/05/2024
RISPERIDONE M-TAB 4 MG ODT	0000	2.75686	09/05/2024
RIVASTIGMINE TARTRATE 1.5 MG CAP	0000	0.17120	11/05/2024
RIVASTIGMINE TARTRATE 3 MG CAP	**0000**	**0.18793**	**07/05/2025**
RIVASTIGMINE TARTRATE 4.5 MG CAP	0000	0.23125	06/05/2025
RIVASTIGMINE TARTRATE 6 MG CAP	0000	0.21459	10/05/2024
RIZATRIPTAN BENZOATE 10 MG TAB	0000	0.41788	05/05/2025
RIZATRIPTAN BENZOATE 10 MG TAB RAPDIS	0000	0.55777	04/05/2025
RIZATRIPTAN BENZOATE 5 MG TAB	0000	0.37775	12/05/2024
RIZATRIPTAN BENZOATE 5 MG TAB RAPDIS	0000	0.60135	03/05/2025
ROPINIROLE HCL 0.25 MG TAB	0000	0.03864	12/05/2024
ROPINIROLE HCL 0.5 MG TAB	0000	0.06538	11/05/2024
ROPINIROLE HCL 1 MG TAB	0000	0.05558	12/05/2024
ROPINIROLE HCL 12 MG TAB ER 24H	0000	2.71149	12/05/2024
ROPINIROLE HCL 2 MG TAB	0000	0.08462	05/05/2024
ROPINIROLE HCL 2 MG TAB ER 24H	0000	0.46092	01/05/2025
ROPINIROLE HCL 3 MG TAB	0000	0.07271	03/05/2025
ROPINIROLE HCL 4 MG TAB	0000	0.08409	12/05/2024
ROPINIROLE HCL 4 MG TAB ER 24H	0000	0.82032	04/05/2025
ROPINIROLE HCL 5 MG TAB	0000	0.08354	06/05/2025
ROPINIROLE HCL 6 MG TAB ER 24H	0000	1.30253	05/05/2025
ROPINIROLE HCL 8 MG TAB ER 24H	0000	1.80183	12/05/2024
ROSUVASTATIN CALCIUM 10 MG TAB	**0000**	**0.04732**	**07/05/2025**
ROSUVASTATIN CALCIUM 20 MG TAB	0000	0.05457	12/05/2024
ROSUVASTATIN CALCIUM 40 MG TAB	0000	0.07740	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ROSUVASTATIN CALCIUM 5 MG TAB	0000	0.04650	06/05/2025
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	0.64827	09/05/2024
SELEGILINE HCL 5 MG TAB	0000	0.84849	10/05/2024
SERTRALINE 20 MG/ML ORAL CONC	0000	0.49116	04/05/2025
SERTRALINE HCL 100 MG TAB	0000	0.05282	04/05/2025
SERTRALINE HCL 25 MG TAB	0000	0.03185	12/05/2024
SERTRALINE HCL 50 MG TAB	0000	0.03253	08/05/2024
SILDENAFIL 10 MG/ML ORAL SUSP	**0000**	**11.16817**	**07/05/2025**
SILDENAFIL CITRATE 20 MG TAB	0000	0.07525	04/05/2025
SILVER SULFADIAZINE 1% CRM	0000	0.15286	09/05/2024
SIMVASTATIN 10 MG TAB	0000	0.02517	12/05/2024
SIMVASTATIN 20 MG TAB	0000	0.03779	11/05/2024
SIMVASTATIN 40 MG TAB	0000	0.04755	12/05/2024
SIMVASTATIN 5 MG TAB	0000	0.03540	10/05/2024
SIMVASTATIN 80 MG TAB	0000	0.09386	04/05/2025
SODIUM BICARBONATE 650 MG TAB	0000	0.01369	06/05/2025
SODIUM CHLORIDE 0.9% IRRIG	0000	0.00264	11/05/2015
SODIUM CHLORIDE 0.9% SOLN	0000	0.00319	11/05/2015
