

**North Carolina Department of Health and Human Services
Non-340B State Maximum Allowable Cost (SMAC) Rate Listing for Clotting Factor Products**

Product Group	SMAC Rate	Effective Date
ADVATE	\$1.41331	1/1/2025
ADYNOVATE	\$1.96849	1/1/2025
AFSTYLA	\$1.32658	1/1/2025
ALHEMO	No Rate on File	
ALPHANATE	\$0.97454	1/1/2025
ALPHANINE	\$1.10998	12/1/2024
ALPROLIX	\$3.42664	1/3/2025
ALTUVIIIIO	\$4.70083	1/3/2025
BALFAXAR	No Rate on File	
BENEFIX	\$1.58929	12/1/2024
COAGADEX	\$8.24500	12/1/2023
CORIFACT	\$8.81870	10/1/2021
ELOCTATE	\$2.31497	1/3/2025
ESPEROCT	\$2.13595	1/1/2025
FEIBA	\$2.11894	1/1/2025
FIBRYGA	\$0.85400	6/1/2021
HEMLIBRA 12 MG/0.4 ML	\$3,641.30158	1/1/2025
HEMLIBRA 30 MG/ML	\$3,420.36211	1/1/2025
HEMLIBRA 60 MG/0.4 ML	\$16,769.53933	1/1/2025
HEMLIBRA 105 MG/0.7 ML	\$16,735.16428	1/1/2025
HEMLIBRA 150 MG/ML	\$16,570.20765	1/1/2025
HEMLIBRA 300 MG/2 ML	\$16,565.10790	1/1/2025
HEMOFIL	\$1.09473	1/1/2025
HUMATE	\$1.19395	1/1/2025
HYMPAVZI	No Rate on File	
IDELVION	\$4.95560	1/1/2025
IXINITY	\$1.70500	12/1/2024
JIVI	\$2.45512	1/1/2025
KCENTRA	No Rate on File	
KOATE	\$0.76388	12/1/2023
KOGENATE	\$1.26833	12/1/2023
KOVALTRY	\$1.48752	1/1/2025
NOVOEIGHT	\$1.42137	1/1/2025
NOVOSEVEN	\$2.24939	1/1/2025
NUWIQ	\$1.03100	12/1/2024
OBIZUR	No Rate on File	
PROFILNINE	\$1.22500	4/1/2017
REBINYN	\$4.14997	12/1/2024
RECOMBINATE	\$1.40864	1/1/2025
RIASTAP	\$1.00802	12/1/2020
RIXUBIS	\$1.40500	1/1/2025
SEVENFACT	No Rate on File	
TRETTEN	\$13.98100	1/8/2019
VONVENDI	\$1.47000	12/1/2024
WILATE	\$0.95337	12/1/2024
XYNTHA	\$1.30109	1/1/2025

*SMAC rates are calculated by adding \$0.055 to the calculated average acquisition cost.

*The per unit professional dispensing fee will be \$.04/unit for HTC pharmacies and \$.025/unit for all other pharmacies.

*Invoices were not received for those products with No Rate on File identified above. Claims for these products will be denied. Providers may contact the North Carolina Pharmacy Help Desk at 1-800-591-1183 or NCParmacy@mslc.com and submit their invoice to establish a reimbursement rate.

*Hemlibra SMAC rates are adjusted to compensate for the low dispensing fee based on the billing units of the product.

*Surveys will be conducted semi-annually to adjust rates. Interim updates between surveys may be initiated by contacting the North Carolina Pharmacy Help Desk.