

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ABACAVIR SULFATE 300 MG TAB	0000	0.65170	04/05/2023
ACAMPROSATE CALCIUM 333 MG TAB DR	0000	0.51110	10/05/2022
ACARBOSE 100 MG TAB	0000	0.31309	03/05/2023
ACARBOSE 25 MG TAB	0000	0.15864	04/05/2023
ACARBOSE 50 MG TAB	0000	0.20423	07/05/2022
ACEBUTOLOL 200 MG CAP	0000	0.58563	03/05/2023
ACEBUTOLOL 400 MG CAP	0000	0.74763	10/05/2020
ACETAMINOPHEN WITH CODEINE 120-12MG/5 SOLUTION	0000	0.01535	05/05/2022
ACETAMINOPHEN/COD 300/15 MG TAB	0000	0.17983	02/05/2023
ACETAMINOPHEN/COD 300/30 MG TAB	0000	0.16293	02/05/2023
ACETAMINOPHEN/COD 300/60 MG TAB	0000	0.40968	05/05/2023
ACETAZOLAMIDE 250 MG TAB	0000	0.24750	05/05/2023
ACETAZOLAMIDE 500 MG CAP	0000	0.40301	05/05/2022
ACETIC ACID 0.25% IRRIG SOLN	0000	0.00460	03/05/2015
ACETIC ACID 2 % SOLN	0000	1.58324	12/05/2022
ACETIC ACID/HYDROCORTISONE 2 %-1 % DROPS	0000	6.54197	02/05/2023
ACETYLCYSTEINE 10% VIAL	0000	0.84806	05/05/2022
ACETYLCYSTEINE 20% VIAL	0000	0.38187	07/05/2021
ACITRETIN 10 MG CAPSULE	0000	7.61092	05/05/2023
ACITRETIN 25 MG CAP	0000	7.26615	04/05/2023
ACYCLOVIR 200 MG CAP	0000	0.09946	09/05/2022
ACYCLOVIR 200 MG/5 ML SUSP	0000	0.15454	01/05/2023
ACYCLOVIR 400 MG TAB	0000	0.10524	02/05/2023
ACYCLOVIR 5 % OINT. (G)	0000	0.68269	05/05/2023
ACYCLOVIR 800 MG TAB	0000	0.19958	02/05/2023
ALBUTEROL 0.83 MG/ML SOLN	0000	0.05807	05/05/2023
ALBUTEROL 2.5 MG/0.5 ML SOL	0000	0.41258	12/05/2022
ALBUTEROL 5 MG/ML SOLN	0000	2.12250	09/05/2019
ALBUTEROL SUL 1.25 MG/3 ML SOLN	0000	0.32014	10/05/2022
ALBUTEROL SULF 2 MG/5 ML SYRP	0000	0.04490	12/05/2022
ALBUTEROL SULFATE 0.63MG/3ML VIAL-NEB	0000	0.24300	12/05/2022
ALBUTEROL SULFATE 2 MG TAB	0000	0.32869	02/05/2023
ALBUTEROL SULFATE 4 MG TAB	0000	0.31264	03/05/2023
ALBUTEROL SULFATE ER 4 MG TAB	0000	1.49416	09/05/2017
ALCLOMETASONE DIP 0.05% CRM	0000	0.85189	03/05/2023
ALCLOMETASONE DIP 0.05% OINT	0000	0.83809	01/05/2023
ALENDRONATE SODIUM 10 MG TAB	0000	0.12052	04/05/2023
ALENDRONATE SODIUM 35 MG TAB	0000	0.36047	01/05/2023
ALENDRONATE SODIUM 5 MG TAB	0000	0.18514	04/05/2019
ALENDRONATE SODIUM 70 MG TAB	0000	0.28525	07/05/2022
ALFUZOSIN HCL 10 MG TAB ER 24H	0000	0.12660	09/05/2022
ALLOPURINOL 100 MG TAB	0000	0.06670	12/05/2022
ALLOPURINOL 300 MG TAB	0000	0.10226	05/05/2022
ALMOTRIPTAN MALATE 12.5 MG TAB	0000	18.59573	05/05/2023
ALOSETRON HCL 1 MG TAB	0000	6.20242	11/05/2022

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ALPRAZOLAM 0.25 MG TAB	0000	0.02169	04/05/2023
ALPRAZOLAM 0.5 MG ODT	0000	1.63999	06/05/2020
ALPRAZOLAM 0.5 MG TAB	0000	0.02184	01/05/2023
ALPRAZOLAM 1 MG ODT	0000	2.58435	08/05/2015
ALPRAZOLAM 1 MG TAB	0000	0.02429	05/05/2023
ALPRAZOLAM 2 MG TAB	0000	0.05870	01/05/2023
ALPRAZOLAM XR 0.5 MG TAB	0000	0.13923	10/05/2022
ALPRAZOLAM XR 1 MG TAB	0000	0.17042	06/05/2022
ALPRAZOLAM XR 2 MG TAB	0000	0.29247	05/05/2023
ALPRAZOLAM XR 3 MG TAB	0000	0.19675	03/05/2023
AMANTADINE 100 MG CAP	0000	0.20272	05/05/2023
AMANTADINE 100 MG TAB	0000	0.70109	11/05/2022
AMANTADINE 50 MG/5 ML SYRP	0000	0.01842	10/05/2022
AMILORIDE HCL 5 MG TAB	0000	0.14732	12/05/2022
AMILORIDE HCL/HCTZ 5/50 MG TAB	0000	0.36688	08/05/2022
AMIODARONE HCL 100 MG TAB	0000	0.91793	12/05/2022
AMIODARONE HCL 200 MG TAB	0000	0.13117	01/05/2023
AMIODARONE HCL 400 MG TAB	0000	0.75995	04/05/2023
AMITRIPTYLINE HCL 10 MG TAB	0000	0.08839	05/05/2022
AMITRIPTYLINE HCL 100 MG TAB	0000	0.30196	11/05/2022
AMITRIPTYLINE HCL 150 MG TAB	0000	0.35989	04/05/2023
AMITRIPTYLINE HCL 25 MG TAB	0000	0.07143	12/05/2022
AMITRIPTYLINE HCL 50 MG TAB	0000	0.13650	02/05/2023
AMITRIPTYLINE HCL 75 MG TAB	0000	0.19684	07/05/2022
AMLODIPINE BESYLATE 10 MG TAB	0000	0.01733	05/05/2022
AMLODIPINE BESYLATE 2.5 MG TAB	0000	0.01599	03/05/2023
AMLODIPINE BESYLATE 5 MG TAB	0000	0.01170	12/05/2022
AMLODIPINE-ATORVAST 5-40 MG TAB	0000	2.37787	03/05/2023
AMLODIPINE-BENAZEPRIL 10-40 MG CAP	0000	0.16424	05/05/2022
AMLODIPINE-BENAZEPRIL 10/20 MG CAP	0000	0.14951	12/05/2022
AMLODIPINE-BENAZEPRIL 2.5/10 MG CAP	0000	0.14868	04/05/2023
AMLODIPINE-BENAZEPRIL 5-40 MG CAP	0000	0.16434	03/05/2023
AMLODIPINE-BENAZEPRIL 5/10 MG CAP	0000	0.13560	02/05/2022
AMLODIPINE-BENAZEPRIL 5/20 MG CAP	0000	0.13926	02/05/2023
AMLODIPINE/ATORVASTATIN 10 MG-10 MG TAB	0000	1.47104	04/05/2023
AMLODIPINE/ATORVASTATIN 10 MG-20 MG TAB	0000	1.80115	04/05/2023
AMLODIPINE/ATORVASTATIN 10 MG-40 MG TAB	0000	1.65879	05/05/2023
AMLODIPINE/ATORVASTATIN 5 MG-10 MG TAB	0000	1.61076	05/05/2023
AMLODIPINE/ATORVASTATIN 5 MG-20 MG TAB	0000	1.74337	04/05/2023
AMMONIUM LACTATE 12% CRM	0000	0.07053	01/05/2023
AMMONIUM LACTATE 12% LOT	0000	0.07405	04/05/2022
AMOX TR-K CLV 200-28.5 MG/5ML SUSP	0000	0.06657	03/05/2023
AMOX TR-K CLV 200-28.5 TAB CHW	0000	2.32040	03/05/2015
AMOX TR-K CLV 250-125 MG TAB	0000	1.48393	05/05/2023
AMOX TR-K CLV 250-62.5/5 SUSP	0000	0.52126	04/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AMOX TR-K CLV 400-57 MG TAB CHEW	0000	2.42849	03/05/2023
AMOX TR-K CLV 400-57 MG/5 ML SUSP	0000	0.10109	05/05/2022
AMOX TR-K CLV 500-125 MG TAB	0000	0.30617	01/05/2023
AMOX TR-K CLV 600-42.9 MG/5 ML SUSP	0000	0.09276	02/05/2022
AMOX TR-K CLV 875-125 MG TAB	0000	0.29480	11/05/2022
AMOXICILLIN 125 MG/5 ML SUSP	0000	0.02287	05/05/2022
AMOXICILLIN 200 MG/5 ML SUSP	0000	0.03163	09/05/2022
AMOXICILLIN 250 MG CAP	0000	0.05780	07/05/2022
AMOXICILLIN 250 MG TAB CHEW	0000	0.26101	01/05/2022
AMOXICILLIN 250 MG/5 ML SUSP	0000	0.02409	08/05/2022
AMOXICILLIN 400 MG/5 ML SUSP	0000	0.02700	12/05/2022
AMOXICILLIN 500 MG CAP	0000	0.07918	05/05/2023
AMOXICILLIN 875 MG TAB	0000	0.14011	09/05/2022
AMOXICILLIN-CLAV ER 1,000-62.5 TAB	0000	6.07911	04/05/2023
AMPHETAMINE SALTS 10 MG TAB	0000	0.74672	08/05/2022
AMPHETAMINE SALTS 12.5 MG TAB	0000	0.59461	02/05/2023
AMPHETAMINE SALTS 15 MG TAB	0000	0.33556	03/05/2023
AMPHETAMINE SALTS 20 MG TAB	0000	0.78260	09/05/2022
AMPHETAMINE SALTS 30 MG TAB	0000	0.84947	01/05/2023
AMPHETAMINE SALTS 5 MG TAB	0000	0.27795	05/05/2023
AMPHETAMINE SALTS 7.5 MG TAB	0000	0.36218	04/05/2023
AMPHETAMINE SULFATE 10 MG TAB	0000	1.10901	04/05/2023
AMPHETAMINE SULFATE 5 MG TAB	0000	5.15545	02/05/2020
AMPICILLIN TR 250 MG CAP	0000	0.11462	08/05/2017
AMPICILLIN TR 500 MG CAP	0000	0.45847	02/05/2023
AMPICILLIN-SULBACTAM 3 GM VIAL	0000	5.62800	03/05/2015
ANAGRELIDE HCL 0.5 MG CAP	0000	0.74793	03/05/2022
ANAGRELIDE HCL 1 MG CAP	0000	1.72712	02/05/2017
ANASTROZOLE 1 MG TAB	0000	0.10406	08/05/2022
APAP-BUTALBITAL 325/50 MG TAB	0000	0.98344	05/05/2023
ASA/BUTALB/CAFF/COD 325/50/40/30 MG CAP	0000	1.21648	12/05/2022
ASPIRIN 81 MG TAB CHEW	0000	0.02696	04/05/2022
ASPIRIN 81 MG TAB DR	0000	0.01472	10/05/2022
ATENOLOL 100 MG TAB	0000	0.04570	07/05/2022
ATENOLOL 25 MG TAB	0000	0.02760	08/05/2022
ATENOLOL 50 MG TAB	0000	0.03133	05/05/2022
ATENOLOL/CHLORTHALIDONE 100/25 MG TAB	0000	0.49842	05/05/2023
ATENOLOL/CHLORTHALIDONE 50/25 MG TAB	0000	0.45055	05/05/2023
ATORVASTATIN CALCIUM 10 MG TAB	0000	0.04235	05/05/2023
ATORVASTATIN CALCIUM 20 MG TAB	0000	0.05947	12/05/2022
ATORVASTATIN CALCIUM 40 MG TAB	0000	0.09415	08/05/2022
ATORVASTATIN CALCIUM 80 MG TAB	0000	0.10188	05/05/2023
ATOVAQUONE 750 MG/5ML ORAL SUSP	0000	1.06626	10/05/2022
ATOVAQUONE/PROGUANIL HCL 250 MG-100 MG TAB	0000	2.22626	04/05/2023
AZATHIOPRINE 50 MG TAB	0000	0.27701	08/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AZELASTINE 137 MCG NASAL SPRY	0000	0.61060	12/05/2022
AZELASTINE HCL 0.05 % DROPS	0000	1.51216	08/05/2022
AZELASTINE HCL 205.5MCG SPRAY/PUMP	0000	0.83075	12/05/2022
AZITHROMYCIN 100 MG/5 ML SUSP	0000	0.93857	08/05/2022
AZITHROMYCIN 200 MG/5 ML SUSP	0000	0.40996	04/05/2023
AZITHROMYCIN 250 MG TAB	0000	0.50509	06/05/2022
AZITHROMYCIN 500 MG TAB	0000	0.63440	12/05/2022
AZITHROMYCIN 600 MG TAB	0000	0.78500	04/05/2023
BACITRACIN-POLYMYXIN OINT	0000	3.09088	03/05/2023
BACLOFEN 10 MG TAB	0000	0.12387	04/05/2023
BACLOFEN 20 MG TAB	0000	0.11157	05/05/2023
BALSALAZIDE DISODIUM 750 MG CAP	0000	0.42683	11/05/2022
BENAZEPRIL HCL 10 MG TAB	0000	0.07085	03/05/2023
BENAZEPRIL HCL 20 MG TAB	0000	0.07343	02/05/2023
BENAZEPRIL HCL 40 MG TAB	0000	0.09550	01/05/2023
BENAZEPRIL HCL 5 MG TAB	0000	0.06544	11/05/2022
BENAZEPRIL/HCTZ 10/12.5 MG TAB	0000	0.28641	04/05/2023
BENAZEPRIL/HCTZ 20/12.5 MG TAB	0000	0.43261	04/05/2023
BENAZEPRIL/HCTZ 20/25 MG TAB	0000	0.35388	05/05/2023
BENAZEPRIL/HCTZ 5/6.25 MG TAB	0000	1.69356	11/05/2015
BENZONATATE 100 MG CAP	0000	0.13397	05/05/2022
BENZOYL PEROXIDE 4 % CLEANSER	0000	0.05042	11/05/2017
BENZTROPINE MES 0.5 MG TAB	0000	0.09512	07/05/2022
BENZTROPINE MES 1 MG TAB	0000	0.09684	04/05/2022
BENZTROPINE MES 2 MG TAB	0000	0.12870	07/05/2022
BETAMET DIPROP/PROP GLY 0.05% LOT	0000	0.50096	05/05/2023
BETAMETHASONE DP 0.05% AUGMTD CRM	0000	0.21672	05/05/2022
BETAMETHASONE DP 0.05% AUGMTD OINT	0000	0.81798	04/05/2023
BETAMETHASONE DP 0.05% CRM	0015	0.89594	12/05/2022
BETAMETHASONE DP 0.05% CRM	0045	1.37658	03/05/2023
BETAMETHASONE DP 0.05% LOT	0000	0.43274	08/05/2022
BETAMETHASONE DP 0.05% OINT	0015	0.95731	04/05/2023
BETAMETHASONE DP 0.05% OINT	0045	0.97174	01/05/2023
BETAMETHASONE VA 0.1% CRM	0000	0.73375	08/05/2022
BETAMETHASONE VA 0.1% LOT	0060	0.81169	04/05/2023
BETAMETHASONE VA 0.1% OINT	0000	0.80970	08/05/2022
BETAMETHASONE VALERATE 0.12 % FOAM	0000	1.20072	06/05/2022
BETHANECHOL 10 MG TAB	0000	0.21864	02/05/2023
BETHANECHOL 25 MG TAB	0000	0.27448	09/05/2022
BETHANECHOL 5 MG TAB	0000	0.16710	03/05/2023
BETHANECHOL CHLORIDE 50 MG TAB	0000	0.34330	05/05/2023
BICALUTAMIDE 50 MG TAB	0000	0.29591	01/05/2023
BISOPROLOL FUMARATE 10 MG TAB	0000	0.34917	11/05/2022
BISOPROLOL FUMARATE 5 MG TAB	0000	0.29831	01/05/2023
BISOPROLOL/HCTZ 10/6.25 MG TAB	0000	0.24580	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
BISOPROLOL/HCTZ 2.5/6.25 MG TAB	0000	0.27616	12/05/2022
BISOPROLOL/HCTZ 5/6.25 MG TAB	0000	0.28382	12/05/2022
BRIMONIDINE 0.2% EYE DROPS	0000	0.77026	11/05/2022
BROMFENAC SODIUM 0.09% EYE DROPS	0000	62.70481	05/05/2023
BROMOCRIPTINE 2.5 MG TAB	0000	1.69542	03/05/2023
BROMOCRIPTINE 5 MG CAP	0000	4.33954	01/05/2023
BUDESONIDE EC 3 MG CAP	0000	0.68956	10/05/2022
BUMETANIDE 0.5 MG TAB	0000	0.25164	06/05/2022
BUMETANIDE 1 MG TAB	0000	0.31741	02/05/2023
BUMETANIDE 2 MG TAB	0000	0.69274	05/05/2022
BUPRENORPHINE HCL 2 MG TAB SL	0000	0.49710	05/05/2023
BUPRENORPHINE HCL 8 MG TAB SL	0000	1.09293	07/05/2022
BUPRENORPHINE HCL/NALOXONE HCL 2 MG-0.5MG TAB SUBL	0000	0.53576	04/05/2023
BUPRENORPHINE HCL/NALOXONE HCL 8 MG-2 MG TAB SUBL	0000	0.97275	05/05/2023
BUPROPION HCL 100 MG TAB	0000	0.18768	05/05/2023
BUPROPION HCL 75 MG TAB	0000	0.12673	05/05/2023
BUPROPION HCL ER 100 MG TAB	0000	0.10875	05/05/2023
BUPROPION HCL ER 200 MG TAB	0000	0.14332	04/05/2023
BUPROPION HCL SR 150 MG TAB - AB1	0000	0.10685	03/05/2023
BUPROPION HCL SR 150 MG TAB - AB2	0000	0.35223	03/05/2023
BUPROPION XL 150MG TAB	0000	0.12264	07/05/2022
BUPROPION XL 300 MG TAB	0000	0.15371	05/05/2023
BUSPIRONE HCL 10 MG TAB	0000	0.06341	05/05/2023
BUSPIRONE HCL 15 MG TAB	0000	0.06513	05/05/2022
BUSPIRONE HCL 30 MG TAB	0000	0.15918	05/05/2023
BUSPIRONE HCL 5 MG TAB	0000	0.03790	05/05/2023
BUSPIRONE HCL 7.5 MG TAB	0000	0.18940	04/05/2023
BUTALBITAL/APAP/CAFF 50/325/40 MG TAB	0000	0.15252	12/05/2022
BUTALBITAL/ASA/CAFF 50/325/40 MG CAP	0000	0.77804	02/05/2023
BUTALBITAL/CAF/APAP/COD 50/40/325/30 MG CAP	0000	0.93243	08/05/2022
BUTORPHANOL 10 MG/ML SPRY	0000	14.49260	05/05/2023
CABERGOLINE 0.5 MG TAB	0000	2.12566	07/05/2022
CALCIPOTRIENE 0.005 % CREAM (G)	0000	1.01857	03/05/2023
CALCIPOTRIENE/BETAMETHASONE 0.005-.064 OINT. (G)	0000	4.18160	10/05/2022
CALCITRIOL 0.25 MCG CAP	0000	0.23997	06/05/2022
CALCITRIOL 0.5 MCG CAP	0000	0.28892	07/05/2022
CALCITRIOL 1 MCG/ML SOLN	0000	5.02165	04/05/2023
CALCIUM ACETATE 667 MG CAP	0000	0.25840	10/05/2022
CANDESARTAN CILEXETIL 16 MG TAB	0000	0.60535	03/05/2023
CANDESARTAN CILEXETIL 32 MG TAB	0000	0.89112	12/05/2022
CANDESARTAN CILEXETIL 8 MG TAB	0000	0.69512	04/05/2023
CANDESARTAN/HCTZ 16 MG-12.5 MG TAB	0000	1.10444	04/05/2023
CANDESARTAN/HCTZ 32 MG/12.5 MG TAB	0000	1.63116	05/05/2023
CAPECITABINE 500 MG TABLET	0000	0.55935	01/05/2023
CAPTOPRIL 100 MG TAB	0000	1.67474	09/05/2020