SODIUM CHLORIDE 0.9% SOLN	1000	0.00457	11/05/2024
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	0.07823	10/05/2024
SODIUM FLUORIDE 0.25MG TAB CHEW	0000	0.06809	07/05/2024
SODIUM FLUORIDE 0.5 MG/ML DROPS	0000	0.24344	06/05/2024
SODIUM FLUORIDE 0.5MG TAB CHEW	0000	0.06918	07/05/2024
SODIUM FLUORIDE 1.1 % CRM	**0000**	**0.07329**	**07/05/2025**
SODIUM FLUORIDE 1MG TAB CHEW	0000	0.07500	07/05/2024
SODIUM POLYSTYRENE SULF PWDR	0000	0.12738	06/05/2025
SOTALOL HCL 120 MG TAB	0000	0.09295	04/05/2025
SOTALOL HCL 160 MG TAB	0000	0.13269	11/05/2024
SOTALOL HCL 80 MG TAB	0000	0.07571	04/05/2025
SPIRONOLACT/HCTZ 25/25 MG TAB	0000	0.51698	03/05/2025
SPIRONOLACTONE 100 MG TAB	0000	0.18716	03/05/2025
SPIRONOLACTONE 25 MG TAB	0000	0.06240	08/05/2024
SPIRONOLACTONE 50 MG TAB	0000	0.10624	06/05/2025
STAVUDINE 40 MG CAP	0000	0.91474	09/05/2015
SUCRALFATE 1 GM TAB	0000	0.17088	12/05/2024
SULFACETAMIDE 10% EYE DROPS	0000	1.75155	12/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
SULFACETAMIDE SODIUM/SULFUR 10 %-5 % MED. PAD	0000	7.66120	07/17/2015
SULFACETAMIDE/PREDNISOLONE SP 10%-0.23% EYE DROPS	0000	2.47128	12/05/2024
SULFAMETHOXAZOLE/TMP DS TAB	0000	0.05936	06/05/2024
SULFAMETHOXAZOLE/TMP SS TAB	0000	0.04619	07/05/2024
SULFAMETHOXAZOLE/TMP SUSP	0000	0.05664	03/05/2025
SULFASALAZINE 500 MG TAB	0000	0.18715	09/05/2024
SULFASALAZINE DR 500 MG TAB	0000	0.18389	09/05/2024
SULINDAC 150 MG TAB	0000	0.15664	11/05/2024
SULINDAC 200 MG TAB	0000	0.23251	05/05/2025
SUMATRIPTAN 20 MG NASAL SPRY	**0000**	**18.68325**	**07/05/2025**
SUMATRIPTAN 4 MG/0.5 ML KIT	0000	133.27462	10/05/2024
SUMATRIPTAN 5 MG NASAL SPRAY	**0000**	**24.24781**	**07/05/2025**
SUMATRIPTAN SUCC 100 MG TAB	0000	0.43276	08/05/2024
SUMATRIPTAN SUCC 25 MG TAB	0000	0.38009	10/05/2024
SUMATRIPTAN SUCC 50 MG TAB	0000	0.39085	06/05/2025
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**	**72.23756**	**07/05/2025**
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML VIAL	0000	15.84645	06/05/2025
TACROLIMUS 0.03 % OINT. (G)	0000	0.73526	08/05/2024
TACROLIMUS 0.1 % OINT. (G)	0000	0.87622	05/05/2025
TACROLIMUS 0.5 MG CAP	0000	0.14277	03/05/2025
TACROLIMUS 1 MG CAP	0000	0.18505	06/05/2025
TAMOXIFEN 10 MG TAB	**0000**	**0.19769**	**07/05/2025**
TAMOXIFEN 20 MG TAB	**0000**	**0.34853**	**07/05/2025**
TAMSULOSIN HCL 0.4 MG CAP SR 24H	0000	0.05530	08/05/2024
