

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	\$1.44666	1/16/2026
ADYNOVATE	\$2.06302	1/16/2026
AFSTYLA	\$1.37036	1/1/2026
ALHEMO	No Rate on File	
ALPHANATE	\$1.12417	1/1/2026
ALPHANINE	\$1.10998	12/1/2024
ALPROLIX	\$3.56992	1/1/2026
ALTUVIIIIO	\$4.79216	1/1/2026
BALFAXAR	No Rate on File	
BENEFIX	\$1.71855	1/1/2026
COAGADEX	\$8.24500	12/1/2023
CORIFACT	\$9.94878	1/1/2025
ELOCTATE	\$2.43417	1/1/2026
ESPEROCT	\$2.23766	1/1/2026
FEIBA	\$2.15572	1/16/2026
FIBRYGA	\$0.85400	6/1/2021
HEMLIBRA 12 MG/0.4 ML	\$3,778.73468	1/1/2026
HEMLIBRA 30 MG/ML	\$3,583.57777	1/1/2026
HEMLIBRA 60 MG/0.4 ML	\$17,553.97758	1/1/2026
HEMLIBRA 105 MG/0.7 ML	\$17,417.05978	1/1/2026
HEMLIBRA 150 MG/ML	\$17,354.25649	1/1/2026
HEMLIBRA 300 MG/2 ML	\$17,328.47193	1/1/2026
HEMOFIL	\$1.09473	1/1/2025
HUMATE	\$1.25919	1/1/2026
HYMPAVZI	No Rate on File	
IDELVION	\$5.19692	1/1/2026
IXINITY	\$1.70500	12/1/2024
JIVI	\$2.58681	1/1/2026
KCENTRA	No Rate on File	
KOATE	\$0.85500	6/1/2025
KOGENATE	\$1.26833	12/1/2023
KOVALTRY	\$1.55905	1/1/2026
NOVOEIGHT	\$1.52516	1/1/2026
NOVOSEVEN	\$2.24939	1/1/2025
NUWIQ	\$1.02012	6/1/2025
OBIZUR	No Rate on File	
PROFILNINE	\$1.22500	4/1/2017
QFITLIA	No Rate on File	
REBINYN	\$4.34092	6/1/2025
RECOMBINATE	\$1.39055	12/1/2025
RIASTAP	\$1.00802	12/1/2020
RIXUBIS	\$1.40500	1/1/2025
SEVENFACT	\$1.98020	1/1/2025
TRETTEN	\$13.98100	1/8/2019
VONVENDI	\$1.46800	12/1/2025
WILATE	\$1.01291	6/1/2025
XYNTHA	\$1.31100	6/1/2025

*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 NCPharmacy@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.