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CAPTOPRIL 12.5 MG TAB	0000	0.43530	09/05/2022
CAPTOPRIL 25 MG TAB	0000	0.17078	05/05/2023
CAPTOPRIL 50 MG TAB	0000	0.59211	03/05/2023
CAPTOPRIL/HCTZ 50/15 MG TAB	0000	1.92420	06/05/2016
CARBAMAZEPINE 100 MG CPMP 12HR	0000	1.05431	04/05/2023
CARBAMAZEPINE 100 MG TAB CHEW	0000	0.33387	01/05/2023
CARBAMAZEPINE 100 MG/5 ML SUSP	0000	0.13232	02/05/2023
CARBAMAZEPINE 200 MG CPMP 12HR	0000	1.23681	07/05/2022
CARBAMAZEPINE 200 MG TAB	0000	0.34264	08/05/2020
CARBAMAZEPINE 200 MG TAB SR 12H	0000	1.05059	05/05/2023
CARBAMAZEPINE 400 MG TAB SR 12H	0000	0.92934	05/05/2023
CARBAMAZEPINE ER 300 MG CAP	0000	0.95679	08/05/2022
CARBIDOPA-LEVO 10-100 MG ODT	0000	1.06300	12/05/2014
CARBIDOPA-LEVODOPA-ENTA 100 MG TAB	0000	0.71432	02/05/2023
CARBIDOPA-LEVODOPA-ENTA 150 MG TAB	0000	1.09040	06/05/2021
CARBIDOPA-LEVODOPA-ENTA 200 MG TAB	0000	0.87572	11/05/2022
CARBIDOPA/LEVO 10/100 MG TAB	0000	0.10900	05/05/2023
CARBIDOPA/LEVO 25/100 MG TAB	0000	0.11140	04/05/2023
CARBIDOPA/LEVO 25/100 MG TAB RAPDIS	0000	0.80301	12/05/2022
CARBIDOPA/LEVO 25/100 MG TAB SA	0000	0.21943	02/05/2023
CARBIDOPA/LEVO 25/250 MG TAB	0000	0.13409	04/05/2023
CARBIDOPA/LEVO 50/200 MG TAB SA	0000	0.54216	05/05/2022
CARBINOXAMINE MALEATE 4 MG TAB	0000	0.39648	05/05/2022
CARBINOXAMINE MALEATE 4 MG/5 ML LIQUID	0000	0.14841	02/05/2019
CARBOPLATIN 50 MG/5 ML VIAL	0000	1.73240	06/05/2015
CARISOPRODOL 350 MG TAB	0000	0.05953	12/05/2022
CARTEOLOL HCL 1% EYE DROPS	0000	1.24321	05/05/2022
CARVEDILOL 12.5 MG TAB	0000	0.02924	02/05/2023
CARVEDILOL 25 MG TAB	0000	0.03558	03/05/2023
CARVEDILOL 3.125 MG TAB	0000	0.02729	02/05/2023
CARVEDILOL 6.25 MG TAB	0000	0.03009	05/05/2022
CDP/AMITRIP 10/25 MG TAB	0000	1.86937	06/05/2019
CDP/AMITRIP 5/12.5 MG TAB	0000	1.25486	03/05/2019
CEFACLOR 500 MG CAP	0000	1.21680	04/05/2023
CEFADROXIL 250 MG/5 ML SUSP	0000	0.21599	05/05/2023
CEFADROXIL 500 MG CAP	0000	0.26678	11/05/2022
CEFAZOLIN 1 GM VIAL	0000	1.02937	09/05/2015
CEFAZOLIN 10 GM VIAL	0000	11.55000	06/05/2015
CEFDINIR 125 MG/5 ML SUSP	0000	0.12776	04/05/2023
CEFDINIR 250 MG/5 ML SUSP	0000	0.16981	05/05/2023
CEFDINIR 300 MG CAP	0000	0.44529	01/05/2023
CEFEPIME HCL 2 GRAM VIAL	0000	10.29000	12/05/2014
CEFPODOXIME 200 MG TAB	0000	2.71009	01/05/2023
CEFPROZIL 125 MG/5 ML SUSP	0000	0.15776	03/05/2023
CEFPROZIL 250 MG TAB	0000	0.55723	04/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CEFPROZIL 250 MG/5 ML SUSP	0000	0.26612	12/05/2022
CEFPROZIL 500 MG TAB	0000	1.08270	05/05/2023
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	1.67150	04/05/2022
CEFTRIAXONE 10 GM VIAL	0000	29.40000	12/05/2014
CEFTRIAXONE 2 GM VIAL	0000	3.60900	05/05/2016
CEFTRIAXONE 250 MG VIAL	0000	1.64400	12/05/2020
CEFTRIAXONE 500 MG VIAL	0000	0.97033	06/05/2022
CEFUROXIME AXETIL 250 MG TAB	0000	0.41358	10/05/2022
CEFUROXIME AXETIL 500 MG TAB	0000	1.13606	01/05/2023
CEPHALEXIN 125 MG/5 ML SUSP	0000	0.06485	04/05/2023
CEPHALEXIN 250 MG CAP	0000	0.08823	12/05/2022
CEPHALEXIN 250 MG/5 ML SUSP	0000	0.14438	08/05/2022
CEPHALEXIN 500 MG CAP	0000	0.11531	07/05/2022
CETIRIZINE 1 MG/ML SOLN	0000	0.03152	05/05/2023
CETIRIZINE 5 MG TAB	0000	0.05524	05/05/2023
CETIRIZINE HCL 10 MG TAB	0000	0.06708	05/05/2023
CETIRIZINE HCL/PSEUDOEPHEDRINE 5-120MG TAB ER 12H	0000	0.55758	12/05/2022
CEVIMELINE HCL 30 MG CAP	0000	1.12151	10/05/2022
CHLORDIAZEPOXIDE 10 MG CAP	0000	0.10764	04/05/2022
CHLORDIAZEPOXIDE 25 MG CAP	0000	0.13146	06/05/2022
CHLORDIAZEPOXIDE 5 MG CAP	0000	0.18778	07/05/2022
CHLORHEXIDINE 0.12% RINSE	0000	0.00709	03/05/2023
CHLORTHALIDONE 25 MG TAB	0000	0.26594	07/05/2022
CHLORZOAZONE 500 MG TAB	0000	0.24945	10/05/2022
CHOLESTYRAMINE LIGHT PWDR - PREVALITE	0000	0.23988	02/05/2023
CHOLESTYRAMINE PWDR -QUESTRAN	0000	0.17175	06/05/2022
CHOLESTYRAMINE/ASPARTAME 4 GRAM PK	0000	0.98999	01/05/2023
CHOLESTYRAMINE/SUCROSE 4 GRAM PK	0000	1.47677	04/05/2023
CICLOPIROX 0.77 % GEL	0000	1.19711	12/05/2022
CICLOPIROX 0.77% CRM	0000	0.22471	12/05/2022
CICLOPIROX 1 % SHAMPOO	0000	0.28581	03/05/2023
CICLOPIROX 8% SOLN	0000	1.63208	12/05/2022
CILOSTAZOL 100 MG TAB	0000	0.13345	05/05/2023
CILOSTAZOL 50 MG TAB	0000	0.13556	08/05/2022
CIMETIDINE 200 MG TAB	0000	0.29993	09/05/2022
CIMETIDINE 300 MG TAB	0000	0.32901	02/05/2023
CIMETIDINE 300 MG/5 ML SOLN	0000	0.11165	10/05/2022
CIMETIDINE 400 MG TAB	0000	0.49955	05/05/2023
CIMETIDINE 800 MG TAB	0000	0.93362	12/05/2022
CIPROFLOXACIN 0.3% EYE DROPS	0000	2.00993	01/05/2023
CIPROFLOXACIN HCL 250 MG TAB	0000	0.09317	07/05/2022
CIPROFLOXACIN HCL 500 MG TAB	0000	0.15502	09/05/2022
CIPROFLOXACIN HCL 750 MG TAB	0000	0.24145	09/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CITALOPRAM 10 MG/5 ML SOLN	0000	0.21222	04/05/2023
CITALOPRAM HBR 10 MG TAB	0000	0.02706	02/05/2023
CITALOPRAM HBR 20 MG TAB	0000	0.03589	12/05/2022
CITALOPRAM HBR 40 MG TAB	0000	0.03783	01/05/2023
CLADRIBINE 10 MG/10ML VIAL	0000	38.59500	06/05/2015
CLARITHROMYCIN 125MG/ML SUSP	0000	0.77075	08/05/2018
CLARITHROMYCIN 250 MG TAB	0000	0.54440	05/05/2023
CLARITHROMYCIN 250MG/ML SUSP	0000	1.46325	11/05/2022
CLARITHROMYCIN 500 MG TAB	0000	0.53298	12/05/2022
CLARITHROMYCIN ER 500 MG TAB	0000	4.31933	01/05/2023
CLEMASTINE FUM 2.68 MG TAB	0000	0.88057	11/05/2021
CLINDAMYCIN 2% VAG CRM	0000	1.72249	05/05/2023
CLINDAMYCIN HCL 150 MG CAP	0000	0.12031	02/05/2023
CLINDAMYCIN HCL 300 MG CAP	0000	0.28440	12/05/2022
CLINDAMYCIN PALM HCL 75 MG/5 ML SOLN RECON	0000	0.21338	02/05/2023
CLINDAMYCIN PH 1% GEL	0000	0.44514	05/05/2023
CLINDAMYCIN PH 1% LOT	0000	0.47503	05/05/2023
CLINDAMYCIN PH 1% SOLN	0000	0.26764	02/05/2023
CLINDAMYCIN PH 150 MG/ML VIAL	0000	0.29828	06/05/2016
CLINDAMYCIN PH/BENZ PEROX 1%-5% GEL	0000	0.93944	04/05/2023
CLINDAMYCIN PHOS/BENZOYL PEROX 1 %-5 % GEL W/PUMP	0050	2.20956	10/05/2019
CLINDAMYCIN PHOSPHATE 1% FOAM	0000	4.36739	10/05/2018
CLOBAZAM 10 MG TABLET	0000	0.33662	03/05/2023
CLOBAZAM 2.5 MG/ML ORAL SUSP	0000	0.23177	03/05/2023
CLOBAZAM 20 MG TABLET	0000	0.55717	05/05/2023
CLOBETASOL 0.05% CRM	0000	0.33046	02/05/2023
CLOBETASOL 0.05% GEL	0000	0.58040	04/05/2023
CLOBETASOL 0.05% OINT	0000	0.18533	05/05/2023
CLOBETASOL 0.05% SOLN	0000	0.39298	03/05/2023
CLOBETASOL EMOLLIENT 0.05% CRM	0000	0.96718	04/05/2023
CLOBETASOL PROPIONATE 0.05 % FOAM	0000	0.46890	03/05/2023
CLOBETASOL PROPIONATE 0.05 % LOTION	0000	0.70507	03/05/2023
CLOBETASOL PROPIONATE 0.05 % SHAMPOO	0000	0.37610	03/05/2023
CLOBETASOL PROPIONATE 0.05 % SPRAY	0000	0.38882	04/05/2023
CLOMIPRAMINE 25 MG CAP	0000	0.27740	05/05/2023
CLOMIPRAMINE 50 MG CAP	0000	0.37171	01/05/2023
CLOMIPRAMINE 75 MG CAP	0000	0.50420	01/05/2023
CLONAZEPAM 0.125 MG DIS TAB	0000	0.64855	09/05/2022
CLONAZEPAM 0.25 MG DIS TAB	0000	0.52405	01/05/2023
CLONAZEPAM 0.5 MG DIS TAB	0000	0.48926	04/05/2023
CLONAZEPAM 0.5 MG TAB	0000	0.02515	01/05/2023
CLONAZEPAM 1 MG DIS TAB	0000	0.42409	04/05/2023
CLONAZEPAM 1 MG TAB	0000	0.03068	02/05/2023
CLONAZEPAM 2 MG TAB	0000	0.03701	03/05/2023
CLONIDINE HCL 0.1 MG TAB	0000	0.03013	08/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CLONIDINE HCL 0.1 MG TAB ER 12H	0000	0.42109	03/05/2023
CLONIDINE HCL 0.2 MG TAB	0000	0.04336	01/05/2023
CLONIDINE HCL 0.3 MG TAB	0000	0.05001	05/05/2022
CLOPIDOGREL BISULFATE 75 MG TAB	0000	0.07839	12/05/2022
CLORAZEPATE 15 MG TAB	0000	1.79373	05/05/2023
CLORAZEPATE 3.75 MG TAB	0000	0.97985	03/05/2023
CLORAZEPATE 7.5 MG TAB	0000	1.18733	05/05/2023
CLOTRIMAZOLE 1% CRM	0000	0.49634	03/05/2023
CLOTRIMAZOLE 1% SOLN	0000	1.76604	05/05/2023
CLOTRIMAZOLE 10 MG TROCHE	0000	0.54128	12/05/2022
CLOTRIMAZOLE-BETAMETH CRM	0015	0.21877	06/05/2022
CLOTRIMAZOLE-BETAMETH CRM	0000	0.23867	05/05/2023
CLOTRIMAZOLE-BETAMETH LOT	0000	2.55577	04/05/2023
CLOZAPINE 100 MG TAB	0000	0.55871	04/05/2023
CLOZAPINE 200 MG TAB	0000	0.98719	05/05/2023
CLOZAPINE 25 MG TAB	0000	0.21123	05/05/2023
CLOZAPINE 50 MG TAB	0000	0.53802	07/05/2022
COLCHICINE/PROBENECID 0.5 MG-500 MG TAB	0000	0.99410	01/05/2023
COLESTIPOL HCL 1 GM TAB	0000	0.68505	10/05/2022
COLISTIMETHATE 150 MG VIAL	0000	20.66166	06/05/2019
CROMOLYN SODIUM 20 MG/ML ORAL CONC	0000	0.26595	01/05/2023
CROMOLYN SODIUM 4% EYE DROPS	0000	0.61641	09/05/2022
CYANOCOBALAMIN 1,000 MCG/ML VIAL	0000	2.35049	02/05/2023
CYCLOBENZAPRINE 10 MG TAB	0000	0.02235	12/05/2022
CYCLOBENZAPRINE 5 MG TAB	0000	0.02732	07/05/2022
CYCLOPENTOLATE 1% EYE DROPS	0000	1.25364	04/05/2023
CYCLOPENTOLATE 1% EYE DROPS	0002	2.79975	02/05/2023
CYCLOSPORINE 100 MG CAP	0000	7.20247	04/05/2023
CYCLOSPORINE 100 MG/ML SOLN	0000	5.11760	05/05/2016
CYCLOSPORINE 25 MG CAP	0000	2.30094	12/05/2022
CYCLOSPORINE MODIFIED 25 MG	0000	0.40012	03/05/2023
CYCLOSPORINE, MODIFIED 100 MG CAP	0000	1.50139	03/05/2023
CYCLOSPORINE, MODIFIED 50 MG CAPSULE	0000	1.06761	07/05/2022
CYPROHEPTADINE 2 MG/5 ML SYRP	0000	0.06138	03/05/2023
CYPROHEPTADINE 4 MG TAB	0000	0.09282	08/05/2022
D-AMPHETAMINE 10 MG TAB	0000	0.33829	01/05/2023
D-AMPHETAMINE 15 MG CAP SA	0000	0.84642	05/05/2023
D-AMPHETAMINE 5 MG TAB	0000	0.43119	05/05/2023
DANAZOL 200 MG CAP	0000	7.09312	02/05/2016
DANTROLENE SODIUM 100 MG CAP	0000	1.16342	07/05/2022
DANTROLENE SODIUM 25 MG CAP	0000	0.40432	05/05/2023
DANTROLENE SODIUM 50 MG CAP	0000	0.94288	05/05/2022
DAPSONE 100 MG TAB	0000	0.96027	03/05/2023
DAPSONE 25 MG TAB	0000	0.59449	01/05/2023
DEFEROXAMINE 2 GM VIAL	0000	43.26000	12/05/2014