TELMISARTAN 20 MG TAB	0000	0.12560	12/05/2024
TELMISARTAN 40 MG TAB	0000	0.21833	06/05/2025
TELMISARTAN 80 MG TAB	**0000**	**0.15475**	**07/05/2025**
TELMISARTAN/HCTZ 40 MG-12.5 MG TAB	0000	0.51861	04/05/2025
TELMISARTAN/HCTZ 80 MG-12.5 MG TAB	0000	0.59417	08/05/2024
TELMISARTAN/HCTZ 80 MG-25 MG TAB	0000	0.58951	04/05/2025
TEMAZEPAM 15 MG CAP	0000	0.06986	03/05/2025
TEMAZEPAM 22.5 MG CAP	0000	1.95670	05/05/2025
TEMAZEPAM 30 MG CAP	0000	0.09652	10/05/2024
TEMAZEPAM 7.5 MG CAP	0000	0.99375	03/05/2025
TEMOZOLOMIDE 100 MG CAPSULE	**0000**	**11.62865**	**07/05/2025**
TERAZOSIN 1 MG CAP	0000	0.13533	08/05/2024
TERAZOSIN 10 MG CAP	0000	0.16247	12/05/2024
TERAZOSIN 2 MG CAP	0000	0.14377	08/05/2024
TERAZOSIN 5 MG CAP	0000	0.14425	10/05/2024
TERBINAFINE HCL 250 MG TAB	0000	0.12617	05/05/2024
TERBUTALINE SULFATE 2.5 MG TAB	0000	1.12744	06/05/2025
TERBUTALINE SULFATE 5 MG TAB	0000	1.23173	05/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TERCONAZOLE 0.4% CRM	**0000**	**0.59923**	**07/05/2025**
TERCONAZOLE 0.8% VAG CRM	0000	1.20770	05/05/2025
TERCONAZOLE 80 MG VAG SUPP	0000	19.66476	06/05/2025
TESTOSTERONE 20.25/1.25 GEL MD PMP	0000	0.43299	01/05/2025
TESTOSTERONE 50 MG/5 GRAM (1 %) UD TUBE	0000	0.82618	03/05/2025
TESTOSTERONE CYP 200 MG/ML VIAL	0010	6.65850	04/24/2016
TESTOSTERONE ENAN 200 MG/ML VIAL	**0000**	**13.50604**	**07/05/2025**
TETRACYCLINE 250 MG CAP	0000	0.57843	06/05/2025
TETRACYCLINE 500 MG CAP	0000	0.66284	02/05/2025
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	0.50591	02/05/2025
THEOPHYLLINE ER 400 MG TAB	0000	0.79093	09/05/2024
THIORIDAZINE 10 MG TAB	0000	0.46500	12/05/2014
THIORIDAZINE 100 MG TAB	0000	0.78143	03/05/2017
THIORIDAZINE 25 MG TAB	0000	0.57916	05/05/2025
THIORIDAZINE 50 MG TAB	**0000**	**0.69461**	**07/05/2025**
THIOTHIXENE 1 MG CAP	0000	0.66053	10/05/2024
THIOTHIXENE 10 MG CAP	0000	2.21928	04/05/2025
THIOTHIXENE 2 MG CAP	0000	0.94381	06/05/2024
THIOTHIXENE 5 MG CAP	0000	1.62031	07/05/2024
TIMOLOL 0.25% EYE DROPS	0000	0.61677	05/05/2024
TIMOLOL 0.25% GEL /SOLN	0000	18.35063	06/05/2025
TIMOLOL 0.5% GEL /SOLN	0000	14.55030	06/05/2025
TIMOLOL MALEATE 0.5% EYE DROPS	0000	1.01161	08/05/2024
TINIDAZOLE 500 MG TAB	0000	2.22514	12/05/2024
TIZANIDINE HCL 2 MG CAP	0000	0.09350	05/05/2025
TIZANIDINE HCL 2 MG TAB	0000	0.04199	05/05/2024