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DEMECLOCYCLINE 150 MG TAB	0000	3.33750	10/05/2017
DESIPRAMINE 10 MG TAB	0000	0.10013	01/05/2023
DESIPRAMINE 100 MG TAB	0000	1.08093	11/05/2022
DESIPRAMINE 25 MG TAB	0000	0.20610	04/05/2023
DESIPRAMINE 50 MG TAB	0000	0.34988	03/05/2023
DESIPRAMINE HCL 75 MG TAB	0000	2.33220	09/05/2014
DES Loratadine 5 MG TAB	0000	0.38415	02/05/2023
DESMOPRESSIN 10 MCG/0.1ML SPRY	0000	8.07366	05/05/2023
DESMOPRESSIN ACET 0.1 MG TAB	0000	0.26531	04/05/2023
DESMOPRESSIN ACET 0.2 MG TAB	0000	0.66188	05/05/2023
DESONIDE 0.05% CRM	0000	0.51478	03/05/2023
DESONIDE 0.05% LOT	0000	0.84651	01/05/2023
DESONIDE 0.05% OINT	0000	0.66629	04/05/2023
DESOXIMETASONE 0.05% CRM	0060	1.97647	02/05/2023
DESOXIMETASONE 0.05% GEL	0060	3.73720	05/05/2016
DESOXIMETASONE 0.05% GEL	0015	3.92174	09/05/2015
DESOXIMETASONE 0.25% CRM	0060	0.35104	02/05/2023
DESOXIMETASONE 0.25% CRM	0015	0.89725	03/05/2023
DESOXIMETASONE 0.25% OINT	0060	0.33889	02/05/2023
DESOXIMETASONE 0.25% OINT	0015	0.61880	10/05/2022
DESOXIMETASONE 0.25% OINT	0000	4.68848	09/05/2015
DEXAMETHASONE 0.1% EYE DROPS	0000	7.19902	01/05/2023
DEXAMETHASONE 0.5 MG/5 ML ELX	0000	0.10434	03/05/2023
DEXAMETHASONE 1.5 MG TAB	0000	0.34387	04/05/2022
DEXAMETHASONE SP 4 MG/ML VIAL	0000	0.77471	10/05/2020
DIAZEPAM 10 MG TAB	0000	0.02885	01/05/2023
DIAZEPAM 2 MG TAB	0000	0.02273	03/05/2023
DIAZEPAM 5 MG TAB	0000	0.03026	02/05/2023
DICLOFENAC POT 50 MG TAB	0000	0.20931	09/05/2022
DICLOFENAC SOD 50 MG TAB EC	0000	0.16431	01/05/2023
DICLOFENAC SOD 75 MG TAB EC	0000	0.11246	01/05/2023
DICLOFENAC SOD ER 100 MG TAB	0000	0.74733	06/05/2022
DICLOFENAC SODIUM 0.1% DROPS	0000	2.06363	03/05/2023
DICLOFENAC SODIUM 1 % GEL	0000	0.10457	08/05/2022
DICLOFENAC SODIUM 1.5 % DROPS	0000	0.10037	01/05/2023
DICLOFENAC SODIUM 25 MG TABLET DR	0000	0.87084	10/05/2022
DICLOFENAC SODIUM 3 % GEL (GRAM)	0000	0.45095	04/05/2023
DICLOFENAC SODIUM/MISOPROSTOL 75 MG-200 TAB IR DR	0000	1.42868	05/05/2023
DICLOFENAC-MISOPROST 50 MG-200 MCG TAB	0000	0.94294	04/05/2023
DICLOXACILLIN 250 MG CAP	0000	0.42822	12/05/2022
DICLOXACILLIN 500 MG CAP	0000	0.86142	05/05/2023
DICYCLOMINE 10 MG CAP	0000	0.11818	03/05/2023
DICYCLOMINE 20 MG TAB	0000	0.17691	08/05/2022
DIFLUNISAL 500 MG TAB	0000	1.08199	04/05/2023
DIGOXIN 125 MCG TAB	0000	0.22592	04/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DIGOXIN 250 MCG TAB	0000	0.17098	05/05/2023
DILTIAZEM 120 MG TAB	0000	0.31727	05/05/2023
DILTIAZEM 30 MG TAB	0000	0.11641	12/05/2022
DILTIAZEM 60 MG TAB	0000	0.17708	08/05/2022
DILTIAZEM 90 MG TAB	0000	0.22592	03/05/2023
DILTIAZEM ER 120 MG CAP SA	0000	3.82442	02/05/2023
DILTIAZEM ER 90 MG CAP SA	0000	3.04176	03/05/2023
DILTIAZEM HCL 120 MG CAP SA - AB2	0000	0.53844	02/05/2023
DILTIAZEM HCL 120 MG CAP SA - AB3	0000	0.18383	04/05/2023
DILTIAZEM HCL 120 MG CAP SA - AB4	0000	0.25453	12/05/2022
DILTIAZEM HCL 180 MG CAP SA - AB2	0000	0.58112	05/05/2022
DILTIAZEM HCL 180 MG CAP SA - AB3	0000	0.18915	02/05/2023
DILTIAZEM HCL 180 MG CAP SA - AB4	0000	0.33693	11/05/2022
DILTIAZEM HCL 240 MG CAP SA - AB2	0000	0.80744	12/05/2022
DILTIAZEM HCL 240 MG CAP SA - AB3	0000	0.30504	08/05/2022
DILTIAZEM HCL 240 MG CAP SA - AB4	0000	0.50223	09/05/2022
DILTIAZEM HCL 300 MG CAP SA - AB3	0000	0.30032	05/05/2023
DILTIAZEM HCL 300 MG CAP SA - AB4	0000	0.33283	05/05/2023
DILTIAZEM HCL 360 MG CAP ER 24H	0000	0.40643	04/05/2023
DILTIAZEM HCL 360 MG CAP SA - AB4	0000	0.68693	07/05/2022
DILTIAZEM HCL 420 MG CAP SA	0000	1.12659	09/05/2022
DIPHENHYDRAMINE 25 MG CAP	0000	0.03866	02/05/2023
DIPHENHYDRAMINE 50 MG CAP	0000	0.02034	07/05/2022
DIPHENHYDRAMINE 50 MG/ML VIAL	0000	0.85536	12/05/2022
DIPHENHYDRAMINE HCL 12.5 MG/5 ML LIQ	0000	0.01201	04/05/2022
DIPHENHYDRAMINE HCL 25 MG TAB (ALLERGY)	0000	0.03609	03/05/2023
DIPHENOXYLATE-ATROPINE LIQ	0000	1.08450	03/05/2018
DIPHENOXYLATE/ATROPINE 2.5/0.025 MG TAB	0000	0.17133	03/05/2023
DIPYRIDAMOLE 25 MG TAB	0000	1.06294	12/05/2021
DIPYRIDAMOLE 50 MG TAB	0000	1.37834	02/05/2022
DIPYRIDAMOLE 75 MG TAB	0000	2.03416	01/05/2021
DISOPYRAMIDE 150 MG CAP	0000	1.56288	12/05/2022
DISOPYRAMIDE PHOSPHATE 100 MG CAP	0000	1.56742	11/05/2021
DISULFIRAM 250 MG TAB	0000	1.70143	05/05/2022
DIVALPROEX SODIUM 125 MG CAP	0000	0.52879	11/05/2022
DIVALPROEX SODIUM 125 MG TAB DR	0000	0.06675	05/05/2023
DIVALPROEX SODIUM 250 MG TAB DR	0000	0.07365	01/05/2023
DIVALPROEX SODIUM 500 MG TAB DR	0000	0.14251	11/05/2022
DIVALPROEX SODIUM ER 250 MG TAB	0000	0.15980	08/05/2022
DIVALPROEX SODIUM ER 500 MG TAB	0000	0.23946	02/05/2023
DOCUSATE SODIUM 50 MG/5 ML LIQ	0000	0.01201	12/05/2022
DONEPEZIL HCL 10 MG TAB	0000	0.05758	05/05/2023
DONEPEZIL HCL 10 MG TAB RAPDIS	0000	0.29133	12/05/2022
DONEPEZIL HCL 23 MG TAB	0000	0.86376	04/05/2023
DONEPEZIL HCL 5 MG TAB	0000	0.06427	03/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DORZOLAMIDE HCL 2% EYE DROPS	0000	1.38783	11/05/2022
DORZOLAMIDE-TIMOLOL EYE DROPS	0000	1.27864	08/05/2022
DOXAZOSIN MESYLATE 1 MG TAB	0000	0.09860	03/05/2023
DOXAZOSIN MESYLATE 2 MG TAB	0000	0.08637	03/05/2023
DOXAZOSIN MESYLATE 4 MG TAB	0000	0.11069	04/05/2023
DOXAZOSIN MESYLATE 8 MG TAB	0000	0.11517	03/05/2023
DOXEPIN 10 MG CAP	0000	0.13661	05/05/2023
DOXEPIN 100 MG CAP	0000	0.29038	04/05/2023
DOXEPIN 150 MG CAP	0000	0.71227	06/05/2022
DOXEPIN 25 MG CAP	0000	0.18277	04/05/2023
DOXEPIN 50 MG CAP	0000	0.27121	02/05/2023
DOXEPIN 75 MG CAP	0000	0.38649	04/05/2023
DOXEPIN HCL 10 MG/ML ORAL CONC	0000	0.16370	01/05/2023
DOXYCYCLINE 50 MG TAB	0000	0.26023	03/05/2023
DOXYCYCLINE HYCLATE 100 MG CAP	0000	0.15731	02/05/2023
DOXYCYCLINE HYCLATE 100 MG TAB	0000	0.14197	01/05/2023
DOXYCYCLINE HYCLATE 20 MG TAB	0000	0.18913	04/05/2023
DOXYCYCLINE HYCLATE 50 MG CAP	0000	0.15833	04/05/2023
DOXYCYCLINE MONO 100MG CAP	0000	0.52122	01/05/2023
DOXYCYCLINE MONO 50 MG CAP	0000	0.15927	04/05/2023
DOXYCYCLINE MONOHYDRATE 100 MG TAB	0000	0.29216	08/05/2022
DRONABINOL 10 MG CAP	0000	3.03850	05/05/2023
DRONABINOL 2.5 MG CAP	0000	1.03235	05/05/2023
DRONABINOL 5 MG CAP	0000	2.54235	05/05/2023
DULOXETINE HCL 20 MG CAP DR	0000	0.09676	08/05/2022
DULOXETINE HCL 30 MG CAP DR	0000	0.10619	04/05/2022
DULOXETINE HCL 40 MG CAPSULE DR	0000	1.90140	04/05/2023
DULOXETINE HCL 60 MG CAP DR	0000	0.11595	02/05/2023
DUTASTERIDE 0.5 MG CAP	0000	0.20287	05/05/2023
ECONAZOLE NITRATE 1% CRM	0000	0.47422	05/05/2022
ENALAPRIL MALEATE 10 MG TAB	0000	0.10718	02/05/2023
ENALAPRIL MALEATE 2.5 MG TAB	0000	0.07566	05/05/2023
ENALAPRIL MALEATE 20 MG TAB	0000	0.11555	02/05/2023
ENALAPRIL MALEATE 5 MG TAB	0000	0.12514	05/05/2023
ENALAPRIL/HCTZ 10/25 MG TAB	0000	0.18409	11/05/2022
ENALAPRIL/HCTZ 5/12.5 MG TAB	0000	0.14731	01/05/2023
ENALAPRILAT DIHYDRATE 1.25 MG/ML VIAL	0000	3.15000	03/05/2015
ENOXAPARIN SOD 100 MG/ML DISP SYRN	0000	10.21156	05/05/2023
ENOXAPARIN SOD 40 MG/0.4 ML DISP SYRN	0000	12.31185	05/05/2023
ENOXAPARIN SOD 60 MG/0.6 ML DISP SYRN	0000	11.19268	03/05/2023
ENOXAPARIN SOD 80 MG/0.8 ML DISP SYRN	0000	11.16581	05/05/2023
ENOXAPARIN SODIUM 120MG/.8ML SYRINGE	0000	17.88471	05/05/2023
ENOXAPARIN SODIUM 150 MG/ML SYRINGE	0000	13.90938	05/05/2023
ENOXAPARIN SODIUM 30 MG/0.3 ML DISP SYR	0000	11.44021	05/05/2023
ENTACAPONE 200 MG TAB	0000	0.42173	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
EPINASTINE HCL 0.05 % DROPS	0000	11.66900	05/05/2023
EPIRUBICIN HCL 200MG/0.1L VIAL	0000	1.96880	06/05/2015
EPLERENONE 25 MG TAB	0000	0.42825	04/05/2023
EPLERENONE 50 MG TAB	0000	0.61523	04/05/2023
ERYTHROMYCIN 2% SOLN	0000	0.31585	05/05/2023
ERYTHROMYCIN EYE OINT	0000	2.97272	09/05/2022
ESCITALOPRAM OXALATE 10 MG TAB	0000	0.06683	10/05/2022
ESCITALOPRAM OXALATE 20 MG TAB	0000	0.08537	12/05/2022
ESCITALOPRAM OXALATE 5 MG TAB	0000	0.06514	05/05/2023
ESCITALOPRAM OXALATE 5 MG/5 ML SOLN	0000	0.20641	05/05/2023
ESTAZOLAM 2 MG TAB	0000	1.00923	03/05/2023
ESTRADIOL 0.025 MG/DAY PATCH	0000	12.12331	05/05/2023
ESTRADIOL 0.0375 MG/DAY PATCH	0000	12.80961	05/05/2023
ESTRADIOL 0.05 MG/DAY PATCH - AB2	0000	11.88671	05/05/2023
ESTRADIOL 0.06 MG/24 DAY PATCH	0000	15.63393	05/05/2023
ESTRADIOL 0.075 MG/DAY PATCH	0000	15.96929	05/05/2023
ESTRADIOL 0.1 MG/DAY PATCH - AB2	0000	11.85826	04/05/2023
ESTRADIOL 0.5 MG TAB	0000	0.07482	03/05/2023
ESTRADIOL 1 MG TAB	0000	0.08903	05/05/2023
ESTRADIOL 2 MG TAB	0000	0.11471	12/05/2022
ESTRADIOL/NORETH AC 0.5 MG-0.1 MG TAB	0000	0.78539	03/05/2023
ESTRADIOL/NORETH AC 1 MG-0.5 MG TAB	0000	0.81024	01/05/2023
ESZOPICLONE 1 MG TAB	0000	0.14553	05/05/2023
ESZOPICLONE 2 MG TAB	0000	0.12169	02/05/2023
ESZOPICLONE 3 MG TAB	0000	0.13156	08/05/2022
ETH E/DESO 25/25/25MCG-0.1/.125/.15MG TAB	0000	0.79391	05/05/2023
ETH E/LEVONOR 30/40/30MCG - 0.05/0.075/0.125MG TAB	0000	0.31780	03/05/2023
ETH E/NOR 25/25/25MCG-0.18/.215/.25MG TAB	0000	0.24055	05/05/2023
ETH E/NOR 30MCG/0.15MG(84)-ETH E 10MCG(7) TAB	0000	0.31515	03/05/2023
ETH E/NOR 35/35/35MCG-0.18/.215/.25MG TAB	0000	0.30420	05/05/2022
ETH E/NOR 35/35/35MCG-0.5/.75/1MG TAB	0000	0.35943	05/05/2023
ETH E/NOR 35/35MCG-0.5/1MG (7-9-5) TAB	0000	0.60269	04/05/2022
ETH E/NORETH 20/30/35MCG-1/1/1MG FE TAB	0000	0.92598	03/05/2023
ETH ESTRADIOL/DESOGEST 20/0.15 TAB	0000	0.19359	04/05/2023
ETH ESTRADIOL/DESOGEST 30 MCG/0.15MG TAB	0000	0.30481	12/05/2022
ETH ESTRADIOL/DROSPIRENONE 0.02/3MG TAB	0000	0.39422	08/05/2022
ETH ESTRADIOL/DROSPIRENONE 0.03-3MG TAB	0000	0.22831	06/05/2022
ETH ESTRADIOL/ETHYN 35MCG/1MG TAB	0000	0.34035	05/05/2023
ETH ESTRADIOL/ETHYN 50MCG/1MG TAB	0000	0.64694	01/05/2023
ETH ESTRADIOL/LEVONOR 20MCG/0.1MG TAB	0000	0.22149	02/05/2023
ETH ESTRADIOL/NORETH 20MCG/1MG TAB	0000	0.29392	12/05/2022
ETH ESTRADIOL/NORETH 30MCG/1.5MG TAB	0000	0.62737	08/05/2022
ETH ESTRADIOL/NORETH 35MCG/0.4MG TAB	0000	0.33855	04/05/2023
ETH ESTRADIOL/NORETH 35MCG/0.5MG TAB	0000	0.65287	09/05/2022
ETH ESTRADIOL/NORETH 35MCG/1MG TAB	0000	0.30223	05/05/2023

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ETH ESTRADIOL/NORETH FE 20MCG/1MG TAB	0000	0.14682	04/05/2023
ETH ESTRADIOL/NORETH FE 30MCG/1.5MG TAB	0000	0.20882	03/05/2023
ETH ESTRADIOL/NORGEST 30MCG/0.3MG TAB	0000	0.57856	04/05/2022
ETH ESTRADIOL/NORGEST 35MCG/0.25MG TAB	0000	0.20287	08/05/2022
ETH ESTRADIOL/NORGEST 50MCG/0.5MG TAB	0000	1.17160	10/05/2019
ETHAMBUTOL HCL 400 MG TAB	0000	0.60540	12/05/2022
ETHOSUXIMIDE 250 MG CAP	0000	0.42377	03/05/2023
ETHOSUXIMIDE 250 MG/5 ML SYRP	0000	0.07335	09/05/2022
ETODOLAC 200 MG CAP	0000	0.58067	05/05/2023
ETODOLAC 300 MG CAP	0000	0.38915	05/05/2023
ETODOLAC 400 MG TAB	0000	0.32854	01/05/2023
ETODOLAC 400 MG TAB SA	0000	1.16757	04/05/2023
ETODOLAC 500 MG TAB	0000	0.38595	03/05/2023
ETODOLAC 500 MG TAB SA	0000	1.25783	10/05/2022
ETODOLAC 600 MG TAB	0000	2.25681	07/05/2020
ETOPOSIDE 50 MG CAP	0000	87.08040	06/05/2016
EXEMESTANE 25 MG TAB	0000	0.99786	02/05/2023
FAMCICLOVIR 250 MG TAB	0000	0.39291	07/05/2022
FAMCICLOVIR 500 MG TAB	0000	0.83773	12/05/2022
FAMOTIDINE 20 MG TAB	0000	0.07766	03/05/2023
FAMOTIDINE 40 MG TAB	0000	0.07070	04/05/2023
FAMOTIDINE 40 MG/5 ML SUSP	0000	0.71867	08/05/2022
FAMOTIDINE/CA CARB/MAG HYDROX 10-800-165MG TAB CHEW	0000	0.28625	01/05/2023
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	0.21136	01/05/2023
FELODIPINE ER 2.5 MG TAB	0000	0.12367	05/05/2023
FELODIPINE ER 5 MG TAB	0000	0.18106	08/05/2022
FENOFIBRATE 134 MG CAP	0000	0.13090	04/05/2023
FENOFIBRATE 160 MG TAB	0000	0.17359	03/05/2023
FENOFIBRATE 200 MG CAP	0000	0.16571	05/05/2023
FENOFIBRATE 54 MG TAB	0000	0.22450	09/05/2022
FENOFIBRATE,MICRONIZED 130 MG CAP	0000	0.67027	03/05/2023
FENOFIBRATE,MICRONIZED 43 MG CAPSULE	0000	0.41386	01/05/2023
FENOFIBRATE,MICRONIZED 67 MG CAP	0000	0.08405	05/05/2023
FENOPROFEN 600 MG TAB	0000	3.45792	09/05/2015
FENTANYL 100 MCG/HR PATCH	0000	14.79149	05/05/2023
FENTANYL 12MCG/HR PATCH	0000	8.71388	04/05/2023
FENTANYL 25 MCG/HR PATCH	0000	4.51395	03/05/2023
FENTANYL 50 MCG/HR PATCH	0000	8.50263	05/05/2023
FENTANYL 75 MCG/HR PATCH	0000	11.91942	05/05/2023
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

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FEXOFENADINE HCL 180 MG TAB	0000	0.27783	09/05/2022
FEXOFENADINE HCL 30 MG/5 ML ORAL SUSP	0000	0.06310	03/05/2017
FEXOFENADINE HCL 60 MG TAB	0000	0.15058	04/05/2022
FINASTERIDE 5 MG TAB	0000	0.07552	08/05/2022
FLAVOXATE HCL 100 MG TAB	0000	0.64310	04/05/2023
FLECAINIDE ACETATE 100 MG TAB	0000	0.25924	12/05/2022
FLECAINIDE ACETATE 150 MG TAB	0000	0.28613	04/05/2023
FLECAINIDE ACETATE 50 MG TAB	0000	0.15221	02/05/2023
FLUCONAZOLE 10 MG/ML SUSP	0000	0.29788	05/05/2023
FLUCONAZOLE 100 MG TAB	0000	0.27358	12/05/2022
FLUCONAZOLE 150 MG TAB	0000	0.54702	04/05/2023
FLUCONAZOLE 200 MG TAB	0000	0.38441	05/05/2023
FLUCONAZOLE 40 MG/ML SUSP	0000	0.59789	10/05/2022
FLUCONAZOLE-NS 400 MG/200 ML PB	0000	0.06040	09/05/2014
FLUDROCORTISONE 0.1 MG TAB	0000	0.45687	01/05/2023
FLUNISOLIDE 0.025% SPRY	0000	2.08059	06/05/2022
FLUOCINOLONE 0.01% SOLN	0000	0.27562	03/05/2023
FLUOCINOLONE 0.025% CRM	0000	1.20784	01/05/2023
FLUOCINOLONE 0.025% OINT	0000	1.23681	06/05/2022
FLUOCINOLONE ACETONIDE 0.01 % CRM	0000	1.92111	01/05/2023
FLUOCINOLONE ACETONIDE OIL 0.01 % DROPS	0000	1.84519	01/05/2022
FLUOCINONIDE 0.05% CRM	0000	0.66455	04/05/2023
FLUOCINONIDE 0.05% GEL	0000	0.94596	02/05/2023
FLUOCINONIDE 0.05% OINT	0000	0.45705	03/05/2022
FLUOCINONIDE 0.05% SOLN	0000	0.39780	02/05/2023
FLUOCINONIDE 0.1 % CREAM (G)	0000	0.34475	03/05/2023
FLUOCINONIDE-E 0.05% CRM	0000	1.18078	04/05/2023
FLUOROMETHOLONE 0.1% DROPS	0000	12.85744	04/05/2023
FLUOROURACIL 2,500 MG/50 ML VL	0000	0.40740	06/05/2015
FLUOROURACIL 5 % SOLN	0000	4.66700	05/05/2023
FLUOROURACIL 5% CRM	0000	1.39163	01/05/2023
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	0.03474	04/05/2023
FLUOXETINE 10 MG TAB	0000	0.12331	04/05/2023
FLUOXETINE 20 MG CAP	0000	0.03199	01/05/2023
FLUOXETINE 20 MG/5 ML SOLN	0000	0.14888	12/05/2021
FLUOXETINE 40 MG CAP	0000	0.07181	01/05/2023
FLUOXETINE HCL 90 MG CAP DR	0000	27.27768	04/05/2023
FLUPHENAZINE DEC 25 MG/ML VIAL	0000	15.85667	05/05/2023
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	11.65000	05/05/2023
FLURBIPROFEN 100 MG TAB	0000	0.35427	11/05/2022
FLUTICASONE 50 MCG NASAL SPRY	0000	0.36819	12/05/2022