TIZANIDINE HCL 4 MG CAP	0000	0.14451	10/05/2024
TIZANIDINE HCL 4 MG TAB	0000	0.03874	12/05/2024
TIZANIDINE HCL 6 MG CAP	0000	0.19312	11/05/2024
TOBRAMYCIN 0.3% OPHTH SOLN	0000	0.90968	12/05/2024
TOBRAMYCIN IN 0.225% NACL 300 MG/5ML AMPUL-NEB	**0000**	**1.76032**	**07/05/2025**
TOBRAMYCIN SULFATE 1.2 G VIAL	0000	81.54250	01/18/2019
TOLTERODINE TARTRATE 1 MG TAB	0000	0.24599	04/05/2025
TOLTERODINE TARTRATE 2 MG CAP ER 24H	0000	0.32993	12/05/2024
TOLTERODINE TARTRATE 2 MG TAB	0000	0.25928	07/05/2024
TOLTERODINE TARTRATE 4 MG CAP ER 24H	0000	0.31729	12/05/2024
TOPIRAMATE 100 MG TAB	0000	0.08010	06/05/2024
TOPIRAMATE 15 MG SPRINKLE CAP	0000	0.31855	12/05/2024
TOPIRAMATE 200 MG TAB	**0000**	**0.09787**	**07/05/2025**
TOPIRAMATE 25 MG SPRINKLE CAP	0000	0.53555	11/05/2024
TOPIRAMATE 25 MG TAB	0000	0.02466	08/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TOPIRAMATE 50 MG TAB	0000	0.06686	11/05/2024
TORSEMIDE 10 MG TAB	0000	0.08830	06/05/2025
TORSEMIDE 100 MG TAB	0000	0.20949	03/05/2025
TORSEMIDE 20 MG TAB	0000	0.07427	12/05/2024
TORSEMIDE 5 MG TAB	0000	0.08221	11/05/2024
TRAMADOL HCL 100 MG TBMP 24HR	0000	1.41567	07/05/2020
TRAMADOL HCL 200 MG TAB.SR 24H	0000	1.64914	12/05/2024
TRAMADOL HCL 300 MG TBMP 24HR	0000	3.69250	08/05/2020
TRAMADOL HCL 50 MG TAB	0000	0.02815	11/05/2024
TRAMADOL HCL ER 100 MG TAB	0000	0.94522	05/05/2024
TRAMADOL HCL ER 300 MG TAB	0000	2.20274	12/05/2024
TRAMADOL/APAP 37.5/325 MG TAB	0000	0.10752	03/05/2025
TRANDOLAPRIL 1 MG TAB	0000	0.15401	03/05/2025
TRANDOLAPRIL 2 MG TAB	**0000**	**0.18506**	**07/05/2025**
TRANDOLAPRIL 4 MG TAB	0000	0.15177	12/05/2024
TRANEXAMIC ACID 650 MG TABLET	0000	1.08892	01/05/2025
TRANYLCYPROMINE SULFATE 10 MG TAB	0000	0.66976	12/05/2024
TRAZODONE 100 MG TAB	0000	0.05544	12/05/2024
TRAZODONE 150 MG TAB	0000	0.10535	06/05/2025
TRAZODONE 300 MG TAB	0000	0.92356	03/05/2025
TRAZODONE 50 MG TAB	0000	0.04218	06/05/2025
TRETINOIN 0.01% GEL	0000	3.78912	05/05/2019
TRETINOIN 0.025% CRM	0000	1.39078	11/05/2023
TRETINOIN 0.025% GEL	0000	3.40652	01/05/2020
TRETINOIN 0.05% CRM	0000	2.04962	07/05/2022
TRETINOIN 0.1% CRM	0000	1.44845	04/05/2025
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	0.03367	07/05/2024
TRIAMCINOLONE 0.025% CRM	0080	0.05944	03/05/2025
TRIAMCINOLONE 0.025% CRM	0015	0.11566	12/05/2024
TRIAMCINOLONE 0.025% LOT	0000	0.41915	04/05/2025