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FLUTICASONE PROP 0.005% OINT	0000	0.49042	10/05/2022
FLUTICASONE PROP 0.05% CRM	0000	0.45556	04/05/2022
FLUVASTATIN SODIUM 20 MG CAP	0000	3.25149	05/05/2023
FLUVASTATIN SODIUM 40 MG CAP	0000	3.61264	03/05/2023
FLUVOXAMINE MAL 100 MG TAB	0000	0.38060	05/05/2023
FLUVOXAMINE MAL 25 MG TAB	0000	0.20050	03/05/2023
FLUVOXAMINE MAL 50 MG TAB	0000	0.35105	08/05/2022
FLUVOXAMINE MALEATE 100 MG CAP ER 24H	0000	4.92317	05/05/2023
FLUVOXAMINE MALEATE 150 MG CAP ER 24H	0000	6.24710	04/05/2023
FOLIC ACID 1 MG TAB	0000	0.02981	02/05/2023
FONDAPARINUX 7.5 MG/0.6 ML SYR	0000	57.45472	01/05/2022
FOSINOPRIL SODIUM 10 MG TAB	0000	0.15058	03/05/2023
FOSINOPRIL SODIUM 20 MG TAB	0000	0.15472	10/05/2022
FOSINOPRIL SODIUM 40 MG TAB	0000	0.21633	11/05/2022
FOSINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.96518	04/05/2018
FOSINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.68773	02/05/2020
FUROSEMIDE 10 MG/ML SOLN	0000	0.09353	02/05/2023
FUROSEMIDE 10 MG/ML VIAL	0000	1.23428	08/05/2015
FUROSEMIDE 20 MG TAB	0000	0.02855	08/05/2022
FUROSEMIDE 40 MG TAB	0000	0.03177	03/05/2023
FUROSEMIDE 80 MG TAB	0000	0.05053	01/05/2023
GABAPENTIN 100 MG CAP	0000	0.02961	03/05/2023
GABAPENTIN 250 MG/5 ML SOLN	0000	0.11427	05/05/2022
GABAPENTIN 300 MG CAP	0000	0.04958	05/05/2023
GABAPENTIN 400 MG CAP	0000	0.05705	08/05/2022
GABAPENTIN 600 MG TAB	0000	0.09024	02/05/2023
GABAPENTIN 800 MG TAB	0000	0.13938	07/05/2022
GALANTAMINE 12MG TAB	0000	0.57610	01/05/2023
GALANTAMINE 4MG TAB	0000	0.53613	05/05/2023
GALANTAMINE 8MG TAB	0000	0.43048	04/05/2023
GALANTAMINE ER 16MG CAP	0000	1.60484	05/05/2023
GALANTAMINE ER 24MG CAP	0000	1.28040	04/05/2023
GALANTAMINE ER 8MG CAP	0000	0.79143	05/05/2023
GATIFLOXACIN 0.5 % DROPS	0000	9.76284	05/05/2023
GEMCITABINE HCL 1 GRAM VIAL	0000	58.58130	06/05/2015
GEMFIBROZIL 600 MG TAB	0000	0.11053	11/05/2022
GENTAMICIN 0.1% CRM	0000	1.15511	03/05/2023
GENTAMICIN 0.1% OINT	0000	1.31261	06/05/2022
GENTAMICIN 3 MG/GM EYE OINT	0000	8.45714	10/05/2021
GENTAMICIN 3 MG/ML EYE DROPS	0000	0.86568	05/05/2023
GENTAMICIN 40 MG/ML VIAL	0000	0.69103	09/05/2021
GLIMEPIRIDE 1 MG TAB	0000	0.03492	02/05/2023
GLIMEPIRIDE 2 MG TAB	0000	0.04295	05/05/2022
GLIMEPIRIDE 4 MG TAB	0000	0.05391	08/05/2022
GLIPIZIDE 10 MG TAB	0000	0.05339	01/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
GLIPIZIDE 5 MG TAB	0000	0.02995	08/05/2022
GLIPIZIDE ER 10 MG TAB	0000	0.24564	12/05/2022
GLIPIZIDE ER 2.5 MG TAB	0000	0.17975	02/05/2023
GLIPIZIDE ER 5 MG TAB	0000	0.16283	02/05/2023
GLIPIZIDE/METFORMIN 2.5/250 MG TAB	0000	0.32296	11/05/2018
GLIPIZIDE/METFORMIN 2.5/500 MG TAB	0000	0.26122	01/05/2023
GLIPIZIDE/METFORMIN 5/500 MG TAB	0000	0.33936	05/05/2023
GLYBURIDE 1.25 MG TAB	0000	0.07740	05/05/2023
GLYBURIDE 2.5 MG TAB	0000	0.07352	05/05/2023
GLYBURIDE 5 MG TAB	0000	0.06315	04/05/2023
GLYBURIDE MICRO 3 MG TAB	0000	0.11286	12/05/2020
GLYBURIDE MICRO 6 MG TAB	0000	0.18063	02/05/2022
GLYBURIDE/METFORMIN 1.25/250 MG TAB	0000	0.04929	02/05/2019
GLYBURIDE/METFORMIN 2.5/500 MG TAB	0000	0.05656	08/05/2022
GLYBURIDE/METFORMIN 5/500 MG TAB	0000	0.05150	03/05/2023
GLYCOPYRROLATE 1 MG TAB	0000	0.10088	05/05/2022
GLYCOPYRROLATE 2 MG TAB	0000	0.24341	02/05/2023
GRANISETRON HCL 1 MG TAB	0000	1.88610	04/05/2019
GRANISETRON HCL 1 MG/ML VIAL	0000	8.20320	06/05/2015
GRISEOFULVIN 125 MG/5 ML SUSP	0000	0.38471	11/05/2022
GRISEOFULVIN 500 MG TAB	0000	7.24464	05/05/2023
GUAIFENESIN 100 MG/5 ML LIQ	0000	0.01269	02/05/2023
GUAIFENESIN/DEXTROMETHORPHAN 100-10MG/5ML SF LIQ	0000	0.01290	02/05/2023
GUANFACINE HCL 1 MG TAB ER 24H	0000	0.33243	01/05/2023
GUANFACINE HCL 2 MG TAB ER 24H	0000	0.32533	09/05/2022
GUANFACINE HCL 3 MG TAB ER 24H	0000	0.40810	12/05/2022
GUANFACINE HCL 4 MG TAB ER 24H	0000	0.24510	11/05/2022
HALOBETASOL PROP 0.05% CRM	0000	0.87391	01/05/2023
HALOBETASOL PROP 0.05% OINT	0000	0.96987	01/05/2023
HALOPERIDOL 0.5 MG TAB	0000	0.20076	09/05/2022
HALOPERIDOL 1 MG TAB	0000	0.25349	05/05/2023
HALOPERIDOL 10 MG TAB	0000	0.51311	02/05/2023
HALOPERIDOL 2 MG TAB	0000	0.30198	04/05/2023
HALOPERIDOL 20 MG TAB	0000	0.94441	03/05/2023
HALOPERIDOL 5 MG TAB	0000	0.44711	12/05/2022
HALOPERIDOL DEC 100 MG/ML AMP	0000	29.55720	05/05/2023
HALOPERIDOL DEC 100 MG/ML VIAL	0000	21.23433	05/05/2023
HALOPERIDOL DECAN 50 MG/ML AMP	0000	18.76762	02/05/2023
HALOPERIDOL LAC 2 MG/ML CONC	0120	0.17081	03/05/2023
HALOPERIDOL LAC 2 MG/ML CONC	0000	1.10407	10/05/2022
HALOPERIDOL LAC 5 MG/ML VIAL	0000	1.15219	09/05/2016
HEPARIN NA 10,000 UNIT/ML VIAL	0000	1.79440	09/05/2022
HEPARIN NA 5,000 UNITS/ML VIAL	0000	1.71290	02/05/2023
HYDRALAZINE 10 MG TAB	0000	0.04055	01/05/2023
HYDRALAZINE 100 MG TAB	0000	0.08984	02/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HYDRALAZINE 25 MG TAB	0000	0.04881	01/05/2023
HYDRALAZINE 50 MG TAB	0000	0.05521	06/05/2022
HYDROCHLOROTHIAZIDE 12.5 MG CAP	0000	0.03910	01/05/2023
HYDROCHLOROTHIAZIDE 12.5 MG TAB	0000	0.05827	11/05/2022
HYDROCHLOROTHIAZIDE 25 MG TAB	0000	0.01368	12/05/2022
HYDROCHLOROTHIAZIDE 50 MG TAB	0000	0.03229	11/05/2022
HYDROCODON-ACETAMINOPHN 10-300	0000	0.21074	05/05/2023
HYDROCODONE BT/IBU 7.5/200 MG TAB	0000	0.41328	05/05/2023
HYDROCODONE/APAP 10/325 MG TAB	0000	0.12324	07/05/2022
HYDROCODONE/APAP 5/300 MG TAB	0000	0.16517	05/05/2023
HYDROCODONE/APAP 5/325 MG TAB	0000	0.10775	05/05/2023
HYDROCODONE/APAP 7.5-325 MG / 5ML SOLN	0000	0.08944	07/05/2022
HYDROCODONE/APAP 7.5/300 MG TAB	0000	0.44507	03/05/2023
HYDROCODONE/APAP 7.5/325 MG TAB	0000	0.13254	04/05/2023
HYDROCORTISONE 0.2% CRM	0000	0.54042	05/05/2023
HYDROCORTISONE 1% CRM	0000	0.09345	03/05/2023
HYDROCORTISONE 1% LOT	0000	0.06844	02/05/2018
HYDROCORTISONE 1% OINT	0000	0.18014	03/05/2022
HYDROCORTISONE 10 MG TAB	0000	0.27543	07/05/2022
HYDROCORTISONE 100 MG ENEMA	0000	0.16333	09/05/2022
HYDROCORTISONE 2.5 % CREAM/APPL	0000	0.67015	03/05/2023
HYDROCORTISONE 2.5% CRM	0000	0.10131	04/05/2023
HYDROCORTISONE 2.5% LOT	0000	0.18760	02/05/2023
HYDROCORTISONE 2.5% OINT	0000	0.11152	01/05/2023
HYDROCORTISONE 20 MG TAB	0000	0.40232	05/05/2023
HYDROCORTISONE 5 MG TAB	0000	0.21691	04/05/2023
HYDROCORTISONE BUTYR 0.1% CRM	0000	2.46633	08/05/2022
HYDROCORTISONE BUTYR 0.1% OINT	0000	2.90500	02/05/2018
HYDROCORTISONE VAL 0.2% OINT	0000	3.00959	05/05/2023
HYDROMORPHONE 2 MG TAB	0000	0.09673	01/05/2023
HYDROMORPHONE 4 MG TAB	0000	0.10336	03/05/2023
HYDROMORPHONE HCL 1 MG/ML LIQUID	0000	0.28168	05/05/2023
HYDROMORPHONE HCL 12 MG TAB ER 24H	0000	9.21707	01/05/2019
HYDROMORPHONE HCL 16 MG TAB ER 24H	0000	7.07756	07/05/2019
HYDROMORPHONE HCL 8 MG TAB	0000	0.31175	08/05/2022
HYDROMORPHONE HCL 8 MG TAB ER 24H	0000	6.99860	07/05/2018
HYDROQUINONE 4 % CRM	0000	0.80195	12/05/2022
HYDROXYCHLOROQUINE 200 MG TAB	0000	0.28031	02/05/2023
HYDROXYUREA 500 MG CAP	0000	0.44104	01/05/2023
HYDROXYZINE 10 MG/5 ML SYRP	0000	0.08545	11/05/2022
HYDROXYZINE HCL 10 MG TAB	0000	0.04591	12/05/2022
HYDROXYZINE HCL 25 MG TAB	0000	0.05178	06/05/2022
HYDROXYZINE HCL 50 MG TAB	0000	0.06794	05/05/2023
HYDROXYZINE PAM 25 MG CAP	0000	0.07679	05/05/2022
HYDROXYZINE PAM 50 MG CAP	0000	0.08932	01/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HYOSCYAMINE 0.125 MG/ML DROP	0000	1.12648	02/05/2018
HYOSCYAMINE SULFATE 0.125MG TAB	0000	0.13700	11/05/2022
IBANDRONATE SODIUM 150 MG TAB	0000	4.65533	04/05/2023
IBUPROFEN 100 MG/5 ML SUSP	0000	0.05187	06/05/2022
IBUPROFEN 200 MG TAB	0000	0.03261	12/05/2022
IBUPROFEN 400 MG TAB	0000	0.04963	08/05/2022
IBUPROFEN 600 MG TAB	0000	0.05821	07/05/2022
IBUPROFEN 800 MG TAB	0000	0.07943	01/05/2023
IMATINIB MESYLATE 400 MG TAB	0000	2.67480	05/05/2023
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	0.08021	02/05/2023
IMIPRAMINE HCL 25 MG TAB	0000	0.08895	05/05/2023
IMIPRAMINE HCL 50 MG TAB	0000	0.13726	09/05/2022
IMIPRAMINE PAMOATE 100 MG CAP	0000	5.44244	11/05/2020
IMIPRAMINE PAMOATE 75 MG CAP	0000	5.10133	06/05/2022
INDAPAMIDE 1.25 MG TAB	0000	0.13879	12/05/2022
INDAPAMIDE 2.5 MG TAB	0000	0.12956	10/05/2022
INDOMETHACIN 25 MG CAP	0000	0.09981	04/05/2023
INDOMETHACIN 50 MG CAP	0000	0.12124	03/05/2023
INDOMETHACIN 75 MG CAP SA	0000	0.22506	12/05/2022
INSULIN NPH HUM/REG INSULIN HM 70-30/ML INSULN PEN	0000	28.26974	02/05/2023
INSULIN NPH HUMAN ISOPHANE 100/ML (3) INSULN PEN	0000	28.12697	03/05/2023
IPRATR-ALBUTEROL 0.5-3 MG/3 ML SOLN	0000	0.06805	06/05/2022
IPRATROPIUM 0.03% SPRAY	0000	0.81723	05/05/2023
IPRATROPIUM 0.06% SPRAY	0000	1.66617	11/05/2022
IPRATROPIUM BR 0.02% SOLN	0000	0.07018	05/05/2023
IRBESARTAN 150 MG TAB	0000	0.18139	02/05/2023
IRBESARTAN 300 MG TAB	0000	0.27582	10/05/2022
IRBESARTAN 75 MG TAB	0000	0.17744	10/05/2022
IRBESARTAN/HCTZ 150 MG-12.5 MG TAB	0000	0.22520	06/05/2022
IRBESARTAN/HCTZ 300 MG-12.5 MG TAB	0000	0.35901	12/05/2022
ISONIAZID 300 MG TAB	0000	0.20155	01/05/2023
ISOSORBIDE DN 10 MG TAB	0000	0.37482	04/05/2023
ISOSORBIDE DN 20 MG TAB	0000	0.27791	05/05/2023
ISOSORBIDE DN 30 MG TAB	0000	0.43601	02/05/2023
ISOSORBIDE DN 5 MG TAB	0000	0.24123	04/05/2023
ISOSORBIDE MN 10 MG TAB	0000	0.19968	11/05/2022
ISOSORBIDE MN 120 MG TAB SA	0000	0.23585	02/05/2023
ISOSORBIDE MN 20 MG TAB	0000	0.16245	10/05/2022
ISOSORBIDE MN 30 MG TAB SA	0000	0.12803	12/05/2022
ISOSORBIDE MN 60 MG TAB SA	0000	0.20237	11/05/2022
ISOTRETINOIN 20 MG CAP	0000	2.52398	02/05/2023
ISOTRETINOIN 30 MG CAP	0000	3.09836	01/05/2023
ISOTRETINOIN 40 MG CAP	0000	3.37200	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ISRADIPINE 5 MG CAP	0000	1.61043	08/05/2017
ITRACONAZOLE 100 MG CAP	0000	0.88460	01/05/2023
IVERMECTIN 3 MG TAB	0000	3.60084	05/05/2023
KETOCONAZOLE 2 % FOAM	0000	5.39100	06/05/2015
KETOCONAZOLE 2% CRM	0000	1.28147	04/05/2023
KETOCONAZOLE 2% SHAMPOO	0000	0.09035	05/05/2023
KETOCONAZOLE 200 MG TAB	0000	0.76155	05/05/2023
KETOPROFEN 200 MG CAP SA	0000	9.30778	04/05/2017
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	9.74061	05/05/2023
KETOROLAC 0.5% OPHTH SOLN	0000	1.25961	10/05/2022
KETOROLAC 10 MG TAB	0000	0.65658	03/05/2023
KETOROLAC 30 MG/ML VIAL	0000	1.48736	09/05/2022
KETOROLAC 60 MG/2ML VIAL	0000	0.83991	03/05/2023
L-NORG-E EST 0.15 MG-30 MCG 3 MONTH DOSE PK	0000	0.18912	02/05/2023
L-NORG-E EST/E EST 0.10 MG-20 MCG (84)/10 MCG 3 MONTH	0000	0.35431	02/05/2023
LABETALOL HCL 100 MG TAB	0000	0.10684	02/05/2023
LABETALOL HCL 200 MG TAB	0000	0.16704	05/05/2023
LABETALOL HCL 300 MG TAB	0000	0.30077	04/05/2023
LACTULOSE 10 GM/15 ML SOLN-CON	0000	0.01546	04/05/2023
LACTULOSE 10 GM/15 ML SOLN-ENU	0000	0.01590	03/05/2022
LAMIVUDINE 150 MG TAB	0000	0.72124	09/05/2022
LAMIVUDINE/ZIDOVUDINE 150 MG-300 MG TAB	0000	0.62913	01/05/2022
LAMOTRIGINE 100 MG TAB	0000	0.06375	05/05/2022
LAMOTRIGINE 100 MG TAB RAPDIS	0000	3.52718	02/05/2023
LAMOTRIGINE 150 MG TAB	0000	0.08326	01/05/2023
LAMOTRIGINE 200 MG TAB	0000	0.08006	12/05/2022
LAMOTRIGINE 200 MG TAB ER 24	0000	1.13515	03/05/2023
LAMOTRIGINE 25 MG DISPER TAB	0000	0.25632	02/05/2023
LAMOTRIGINE 25 MG TAB	0000	0.03626	09/05/2022
LAMOTRIGINE 25 MG TAB RAPDIS	0000	2.09633	05/05/2023
LAMOTRIGINE 250 MG TAB ER 24	0000	2.51336	05/05/2023
LAMOTRIGINE 300 MG TAB ER 24	0000	2.20064	05/05/2023
LAMOTRIGINE 5 MG DISPER TAB	0000	0.21132	07/05/2022
LAMOTRIGINE 50 MG TAB RAPDIS	0000	2.18076	05/05/2023
LAMOTRIGINE ER 100 MG TABLET	0000	1.25758	01/05/2023
LAMOTRIGINE ER 25 MG TAB	0000	1.03200	05/05/2022
LAMOTRIGINE ER 50 MG TABLET	0000	0.78909	05/05/2023
LANSOPRAZOLE 15 MG CAP DR	0000	0.38304	01/05/2023
LANSOPRAZOLE 15 MG TAB RAP DR	0000	3.46581	05/05/2023
LANSOPRAZOLE 30 MG CAP DR	0000	0.14800	12/05/2022
LANSOPRAZOLE 30 MG TAB RAP DR	0000	4.02663	05/05/2023
LANSOPRAZOLE/AMOXICILN/CLARITH 30-500-500 COMBO. PKG	0000	4.91887	10/05/2021
LATANOPROST 0.005 % DROPS	0000	2.21233	03/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LEFLUNOMIDE 10 MG TAB	0000	0.50628	12/05/2022
LEFLUNOMIDE 20 MG TAB	0000	0.43363	05/05/2023
LETROZOLE 2.5 MG TAB	0000	0.15402	05/05/2023
LEUCOVORIN CALCIUM 25 MG TAB	0000	6.09948	04/05/2023
LEUCOVORIN CALCIUM 5 MG TAB	0000	0.89199	11/05/2022
LEV/NORGES/ETH/ESTR 90/20 MCG TAB	0000	1.33693	05/05/2022
LEVALBUTEROL HCL 0.31 MG/3 ML VIAL-NEB	0000	0.31367	01/05/2023
LEVALBUTEROL HCL 0.63 MG/3 ML VIAL-NEB	0000	0.34345	10/05/2022
LEVALBUTEROL HCL 1.25MG/3ML VIAL-NEB	0000	0.33979	01/05/2023
LEVETIRACETAM 100 MG/ML SOLN	0000	0.04059	01/05/2023
LEVETIRACETAM 1000 MG TAB	0000	0.29689	03/05/2023
LEVETIRACETAM 250 MG TAB	0000	0.09481	08/05/2022
LEVETIRACETAM 500 MG TAB	0000	0.10386	07/05/2022
LEVETIRACETAM 500 MG TAB.SR 24H	0000	0.20411	08/05/2022
LEVETIRACETAM 500 MG/5 ML VIAL	0000	1.31260	03/05/2015
LEVETIRACETAM 750 MG TAB	0000	0.22696	09/05/2022
LEVETIRACETAM ER 750 MG TAB	0000	0.35710	05/05/2023
LEVOBUNOLOL 0.5% EYE DROPS	0000	1.95460	03/05/2023
LEVOCARNITINE 100 MG/ML SOLN	0000	0.21054	10/05/2022
LEVOCARNITINE 200 MG/ML VIAL	0000	2.78000	04/15/2016
LEVOCARNITINE 330 MG TAB	0000	0.84324	03/05/2023
LEVOCETIRIZINE 2.5 MG/5 ML SOLN	0000	0.20717	03/05/2023
LEVOCETIRIZINE DIHYDROCHLORIDE 5 MG TAB	0000	0.11317	02/05/2023
LEVOFLOXACIN 250 MG TAB	0000	0.16666	05/05/2023
LEVOFLOXACIN 250MG/10ML SOLUTION	0000	1.05072	10/05/2022
LEVOFLOXACIN 500 MG TAB	0000	0.17453	07/05/2022
LEVOFLOXACIN 750 MG TAB	0000	0.31203	10/05/2022
LEVONOR/ETH E 0.15 MG/30 MCG TAB	0000	0.13461	10/05/2022
LEVOTHYROXINE 100 MCG TAB	0000	0.10772	04/05/2023
LEVOTHYROXINE 112 MCG TAB	0000	0.11914	02/05/2023
LEVOTHYROXINE 125 MCG TAB	0000	0.15989	04/05/2023
LEVOTHYROXINE 137 MCG TAB	0000	0.14991	04/05/2023
LEVOTHYROXINE 150 MCG TAB	0000	0.12283	04/05/2023
LEVOTHYROXINE 175 MCG TAB	0000	0.14960	04/05/2023
LEVOTHYROXINE 200 MCG TAB	0000	0.16325	01/05/2023
LEVOTHYROXINE 25 MCG TAB	0000	0.12468	04/05/2023
LEVOTHYROXINE 300 MCG TAB	0000	0.14046	04/05/2023
LEVOTHYROXINE 50 MCG TAB	0000	0.20406	04/05/2023
LEVOTHYROXINE 75 MCG TAB	0000	0.14181	04/05/2023
LEVOTHYROXINE 88 MCG TAB	0000	0.10175	04/05/2023
LIDOCAINE 2% VISCOUS SOLN	0000	0.06795	12/05/2022
LIDOCAINE 5 % OINT. (G)	0000	0.29882	08/05/2022
LIDOCAINE 5%(700MG) ADH. PATCH	0000	2.96841	02/05/2023
LIDOCAINE HCL 1% VIAL	0000	0.07675	03/05/2017
LIDOCAINE HCL 40 MG/ML SOLN	0000	0.54480	06/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LIDOCAINE-HC 3-0.5% CRM/APPL	0000	1.52490	06/05/2015
LIDOCAINE-PRILOCAINE CRM	0000	0.57122	05/05/2023
LIOthyRONINE SOD 50 MCG TAB	0000	0.67129	02/05/2023
LIOthyRONINE SODIUM 25 MCG TAB	0000	0.39990	01/05/2023
LIOthyRONINE SODIUM 5 MCG TAB	0000	0.27717	04/05/2023
LISINOPRIL 10 MG TAB	0000	0.02174	04/05/2023
LISINOPRIL 2.5 MG TAB	0000	0.01662	01/05/2023
LISINOPRIL 20 MG TAB	0000	0.02951	12/05/2022
LISINOPRIL 30 MG TAB	0000	0.06342	11/05/2022
LISINOPRIL 40 MG TAB	0000	0.04837	04/05/2023
LISINOPRIL 5 MG TAB	0000	0.01649	03/05/2023
LISINOPRIL/HCTZ 10/12.5 MG TAB	0000	0.03962	10/05/2022
LISINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.05796	12/05/2022
LISINOPRIL/HCTZ 20/25 MG TAB	0000	0.04820	03/05/2023
LITHIUM CARBONATE 150 MG CAP	0000	0.07709	06/05/2022
LITHIUM CARBONATE 300 MG CAP	0000	0.04992	06/05/2022
LITHIUM CARBONATE 300 MG TAB	0000	0.14037	01/05/2023
LITHIUM CARBONATE 600 MG CAP	0000	0.23690	05/05/2023
LITHIUM CARBONATE ER 300 MG TAB	0000	0.16343	05/05/2023
LITHIUM ER 450 MG TAB	0000	0.15756	05/05/2023
LOPERAMIDE HCL 2 MG CAP	0000	0.37794	06/05/2022
LORATADINE 10MG REDI-TAB	0000	0.42635	12/05/2022
LORATADINE 10MG TAB	0000	0.06040	03/05/2023
LORATADINE 5MG/5ML SYRP	0000	0.04441	02/05/2023
LORATADINE/PSE 10/240MG TAB SA	0000	0.49867	09/05/2022
LORAZEPAM 0.5 MG TAB	0000	0.03634	04/05/2023
LORAZEPAM 1 MG TAB	0000	0.04244	06/05/2022
LORAZEPAM 2 MG TAB	0000	0.06519	02/05/2022
LORAZEPAM 2 MG/ML ORAL CONC	0000	0.54576	10/05/2022
LORAZEPAM 2 MG/ML VIAL	0000	1.89450	05/05/2016
LOSARTAN POTASSIUM 100 MG TAB	0000	0.08928	12/05/2022
LOSARTAN POTASSIUM 25 MG TAB	0000	0.04589	12/05/2022
LOSARTAN POTASSIUM 50 MG TAB	0000	0.06129	02/05/2023
LOSARTAN-HCTZ 100-12.5 MG TAB	0000	0.16438	06/05/2022
LOSARTAN-HCTZ 100-25 MG TAB	0000	0.17082	07/05/2022
LOSARTAN-HCTZ 50-12.5 MG TAB	0000	0.13909	06/05/2022
LOVASTATIN 10 MG TAB	0000	0.04989	05/05/2023
LOVASTATIN 20 MG TAB	0000	0.05227	11/05/2022
LOVASTATIN 40 MG TAB	0000	0.06405	05/05/2023
LOXAPINE SUCCINATE 10 MG CAP	0000	0.45302	05/05/2023
LOXAPINE SUCCINATE 25 MG CAP	0000	0.81563	03/05/2023
LOXAPINE SUCCINATE 50 MG CAP	0000	1.42652	05/05/2023
MALATHION 0.5 % LOT	0000	3.91193	10/05/2019
MECLIZINE 12.5 MG TAB	0000	0.06131	07/05/2022
MECLIZINE HCL 25 MG TAB	0000	0.13180	02/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
MEDROXYPROGEST 150 MG/ML SYR	0000	43.70752	05/05/2023
MEDROXYPROGEST 150 MG/ML VIAL	0000	29.57243	05/05/2023
MEDROXYPROGESTERONE 10 MG TAB	0000	0.18165	04/05/2023
MEDROXYPROGESTERONE 2.5 MG TAB	0000	0.12619	04/05/2023
MEDROXYPROGESTERONE 5 MG TAB	0000	0.13876	01/05/2023
MEFENAMIC ACID 250 MG CAP	0000	1.49407	01/05/2023
MEGESTROL 20 MG TAB	0000	0.18421	02/05/2023
MEGESTROL 40 MG TAB	0000	0.20713	12/05/2022
MEGESTROL ACET 40 MG/ML SUSP	0000	0.13036	01/05/2023
MEGESTROL ACETATE 625MG/5ML ORAL SUSP	0000	1.22819	09/05/2022
MELOXICAM 15 MG TAB	0000	0.02827	04/05/2023
MELOXICAM 7.5 MG TAB	0000	0.02129	04/05/2023
MEMANTINE HCL 10 MG TAB	0000	0.09104	12/05/2022
MEMANTINE HCL 5 MG TABLET	0000	0.12631	05/05/2022
MEPERIDINE 50 MG TAB	0000	0.65024	10/05/2018
MERCAPTOPURINE 50 MG TAB	0000	1.21809	08/05/2022
MEROPENEM 1 G VIAL	0000	12.60000	03/05/2015
MEROPENEM 500 MG VIAL	0000	6.16880	03/05/2015
MESALAMINE 4G/60 ML RECT SUSP	0000	0.15118	08/05/2022
METAXALONE 800 MG TAB	0000	0.49285	02/05/2023
METFORMIN HCL 1000 MG TAB	0000	0.03210	04/05/2023
METFORMIN HCL 500 MG TAB	0000	0.01834	01/05/2023
METFORMIN HCL 850 MG TAB	0000	0.03067	01/05/2023
METFORMIN HCL ER 1,000 MG OSM-TAB	0000	0.48651	10/05/2022
METFORMIN HCL ER 500 MG FILM TAB	0000	0.14503	03/05/2023
METFORMIN HCL ER 500 MG TAB	0000	0.03218	02/05/2023
METFORMIN HCL ER 750 MG TAB	0000	0.06911	08/05/2022
METHADONE HCL 10 MG TAB	0000	0.11904	07/05/2022
METHADONE HCL 5 MG TAB	0000	0.12785	06/05/2022
METHADONE INTENSOL 10 MG/ML CONC	0000	0.83580	05/05/2016
METHAZOLAMIDE 25 MG TAB	0000	1.03900	05/05/2023
METHAZOLAMIDE 50 MG TAB	0000	1.95540	05/05/2023
METHENAMINE HIPP 1 GM TAB	0000	0.81382	10/05/2022
METHIMAZOLE 10 MG TAB	0000	0.16838	05/05/2023
METHIMAZOLE 5 MG TAB	0000	0.07824	06/05/2022
METHOCARBAMOL 500 MG TAB	0000	0.05282	06/05/2022
METHOCARBAMOL 750 MG TAB	0000	0.06608	06/05/2022
METHOTREXATE 2.5 MG TAB	0000	0.23874	04/05/2023
METHOTREXATE 25 MG/ML VIAL	0000	3.26853	01/05/2023
METHOTREXATE 25 MG/ML VIAL-PF	0000	1.43271	04/05/2023
METHSCOPOLAMINE BROM 2.5 MG TAB	0000	1.01825	11/05/2021
METHSCOPOLAMINE BROM 5 MG TAB	0000	1.44460	02/05/2020
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	11.96183	04/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METHYLPHENIDATE 10 MG TAB	0000	0.13170	12/05/2022
METHYLPHENIDATE 10 MG TAB SA	0000	0.48086	04/05/2023
METHYLPHENIDATE 20 MG TAB	0000	0.16922	08/05/2022
METHYLPHENIDATE 5 MG TAB	0000	0.10109	01/05/2023
METHYLPHENIDATE HCL 10 MG CPBP 50-50	0000	3.90026	04/05/2023
METHYLPHENIDATE HCL 20 MG TAB ER	0000	0.51776	04/05/2023
METHYLPRED 4 MG TAB DOSEPAK	0000	0.24420	01/05/2023
METHYLPREDNISOLONE 4 MG TAB	0000	0.14780	10/05/2022
METHYLPREDNISOLONE ACETATE 80 MG/ML VIAL	0000	13.30143	07/05/2022
METOCLOPRAMIDE 10 MG TAB	0000	0.05616	12/05/2022
METOCLOPRAMIDE 5 MG TAB	0000	0.06208	04/05/2023
METOCLOPRAMIDE 5 MG/5 ML SYRP	0000	0.03958	06/05/2022
METOLAZONE 10 MG TAB	0000	0.82673	09/05/2022
METOLAZONE 2.5 MG TAB	0000	0.46512	05/05/2023
METOLAZONE 5 MG TAB	0000	0.29690	05/05/2023
METOPROLOL 100 MG TAB	0000	0.02945	12/05/2022
METOPROLOL 25 MG TAB	0000	0.01667	02/05/2023
METOPROLOL 50 MG TAB	0000	0.02003	02/05/2023
METOPROLOL SUCC ER 100 MG TAB	0000	0.18129	05/05/2023
METOPROLOL SUCC ER 200 MG TAB	0000	0.18461	04/05/2023
METOPROLOL SUCC ER 25 MG TAB	0000	0.16431	12/05/2022
METOPROLOL SUCC ER 50 MG TAB	0000	0.16299	04/05/2023
METOPROLOL-HCTZ 100/25MG TAB	0000	1.28541	03/05/2023
METOPROLOL-HCTZ 50/25MG TAB	0000	0.96262	08/05/2022
METRONIDAZOLE 0.75% CRM	0000	0.98538	03/05/2023
METRONIDAZOLE 250 MG TAB	0000	0.10802	09/05/2022
METRONIDAZOLE 375 MG CAP	0000	5.86590	08/05/2015
METRONIDAZOLE 500 MG TAB	0000	0.15238	03/05/2023
METRONIDAZOLE 500 MG/100 ML	0000	0.02085	05/05/2016
METRONIDAZOLE TOP 0.75% GEL	0000	0.60677	04/05/2023
METRONIDAZOLE VAG 0.75% GEL	0000	0.50835	10/05/2022
MEXILETINE 150 MG CAP	0000	0.52428	12/05/2022
MEXILETINE 200 MG CAP	0000	0.45985	04/05/2023
MICONAZOLE NITRATE 2 % CRM/APPL	0000	0.12202	02/05/2023
MIDODRINE HCL 10 MG TAB	0000	0.42956	01/05/2023
MIDODRINE HCL 2.5 MG TAB	0000	0.14406	04/05/2023
MIDODRINE HCL 5 MG TAB	0000	0.22445	01/05/2023
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	0.39796	08/05/2022
MINOCYCLINE 50 MG CAP	0000	0.19275	04/05/2023
MINOCYCLINE 75 MG CAP	0000	0.43436	07/05/2022
MINOCYCLINE HCL 100 MG TAB	0000	0.84426	05/05/2023
MINOCYCLINE HCL 50 MG TABLET	0000	0.96668	05/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
MINOCYCLINE HCL 75MG TAB	0000	2.98650	05/05/2016
MINOXIDIL 10 MG TAB	0000	0.16743	04/05/2023
MINOXIDIL 2.5 MG TAB	0000	0.13641	09/05/2022
MIRTAZAPINE 15 MG RPD DISLV TAB	0000	0.52425	03/05/2023
MIRTAZAPINE 15 MG TAB	0000	0.10185	07/05/2022
MIRTAZAPINE 30 MG RPD DISLV TAB	0000	0.57231	04/05/2023
MIRTAZAPINE 30 MG TAB	0000	0.12967	05/05/2023
MIRTAZAPINE 45 MG RPD DISLV TAB	0000	0.88105	11/05/2022
MIRTAZAPINE 45 MG TAB	0000	0.21651	12/05/2022
MIRTAZAPINE 7.5 MG TAB	0000	1.12931	10/05/2022
MISOPROSTOL 100 MCG TAB	0000	0.45598	07/05/2022
MISOPROSTOL 200 MCG TAB	0000	0.75099	07/05/2022
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	0.85723	03/05/2022
MOMETASONE FUROATE 0.1% CRM	0000	0.50188	05/05/2022
MOMETASONE FUROATE 0.1% OINT	0000	0.30462	04/05/2023
MOMETASONE FUROATE 0.1% SOLN	0000	0.32371	03/05/2023
MONTELUKAST SODIUM 10 MG TAB	0000	0.06341	03/05/2023
MONTELUKAST SODIUM 4 MG GRAN PK	0000	1.04180	01/05/2023
MONTELUKAST SODIUM 4 MG TAB CHEW	0000	0.09591	05/05/2023
MONTELUKAST SODIUM 5 MG TAB CHEW	0000	0.11171	02/05/2023
MORPHINE SULF 100 MG TAB SA	0000	0.82262	04/05/2023
MORPHINE SULF 15 MG TAB SA	0000	0.18006	05/05/2023
MORPHINE SULF 200 MG TAB SA	0000	2.54414	08/05/2021
MORPHINE SULF 30 MG TAB SA	0000	0.36562	03/05/2023
MORPHINE SULF 60 MG TAB SA	0000	0.65381	04/05/2022
MORPHINE SULFATE 10 MG/5 ML SOLUTION	0000	0.06488	06/05/2022
MORPHINE SULFATE 100 MG/5 ML (20 MG/ML) SOLN	0000	0.32123	05/05/2022
MORPHINE SULFATE 30 MG TABLET	0000	0.34652	01/05/2023
MORPHINE SULFATE IR 15 MG TAB	0000	0.28583	01/05/2023
MUPIROCIN 2% OINT	0000	0.24624	01/05/2023
MYCOPHENOLATE 250 MG CAP	0000	0.18964	05/05/2023
MYCOPHENOLATE 500 MG TAB	0000	0.34299	05/05/2022
MYCOPHENOLATE SODIUM 180 MG TABLET DR	0000	0.21066	12/05/2022
MYCOPHENOLATE SODIUM 360 MG TAB DR	0000	0.36911	05/05/2023
NABUMETONE 500 MG TAB	0000	0.14477	01/05/2023
NABUMETONE 750 MG TAB	0000	0.23008	03/05/2023
NADOLOL 20 MG TAB	0000	0.18798	01/05/2023
NADOLOL 40 MG TAB	0000	0.25148	05/05/2023
NADOLOL 80 MG TAB	0000	0.38338	05/05/2023
NALTREXONE 50 MG TAB	0000	0.77748	10/05/2022
NAPROXEN 125 MG/5 ML SUSP	0000	0.77744	03/05/2018
NAPROXEN 250 MG TAB	0000	0.05372	05/05/2023
NAPROXEN 375 MG TAB	0000	0.06238	02/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NAPROXEN 375 MG TAB EC	0000	0.23370	01/05/2023
NAPROXEN 500 MG TAB	0000	0.07317	06/05/2022
NAPROXEN 500 MG TAB EC	0000	3.60402	05/05/2023
NAPROXEN SODIUM 275 MG TAB	0000	0.55458	08/05/2019
NAPROXEN SODIUM 550 MG TAB	0000	0.31574	03/05/2023
NARATRIPTAN HCL 1 MG TAB	0000	1.31417	12/05/2022
NARATRIPTAN HCL 2.5 MG TAB	0000	1.39787	03/05/2023
NATEGLINIDE 120 MG TAB	0000	0.48781	10/05/2022
NATEGLINIDE 60 MG TAB	0000	0.36792	06/05/2022
NEFAZODONE HCL 100 MG TAB	0000	1.13353	07/05/2020
NEFAZODONE HCL 250 MG TAB	0000	1.45931	08/05/2016
NEO/BAC/POLY 3.5MG-400U-100,00U/GM EYE OINT	0000	7.60408	04/05/2023
NEO/POLY/DEXAMET EYE OINT	0000	3.38928	05/05/2023
NEO/POLYMYXIN/DEXAMETH DROPS	0000	2.77237	12/05/2022
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SOLN	0000	4.70304	02/05/2023
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SUSP	0000	5.71289	05/05/2023
NEOMY-BAC-POLY 3.5-400U-5,000U/GM OINT	0000	0.09828	11/05/2022
NEOMYCI/POLY/GRAM OPHTH SOL	0000	4.74284	07/05/2020
NEOMYCIN 500 MG TAB	0000	0.82499	05/05/2023
NEOMYCIN/POLY/HC EYE DROPS	0000	16.05161	04/05/2022
NEVIRAPINE 200 MG TAB	0000	0.15915	08/05/2019
NIACIN 1,000 MG TAB ER 24H	0000	0.33371	04/05/2023
NIACIN 500 MG TAB ER 24H	0000	0.21950	10/05/2022
NIACIN 750 MG TAB ER 24H	0000	0.39715	10/05/2022
NICARDIPINE HCL 20 MG CAP	0000	1.61982	09/05/2018
NICOTINE 14 MG/24HR PATCH	0000	2.00879	05/05/2022
NICOTINE 21 MG/24HR PATCH	0000	2.10429	10/05/2022
NICOTINE 7 MG/24 HOUR PATCH TD24	0000	1.95159	02/05/2023
NICOTINE POLACRILEX 2 MG GUM	0000	0.22088	01/05/2023
NICOTINE POLACRILEX 4 MG GUM	0000	0.25273	05/05/2022
NIFEDIPINE 10 MG CAP	0000	0.27747	02/05/2023
NIFEDIPINE 20 MG CAP	0000	1.82766	01/05/2020
NIFEDIPINE ER 30 MG TAB - AB1	0000	0.13481	10/05/2022
NIFEDIPINE ER 30 MG TAB - AB2	0000	0.13215	03/05/2023
NIFEDIPINE ER 60 MG TAB - AB1	0000	0.19470	12/05/2022
NIFEDIPINE ER 60 MG TAB - AB2	0000	0.17160	10/05/2022
NIFEDIPINE ER 90 MG TAB - AB1	0000	0.30184	09/05/2022
NIFEDIPINE ER 90 MG TAB - AB2	0000	0.27824	05/05/2023
NISOLDIPINE 17 MG TAB ER 24H	0000	5.35242	11/05/2020
NISOLDIPINE ER 34 MG TAB	0000	7.51416	01/05/2017
NISOLDIPINE ER 8.5 MG TAB	0000	3.59945	09/05/2018
NITROFURANTOIN MCR 100 MG CAP	0000	0.40377	04/05/2023
NITROFURANTOIN MCR 50 MG CAP	0000	0.75907	12/05/2022
NITROFURANTOIN MONOHD 100 MG CAP	0000	0.87465	04/05/2023
NITROGLYCERIN 0.1 MG/HR PATCH	0000	0.49178	09/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NITROGLYCERIN 0.2 MG/HR PATCH	0000	0.54204	04/05/2023
NITROGLYCERIN 0.4 MG/HR PATCH	0000	0.64299	03/05/2023
NITROGLYCERIN 0.6 MG/HR PATCH	0000	0.90953	05/05/2022
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	21.51307	05/05/2023
NIZATIDINE 150 MG CAP	0000	0.36307	03/05/2020
NIZATIDINE 150 MG/10 ML SOLN	0000	0.55088	04/05/2016
NIZATIDINE 300 MG CAP	0000	0.59360	12/05/2019
NOR/ETH/ESTR/ FE 0.4MG-35MCG (21)/75MG (7) CHEW	0000	0.33040	02/05/2023
NORETH-ETHINYL ESTRADIOL/IRON 0.8-25(24) TAB CHEW	0000	1.40176	04/05/2023
NORETHIND AC/ETH ESTRADIOL 1 MG-5 MCG TAB	0000	1.18708	02/05/2023
NORETHINDRONE 0.35 MG TAB	0000	0.14302	09/05/2022
NORETHINDRONE 5 MG TAB	0000	0.47253	10/05/2022
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) TABLET	0000	0.37134	04/05/2023
NORTRIPTYLINE HCL 10 MG CAP	0000	0.10567	12/05/2022
NORTRIPTYLINE HCL 25 MG CAP	0000	0.14425	05/05/2022
NORTRIPTYLINE HCL 50 MG CAP	0000	0.13751	02/05/2023
NORTRIPTYLINE HCL 75 MG CAP	0000	0.16566	10/05/2022
NPH, HUMAN INSULIN ISOPHANE 100 UNIT/ML VIAL	0000	14.07140	03/05/2022
NYSTATIN 100,000 UNIT/GM CRM	0000	0.31681	01/05/2023
NYSTATIN 100,000 UNIT/GM OINT	0000	0.35368	12/05/2022
NYSTATIN 100,000 UNIT/GM PWDR	0000	0.43446	05/05/2022
NYSTATIN 100,000 UNIT/ML SUSP	0000	0.08876	06/05/2022
NYSTATIN 500,000 UNIT ORAL TAB	0000	0.37638	08/05/2022
NYSTATIN/TRIAMCINOLONE CRM	0000	0.35658	11/05/2022
NYSTATIN/TRIAMCINOLONE OINT	0000	0.24361	05/05/2023
OFLOXACIN 0.3% EAR DROPS	0000	2.05853	03/05/2023
OFLOXACIN 0.3% EYE DROPS	0000	1.61961	02/05/2023
OLANZAPINE 10 MG TAB	0000	0.11927	02/05/2023
OLANZAPINE 10 MG TAB RAPDIS	0000	0.63190	11/05/2022
OLANZAPINE 10 MG VIAL	0000	39.04800	06/05/2016
OLANZAPINE 15 MG TAB	0000	0.18353	04/05/2023
OLANZAPINE 15 MG TAB RAPDIS	0000	0.55587	04/05/2023
OLANZAPINE 2.5 MG TAB	0000	0.08827	02/05/2023
OLANZAPINE 20 MG TAB	0000	0.22984	04/05/2022
OLANZAPINE 20 MG TAB RAPDIS	0000	1.23962	04/05/2023
OLANZAPINE 5 MG TAB	0000	0.10604	10/05/2022
OLANZAPINE 5 MG TAB RAPDIS	0000	0.36995	02/05/2023
OLANZAPINE 7.5 MG TAB	0000	0.10712	08/05/2022
OLOPATADINE 665 MCG NASAL SPRY	0000	1.03167	01/05/2023
OLOPATADINE HCL 0.1 % DROPS	0000	2.80057	06/05/2022
OMEGA-3 ACID ETHYL ESTERS 1 G CAPSULE	0000	0.28590	06/05/2022
OMEPRAZOLE 10 MG CAP DR	0000	0.08977	04/05/2023
OMEPRAZOLE 20 MG CAP	0000	0.04380	12/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
OMEPRAZOLE 20 MG TAB DR	0000	0.57056	01/05/2023
OMEPRAZOLE 40 MG CAP DR	0000	0.11579	02/05/2023
OMEPRAZOLE MAGNESIUM 20 MG TAB DR	0000	0.48246	06/05/2022
OMEPRAZOLE-BICARB 40-1,100 CAP	0000	0.60597	05/05/2023
ONDANSETRON 4 MG/5 ML SOLN	0000	0.29096	10/05/2022
ONDANSETRON HCL 2 MG/ML VIAL	0000	0.32260	11/05/2020
ONDANSETRON HCL 4 MG TAB	0000	0.13091	08/05/2022
ONDANSETRON HCL 4 MG/2 ML VIAL	0000	0.25956	02/05/2023
ONDANSETRON HCL 8 MG TAB	0000	0.16197	08/05/2022
ONDANSETRON ODT 4 MG TAB	0000	0.24736	10/05/2022
ONDANSETRON ODT 8 MG TAB	0000	0.20787	02/05/2023
ORPHENADRINE 100 MG TAB SA	0000	0.49252	10/05/2022
OXAPROZIN 600 MG TAB	0000	0.54397	02/05/2023
OXAZEPAM 10 MG CAP	0000	0.67583	09/05/2022
OXAZEPAM 15 MG CAP	0000	0.99898	01/05/2023
OXAZEPAM 30 MG CAP	0000	1.42316	09/05/2020
OXCARBAZEPINE 150 MG TAB	0000	0.14153	11/05/2022
OXCARBAZEPINE 300 MG TAB	0000	0.21256	12/05/2022
OXCARBAZEPINE 300 MG/5 ML ORAL SUSP	0000	0.40508	03/05/2023
OXCARBAZEPINE 600 MG TAB	0000	0.45565	09/05/2022
OXICONAZOLE NITRATE 1 % CRM (G)	0000	5.15397	10/05/2020
OXICONAZOLE NITRATE 1 % CRM (G)	0030	8.55853	08/05/2019
OXYBUTYNIN 5 MG TAB	0000	0.08813	12/05/2022
OXYBUTYNIN 5 MG/5 ML SYRP	0000	0.02927	08/05/2022
OXYBUTYNIN CL ER 10 MG TAB	0000	0.16885	08/05/2022
OXYBUTYNIN CL ER 15 MG TAB	0000	0.19527	04/05/2023
OXYBUTYNIN CL ER 5 MG TAB	0000	0.18388	11/05/2022
OXYCODON-ACETAMINOPHEN 2.5-325	0000	0.95628	01/05/2023
OXYCODONE 20 MG/ML SOLN	0000	2.84920	05/05/2023
OXYCODONE HCL 10 MG TAB	0000	0.11006	01/05/2023
OXYCODONE HCL 15 MG TAB	0000	0.12637	05/05/2022
OXYCODONE HCL 20 MG TAB	0000	0.28339	10/05/2022
OXYCODONE HCL 30 MG TAB	0000	0.31997	01/05/2023
OXYCODONE HCL 5 MG CAP	0000	0.48488	05/05/2023
OXYCODONE HCL 5 MG TAB	0000	0.08180	03/05/2023
OXYCODONE HCL 5 MG/5 ML SOLUTION	0000	0.09411	02/05/2023
OXYCODONE-ASPIRIN 4.83-325 MG	0000	0.77249	06/05/2018
OXYCODONE/APAP 10/325 MG TAB	0000	0.20853	02/05/2023
OXYCODONE/APAP 5/325 MG TAB	0000	0.09065	02/05/2023
OXYCODONE/APAP 7.5/325 MG TAB	0000	0.14686	04/05/2023
OXYMORPHONE HCL 10 MG TAB	0000	0.53663	12/05/2022
OXYMORPHONE HCL 10 MG TAB ER 12H	0000	6.26462	09/05/2022
OXYMORPHONE HCL 20 MG TAB ER 12H	0000	9.71314	06/05/2021
OXYMORPHONE HCL 30 MG TAB ER 12H	0000	11.76676	10/05/2020
OXYMORPHONE HCL 40 MG TAB ER 12H	0000	15.25528	07/05/2021

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
OXYMORPHONE HCL 5 MG TAB	0000	0.45781	02/05/2023
OXYMORPHONE HCL 7.5 MG TAB ER 12H	0000	3.18037	05/05/2020
OXYMORPHONE HCL ER 15 MG TAB	0000	7.52801	06/05/2021
PAMIDRONATE DISODIUM 30MG/10ML VIAL	0000	1.64060	12/05/2014
PANTOPRAZOLE SOD 40 MG TAB DR	0000	0.06571	04/05/2023
PANTOPRAZOLE SODIUM 20MG TAB DR	0000	0.06625	04/05/2023
PARICALCITOL 1 MCG CAP	0000	1.07270	04/05/2022
PARICALCITOL 2 MCG CAPSULE	0000	7.51467	09/05/2017
PAROXETINE 37.5 MG TAB SR 24H	0000	0.71346	04/05/2023
PAROXETINE HCL 10 MG TAB	0000	0.06738	02/05/2023
PAROXETINE HCL 12.5 MG TAB SR 24H	0000	0.82035	05/05/2023
PAROXETINE HCL 20 MG TAB	0000	0.08807	06/05/2022
PAROXETINE HCL 25 MG TAB SR 24H	0000	0.60955	04/05/2023
PAROXETINE HCL 30 MG TAB	0000	0.13741	08/05/2022
PAROXETINE HCL 40 MG TAB	0000	0.11603	12/05/2022
PEG 3350/ELECTROLYTE SOLN (COLYTE)	0000	0.00358	12/05/2022
PEG 3350/ELECTROLYTE SOLN (GOLYTELY)	0000	0.00304	06/05/2022
PEG 3350/FLAVOR PACKS - NULYTELY	0000	0.01058	03/05/2023
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0000	0.04436	10/05/2018
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0100	0.05782	10/05/2019
PENICILLIN V POTASSIUM 250MG TAB	0000	0.07592	12/05/2022
PENICILLIN V POTASSIUM 250MG/5ML SOLN	0000	0.05694	02/05/2023
PENICILLIN V POTASSIUM 500MG TAB	0000	0.09469	08/05/2022
PENTAZOCINE HCL/NALOXONE HCL 50-0.5MG TAB	0000	1.82823	08/05/2021
PENTOXIFYLLINE 400 MG TAB SA	0000	0.25243	10/05/2022
PERINDOPRIL ERBUMINE 4 MG TAB	0000	0.47305	08/05/2022
PERINDOPRIL ERBUMINE 8 MG TAB	0000	0.51738	03/05/2021
PERMETHRIN 5% CRM	0000	0.48224	10/05/2022
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	0.72566	05/05/2023
PERPHENAZINE 2 MG TAB	0000	0.22279	05/05/2023
PERPHENAZINE 4 MG TAB	0000	0.24676	03/05/2023
PERPHENAZINE 8 MG TAB	0000	0.27911	04/05/2023
PHENAZOPYRIDINE HCL 100 MG TABLET	0000	0.17855	03/05/2023
PHENAZOPYRIDINE HCL 200 MG TABLET	0000	0.23967	01/05/2023
PHENYTOIN 125 MG/5 ML SUSP	0000	0.06380	04/05/2023
PHENYTOIN 50 MG CHEW TAB	0000	0.34342	06/05/2022
PHENYTOIN SOD EXT 100 MG CAP	0000	0.34548	02/05/2023
PHENYTOIN SODIUM EXTENDED 30 MG CAP	0000	1.02381	12/05/2021
PILOCARPINE 4% EYE DROPS	0000	3.90400	05/05/2023
PILOCARPINE HCL 5 MG TAB	0000	0.26586	02/05/2023
PILOCARPINE HCL 7.5 MG TAB	0000	0.78568	04/05/2023
PINDOLOL 10 MG TAB	0000	0.80549	02/05/2023
PINDOLOL 5 MG TAB	0000	0.81449	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PIOGLITAZONE - METFORMIN 15 MG-850 MG TAB	0000	0.29937	04/05/2023
PIOGLITAZONE HCL 15 MG TAB	0000	0.10203	04/05/2023
PIOGLITAZONE HCL 30 MG TAB	0000	0.14187	07/05/2022
PIOGLITAZONE HCL 45 MG TAB	0000	0.16270	12/05/2022
PIOGLITAZONE- METFORMIN 15 MG- 500 MG TAB	0000	0.19943	05/05/2023
PIPERACIL-TAZOBACT 2.25 GM VIAL	0000	7.35000	03/05/2015
PIPERACILLIN SODIUM/TAZOBACTAM 3.375 G VIAL	0000	6.82500	12/05/2014
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	0.20763	05/05/2023
PIROXICAM 20 MG CAP	0000	0.35207	04/05/2023
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 #116/IRON FUMARATE/FA/DHA 28-800-200 COMBO. PKG	0000	0.14000	05/29/2015
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	0.14000	05/04/2012
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	0.14000	05/04/2012
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/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