TRIAMCINOLONE 0.025% OINT	0080	0.08434	06/05/2025
TRIAMCINOLONE 0.025% OINT	0000	0.15922	12/05/2024
TRIAMCINOLONE 0.1% CRM	0000	0.06770	12/05/2024
TRIAMCINOLONE 0.1% LOT	0000	0.29487	07/05/2024
TRIAMCINOLONE 0.1% OINT	0000	0.08611	06/05/2025
TRIAMCINOLONE 0.1% PASTE	0000	3.30498	04/05/2025
TRIAMCINOLONE 0.5% CRM	0000	0.30095	06/05/2025
TRIAMCINOLONE 0.5% OINT	0000	0.31259	02/05/2025
TRIAMTERENE/HCTZ 37.5/25 MG CAP	0000	0.11814	04/05/2025

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TRIAMTERENE/HCTZ 37.5/25 MG TAB	0000	0.09475	04/05/2025
TRIAMTERENE/HCTZ 75/50 MG TAB	0000	0.12017	10/05/2024
TRIAZOLAM 0.125 MG TAB	0000	0.34351	05/05/2025
TRIAZOLAM 0.25 MG TAB	0000	0.31906	03/05/2025
TRIFLUOPERAZINE 10 MG TAB	0000	1.44808	06/05/2024
TRIFLUOPERAZINE 2 MG TAB	**0000**	**0.94139**	**07/05/2025**
TRIFLUOPERAZINE 5 MG TAB	0000	0.78959	08/05/2024
TRIFLURIDINE 1% EYE DROPS	0000	21.29562	06/05/2025
TRIHEXYPHENIDYL 2 MG TAB	0000	0.08462	03/05/2025
TRIHEXYPHENIDYL 5 MG TAB	0000	0.15185	08/05/2024
TRIMETHOBENZAMIDE 300 MG CAP	0000	1.21159	03/05/2020
TRIMETHOPRIM 100 MG TAB	0000	1.25907	12/05/2024
TROSPIUM CHLORIDE 20 MG TAB	0000	0.33071	05/05/2025
TROSPIUM CHLORIDE 60 MG CAP ER 24H	0000	1.75669	12/05/2024
URSODIOL 250 MG TAB	0000	0.37048	03/05/2025
URSODIOL 300 MG CAP	0000	0.49561	06/05/2025
URSODIOL 500 MG TAB	0000	0.68553	09/05/2024
VALACYCLOVIR HCL 1,000 MG TAB	0000	0.41289	08/05/2024
VALACYCLOVIR HCL 500 MG TAB	0000	0.23466	08/05/2024
VALGANCICLOVIR HYDROCHLORIDE 450 MG TAB	0000	2.32281	03/05/2025
VALPROIC ACID 250 MG CAP	**0000**	**0.22607**	**07/05/2025**
VALPROIC ACID 250 MG/5 ML SYRP	0000	0.03276	11/05/2024
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	1.30273	03/05/2025
VANCOMYCIN HCL 250 MG CAPSULE	0000	1.82514	10/05/2024
VENLAFAXINE HCL 100 MG TAB	0000	0.09955	03/05/2025
VENLAFAXINE HCL 150 MG CAP ER 24H	0000	0.11384	08/05/2024
VENLAFAXINE HCL 150 MG TAB ER 24	0000	0.23511	03/05/2025
VENLAFAXINE HCL 25 MG TAB	0000	0.06927	10/05/2024
VENLAFAXINE HCL 37.5 MG CAP ER 24H	0000	0.09078	05/05/2025
VENLAFAXINE HCL 37.5 MG TAB	0000	0.07465	08/05/2024
VENLAFAXINE HCL 37.5 MG TAB ER 24	**0000**	**0.61037**	**07/05/2025**
VENLAFAXINE HCL 50 MG TAB	0000	0.07929	11/05/2024
VENLAFAXINE HCL 75 MG CAP ER 24H	0000	0.09563	04/05/2025
VENLAFAXINE HCL 75 MG TAB	0000	0.07781	04/05/2025