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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.139/IRON,CARB/FOLIC/DHA 33MG-0.8MG COMBO. PKG	0000	0.14000	10/05/2018
PNV NO.143/IRON/METHYLFOLATE 29 MG-1 MG TABLET	0000	0.14000	06/05/2019
PNV NO.15/IRON FUM & PS CMP/FA 85 MG-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV NO.153/FA/OM3/DHA/EPA/FISH 400-35-25 TAB CHEW	0000	0.14000	07/05/2019
PNV NO.154/IRON FUM/FOLIC ACID 27 MG-1 MG TABLET	0000	0.14000	08/05/2021
PNV NO.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.165/IRON FUM/FOLIC ACID 13 MG-1 MG TAB CHEW	0000	0.14000	05/05/2020
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 WITH FE FUM/FA/SELENIUM 27-1MG 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

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PNV120/LEVOMEFOLATE/OMEGA3/DHA 267MCG-321 CMB TABCAP	0000	0.14000	09/05/2017
PNV133/FERROUS FUMARATE/FA 28 MG IRON-800 MCG TABLET	0000	0.14000	10/05/2016
PNV135/IRON/L-MEFOL/OMEGA3/DHA 18 MG IRON-800 MCG-290 MG-225 MG CMB CP PKT	0000	0.14000	04/05/2017
PNV151/IRON/FA/O3/DHA/EPA/FISH 27-800-260 CAPSULE	0000	0.14000	05/05/2019
PNV157/IRON/FA/O3/DHA/EPA/FISH 4-0.5-150 CAPSULE	0000	0.14000	08/05/2019
PNV158/IRON/FA/O3/DHA/EPA/FISH 13.5-0.5MG CAPSULE	0000	0.14000	08/05/2019
PNV166/IRON/FA/O3/DHA/EPA/FISH 27MG-0.8MG CAPSULE	0000	0.14000	09/05/2020
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
PNV62/FA/OM3/DHA/EPA/FISH OIL 400-35-25 TAB CHEW	0000	0.14000	05/29/2015
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	12.74095	04/05/2023
POLYETHYLENE GLYCOL 3350 17 GM PWD BTL	0000	0.02617	04/05/2023
POLYETHYLENE GLYCOL 3350 17 GM PWD PKT	0000	1.34206	04/05/2023
POLYMYXIN B/TMP EYE DROPS	0000	0.74284	12/05/2022
POTASSIUM BICARBONATE/CIT AC 25MEQ TAB EFF	0000	0.26951	12/05/2020
POTASSIUM CHLORIDE 20 MEQ PK	0000	1.87063	05/05/2023
POTASSIUM CHLORIDE 8 MEQ CAP SA	0000	0.15621	03/05/2023
POTASSIUM CITRATE 15 MEQ TABLET ER	0000	0.28618	02/05/2023
POTASSIUM CITRATE ER 10 MEQ TAB	0000	0.32036	02/05/2023
POTASSIUM CL 10 MEQ CAP SA	0000	0.15235	12/05/2022
POTASSIUM CL 10 MEQ TAB SA	0000	0.19307	03/05/2023
POTASSIUM CL 10 MEQ TAB SA PRT	0000	0.30773	04/05/2023
POTASSIUM CL 10% LIQUID	0000	0.09093	03/05/2023
POTASSIUM CL 20 MEQ TAB SA	0000	0.19190	02/05/2023
POTASSIUM CL 20% LIQUID	0000	0.17027	05/05/2023
POTASSIUM CL 8 MEQ TAB SA	0000	0.14342	02/05/2023
PRAMIPEXOLE DI-HCL 0.125 MG TAB	0000	0.05008	02/05/2023
PRAMIPEXOLE DI-HCL 0.25 MG TAB	0000	0.05422	02/05/2023
PRAMIPEXOLE DI-HCL 0.5 MG TAB	0000	0.11262	05/05/2023
PRAMIPEXOLE DI-HCL 0.75 MG TAB	0000	0.09144	06/05/2022
PRAMIPEXOLE DI-HCL 1 MG TAB	0000	0.07781	05/05/2023
PRAMIPEXOLE DI-HCL 1.5 MG TAB	0000	0.08164	08/05/2022
PRAVASTATIN SODIUM 10 MG TAB	0000	0.06892	06/05/2022
PRAVASTATIN SODIUM 20 MG TAB	0000	0.08015	02/05/2023
PRAVASTATIN SODIUM 40 MG TAB	0000	0.15216	08/05/2022
PRAVASTATIN SODIUM 80 MG TAB	0000	0.17168	01/05/2023
PRAZOSIN 1 MG CAP	0000	0.18793	04/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PRAZOSIN 2 MG CAP	0000	0.28535	12/05/2022
PRAZOSIN HCL 5 MG CAP	0000	0.47555	07/05/2022
PREDNISOLONE 15 MG/5 ML SOLN	0000	0.11549	04/05/2022
PREDNISOLONE 15 MG/5 ML SYRP	0000	0.16772	02/05/2023
PREDNISOLONE 5 MG/5 ML SOLN	0000	0.56459	01/05/2023
PREDNISOLONE AC 1% EYE DROPS	0000	5.65912	11/05/2022
PREDNISOLONE SOD 1% DROPS	0000	4.75143	06/05/2018
PREDNISONONE 1 MG TAB	0000	0.05890	02/05/2023
PREDNISONONE 10 MG TAB	0000	0.07569	12/05/2022
PREDNISONONE 10 MG TAB - UNIPAK	0000	0.66916	08/05/2022
PREDNISONONE 2.5 MG TAB	0000	0.11021	04/05/2023
PREDNISONONE 20 MG TAB	0000	0.12215	05/05/2023
PREDNISONONE 5 MG TAB	0000	0.06192	11/05/2022
PREDNISONONE 5 MG TAB - UNIPAK	0000	0.39156	04/05/2023
PREDNISONONE 50 MG TAB	0000	0.29451	05/05/2022
PREGABALIN 100 MG CAP	0000	0.06236	03/05/2023
PREGABALIN 150 MG CAP	0000	0.07900	03/05/2023
PREGABALIN 165 MG TAB ER 24H	0000	8.39002	06/05/2021
PREGABALIN 200 MG CAP	0000	0.13590	01/05/2023
PREGABALIN 225 MG CAP	0000	0.09142	09/05/2022
PREGABALIN 25 MG CAP	0000	0.09049	10/05/2022
PREGABALIN 300 MG CAP	0000	0.11822	01/05/2023
PREGABALIN 330 MG TAB ER 24H	0000	8.36314	06/05/2021
PREGABALIN 50 MG CAP	0000	0.08063	03/05/2023
PREGABALIN 75 MG CAP	0000	0.10570	03/05/2023
PREGABALIN 82.5 MG TAB ER 24H	0000	8.27379	06/05/2021
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

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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
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 W-CA,FE,FA(<1 MG) TABLET	0000	0.14000	05/04/2012
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 27MG-0.8MG 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	0.26252	12/05/2022
PRIMIDONE 50 MG TAB	0000	0.15683	10/05/2022
PROBENECID 500 MG TAB	0000	0.94068	02/05/2023
PROCHLORPERAZINE 10 MG TAB	0000	0.39928	05/05/2022
PROCHLORPERAZINE 25 MG SUPP	0000	5.55750	11/05/2022
PROCHLORPERAZINE 5 MG TAB	0000	0.22697	05/05/2023
PROGESTERONE OIL 50 MG/ML VL	0000	1.54275	04/05/2023
PROGESTERONE,MICRONIZED 100 MG CAP	0000	0.23572	04/05/2023
PROGESTERONE,MICRONIZED 200 MG CAP	0000	0.51082	08/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PROMETHAZINE 25 MG SUPP	0000	3.01046	05/05/2023
PROMETHAZINE 25 MG TAB	0000	0.05945	11/05/2022
PROMETHAZINE 25 MG/ML AMP	0000	1.94873	12/05/2015
PROMETHAZINE 25 MG/ML VIAL	0000	1.68312	05/05/2021
PROMETHAZINE 50 MG TAB	0000	0.07355	05/05/2023
PROMETHAZINE 6.25/5 ML SYRP	0000	0.03087	01/05/2023
PROMETHAZINE HCL 12.5 MG SUPP	0000	3.85083	05/05/2023
PROMETHAZINE HCL 12.5 MG TAB	0000	0.05313	05/05/2022
PROMETHAZINE HCL 50 MG/ML AMP	0000	3.49753	12/05/2015
PROMETHAZINE VC SYRP	0000	0.22293	06/05/2019
PROPAFENONE HCL 150 MG TAB	0000	0.17124	04/05/2023
PROPAFENONE HCL 225 MG TAB	0000	0.23261	03/05/2023
PROPAFENONE HCL 300 MG TAB	0000	0.56715	06/05/2022
PROPRANOLOL 10 MG TAB	0000	0.07019	02/05/2023
PROPRANOLOL 120 MG CAP SA	0000	0.41936	12/05/2022
PROPRANOLOL 160 MG CAP SA	0000	0.35231	10/05/2022
PROPRANOLOL 20 MG TAB	0000	0.08106	08/05/2022
PROPRANOLOL 40 MG TAB	0000	0.11233	12/05/2022
PROPRANOLOL 60 MG CAP SA	0000	0.22247	12/05/2022
PROPRANOLOL 60 MG TAB	0000	0.24041	04/05/2023
PROPRANOLOL 80 MG CAP SA	0000	0.24648	08/05/2022
PROPRANOLOL 80 MG TAB	0000	0.22302	01/05/2023
PROPYLTHIOURACIL 50 MG TAB	0000	0.70019	05/05/2022
PROTRIPTYLINE HCL 10 MG TAB	0000	3.08566	03/05/2023
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	0.21449	01/05/2023
PYRIDOSTIGMINE BROMIDE 180 MG TAB ER	0000	4.89160	05/05/2023
QUETIAPINE FUMARATE 100 MG TAB	0000	0.07297	11/05/2022
QUETIAPINE FUMARATE 200 MG TAB	0000	0.11525	01/05/2023
QUETIAPINE FUMARATE 25 MG TAB	0000	0.03258	05/05/2023
QUETIAPINE FUMARATE 300 MG TAB	0000	0.13245	05/05/2023
QUETIAPINE FUMARATE 400 MG TAB	0000	0.18027	01/05/2023
QUETIAPINE FUMARATE 50 MG TAB	0000	0.06298	12/05/2022
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	0.93928	04/05/2023
RABEPRAZOLE SODIUM 20 MG TABLET DR	0000	0.23438	05/05/2022
RALOXIFENE HCL 60 MG TAB	0000	0.43124	08/05/2022
RAMIPRIL 1.25 MG CAP	0000	0.11404	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
RAMIPRIL 10 MG CAP	0000	0.07611	12/05/2022
RAMIPRIL 2.5 MG CAP	0000	0.06497	01/05/2023
RAMIPRIL 5 MG CAP	0000	0.06662	06/05/2022
REPREXAIN 10-200 MG TAB	0000	3.22053	08/05/2022
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	0.76696	07/05/2022
RIFAMPIN 300 MG CAP	0000	0.67367	05/05/2022
RILUZOLE 50 MG TAB	0000	0.53833	09/05/2022
RISEDRONATE SODIUM 150 MG TABLET	0000	11.63049	05/05/2023
RISPERIDONE 0.25MG TAB	0000	0.04443	12/05/2022
RISPERIDONE 0.5 MG TAB ODT	0000	0.91511	02/05/2023
RISPERIDONE 0.5MG TAB	0000	0.04818	02/05/2023
RISPERIDONE 1 MG TAB RAPDIS	0000	0.98935	05/05/2023
RISPERIDONE 1MG TAB	0000	0.04660	07/05/2022
RISPERIDONE 1MG/ML SOLN	0000	0.27644	08/05/2022
RISPERIDONE 2 MG TAB ODT	0000	0.97232	04/05/2023
RISPERIDONE 2MG TAB	0000	0.05285	01/05/2023
RISPERIDONE 3 MG TAB RAPDIS	0000	1.41301	11/05/2021
RISPERIDONE 3MG TAB	0000	0.07415	08/05/2022
RISPERIDONE 4MG TAB	0000	0.09695	06/05/2022
RISPERIDONE M-TAB 4 MG ODT	0000	2.63571	06/05/2019
RIVASTIGMINE TARTRATE 1.5 MG CAP	0000	0.19891	04/05/2023
RIVASTIGMINE TARTRATE 3 MG CAP	0000	0.21015	10/05/2022
RIVASTIGMINE TARTRATE 4.5 MG CAP	0000	0.23401	01/05/2023
RIVASTIGMINE TARTRATE 6 MG CAP	0000	0.30705	05/05/2023
RIZATRIPTAN BENZOATE 10 MG TAB	0000	0.44968	03/05/2023
RIZATRIPTAN BENZOATE 10 MG TAB RAPDIS	0000	0.70324	04/05/2023
RIZATRIPTAN BENZOATE 5 MG TAB	0000	0.61058	03/05/2023
RIZATRIPTAN BENZOATE 5 MG TAB RAPDIS	0000	0.69520	11/05/2022
ROPINIROLE HCL 0.25 MG TAB	0000	0.05821	07/05/2022
ROPINIROLE HCL 0.5 MG TAB	0000	0.07210	07/05/2022
ROPINIROLE HCL 1 MG TAB	0000	0.08125	06/05/2022
ROPINIROLE HCL 12 MG TAB ER 24H	0000	0.97200	04/05/2023
ROPINIROLE HCL 2 MG TAB	0000	0.11921	01/05/2023
ROPINIROLE HCL 2 MG TAB ER 24H	0000	0.63662	05/05/2023
ROPINIROLE HCL 3 MG TAB	0000	0.10452	03/05/2023
ROPINIROLE HCL 4 MG TAB	0000	0.09755	11/05/2022
ROPINIROLE HCL 4 MG TAB ER 24H	0000	0.56367	04/05/2023
ROPINIROLE HCL 5 MG TAB	0000	0.09843	10/05/2022
ROPINIROLE HCL 6 MG TAB ER 24H	0000	1.37999	05/05/2023
ROPINIROLE HCL 8 MG TAB ER 24H	0000	1.44507	01/05/2023
ROSUVASTATIN CALCIUM 10 MG TAB	0000	0.06053	01/05/2023
ROSUVASTATIN CALCIUM 20 MG TAB	0000	0.10410	05/05/2022
ROSUVASTATIN CALCIUM 40 MG TAB	0000	0.13350	11/05/2022

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ROSUVASTATIN CALCIUM 5 MG TAB	0000	0.06351	12/05/2022
SALICYLIC ACID 6% SHAMPOO	0000	0.16692	04/05/2016
SALSALATE 500MG TAB	0000	0.35198	02/05/2022
SELEGILINE HCL 5 MG CAP	0000	0.86977	05/05/2023
SELEGILINE HCL 5 MG TAB	0000	0.64848	05/05/2023
SERTRALINE 20 MG/ML ORAL CONC	0000	0.49209	12/05/2022
SERTRALINE HCL 100 MG TAB	0000	0.05281	12/05/2022
SERTRALINE HCL 25 MG TAB	0000	0.05099	06/05/2022
SERTRALINE HCL 50 MG TAB	0000	0.04371	12/05/2022
SILDENAFIL 10 MG/ML ORAL SUSP	0000	17.33273	06/05/2020
SILDENAFIL CITRATE 20 MG TAB	0000	0.07489	01/05/2023
SILVER SULFADIAZINE 1% CRM	0000	0.18486	01/05/2023
SIMVASTATIN 10 MG TAB	0000	0.02646	08/05/2022
SIMVASTATIN 20 MG TAB	0000	0.02487	01/05/2023
SIMVASTATIN 40 MG TAB	0000	0.04221	03/05/2023
SIMVASTATIN 5 MG TAB	0000	0.02087	03/05/2023
SIMVASTATIN 80 MG TAB	0000	0.09033	09/05/2022
SODIUM BICARBONATE 650 MG TAB	0000	0.01562	05/05/2023
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	0.00460	03/05/2016
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	0.07997	03/05/2023
SODIUM FLUORIDE 0.25MG TAB CHEW	0000	0.07812	04/05/2023
SODIUM FLUORIDE 0.5 MG/ML DROPS	0000	0.23847	05/05/2023
SODIUM FLUORIDE 1.1 % CRM	0000	0.09163	05/05/2023
SODIUM POLYSTYRENE SULF PWDR	0000	0.15249	02/05/2023
SODIUM POLYSTYRENE SULFONATE 15GM/60ML SUSP	0000	0.12830	10/05/2018
SOTALOL HCL 120 MG TAB	0000	0.09078	02/05/2023
SOTALOL HCL 160 MG TAB	0000	0.11401	05/05/2023
SOTALOL HCL 80 MG TAB	0000	0.07374	04/05/2023
SPIRONOLACT/HCTZ 25/25 MG TAB	0000	0.61856	04/05/2023
SPIRONOLACTONE 100 MG TAB	0000	0.24811	08/05/2022
SPIRONOLACTONE 25 MG TAB	0000	0.07433	09/05/2022
SPIRONOLACTONE 50 MG TAB	0000	0.14169	12/05/2022
STAVUDINE 40 MG CAP	0000	0.91474	09/05/2015
SUCRALFATE 1 GM TAB	0000	0.20178	02/05/2023
SULFACETAMIDE 10% EYE DROPS	0000	2.74083	10/05/2022
SULFACETAMIDE SODIUM/SULFUR 10 %-5 % MED. PAD	0000	7.66120	07/17/2015
SULFACETAMIDE/PREDNISOLONE SP 10%-0.23% EYE DROPS	0000	2.41689	12/05/2022
SULFAMETHOXAZOLE/TMP DS TAB	0000	0.07516	03/05/2023

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
SULFAMETHOXAZOLE/TMP SS TAB	0000	0.05996	05/05/2022
SULFAMETHOXAZOLE/TMP SUSP	0000	0.06775	05/05/2023
SULFASALAZINE 500 MG TAB	0000	0.16852	05/05/2023
SULFASALAZINE DR 500 MG TAB	0000	0.25956	06/05/2022
SULINDAC 150 MG TAB	0000	0.15440	09/05/2022
SULINDAC 200 MG TAB	0000	0.20008	06/05/2022
SUMATRIPTAN 20 MG NASAL SPRY	0000	19.17207	05/05/2023
SUMATRIPTAN 4 MG/0.5 ML KIT	0000	162.60167	04/05/2023
SUMATRIPTAN 5 MG NASAL SPRAY	0000	35.91692	05/05/2023
SUMATRIPTAN SUCC 100 MG TAB	0000	0.61184	08/05/2022
SUMATRIPTAN SUCC 25 MG TAB	0000	0.31980	04/05/2023
SUMATRIPTAN SUCC 50 MG TAB	0000	0.56089	01/05/2023
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML KIT-REFILL	0000	124.48333	05/05/2023
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML PEN IJ KIT	0000	67.20526	05/05/2023
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML VIAL	0000	18.07150	04/05/2023
TACROLIMUS 0.03 % OINT. (G)	0000	1.45392	05/05/2023
TACROLIMUS 0.1 % OINT. (G)	0000	1.88484	03/05/2023
TACROLIMUS 0.5 MG CAP	0000	0.19525	05/05/2023
TACROLIMUS 1 MG CAP	0000	0.29075	05/05/2022
TAMOXIFEN 10 MG TAB	0000	0.17473	04/05/2023
TAMOXIFEN 20 MG TAB	0000	0.31019	04/05/2023
TAMSULOSIN HCL 0.4 MG CAP SR 24H	0000	0.07063	07/05/2022
TELMISARTAN 20 MG TAB	0000	0.22498	06/05/2022
TELMISARTAN 40 MG TAB	0000	0.33410	02/05/2023
TELMISARTAN 80 MG TAB	0000	0.25897	08/05/2022
TELMISARTAN/HCTZ 40 MG-12.5 MG TAB	0000	0.65746	05/05/2023
TELMISARTAN/HCTZ 80 MG-12.5 MG TAB	0000	0.75011	04/05/2023
TELMISARTAN/HCTZ 80 MG-25 MG TAB	0000	0.76365	03/05/2023
TEMAZEPAM 15 MG CAP	0000	0.07269	03/05/2023
TEMAZEPAM 22.5 MG CAP	0000	1.19100	05/05/2023
TEMAZEPAM 30 MG CAP	0000	0.08814	05/05/2023
TEMAZEPAM 7.5 MG CAP	0000	1.16412	05/05/2023
TEMOZOLOMIDE 100 MG CAPSULE	0000	123.67200	11/05/2016
TERAZOSIN 1 MG CAP	0000	0.12989	02/05/2023
TERAZOSIN 10 MG CAP	0000	0.16869	03/05/2023
TERAZOSIN 2 MG CAP	0000	0.13484	05/05/2023
TERAZOSIN 5 MG CAP	0000	0.16221	03/05/2023
TERBINAFINE HCL 250 MG TAB	0000	0.15433	02/05/2023
TERBUTALINE SULFATE 2.5 MG TAB	0000	1.79888	11/05/2022
TERBUTALINE SULFATE 5 MG TAB	0000	2.01998	03/05/2016
TERCONAZOLE 0.4% CRM	0000	0.65109	02/05/2022
TERCONAZOLE 0.8% VAG CRM	0000	1.28148	03/05/2023
TERCONAZOLE 80 MG VAG SUPP	0000	19.37333	04/05/2023
TESTOSTERONE 20.25/1.25 GEL MD PMP	0000	0.33529	06/05/2021
TESTOSTERONE 50 MG/5 GRAM (1 %) UD TUBE	0000	0.92925	02/05/2023

North Carolina Department of Health and Human Services
State Maximum Allowable Cost (SMAC) Rate Listing for Generic Drugs
Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TESTOSTERONE CYP 200 MG/ML VIAL	0010	6.65850	04/24/2016
TESTOSTERONE ENAN 200 MG/ML VIAL	0000	11.21533	05/05/2023
TETRACYCLINE 250 MG CAP	0000	0.47352	05/05/2023
TETRACYCLINE 500 MG CAP	0000	1.04513	03/05/2023
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	2.27594	04/05/2023
THEOPHYLLINE ER 400 MG TAB	0000	0.52389	05/05/2023
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	0.55377	03/05/2020
THIORIDAZINE 50 MG TAB	0000	0.74643	11/05/2018
THIOTHIXENE 1 MG CAP	0000	0.71370	06/05/2016
THIOTHIXENE 10 MG CAP	0000	2.41182	02/05/2018
THIOTHIXENE 2 MG CAP	0000	1.13735	09/05/2018
THIOTHIXENE 5 MG CAP	0000	1.68901	09/05/2018
TIMOLOL 0.25% EYE DROPS	0000	0.69809	05/05/2023
TIMOLOL 0.25% GEL /SOLN	0000	25.96480	11/05/2020
TIMOLOL 0.5% GEL /SOLN	0000	29.87907	05/05/2023
TIMOLOL MALEATE 0.5% EYE DROPS	0000	1.16373	12/05/2022
TINIDAZOLE 500 MG TAB	0000	2.82872	04/05/2023
TIZANIDINE HCL 2 MG CAP	0000	0.08558	05/05/2023
TIZANIDINE HCL 2 MG TAB	0000	0.05796	05/05/2023
TIZANIDINE HCL 4 MG CAP	0000	0.15471	03/05/2023
TIZANIDINE HCL 4 MG TAB	0000	0.05534	11/05/2022
TIZANIDINE HCL 6 MG CAP	0000	0.16389	05/05/2023
TOBRAMYCIN 0.3% OPHTH SOLN	0000	1.40563	04/05/2023
TOBRAMYCIN IN 0.225% NACL 300 MG/5ML AMPUL-NEB	0000	2.02462	02/05/2023
TOBRAMYCIN SULFATE 1.2 G VIAL	0000	81.54250	01/18/2019
TOLTERODINE TARTRATE 1 MG TAB	0000	0.27030	05/05/2023
TOLTERODINE TARTRATE 2 MG CAP ER 24H	0000	0.63149	05/05/2023
TOLTERODINE TARTRATE 2 MG TAB	0000	0.32691	05/05/2023
TOLTERODINE TARTRATE 4 MG CAP ER 24H	0000	0.78590	02/05/2023
TOPIRAMATE 100 MG TAB	0000	0.08307	05/05/2022
TOPIRAMATE 15 MG SPRINKLE CAP	0000	0.65977	05/05/2022
TOPIRAMATE 200 MG TAB	0000	0.12075	04/05/2023
TOPIRAMATE 25 MG SPRINKLE CAP	0000	0.77814	07/05/2022
TOPIRAMATE 25 MG TAB	0000	0.03670	09/05/2022
TOPIRAMATE 50 MG TAB	0000	0.06799	10/05/2022
TORSEMIDE 10 MG TAB	0000	0.10820	05/05/2023
TORSEMIDE 100 MG TAB	0000	0.26519	01/05/2023
TORSEMIDE 20 MG TAB	0000	0.10527	12/05/2022
TORSEMIDE 5 MG TAB	0000	0.08735	03/05/2023
TRAMADOL HCL 100 MG TBMP 24HR	0000	1.41567	07/05/2020
TRAMADOL HCL 200 MG TAB.SR 24H	0000	1.69906	05/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TRAMADOL HCL 300 MG TBMP 24HR	0000	3.69250	08/05/2020
TRAMADOL HCL 50 MG TAB	0000	0.02419	10/05/2022
TRAMADOL HCL ER 100 MG TAB	0000	1.12076	11/05/2022
TRAMADOL HCL ER 300 MG TAB	0000	2.58079	05/05/2023
TRAMADOL/APAP 37.5/325 MG TAB	0000	0.12915	01/05/2023
TRANDOLAPRIL 1 MG TAB	0000	0.21468	06/05/2022
TRANDOLAPRIL 2 MG TAB	0000	0.20524	03/05/2023
TRANDOLAPRIL 4 MG TAB	0000	0.15288	05/05/2023
TRANEXAMIC ACID 650 MG TABLET	0000	1.40361	08/05/2022
TRANLYCYPROMINE SULFATE 10 MG TAB	0000	0.68113	04/05/2023
TRAZODONE 100 MG TAB	0000	0.10053	05/05/2023
TRAZODONE 150 MG TAB	0000	0.11543	02/05/2023
TRAZODONE 300 MG TAB	0000	1.04714	02/05/2023
TRAZODONE 50 MG TAB	0000	0.04930	04/05/2023
TRETINOIN 0.01% GEL	0000	3.78912	05/05/2019
TRETINOIN 0.025% CRM	0000	1.60915	04/05/2023
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	2.68546	09/05/2022
TRETINOIN MICROSPHERES 0.04 % GEL (GRAM)	0000	9.45909	06/05/2019
TRETINOIN MICROSPHERES 0.04 % GEL W/PUMP	0000	12.70555	12/05/2016
TRETINOIN MICROSPHERES 0.1 % GEL (GRAM)	0000	8.86935	11/05/2019
TRETINOIN MICROSPHERES 0.1 % GEL W/PUMP	0000	10.50984	06/05/2016
TRIAMCINOLONE 0.025% CRM	0000	0.03341	05/05/2023
TRIAMCINOLONE 0.025% CRM	0080	0.06975	11/05/2022
TRIAMCINOLONE 0.025% CRM	0015	0.18089	04/05/2022
TRIAMCINOLONE 0.025% LOT	0000	0.42117	11/05/2022
TRIAMCINOLONE 0.025% OINT	0080	0.08932	04/05/2023
TRIAMCINOLONE 0.025% OINT	0000	0.21309	04/05/2023
TRIAMCINOLONE 0.1% CRM	0000	0.09129	07/05/2022
TRIAMCINOLONE 0.1% LOT	0000	0.35275	10/05/2022
TRIAMCINOLONE 0.1% OINT	0000	0.08501	08/05/2022
TRIAMCINOLONE 0.1% PASTE	0000	3.58056	05/05/2023
TRIAMCINOLONE 0.5% CRM	0000	0.34952	04/05/2023
TRIAMCINOLONE 0.5% OINT	0000	0.41855	12/05/2022
TRIAMTERENE/HCTZ 37.5/25 MG CAP	0000	0.16869	11/05/2022
TRIAMTERENE/HCTZ 37.5/25 MG TAB	0000	0.10190	12/05/2022
TRIAMTERENE/HCTZ 75/50 MG TAB	0000	0.13428	09/05/2022
TRIAZOLAM 0.125 MG TAB	0000	0.87261	04/05/2023
TRIAZOLAM 0.25 MG TAB	0000	1.08070	12/05/2022
TRIFLUOPERAZINE 10 MG TAB	0000	1.61372	07/05/2018
TRIFLUOPERAZINE 2 MG TAB	0000	1.15793	04/05/2018
TRIFLUOPERAZINE 5 MG TAB	0000	0.79366	01/05/2023
TRIFLURIDINE 1% EYE DROPS	0000	19.98343	04/05/2023
TRIHEXYPHENIDYL 2 MG TAB	0000	0.06286	02/05/2023

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TRIHEXYPHENIDYL 5 MG TAB	0000	0.11317	04/05/2023
TRIMETHOBENZAMIDE 300 MG CAP	0000	1.21159	03/05/2020
TRIMETHOPRIM 100 MG TAB	0000	1.10845	04/05/2023
TROSPIMUM CHLORIDE 20 MG TAB	0000	0.36075	03/05/2023
TROSPIMUM CHLORIDE 60 MG CAP ER 24H	0000	2.66952	05/05/2023
URSODIOL 250 MG TAB	0000	0.55366	05/05/2023
URSODIOL 300 MG CAP	0000	0.64890	03/05/2023
URSODIOL 500 MG TAB	0000	0.88984	10/05/2022
VALACYCLOVIR HCL 1,000 MG TAB	0000	0.46000	02/05/2023
VALACYCLOVIR HCL 500 MG TAB	0000	0.26668	07/05/2022
VALGANCICLOVIR HYDROCHLORIDE 450 MG TAB	0000	2.65949	04/05/2023
VALPROIC ACID 250 MG CAP	0000	0.23860	04/05/2023
VALPROIC ACID 250 MG/5 ML SYRP	0000	0.01885	05/05/2023
VANCOMYCIN 1 GM VIAL	0000	8.78880	03/05/2020
VANCOMYCIN 5 GM VIAL	0000	28.30333	10/05/2017
VANCOMYCIN 500 MG VIAL	0000	6.50200	09/05/2016
VANCOMYCIN HCL 10 GM VIAL	0000	42.17000	05/05/2016
VANCOMYCIN HCL 125 MG CAP	0000	1.53894	07/05/2022
VANCOMYCIN HCL 250 MG CAPSULE	0000	2.47389	03/05/2023
VENLAFAXINE HCL 100 MG TAB	0000	0.08499	01/05/2023
VENLAFAXINE HCL 150 MG CAP ER 24H	0000	0.18877	07/05/2022
VENLAFAXINE HCL 150 MG TAB ER 24	0000	0.18529	04/05/2023
VENLAFAXINE HCL 25 MG TAB	0000	0.07278	12/05/2022
VENLAFAXINE HCL 37.5 MG CAP ER 24H	0000	0.09594	11/05/2022
VENLAFAXINE HCL 37.5 MG TAB	0000	0.07613	08/05/2022
VENLAFAXINE HCL 37.5 MG TAB ER 24	0000	1.25227	04/05/2023
VENLAFAXINE HCL 50 MG TAB	0000	0.06031	02/05/2023
VENLAFAXINE HCL 75 MG CAP ER 24H	0000	0.11654	04/05/2023
VENLAFAXINE HCL 75 MG TAB	0000	0.08302	12/05/2022
VENLAFAXINE HCL 75 MG TAB ER 24	0000	1.14457	05/05/2023
VERAPAMIL 120 MG CAP PELLETT	0000	1.09722	02/05/2023
VERAPAMIL 120 MG TAB	0000	0.06635	11/05/2022
VERAPAMIL 120 MG TAB SA	0000	0.26198	02/05/2023
VERAPAMIL 180 MG CAP PELLETT	0000	1.17000	06/05/2022
VERAPAMIL 180 MG TAB SA	0000	0.29404	03/05/2023
VERAPAMIL 240 MG CAP PELLETT	0000	1.41075	10/05/2022
VERAPAMIL 240 MG TAB SA	0000	0.17934	02/05/2023
VERAPAMIL 360 MG CAP PELLETT	0000	4.15230	09/05/2022
VERAPAMIL 40 MG TAB	0000	0.14004	07/05/2022
VERAPAMIL 80 MG TAB	0000	0.06616	05/05/2022
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	0.14992	01/05/2023
VORICONAZOLE 200 MG TAB	0000	1.94513	12/05/2022
VORICONAZOLE 200 MG VIAL	0000	51.00000	05/05/2019

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

Updates Effective May 5, 2023

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
WARFARIN SODIUM 1 MG TAB	0000	0.09219	01/05/2023
WARFARIN SODIUM 10 MG TAB	0000	0.10106	05/05/2023
WARFARIN SODIUM 2 MG TAB	0000	0.07999	04/05/2023
WARFARIN SODIUM 2.5 MG TAB	0000	0.08713	04/05/2023
WARFARIN SODIUM 3 MG TAB	0000	0.09209	02/05/2023
WARFARIN SODIUM 4 MG TAB	0000	0.07841	05/05/2023
WARFARIN SODIUM 5 MG TAB	0000	0.09878	08/05/2022
WARFARIN SODIUM 6 MG TAB	0000	0.10992	03/05/2023
WARFARIN SODIUM 7.5 MG TAB	0000	0.10782	12/05/2022
WATER FOR INJECTION VIAL	0000	0.06901	09/05/2017
ZAFIRLUKAST 10 MG TAB	0000	0.74550	02/05/2023
ZAFIRLUKAST 20 MG TAB	0000	1.15535	12/05/2022
ZALEPLON 10 MG CAP	0000	0.17059	07/05/2022
ZALEPLON 5 MG CAP	0000	0.15805	04/05/2023
ZIDOVUDINE 100 MG CAP	0000	1.11600	12/05/2014
ZIDOVUDINE 300 MG TAB	0000	0.43828	01/05/2021
ZIPRASIDONE HCL 20 MG CAP	0000	0.26321	01/05/2023
ZIPRASIDONE HCL 40 MG CAP	0000	0.43184	10/05/2022
ZIPRASIDONE HCL 60 MG CAP	0000	0.40745	12/05/2022
ZIPRASIDONE HCL 80 MG CAP	0000	0.49945	08/05/2022
ZOLMITRIPTAN 2.5 MG TAB	0000	0.93119	09/05/2022
ZOLMITRIPTAN 5 MG TAB	0000	1.29558	05/05/2023
ZOLMITRIPTAN 5 MG TAB RAPDIS	0000	3.03152	03/05/2023
ZOLPIDEM TART ER 12.5 MG TAB	0000	0.25430	05/05/2023
ZOLPIDEM TARTRATE 10 MG TAB	0000	0.03027	07/05/2022
ZOLPIDEM TARTRATE 5 MG TAB	0000	0.03268	04/05/2023
ZOLPIDEM TARTRATE 6.25 MG ER TAB	0000	0.22949	05/05/2023
ZONISAMIDE 100 MG CAP	0000	0.11452	03/05/2023
ZONISAMIDE 25 MG CAP	0000	0.07464	05/05/2023
ZONISAMIDE 50 MG CAP	0000	0.09449	05/05/2022

This information may not be used for commercial purposes