VENLAFAXINE HCL 75 MG TAB ER 24	**0000**	**0.74627**	**07/05/2025**
VERAPAMIL 120 MG CAP PELLET	0000	0.92992	01/05/2025
VERAPAMIL 120 MG TAB	0000	0.07361	04/05/2025
VERAPAMIL 120 MG TAB SA	0000	0.23200	09/05/2024
VERAPAMIL 180 MG CAP PELLET	0000	1.05167	08/05/2024

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

Updates Effective July 5, 2025

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
VERAPAMIL 180 MG TAB SA	0000	0.23999	06/05/2025
VERAPAMIL 240 MG CAP PELLET	0000	1.28673	12/05/2024
VERAPAMIL 240 MG TAB SA	**0000**	**0.16728**	**07/05/2025**
VERAPAMIL 360 MG CAP PELLET	0000	3.92519	12/05/2024
VERAPAMIL 40 MG TAB	0000	0.10603	08/05/2024
VERAPAMIL 80 MG TAB	0000	0.04955	12/05/2024
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	0.11721	03/05/2025
VORICONAZOLE 200 MG TAB	0000	1.58551	11/05/2024
VORICONAZOLE 200 MG VIAL	0000	47.61951	06/05/2025
WARFARIN SODIUM 1 MG TAB	0000	0.09429	07/05/2024
WARFARIN SODIUM 10 MG TAB	0000	0.11654	05/05/2025
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	0.09265	02/05/2025
WARFARIN SODIUM 4 MG TAB	**0000**	**0.08321**	**07/05/2025**
WARFARIN SODIUM 5 MG TAB	0000	0.08493	08/05/2024
WARFARIN SODIUM 6 MG TAB	0000	0.11444	01/05/2025
WARFARIN SODIUM 7.5 MG TAB	0000	0.09886	01/05/2025
WATER FOR INJECTION VIAL	**0000**	**0.07262**	**07/05/2025**
ZAFIRLUKAST 10 MG TAB	**0000**	**0.64680**	**07/05/2025**
ZAFIRLUKAST 20 MG TAB	0000	0.61629	03/05/2025
ZALEPLON 10 MG CAP	0000	0.18430	04/05/2025
ZALEPLON 5 MG CAP	0000	0.15880	04/05/2025
ZIDOVUDINE 100 MG CAP	0000	1.11600	12/05/2014
ZIDOVUDINE 300 MG TAB	0000	0.45831	07/05/2024
ZIPRASIDONE HCL 20 MG CAP	0000	0.23433	12/05/2024
ZIPRASIDONE HCL 40 MG CAP	0000	0.31434	08/05/2024
ZIPRASIDONE HCL 60 MG CAP	0000	0.31922	03/05/2025
ZIPRASIDONE HCL 80 MG CAP	0000	0.38391	10/05/2024
ZOLMITRIPTAN 2.5 MG TAB	0000	1.28796	05/05/2025
ZOLMITRIPTAN 5 MG TAB	**0000**	**1.77654**	**07/05/2025**
ZOLMITRIPTAN 5 MG TAB RAPDIS	0000	3.17027	06/05/2025
ZOLPIDEM TART ER 12.5 MG TAB	0000	0.11967	03/05/2025
ZOLPIDEM TARTRATE 10 MG TAB	0000	0.03155	08/05/2024
ZOLPIDEM TARTRATE 5 MG TAB	0000	0.02599	12/05/2024
ZOLPIDEM TARTRATE 6.25 MG ER TAB	0000	0.14200	03/05/2025
ZONISAMIDE 100 MG CAP	0000	0.11217	03/05/2025
ZONISAMIDE 25 MG CAP	0000	0.07363	09/05/2024
ZONISAMIDE 50 MG CAP	0000	0.09237	03/05/2025